Office of Regulatory Management

Economic Review Form

Agency name	Department of Behavioral Health and Developmental Services
Virginia Administrative Code (VAC) Chapter citation(s)	12 VAC 35-105
VAC Chapter title(s)	Rules and Regulations for Licensing Providers by the Department of Behavioral Health and Developmental Services ("Licensing Regulations")
Action title	Integration of the Final Federal Rule: Registration Requirements for Narcotic Treatment Programs with Mobile Components into the Licensing Regulations
Date this document prepared	December 8, 2022 (NOTE: RESUBMITTED on 7/17/23 from final exempt to fast track per OAG 6/15/22)

Cost Benefit Analysis

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

(1) Direct Costs	This regulatory action amends 12VAC35-105-20 to add a definition of	
& Benefits	"Mobile medication assisted treatment program" (MAT) and creates	
	12VAC35-105-1420 through 12VAC35-105-1460, detailing requirements	
	for the application and operation of a mobile MAT program. The regulatory	
	change allows mobile medication assisted treatment programs to operate as	
	a component of a licensed MAT location. Current MAT providers are not	
	required to add a mobile treatment component, but they are eligible to add	
	this element if they choose to apply and meet the program requirements	
	outlined in this regulatory action.	
	• Direct Costs: This regulatory change does not directly impact any	
	MAT providers as the establishment of a mobile MAT program is	
	voluntary and not a requirement for all providers. As such, there are	
	no direct costs to this regulatory change.	
	• Direct Benefits : This regulatory action will allow MAT providers to	
	add a licensed mobile MAT component to their treatment services.	
	Mobile MAT units are intended to increase access to treatment for	
	opioid use disorder, particularly for hard-to-reach populations that	
	are not likely to have access to traditional health care services. The	

	access to treatment, and for Virginians suffering this is a newly authorize number of individuals w	vice component is expected to increase therefore, is expected to result in benefits from substance use disorder. However, as ed service, data is not available on the who may be served under a mobile MAT n exact benefit cannot be calculated.
(2) Quantitative Factors Direct Costs	Estimated Dollar Amount (a) \$0	Present Value (c) \$0
Direct Benefits	(b) \$0	(d) \$0
(3) Benefits- Costs Ratio		(4) Net\$0Benefit
(5) Indirect Costs & Benefits	Increasing community access to MAT is likely to reduce the demand for high acuity services related to substance use disorder including inpatient hospitalization in public and private hospitals, as well reduce the demand for ambulatory and emergency department care. These impacts are expected to have a positive effect on public and private health systems throughout the Commonwealth.	
(6) Information Sources		
(7) Optional		

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

(1) Direct Costs	This regulatory action integrates the US Drug Enforcement Administration	
& Benefits	(DEA) final federal rule, Registration Requirements for Narcotic Treatment	
	Programs with Mobile Components, into the DBHDS Licensing	
	Regulations. DBHDS was not required to create this regulatory change but	
	chose to initiate this action due to provider interest and a desire to increase	
	access to care for substance use disorder throughout the Commonwealth.	
	The below items detail the costs and benefits of not initiating this regulatory	
	change.	
	• Direct Costs: Without the possibility of this service, providers of	
	MAT services will not have the option to offer MAT service in a	
	mobile capacity, and therefore, access to treatment would be limited	

	 to individuals able to receive services as a physical location. The cost of this action is the cost of lack of treatment for SUD, which has significant negative financial and health impacts on individuals, their families, their communities, and the Commonwealth. However, as this is a newly authorized service, data is not available on the number of individuals who may be served under a mobile MAT license, therefore an exact cost cannot be calculated. Direct Benefit: There are no direct benefits to not initiating this regulatory change. This regulatory action would not require MAT providers to develop a mobile MAT component, therefore, there are no benefits to providers under the status quo. 		
(2) Quantitative Factors	Estimated Dollar Amount	Present Va	lue
Direct Costs	(a) \$0	(c) \$0	
Direct Benefits	(b) \$0	(d) \$0	
(3) Benefits-		(4) Net	
Costs Ratio		Benefit	\$0
(5) Indirect Costs & Benefits			
(6) Information Sources			
(7) Optional			

Table 1c: Costs and Benefits under an Alternative Approach

(1) Direct Costs & Benefits	This table is not necessary, as an alternative approach to the integration of this federal rule is not available. The requirements for a mobile MAT program established in this draft regulation are in line with the federal requirements for mobile MAT programs established by the DEA in July 2021. DBHDS did not exercise any discretion in the adoption of these	
	regulatory requirements.	
(2) Quantitative		
Factors	Estimated Dollar Amount	Present Value

Direct Costs	(a)	(c)
Direct Benefits	(b)	(d)
(3) Benefits- Costs Ratio		(4) Net Benefit
(5) Indirect Costs & Benefits		
(6) Information Sources		
(7) Optional		

Impact on Local Partners

Table 2: Impact on Local Partners

(1) Direct Costs & Benefits	• Direct Costs : Local service providers, such as local community services boards (CSBs), who provide MAT services would experience the same costs and benefits outlined in Table 1a. Providers currently licensed to provide MAT services would not be required to adopt a mobile service component under this regulation however, they would have the option to apply for an addendum to existing license to add a mobile service component to their curren operations. As this regulatory action would not mandate any changes, there are no anticipated costs to providers.	
	• Direct Benefits : This regulatory action would enable licensed providers to provide substance use disorder treatment to a group of individuals who may not be able to receive care in traditional settings. This could result in increased reimbursement from Medicaid and private insurance for this service, as well as improve access to community-based substance use disorder care. Data is not available on the number of individuals who may be served under this service, and therefore, an exact economic benefit cannot be determined.	
(2) Quantitative		
Factors	Estimated Dollar Amount	

Direct Costs	(a) \$0
Direct Benefits	(b) \$0
(2) Indiraat	
(3) Indirect	
Costs &	
Benefits	
(4) Information	
Sources	
(5) Assistance	
(6) Optional	

Economic Impacts on Families

Table 3: Impact on Families

Table 5. Impact on Families		
(1) Direct Costs & Benefits	 Costs: This regulatory action is not expected to result in any costs for families. Benefits: This regulation is expected to have a positive impact on families, as Virginians with substance use disorder will have greater access to MAT, which is expected to improve rates of recovery. Recovery from substance use disorder has a positive impact on family units, as family members are less likely to suffer negative health impacts due to substance use, become involved with the criminal justice system, and will experience other forms of harm reduction. However, as this is a new service, data on the number of individuals served by the mobile MAT program is not available, and therefore, an exact benefit cannot be calculated. 	
(2) Quantitative		
Factors	Estimated Dollar Amount	
Direct Costs	(a) \$0	

Direct Benefits	(b) \$0
(3) Indirect Costs & Benefits	
(4) Information Sources	
(5) Optional	

Impacts on Small Businesses

Table 4: Impact on Small Businesses

(1) Direct Costs	This regulation is not expected to have any direct costs or benefits to small
& Benefits	businesses.
(2) Quantitative	
Factors	Estimated Dollar Amount
Direct Costs	(a) \$0
Direct Benefits	(b) \$0
(3) Indirect	
Costs &	
Benefits	
(4) Alternatives	
(5) Information Sources	
(6) Optional	

Changes to Number of Regulatory Requirements

	Number of Requirements			
Chapter number	Initial Count	Additions	Subtractions	Net Change
105	1,311 (*2020 Baseline Total 968 + 66 Post 2020 in three actions [DOJ primarily; provider statement; CSB grace period] + 267 ASAM and +10 BHE.)	0	0	0*

Table 5: Total Number of Requirements

*These changes are federally mandated for the providers that choose to provide this service; therefore, they are not regulatory requirements as defined as agency discretionary mandates.

COST BENEFIT ANALYSIS WORKSHEET					
INTERI v. Jul M 2022	•				
Discount Rate:	3%	DO NOT CHANGE THIS NUMBER unless you wish to use a different discount rate; if so, please make a note of this on the Economic Impact form and provide a rationale			
Time horizon:	10 years				

Notes:

1. Year 0 represents the current fiscal year

2. Options 1 & 2 below correspond to the two options in the grocery cart example. Option 3 below provides an example where costs and benefits vary from year to year.

3. Replace the values in the green cells below with the expected costs and benefits for your analysis. Insert zero (0) for years where no costs or benefits are expected.

4. The sections for options 2 and 3 must be filled out if the agency has any discretion over the proposed regulatory changes. Use "Option 2" for the status quo and "Option 3" for one other alternative.

	Opt	tion 1	Option 2 O		tion 3	
	Cos	Bene				<u>.</u>
Year	t	fit	Cost Benefit		Cost B	enefit
0	0	0	0	0	0	0
1	0	0	0	0	0	0
2	0	0	0	0	0	0
3	0	0	0	0	0	0
4	0	0	0	0	0	0
5	0	0	0	0	0	0
6	0	0	0	0	0	0
7	0	0	0	0	0	0
8	0	0	0	0	0	0

9	0	0	0	0	0	0
TOTAL	0	0	0	0	0	0

Present Value						
	Option 1		Option 2		Option 3	
	Cos	Bene				- 0
Year	t	fit	Cost Benefit		Cost	Benefit
0	0	0	0	0	0	0
1	0	0	0	0	0	0
2	0	0	0	0	0	0
3	0	0	0	0	0	0
4	0	0	0	0	0	0
5	0	0	0	0	0	0
6	0	0	0	0	0	0
7	0	0	0	0	0	0
8	0	0	0	0	0	0
9	0	0	0	0	0	0
TOTAL	0	0	0	0	0	0

Option 1	Option 2	Option 3	
#DIV/			
0!	#DIV/0!	#DIV/0!	
0	0	0	
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