

Office of Regulatory Management
Economic Review Form

Agency name	Department of Medical Assistance Services
Virginia Administrative Code (VAC) Chapter citation(s)	N/A
VAC Chapter title(s)	N/A
Action title	Changes to Hospice Procedures Under Cardinal Care SM - Virginia's Medicaid Program, Effective July 1, 2023
Date this document prepared	3/8/2023
Regulatory Stage (including Issuance of Guidance Documents)	Issuance of Guidance Document

Cost Benefit Analysis

Complete Tables 1a and 1b for all regulatory actions. You do not need to complete Table 1c if the regulatory action is required by state statute or federal statute or regulation and leaves no discretion in its implementation.

Table 1a should provide analysis for the regulatory approach you are taking. Table 1b should provide analysis for the approach of leaving the current regulations intact (i.e., no further change is implemented). Table 1c should provide analysis for at least one alternative approach. You should not limit yourself to one alternative, however, and can add additional charts as needed.

Report both direct and indirect costs and benefits that can be monetized in Boxes 1 and 2. Report direct and indirect costs and benefits that cannot be monetized in Box 4. See the ORM Regulatory Economic Analysis Manual for additional guidance.

Table 1a: Costs and Benefits of the Proposed Changes (Primary Option)

(1) Direct & Indirect Costs & Benefits (Monetized)	<p>This Medicaid Memo clarifies procedures for accessing and billing for hospice services under DMAS' Cardinal Care Managed Care program, which is anticipated to be implemented July 1, 2023. The benefit of this Memo is to provide clarity to the regulatory community.</p> <p>The procedures for accessing and billing for hospice services under Cardinal Care represent existing technical requirements in the CCC Plus program. The same Managed Care Organizations (MCOs) that administer the CCC Plus program also operate the Medallion 4.0 program. These same MCOs will operate the Cardinal Care program. Therefore, the changes related to hospice will not place a burden on the MCOs under the Cardinal Care program. Furthermore, the actuarial rates that will be paid to the MCOs under Cardinal Care will be appropriate for the populations to be covered and the services to be furnished, including hospice services. These costs and benefits will be factored into and included in the Economic Review Form that accompanies future regulatory actions for Cardinal Care. There are no separate or additional costs/benefits tied to this Medicaid Memo.</p>	
(2) Present Monetized Values	Direct & Indirect Costs	Direct & Indirect Benefits
	(a)	(b)
(3) Net Monetized Benefit		
(4) Other Costs & Benefits (Non-Monetized)		
(5) Information Sources		

Table 1b: Costs and Benefits under the Status Quo (No change to the regulation)

(1) Direct & Indirect Costs & Benefits (Monetized)	<p>The costs and/or benefits under the Status Quo will be included in the Economic Review Form that accompanies the regulatory action for Cardinal Care.</p>	
(2) Present Monetized Values	Direct & Indirect Costs	Direct & Indirect Benefits
	(a)	(b)

(3) Net Monetized Benefit	
(4) Other Costs & Benefits (Non-Monetized)	
(5) Information Sources	

Table 1c: Costs and Benefits under Alternative Approach(es)

(1) Direct & Indirect Costs & Benefits (Monetized)	The costs and/or benefits under an Alternative Approach(es) will be included in the Economic Review Form that accompanies the regulatory action for Cardinal Care.	
(2) Present Monetized Values	Direct & Indirect Costs	Direct & Indirect Benefits
	(a)	(b)
(3) Net Monetized Benefit		
(4) Other Costs & Benefits (Non-Monetized)		
(5) Information Sources		

Impact on Local Partners

Use this chart to describe impacts on local partners. See Part 8 of the ORM Cost Impact Analysis Guidance for additional guidance.

Table 2: Impact on Local Partners

(1) Direct & Indirect Costs & Benefits (Monetized)	The costs and/or benefits on local partners will be included in the Economic Review Form that accompanies the regulatory action for Cardinal Care. There are no separate or additional impacts on local partners related to this Medicaid Memo.	
(2) Present Monetized Values	Direct & Indirect Costs	Direct & Indirect Benefits
	(a)	(b)

(3) Other Costs & Benefits (Non-Monetized)	
(4) Assistance	
(5) Information Sources	

Impacts on Families

Use this chart to describe impacts on families. See Part 8 of the ORM Cost Impact Analysis Guidance for additional guidance.

Table 3: Impact on Families

(1) Direct & Indirect Costs & Benefits (Monetized)	The costs and/or benefits on families will be included in the Economic Review Form that accompanies the regulatory action for Cardinal Care. There are no separate or additional impacts on families related to this Medicaid Memo.	
(2) Present Monetized Values	Direct & Indirect Costs	Direct & Indirect Benefits
	(a)	(b)
(3) Other Costs & Benefits (Non-Monetized)		
(4) Information Sources		

Impacts on Small Businesses

Use this chart to describe impacts on small businesses. See Part 8 of the ORM Cost Impact Analysis Guidance for additional guidance.

Table 4: Impact on Small Businesses

(1) Direct & Indirect Costs & Benefits (Monetized)	The costs and/or benefits on small businesses will be included in the Economic Review Form that accompanies the regulatory action for Cardinal Care. There are no separate or additional impacts on small businesses related to this Medicaid Memo.
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(2) Present Monetized Values	Direct & Indirect Costs	Direct & Indirect Benefits
	(a)	(b)
(3) Other Costs & Benefits (Non-Monetized)		
(4) Alternatives		
(5) Information Sources		

Changes to Number of Regulatory Requirements

For each individual VAC Chapter amended, repealed, or promulgated by this regulatory action, list (a) the initial requirement count, (b) the count of requirements that this regulatory package is adding, (c) the count of requirements that this regulatory package is reducing, (d) the net change in the number of requirements. This count should be based upon the text as written when this stage was presented for executive branch review. Five rows have been provided, add or delete rows as needed. In the last row, indicate the total number for each column.

Table 5: Total Number of Requirements

Chapter number	Number of Requirements			
	Initial Count	Additions	Subtractions	Net Change
Changes to Hospice Procedures Under Cardinal Care SM - Virginia's Medicaid Program, Effective July 1, 2023 (The number of requirements will be included in the Economic Review Form that accompanies any regulatory action that results from the guidance document. There are no separate or additional requirements in this Medicaid Memo.)	0	0	0	0