

## Office of Regulatory Management

## Economic Review Form

|                                                                    |                                                                   |
|--------------------------------------------------------------------|-------------------------------------------------------------------|
| <b>Agency name</b>                                                 | Department of Medical Assistance Services                         |
| <b>Virginia Administrative Code (VAC) Chapter citation(s)</b>      | 12 VAC 30-50-210                                                  |
| <b>VAC Chapter title(s)</b>                                        | Amount, Duration, and Scope of Medical and Remedial Care Services |
| <b>Action title</b>                                                | 90-Day Prescriptions                                              |
| <b>Date this document prepared</b>                                 | 4/18/24                                                           |
| <b>Regulatory Stage (including Issuance of Guidance Documents)</b> | Fast Track                                                        |

**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>There are no costs associated with these changes.</p> <p>There are benefits for Medicaid members, who can visit the pharmacy less frequently for medication refills. There are also benefits for Medicaid pharmacy providers, who can provide the same medications to patients with less time and effort.</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) | No costs or benefits result from making no changes. |                            |
| (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) | No alternative approaches would produce the benefits described above. |                            |
| (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) | No impact on local partners. |                            |
| (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) | No impact on families.  |                            |
| (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) | Medicaid pharmacies that are small businesses will benefit from being able to provide the same medications with less time and effort. |                            |
| (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**

**Table 5: Regulatory Reduction**

For each individual action, please fill out the appropriate chart to reflect any change in regulatory requirements, costs, regulatory stringency, or the overall length of any guidance documents.

### *Change in Regulatory Requirements*

| <b>VAC Section(s) Involved*</b>                | <b>Authority of Change</b> | <b>Initial Count</b> | <b>Additions</b> | <b>Subtractions</b> | <b>Total Net Change in Requirements</b> |
|------------------------------------------------|----------------------------|----------------------|------------------|---------------------|-----------------------------------------|
| 12 VAC<br>30-50-210                            | <b>(M/A):</b>              | <b>0</b>             | 0                | 0                   | 0                                       |
|                                                | <b>(D/A):</b>              | <b>0</b>             | 0                | 0                   | 0                                       |
|                                                | <b>(M/R):</b>              | <b>51</b>            | 0                | 0                   | 0                                       |
|                                                | <b>(D/R):</b>              | <b>0</b>             | 0                | 0                   | 0                                       |
| <b>Grand Total of Changes in Requirements:</b> |                            |                      |                  |                     | <b>(M/A): 0</b>                         |
|                                                |                            |                      |                  |                     | <b>(D/A): 0</b>                         |
|                                                |                            |                      |                  |                     | <b>(M/R): 0</b>                         |
|                                                |                            |                      |                  |                     | <b>(D/R): 0</b>                         |

**Key:**

*Please use the following coding if change is mandatory or discretionary and whether it affects externally regulated parties or only the agency itself:*

**(M/A):** Mandatory requirements mandated by federal and/or state statute affecting the agency itself

**(D/A):** Discretionary requirements affecting agency itself

**(M/R):** Mandatory requirements mandated by federal and/or state statute affecting external parties, including other agencies

**(D/R):** Discretionary requirements affecting external parties, including other agencies

### *Cost Reductions or Increases (if applicable)*

| <b>VAC Section(s) Involved*</b> | <b>Description of Regulatory Requirement</b> | <b>Initial Cost</b> | <b>New Cost</b> | <b>Overall Cost Savings/Increases</b> |
|---------------------------------|----------------------------------------------|---------------------|-----------------|---------------------------------------|
|                                 |                                              |                     |                 |                                       |
|                                 |                                              |                     |                 |                                       |

### *Other Decreases or Increases in Regulatory Stringency (if applicable)*

| <b>VAC Section(s) Involved*</b> | <b>Description of Regulatory Change</b> | <b>Overview of How It Reduces or Increases Regulatory Burden</b> |
|---------------------------------|-----------------------------------------|------------------------------------------------------------------|
|                                 |                                         |                                                                  |
|                                 |                                         |                                                                  |

*Length of Guidance Documents (only applicable if guidance document is being revised)*

| <b>Title of Guidance Document</b> | <b>Original Word Count</b> | <b>New Word Count</b> | <b>Net Change in Word Count</b> |
|-----------------------------------|----------------------------|-----------------------|---------------------------------|
|                                   |                            |                       |                                 |
|                                   |                            |                       |                                 |

\*If the agency is modifying a guidance document that has regulatory requirements, it should report any change in requirements in the appropriate chart(s).