



Children, Families, Health, and Human Services Interim Committee

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60th Montana Legislature

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TO: Committee members
FROM: Lisa Mecklenberg Jackson, Staff Attorney, 444-4024
RE: Administrative Rule Activity
DATE: November 16, 2007

The Department of Public Health and Human Services has filed the following rule notices with the Secretary of State's Office for publication in the Montana Administrative Register (MAR):

(Notices in their entirety are available online at:

<http://www.dphhs.mt.gov/legalresources/recentlyadoptedrules/index.shtml>)

Notices of Adopted Rules:

I.

MAR 2007 Issue No. 20 (October 25, 2007), MAR Notice No. 37-409, NOTICE OF AMENDMENT -- a public hearing was held July 27, 2007 to consider amendment of seven rules pertaining to inpatient hospital, outpatient hospital, and Rural Health Clinic (RHC) services. No one appeared at the hearing to testify and no written comments were received. The rule amendments reflect the Department's intention to reimburse only nationally accredited birthing centers for Medicaid services (as well as licensed health care facilities). The Department extends the time allowed for a provider to repay Medicaid reimbursement to which is was not entitled (from 30 days to 60 days) and specify in the rule pertaining to Medicaid utilization that Medicaid's disproportionate share (DSH) calculations are based on inpatient utilization. The Department also added a legislatively mandated provider rate increase to inpatient and outpatient services provided in hospitals reimbursed under a prospective payment reimbursement system. And the Department amended the sites of service for Rural Health Care (RHC) providers to no longer include hospitals. The purpose of this proposed rule amendment is to conform Medicaid policy to Medicare practice. The Department intends the amendments be applied retroactively to October 1, 2007.

II.

MAR 2007 Issue No. 20 (October 25, 2007), MAR Notice No. 37-410, NOTICE OF AMENDMENT -- a public hearing was held August 15, 2007 to consider amendment of a rule pertaining to case management services for persons with developmental disabilities, reimbursement. No one appeared at the hearing to testify and no written comments were received. The rule amendment implements a standard rate system of reimbursement for developmental disabilities targeted case management services by referencing Section 1 of the Developmental Disabilities Program Manual of Service Reimbursement Rates and Procedures. Previously, reimbursement for developmental disabilities targeted case management services had been based upon historical patterns of reimbursement that generally were derived from the

circumstances of service development and the individualized cost basis needs of each contracted for provider of targeted case management services. The new standard rate system of reimbursement establishes a common standard targeted case management service rate for all providers of this service based upon common cost factors affecting the cost of service delivery for the targeted case management providers. The 2007 Legislature has approved funding that supports this case management reimbursement rate. The amendment is retroactive to July 1, 2007.

III.

MAR 2007 Issue No. 21 (November 8, 2007), MAR Notice No. 37-411, NOTICE OF AMENDMENT -- a public hearing was held October 1, 2007 to consider amendment of seven rules pertaining to Temporary Assistance for Needy Families (TANF). Seven comments were received. Amendments to rules 37.78.102, 37.78.208, 37.78.420, 37.78.425, and 37.78.508 were amended as proposed. Rules 37.78.206 and 37.78.506 were changed from the original proposal based on comments received. Original amendments to these rules changed the sanction policy for TANF violations specifying that all individuals who are or would be required filing unit members at the time of the sanction be subject to the ineligibility period related to a sanction if an ineligibility period is imposed. This ineligibility period will follow those individuals if they apply for benefits in another case. The commentor stated the proposal was punitive toward children who go to live with caretaker relatives when parents have a violation if the caretaker relatives cannot get a child only grant. The Department agrees and recent amendments except minor children from eligibility and cash assistance sanctions if they are determined eligible for child only TANF in another household.

IV.

MAR 2007 Issue No. 21 (November 8, 2007), MAR Notice No. 37-412, NOTICE OF AMENDMENT -- a public hearing was held October 10, 2007 to consider amendment of 16 rules pertaining to audiology services, dental, outpatient drug services, home infusion therapy, durable medical equipment and medical supplies, optometric services, Early & Periodic Screening, Diagnostic and Treatment Services (EPSDT), transportation, and ambulance services. These rule amendments: 1) increase Medicaid provider fees for hearing aid services, home infusion therapy, durable medical equipment, ambulance services, dental services, and private duty nursing as authorized by the 2007 Legislature; 2) edit to improve clarity of writing and update references to current fee schedules dates and provider manual dates; 3) increase the maximum dispensing fee for pharmacy providers; 4) allow transportation to some preferred hospitals with prior approval, rather than the closest facility; and 5: update the mileage rate for some transportation providers. Two comments were received--one stating the 16% increase in dispensing fees for pharmacies was insufficient (the Department stated the increase was approved in HB 2 and further costs are addressed in MAR Notice 37-417) and the other from committee staff stating that one of the statutes the Department is relying on for authority in this rulemaking has been repealed (the Department agrees and states the statute shouldn't have been underlined as authority. Another stated statute does give the Department authority for these rules).

Notices of Proposed Rules:

V.

MAR 2007 Issue No. 19 (October 4, 2007), MAR Notice No. 37-413, NOTICE OF PUBLIC HEARING ON PROPOSED AMENDMENT -- the Department has filed a NOTICE OF HEARING in the matter of the proposed amendment of eight rules pertaining to the Low Income Energy Assistance Program (LIEAP) and the Low Income Weatherization Assistance Program (LIWAP). A hearing was held October 24, 2007 in the Sapphire Room, 2401 Colonial Drive, Helena, Montana. The public comment period ran to November 1, 2007. LIEAP is a federally funded program to help low income households pay their home heating costs. In the definition section, the Department added veterans assistance payments into those items included in annual gross income and added a definition for "nonrecurring lump sum payment." Amendments to ARM 37.70.402 provide that a person who was the member of a household that received benefits from a tribal LIEAP program cannot receive LIEAP benefits from the Department for the same season. This is to discourage duplicate benefits. However, proposed amendments to ARM 37.70.602 provide exceptions to the general rule prohibiting receipt of benefits from both a tribe and the Department in the case of individuals who move during the heating season because of domestic violence or those who move during the heating season for reasons beyond their control. Other rule amendments update the poverty guidelines, the fiscal year for consideration of resources, and benefit amounts in the tables. The Department proposes to add a new section to ARM 37.70.607 with regard to the method for calculating the benefits of households that reside in publicly subsidized housing. The provision states that LIEAP benefits for these households will be computed in accordance with the usual method for computing benefits but the amount of the utility subsidy will be deducted to determine whether they will receive a LIEAP benefit and, if so, what the amount of the benefit will be. This provision is necessary to avoid duplication of benefits. The Department estimates that total funding for LIEAP for 2007-2008 will be \$1,371,276 less than funding for 2006-2007 and there will be a 5% increase in the number of households that receive LIEAP. Accordingly, it is estimated that the average household will receive a LIEAP benefit for the current heating season which is \$11 less than last year's benefit. LIWAP is a federally funded program to help low income households reduce their energy bills by providing services such as the installation of insulation that makes their homes more energy efficient. ARM 37.71.602 is being amended to correct an error in a reference (a change from (3) to (4)).

TECHNICAL NOTE: Committee staff noticed an error in the proposed amendment of ARM 37.70.602. The Department states that if a household changes type of heating fuel during the heating season, they must file a new application. Later, the rule states the household is not required to file a new application if changing heating fuel during the heating season. The Department states the latter is correct and will make the change in the final adoption notice.

VI.

MAR 2007 Issue No. 20 (October 25, 2007), MAR Notice No. 37-414, NOTICE OF PUBLIC HEARING ON PROPOSED AMENDMENT -- the Department has filed a NOTICE OF HEARING in the matter of the proposed amendment of one rule pertaining to Vocational

Rehabilitation Program provider fees. A hearing was held November 14, 2007 in the Sapphire Room, 2401 Colonial Drive, Helena, Montana. The public comment period runs to November 23, 2007. This rule governs the compensation of providers for the delivery of services and goods to consumers of vocational rehabilitation services provided through the authorization of the Montana Vocational Rehabilitation program. The proposed amendment would change the incorporation by reference from the July 1, 2002 edition of Policy R in the Montana Vocational Rehabilitation Policy Manual to the newly adopted October 1, 2007 edition of Policy R, resulting in a 1.85% increase in provider rates for physical and mental rehabilitation services. The increase was statutorily enacted via HB 2, 2007 and assures increased competition among the providers of voc-rehab authorized physical and mental restoration services so as to maintain the presence of these providers in the market.

TECHNICAL NOTE: The proposed rules were reviewed by committee staff and no technical problems were noted.

VII.

MAR 2007 Issue No. 20 (October 25, 2007), MAR Notice No. 37-415, NOTICE OF PUBLIC HEARING ON PROPOSED ADOPTION, AMENDMENT AND REPEAL -- the Department has filed a NOTICE OF HEARING in the matter of the proposed adoption of one new rule, amendment of 16 rules, and the repeal of one rule pertaining to the Children's Health Insurance Program (CHIP). A hearing was held November 14, 2007 in the DPHHS Auditorium, 111 N. Sanders, Helena, Montana. The public comment period runs to November 23, 2007. CHIP is a state and federally funded program to provide health care to children up to the age of 19 with family income and assets greater than the amount that qualifies for Medicaid benefits but less than or equal to 175% of the federal poverty level (FPL). On October 1, 2006 DPHHS began to self-administer the CHIP program and contracted with Blue Cross Blue Shield of Montana for third party administrator (TPA) services. Due to this change, a definition for TPA is being added to ARM 37.79.102 and reference to "contract insurers" and descriptions of the process required to enter into contracts for insurance policies are being deleted throughout these CHIP rules. Definitions of "ambulance based medical services," "family," "earned income," and "family income" are also being revised. Amendments to this section also update the FPL from 150% to 175% (via the 2007 Legislature) and amend the definition of "serious emotional disturbance" (SED) to reflect 2005 funding for extended mental health benefits for children with SED (SED is now a covered benefit). Amendments shorten the time period from three months to one month that a child may not have creditable coverage before becoming eligible for enrollment in CHIP and clarify the Department's current policy that child support received is considered unearned income of the custodial parent and that foster care income is not included in family income for purposes of CHIP eligibility unless the only children in the family are foster care children. The proposed amendment to ARM 37.79.207 adds voluntary disenrollment to the list of reasons for CHIP eligibility terminations. Amendment proposals to ARM 37.79.302 remove the requirement that enrollees who remain in the hospital on the effective date of CHIP coverage shall not be covered for that hospitalization and proposed amendments to ARM 37.79.303 remove the exclusion of mental health therapy when the enrollee is not present. This change permits reimbursement to a CHIP provider for a limited number of visits with parents to discuss mental

health issues related to a CHIP enrollee. ARM 37.79.326 is being amended to reflect a change by the 2007 Legislature extending dental benefits to enrollees with significant dental needs. New Rule I is being proposed to allow for electronic applications and signatures and ARM 37.79.504 is being proposed for repeal as it is meaningless under the current CHIP program. There are no longer any requirements for the selection of providers. The Department expects the proposed amendments to positively impact up to 16,000 CHIP enrollees. The total fiscal impact is estimated to be \$4.46 million in state fiscal year 2008. \$3.48 million will be federal and \$.98 million would be state funds.

TECHNICAL NOTE: The proposed rules were reviewed by committee staff and no technical problems were noted.

VIII.

MAR 2007 Issue No. 20 (October 25, 2007), MAR Notice No. 37-416, NOTICE OF PUBLIC HEARING ON PROPOSED AMENDMENT -- the Department has filed a NOTICE OF HEARING in the matter of the proposed amendment of one rule pertaining to the Medicaid real property liens. A hearing was held November 14, 2007 in the Wilderness Room, 2401 Colonial Drive, Helena, Montana. The public comment period runs to November 23, 2007. The Department is proposing amendments to ARM 37.82.435 that would reduce the time between a determination that a Medicaid applicant or recipient is permanently institutionalized and imposition of a real property lien. Currently, that time and the time allowed for a hearing request is 90 days. The proposed amendments would make it 30 days. Montana's lien statute (53-6-172) requires 30 days notice of intent to impose a lien and the opportunity for a hearing. Therefore, this proposed DPHHS rule change would bring the Department into compliance with Montana law.

TECHNICAL NOTE: The proposed rules were reviewed by committee staff and no technical problems were noted.

IX.

MAR 2007 Issue No. 20 (October 25, 2007), MAR Notice No. 37-417, NOTICE OF PUBLIC HEARING ON PROPOSED AMENDMENT -- the Department has filed a NOTICE OF HEARING in the matter of the proposed amendment of two rules pertaining to Medicaid reimbursement for dispensing fees and outpatient compound prescriptions. A hearing was held November 14, 2007 in the Wilderness Room, 2401 Colonial Drive, Helena, Montana. The public comment period runs to November 23, 2007. The Department is proposing changes to the reimbursement methodology for pharmacy providers based on the Deficit Reduction Act of 2005 (DRA) and the federal regulations implementing it. Specifically, the proposed amendments to the federal regulations change the methodology by which the Department calculates the federal upper payment limit. The portions of Montana's rules to be deleted are inconsistent with the new methodology. The Department is proposing changes to the pharmacy dispensing fee rule to reflect results from a statewide Montana Medicaid cost of dispensing survey (Feb.-April 2007), as well as to address the redefinition of "dispensing fee" in the DRA. The new definition of dispensing fee as provided in the DRA includes specialty packaging as a consideration in the

overall dispensing fee. The Montana Medicaid survey showed the average cost statewide to dispense was \$9.93. Accordingly, the Department determined that a \$10 maximum dispensing fee was adequate reimbursement for Montana pharmacies. Many pharmacies will not receive the maximum dispensing fee because their overall costs to dispense are less than \$10. Out-of-state prescriptions would still be reimbursed with a dispensing fee of \$3.50. The Department is also proposing changes to the compounding dispensing regulations. This is necessary to ensure federal matching funds are available for compounded prescriptions paid for by Medicaid. Prior authorization requirements for individual components of a compound must be met for reimbursement purposes. The Department is proposing that the dispensing fee for each compounded drug shall be \$12.50, \$17.50 or \$22.50 based on the level of effort required by the pharmacist. The Department proposes the amendments be effective January 1, 2008.

TECHNICAL NOTE: The proposed rules were reviewed by committee staff and no technical problems were noted.

X.

MAR 2007 Issue No. 20 (October 25, 2007), MAR Notice No. 37-418, NOTICE OF PUBLIC HEARING ON PROPOSED AMENDMENT -- the Department has filed a NOTICE OF HEARING in the matter of the proposed amendment of one rule pertaining to Medicaid eligibility. A hearing will be held November 20, 2007 in the Wilderness Room, 2401 Colonial Drive, Helena, Montana. The public comment period runs to November 23, 2007. ARM 37.82.101 incorporates by reference the state policy manuals (Family Medicaid Manual and Aged Blind Disabled (ABD) Medical Manual) which govern the administration of the Medicaid program. The Department proposes to make some revisions to these manuals that will take effect on January 1, 2008. A sampling of some of the changes appear below:

ABD Medicaid Manual

MA 002 Medically Needy: The 2007 Legislature appropriated \$1.1 million of state special revenue dollars for 2008 and 2009 to increase the amount of income that is disregarded in determining eligibility for the medically needy category of Medicaid. The Department is implementing the Legislature's mandate to count less income by allowing an additional deduction of \$50 per month to be subtracted from each medically needy incurment making it easier to qualify for Medicaid.

MA 105-1 Disability Determination Overview: The Department recently learned that the Department's Developmental Disabilities Program (DDP) uses a somewhat different set of state criteria to determine developmental disability than the Social Security Administration (SSA) does. Accordingly, the Department must stop recognizing DDP determinations as verification that an individual is disabled according to SSA criteria. All individuals not determined disabled by SSA will be processed for a disability determination through the state's disability determination contractor.

MA 400 Resources Overview: When a sponsored alien applies for Medicaid coverage, the resources of the sponsor are deemed available to the sponsored alien. The Department proposes to make certain changes to the policy governing deeming of a sponsor's resources in order to make it simpler.

MA 401-1 Resource Ownership/Accessibility/Equity Value: Definition of asset being restated to

clarify that a resource is considered available if the individual has either a legal or equitable interest in the asset.

MA 402-1 Countable and Excluded Resources: This section is being revised to specify that annuities owned by an eligible spouse will be treated the same as annuities owned by a Medicaid applicant or recipient. Also, a provision relating to irrevocable funeral agreements is being revised to add that a funeral agreement must comply with 53-6-169 which provides that if the funeral agreement originally held funds in excess of \$5,000, any funds not expended for the funeral expenses are payable to Montana Medicaid.

MA 404-1 Asset Transfers: A new policy regarding personal care contracts is being added to this section. The manual will now specify that when a Medicaid recipient has entered into a personal care contract with a third party other than the nursing home, assisted living facility, or adult foster home in which the applicant resides, any payment to the third party for services which are duplicative of services already included in the service package being received in the person's living situation is considered an uncompensated asset transfer. **Other sections being revised:**

MA 404-2 Penalty Periods for Asset Transfers:

MA 501-2 Native American Income:

MA 503-1 Self-Employment Income:

MA 603-3 Income Deeming Computation for a Sponsored Alien:

MA 702-2 Cash Option Refund:

MA 904-2 Post Eligibility Treatment of Income for Institutionalized Spouses:

MA 904-3 Post-Eligibility Treatment of Income for Institutionalized Individuals:

MA 1401-1 Estates Recovery:

Family Medicaid Manual

FMA 003 Medically Needy Income Levels:

FMA 004 Pregnancy:

FMA 307-4 Estates Recovery:

FMA 400 Resource Overview:

FMA 401-1 Resource Ownership/Accessibility/Equity Value:

FMA 503-1 Self-Employment:

TECHNICAL NOTE: The proposed rules were reviewed by committee staff and no technical problems were noted.

XI.

MAR 2007 Issue No. 20 (October 25, 2007), MAR Notice No. 37-419, NOTICE OF PUBLIC HEARING ON PROPOSED AMENDMENT -- the Department has filed a NOTICE OF HEARING in the matter of the proposed amendment of four rules pertaining to durable medical equipment and medical supplies. A hearing was held November 15, 2007 in the Wilderness Room, 2401 Colonial Drive, Helena, Montana. The public comment period runs to November 23, 2007. The proposed amendments are to rules providing for Medicaid reimbursement of durable medical equipment (DME) services. These changes to existing policy would include making DME usable in school and workplace settings, changing procedures for transmitting DME prescriptions and orders, changing the way providers are reimbursed for wheelchairs, allowing reimbursement for positioning items in nursing facilities, adopting Medicare's method

of reimbursement for rental equipment, updating references to Medicare manuals, correcting grammatical errors, and deleting obsolete provisions. Several of these proposed changes are the direct result of recommendations by the HJR 32 Workgroup. The Department intends the rule changes be effective January 1, 2008.

TECHNICAL NOTE: The proposed rules were reviewed by committee staff and no technical problems were noted.

XII.

MAR 2007 Issue No. 20 (October 25, 2007), MAR Notice No. 37-420, NOTICE OF PUBLIC HEARING ON PROPOSED AMENDMENT AND REPEAL -- the Department has filed a NOTICE OF HEARING in the matter of the proposed amendment of four rules and the repealing of four rules pertaining to the child care assistance program. A hearing will be held December 4, 2007 in the Board of Investments Conference Room, 2401 Colonial Drive, Helena, Montana. The public comment period runs to December 6, 2007. These rules pertain to payment for child care services provided to parents eligible for benefits under the Child Care and Development Block Grant Act of 1990 and the Personal Responsibility and Work Opportunity Reconciliation Act of 1996. The Department has included some updates to the Montana Child Care Manual which contains the policies and procedures utilized in the implementation of the Department's Child Care Assistance program and which are incorporated into the ARM by reference. Proposed amendments to ARM 37.80.201 provide that the Department cooperate with the Child Support Enforcement Division by maintaining an open case when a case can be established. Further amendments to that rule specify that any licensed or registered child care provider is not eligible for child care assistance while a child attends a public or private school. The Department will also not pay for a child to be home schooled. Proposed amendments to ARM 37.80.206 state that if a provider fails to notify the child care resource and referral agency when a child is absent without explanation for five consecutive working days, the Department is not required to pay for any care from the date the child last attended the facility. The Department has found it necessary to revise sections 1-2 (organizational chart), 1-3 (definitions), 1-4 (provider rates), 1-5 (child care sliding fee scale), 2-1 (application process), 2-2 (household requirements), 2-5 (prospective budgeting), 2-6 (income table), 3-1 (process for cash benefits), 4-1 (child care authorizations), 6-2 (legally unregistered providers), 6-5 (reporting), 6-6 (absent day policies), 6-7 (invoice and payment processes), 6-10 (table of eligibility related forms), 6-13 (eligibility specialists), 7-5b (higher education merit pay) and 7-5c (infant toddler merit pay) of the Montana Child Care Manual. The Department has also found it necessary to add sections 3-3 (working caregiver relative child care) and 4-2 (Tribal IV-E CPS Child Care) to the Manual. The rules proposed for repeal relate to the Best Beginnings Quality Child Care Program and are duplicated in the Montana Child Care Manual.

TECHNICAL NOTE: Committee staff finds no statement of reasonable necessity for the proposed rule changes to ARM 37.80.201(4) and (11). Subsection (6)(b) of MCA 2-4-305 specifically provides that a statement of reasonable necessity for a change in rule must state the principal reasons and the rationale for its intended action and for the particular approach that it takes in complying with the mandate to adopt rules. That subsection further provides that

reasonable necessity must be clearly and thoroughly demonstrated for each adoption, amendment, or repeal of a rule in the agency's notice of proposed rulemaking. DPHHS Legal Staff have been notified.

XIII.

MAR 2007 Issue No. 21 (November 8, 2007), MAR Notice No. 37-421, NOTICE OF PUBLIC HEARING ON PROPOSED ADOPTION, AMENDMENT AND REPEAL -- the Department has filed a NOTICE OF HEARING in the matter of the proposed adoption of four new rules, amendment of 13 rules, and the repeal of one rule pertaining to vital statistics. A hearing will be held December 3, 2007 in the Wilderness Room, 2401 Colonial Drive, Helena, Montana. The public comment period runs to December 6, 2007. The Department developed Rule I to comply with SB 518, enacted by the 2007 Legislature. This new law, contained in 50-15-208, requires the department to issue certificates of birth that have resulted in stillbirth starting January 1, 2008. The law also requires the department to adopt rules for the time a certificate must be filed after the stillbirth, evidence required to establish facts of stillbirth, and information required on the certificate. The Department proposes to have Rules II, III, and IV replace ARM 37.8.106. The new rules address altering and amending vital records. Rule II provides the general requirements for all types of vital record amendment and corrections. Rule III standardizes how the Department and local registrars amend or replace information on birth or death certificates. Rule IV provides procedures for adoptions, name changes, and sex changes. These unique matters result in the issuance of new birth certificates without amending the originals. Proposed amendments to ARM 37.8.103 state retention of paper copies of vital records is not necessary if they are filed electronically and local registrars may destroy any paper record older than two years and report the destruction to the Department. ARM 37.8.116 relates to fee charges. Proposed amendments specify how the fees must be distributed between the counties and the state and proposes uniform fees between the two. The Department believes the proposed fee structure will establish fee parity and provide funding for the vital record system that is used by the Department and counties. The Department is proposing numerous, but minimal, changes in fees for issuing various types of certificates. One proposal allows the Department to retain, not refund, fees for providing services to noncomplying requests for information and copies. This is needed to cover the Department's and counties' expenses. A proposed change to ARM 37.8.801 clarifies that a professional licensed nurse may provide pronouncing information for death certificates. Frequently, the certifier of the cause of death is not present at the death, therefore the certifier must rely on information provided by the attending professional nurse.

TECHNICAL NOTE: The proposed rules were reviewed by committee staff and no technical problems were noted.

XIV.

MAR 2007 Issue No. 21 (November 8, 2007), MAR Notice No. 37-422, NOTICE OF PUBLIC HEARING ON PROPOSED AMENDMENT -- the Department has filed a NOTICE OF HEARING in the matter of the proposed amendment of ten rules pertaining to newborn screening tests and eye treatment. A hearing will be held December 3, 2007 in the Wilderness Room, 2401 Colonial Drive, Helena, Montana. The public comment period runs to December 6,

2007. These proposed rule amendments expand the list of screening tests (from four to 28) required to be provided to infants in Montana. SB 162, passed by the 2007 Legislature, authorized the expansion of the panel of required newborn screening tests through rulemaking. The objective is to make sure that all infants born in Montana are afforded the best opportunity and treatment of congenital conditions that can result in catastrophic health, financial, and quality of life consequences to newborns and their families, and that the requirements for testing should keep pace with the medical and scientific capacity to diagnose and treat congenital conditions. In addition, the revised list of required newborn screenings brings Montana in line with national standards for newborn screenings. Because a significant number of children born in Montana each year are provided health care services through Medicaid, there may be some increases passed on to the Department through higher health care costs. However, because many children afflicted with long-term health conditions that result from undiagnosed and untreated congenital conditions receive benefits through Department programs for health care services or developmental disability services, the overall financial impact to the Department is expected to be minimal.

TECHNICAL NOTE: The proposed rules were reviewed by committee staff and no technical problems were noted.

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