HOUSE AMENDED

## THE GENERAL ASSEMBLY OF PENNSYLVANIA

## SENATE BILL No. 695 Session of 2019

## INTRODUCED BY BROOKS, MAY 31, 2019

AS RE-REPORTED FROM COMMITTEE ON APPROPRIATIONS, HOUSE OF REPRESENTATIVES, AS AMENDED, JUNE 25, 2019

## AN ACT

1 2 3 4 5 6 7 8 9 10 11 12 13	<pre>Amending the act of June 13, 1967 (P.L.31, No.21), entitled "An act to consolidate, editorially revise, and codify the public welfare laws of the Commonwealth," in public assistance, further providing for medical assistance payments for institutional care AND FOR NONEMERGENCY MEDICAL &lt; TRANSPORTATION SERVICES AND PROVIDING FOR UNIFORM STATEWIDE PREFERRED DRUG LIST; in nursing facility assessments, further providing for DEFINITIONS, FOR CALCULATION, FOR REMEDIES, FOR &lt; REPAYMENT AND FOR time periods; in intermediate care facilities for persons with an intellectual disability assessments, further providing for DEFINITIONS AND FOR time &lt; periods; and, in hospital assessments, further providing for &lt; time period-; AND MAKING A RELATED REPEAL. &lt;</pre>
14	The General Assembly of the Commonwealth of Pennsylvania
15	hereby enacts as follows:
16	Section 1. Sections 443.1(7)(iv), 815 A, 811 C(b) and 808 <
17	E(a) of the act of June 13, 1967 (P.L.31, No.21), known as the
18	Human Services Code, are amended to read:
19	SECTION 1. SECTION 443.1(7)(IV) OF THE ACT OF JUNE 13, 1967 <
20	(P.L.31, NO.21), KNOWN AS THE HUMAN SERVICES CODE, IS AMENDED TO
21	READ:
22	Section 443.1. Medical Assistance Payments for Institutional
23	CareThe following medical assistance payments shall be made

on behalf of eligible persons whose institutional care is
 prescribed by physicians:

3 \* \* \*

(7) After June 30, 2007, payments to county and nonpublic 4 nursing facilities enrolled in the medical assistance program as 5 providers of nursing facility services shall be determined in 6 accordance with the methodologies for establishing payment rates 7 8 for county and nonpublic nursing facilities specified in the 9 department's regulations and the Commonwealth's approved Title 10 XIX State Plan for nursing facility services in effect after June 30, 2007. The following shall apply: 11

12 \* \* \*

13 (iv) Subject to Federal approval of such amendments as may be necessary to the Commonwealth's approved Title XIX State 14 15 Plan, for each fiscal year beginning on or after July 1, 2011, 16 the department shall apply a revenue adjustment neutrality factor to county and nonpublic nursing facility payment rates so 17 18 that the estimated Statewide day-weighted average payment rate 19 in effect for that fiscal year is limited to the amount 20 permitted by the funds appropriated by the General Appropriation Act for the fiscal year. The revenue adjustment neutrality 21 factor shall remain in effect until the sooner of June 30, 22 23 [2019] 2022, or the date on which a new rate-setting methodology 24 for medical assistance nursing facility services which replaces the rate-setting methodology codified in 55 Pa. Code Chs. 1187 25 26 (relating to nursing facility services) and 1189 (relating to county nursing facility services) takes effect. 27

28 \* \* \*

29 SECTION 2. SECTION 443.12 OF THE ACT IS AMENDED BY ADDING <-30 SUBSECTIONS TO READ:</pre>

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1 SECTION 443.12. NONEMERGENCY MEDICAL TRANSPORTATION 2 SERVICES.--\* \* \* 3 (D) THE DEPARTMENT MAY NOT ENTER INTO A CONTRACT WITH A 4 BROKER UNDER SUBSECTION (B) PRIOR TO THE COMPLETION OF THE 5 ANALYSIS REQUIRED UNDER SUBSECTION (E). 6 (E) PRIOR TO THE IMPLEMENTATION OF THE FULL-RISK BROKERAGE 7 MODEL, THE DEPARTMENT, IN COORDINATION WITH THE DEPARTMENT OF 8 TRANSPORTATION AND THE DEPARTMENT OF AGING, SHALL COMMISSION AN 9 ANALYSIS THAT PROVIDES AT A MINIMUM THE FOLLOWING: 10 (1) AN ANALYSIS OF CURRENT FEDERAL AND STATE LAW, REGULATIONS AND POLICIES CONTROLLING THE NONEMERGENCY MEDICAL 11 TRANSPORTATION AND OTHER HUMAN SERVICES TRANSPORTATION PROGRAMS 12 13 ADMINISTERED IN THE COMMONWEALTH, INCLUDING THE AUTHORIZED METHODS OF DELIVERY AND LIMITATIONS OR RESTRICTIONS IMPOSED ON 14 15 THE METHODS OF DELIVERY. (2) AN ANALYSIS OF THE EFFECTIVENESS AND EFFICIENCY OF THE 16 CURRENT NONEMERGENCY TRANSPORTATION SERVICE DELIVERY AS IT 17 18 RELATES TO ALL HUMAN SERVICE PROGRAMS IN THIS COMMONWEALTH. (3) A REVIEW OF OTHER STATES' MODELS OF DELIVERING 19 20 NONEMERGENCY MEDICAL AND OTHER HUMAN SERVICES TRANSPORTATION, 21 INCLUDING THE NUMBER OF OTHER STATES THAT UTILIZE A FULL-RISK 22 BROKERAGE MODEL AND THE EFFECT A BROKERAGE MODEL HAS HAD ON 23 PUBLIC TRANSIT IN THOSE STATES. 24 (4) AN ANALYSIS OF THE POSITIVE AND NEGATIVE IMPACT OF 25 MAINTAINING THE CURRENT TRANSPORTATION DELIVERY MODEL VERSUS 26 IMPLEMENTING A FULL-RISK BROKERAGE MODEL AS IT RELATES TO THE 27 STATE AND LOCAL GOVERNMENT ENTITIES, INCLUDING FINANCIAL IMPACT. 28 (5) AN ANALYSIS OF THE IMPACT ON CONSUMERS, INCLUDING AN 29 INCREASE OR DECREASE IN QUALITY AND SERVICE AVAILABILITY.

30 (F) THE ANALYSIS UNDER SUBSECTION (E) SHALL BE COMPLETED NO

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1	LATER THAN NINETY DAYS FROM THE EFFECTIVE DATE OF THIS
2	SUBSECTION, AND SHALL BE DELIVERED TO THE FOLLOWING:
3	(1) THE SECRETARY OF HUMAN SERVICES.
4	(2) THE SECRETARY OF AGING.
5	(3) THE SECRETARY OF TRANSPORTATION.
6	(4) THE CHAIRPERSON AND MINORITY CHAIRPERSON OF THE
7	APPROPRIATIONS COMMITTEE OF THE SENATE.
8	(5) THE CHAIRPERSON AND MINORITY CHAIRPERSON OF THE
9	APPROPRIATIONS COMMITTEE OF THE HOUSE OF REPRESENTATIVES.
10	(6) THE CHAIRPERSON AND MINORITY CHAIRPERSON OF THE HEALTH
11	AND HUMAN SERVICES COMMITTEE OF THE SENATE.
12	(7) THE CHAIRPERSON AND MINORITY CHAIRPERSON OF THE HEALTH
13	COMMITTEE OF THE HOUSE OF REPRESENTATIVES.
14	SECTION 3. THE ACT IS AMENDED BY ADDING A SECTION TO READ:
15	SECTION 459.1. UNIFORM STATEWIDE PREFERRED DRUG LIST(A)
16	THE DEPARTMENT MAY NOT IMPLEMENT A UNIFORM STATEWIDE PREFERRED
17	DRUG LIST FOR THE MEDICAL ASSISTANCE MANAGED CARE ORGANIZATIONS
18	UNTIL AN ANALYSIS HAS BEEN CONDUCTED, AS COMMISSIONED BY THE
19	DEPARTMENT, TO DETERMINE THE PROJECTED COST TO THE MEDICAL
20	ASSISTANCE MANAGED CARE ORGANIZATION AND THE PROJECTED
21	SUPPLEMENTAL REBATES THAT COULD BE OBTAINED BY THE DEPARTMENT
22	THROUGH THE USE OF A UNIFORM STATEWIDE PREFERRED DRUG LIST.
23	(B) THE ANALYSIS UNDER SUBSECTION (A) SHALL BE COMPLETED
24	WITHIN SIXTY DAYS OF THE EFFECTIVE DATE OF THIS SUBSECTION. THE
25	ANALYSIS SHALL BE DELIVERED TO THE FOLLOWING:
26	(1) THE CHAIRPERSON AND MINORITY CHAIRPERSON OF THE
27	APPROPRIATIONS COMMITTEE OF THE SENATE.
28	(2) THE CHAIRPERSON AND MINORITY CHAIRPERSON OF THE HEALTH
29	AND HUMAN SERVICES COMMITTEE OF THE SENATE.
30	(3) THE CHAIRPERSON AND MINORITY CHAIRPERSON OF THE
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1 APPROPRIATIONS COMMITTEE OF THE HOUSE OF REPRESENTATIVES.

2 <u>(4) THE CHAIRPERSON AND MINORITY CHAIRPERSON OF THE HEALTH</u> 3 COMMITTEE OF THE HOUSE OF REPRESENTATIVES.

4 SECTION 4. THE DEFINITIONS OF "COUNTY NURSING FACILITY,"
5 "MEDICAL ASSISTANCE PROVIDER" AND "NURSING FACILITY" IN SECTION
6 801-A OF THE ACT ARE AMENDED AND THE SECTION IS AMENDED BY
7 ADDING A DEFINITION TO READ:

8 SECTION 801-A. DEFINITIONS.--AS USED IN THIS ARTICLE--9 \* \* \*

"COUNTY NURSING FACILITY" MEANS A LONG-TERM CARE NURSING 10 FACILITY THAT IS LICENSED BY THE DEPARTMENT OF HEALTH UNDER THE 11 ACT OF JULY 19, 1979 (P.L.130, NO.48), KNOWN AS THE "HEALTH CARE 12 FACILITIES ACT, " AND CONTROLLED BY THE COUNTY INSTITUTION 13 14 DISTRICT OR COUNTY GOVERNMENT IF NO COUNTY INSTITUTION DISTRICT EXISTS. THE TERM DOES NOT INCLUDE INTERMEDIATE CARE FACILITIES 15 16 FOR [THE MENTALLY RETARDED] INDIVIDUALS WITH AN INTELLECTUAL DISABILITY CONTROLLED BY THE COUNTY INSTITUTION DISTRICT OR 17 18 COUNTY GOVERNMENT.

19 <u>"MEDICAL ASSISTANCE MANAGED CARE ORGANIZATION" MEANS A</u>

20 <u>MEDICAID MANAGED CARE ORGANIZATION AS DEFINED IN SECTION 1903(M)</u>

21 (1) (A) OF THE SOCIAL SECURITY ACT (49 STAT. 620, 42 U.S.C. §

22 1396B(M)(1)(A)) THAT IS A PARTY TO A MEDICAID MANAGED CARE

23 CONTRACT WITH THE DEPARTMENT. THE TERM SHALL NOT INCLUDE A

24 BEHAVIORAL HEALTH MANAGED CARE ORGANIZATION THAT IS A PARTY TO A

25 MEDICAID MANAGED CARE CONTRACT WITH THE DEPARTMENT.

26 "MEDICAL ASSISTANCE PROVIDER" MEANS A PERSON OR ENTITY
27 ENROLLED BY THE [DEPARTMENT OF HUMAN SERVICES] DEPARTMENT AS A
28 PROVIDER OF SERVICES IN THE MEDICAL ASSISTANCE PROGRAM.
29 "NURSING FACILITY" MEANS A NON-FEDERAL, NONPUBLIC LONG-TERM
30 CARE NURSING FACILITY LICENSED BY THE DEPARTMENT OF HEALTH

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PURSUANT TO THE ACT OF JULY 19, 1979 (P.L.130, NO.48), KNOWN AS 1 THE "HEALTH CARE FACILITIES ACT." THE TERM DOES NOT INCLUDE 2 3 INTERMEDIATE CARE FACILITIES FOR [THE MENTALLY RETARDED] INDIVIDUALS WITH AN INTELLECTUAL DISABILITY. 4 5 \* \* \* 6 SECTION 5. SECTIONS 807-A, 810-A(3) AND 813-A OF THE ACT ARE 7 AMENDED TO READ: 8 SECTION 807-A. [CALCULATION.--USING THE ASSESSMENT RATES 9 IMPLEMENTED BY THE SECRETARY PURSUANT TO SECTION 805-A(A), EACH NURSING FACILITY SHALL CALCULATE THE ASSESSMENT AMOUNT IT OWES 10 FOR A CALENDAR QUARTER ON A FORM SPECIFIED BY THE DEPARTMENT AND 11 SHALL SUBMIT THE FORM AND THE AMOUNT OWED TO THE DEPARTMENT NO 12 13 LATER THAN THE LAST DAY OF THAT CALENDAR QUARTER OR THIRTY (30) DAYS FROM THE DATE OF THE SECOND NOTICE PUBLISHED PURSUANT TO 14 15 SECTION 805-A(A), WHICHEVER IS LATER. A NURSING FACILITY'S CALCULATION OF THE ASSESSMENT AMOUNT OWED IN ANY OUARTER IS 16 SUBJECT TO VERIFICATION BY THE DEPARTMENT PURSUANT TO SECTION 17 18 808-A.] ASSESSMENT AMOUNT AND TIMING.--EACH NURSING FACILITY 19 SHALL REMIT THE ASSESSMENT AMOUNTS DUE AS DETERMINED BY THE 20 DEPARTMENT PURSUANT TO SECTION 805-A(A) IN PERIODIC SUBMISSIONS, 21 NOT TO EXCEED FIVE TIMES PER YEAR, AS SPECIFIED BY THE 22 DEPARTMENT. A NURSING FACILITY SHALL REPORT AND REMIT THE TOTAL 23 ASSESSMENT AMOUNT OWED ELECTRONICALLY ON FORMS AND IN ACCORDANCE 24 WITH INSTRUCTIONS AND BY THE DUE DATES PRESCRIBED BY THE 25 DEPARTMENT. THE PRESCRIBED DUE DATES SHALL BE AT LEAST THIRTY 26 (30) DAYS AFTER THE DATE OF PUBLICATION OF THE SECOND NOTICE 27 UNDER SECTION 805-A(A). 28 SECTION 810-A. REMEDIES. -- IN ADDITION TO ANY OTHER REMEDY 29 PROVIDED BY LAW, THE DEPARTMENT MAY ENFORCE THIS ARTICLE BY 30 IMPOSING ONE OR MORE OF THE FOLLOWING REMEDIES:

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1 \* \* \*

2 (3) WHEN A NURSING FACILITY THAT IS A MEDICAL ASSISTANCE 3 PROVIDER OR THAT IS RELATED THROUGH COMMON OWNERSHIP OR CONTROL AS DEFINED IN 42 CFR 413.17(B) (RELATING TO COST TO RELATED 4 5 ORGANIZATIONS) TO A MEDICAL ASSISTANCE PROVIDER FAILS TO PAY ALL OR PART OF AN ASSESSMENT OR PENALTY WITHIN SIXTY (60) DAYS OF 6 THE DATE THAT PAYMENT IS DUE, THE DEPARTMENT MAY DEDUCT OR 7 8 INSTRUCT A MEDICAL ASSISTANCE MANAGED CARE ORGANIZATION TO 9 DEDUCT THE UNPAID ASSESSMENT OR PENALTY AND ANY INTEREST OWED 10 THEREON FROM ANY MEDICAL ASSISTANCE PAYMENTS DUE TO THE NURSING FACILITY OR TO ANY RELATED MEDICAL ASSISTANCE PROVIDER UNTIL THE 11 FULL AMOUNT IS RECOVERED. ANY SUCH DEDUCTION SHALL BE MADE ONLY 12 13 AFTER WRITTEN NOTICE TO THE MEDICAL ASSISTANCE PROVIDER AND MAY BE TAKEN IN AMOUNTS OVER A PERIOD OF TIME TAKING INTO ACCOUNT 14 15 THE FINANCIAL CONDITION OF THE MEDICAL ASSISTANCE PROVIDER. \* \* \* 16

17 SECTION 813-A. REPAYMENT. -- NO NURSING FACILITY SHALL BE 18 DIRECTLY GUARANTEED A REPAYMENT OF ITS ASSESSMENT IN DEROGATION 19 OF 42 CFR 433.68(F) (RELATING TO PERMISSIBLE HEALTH CARE-RELATED 20 TAXES AFTER THE TRANSITION PERIOD): PROVIDED, HOWEVER, THAT IN 21 EACH FISCAL YEAR IN WHICH AN ASSESSMENT IS IMPLEMENTED, THE 22 DEPARTMENT SHALL USE THE STATE REVENUE COLLECTED FROM THE 23 ASSESSMENT AND ANY FEDERAL FUNDS RECEIVED BY THE COMMONWEALTH AS 24 A DIRECT RESULT OF THE ASSESSMENTS TO [MAINTAIN AND INCREASE 25 PROGRAM PAYMENTS] MAKE PROGRAM PAYMENTS THROUGH FEE-FOR-SERVICE 26 OR MANAGED CARE TO MEDICAL ASSISTANCE NURSING FACILITY PROVIDERS 27 TO THE EXTENT PERMISSIBLE UNDER FEDERAL AND STATE LAW OR 28 REGULATION AND WITHOUT CREATING AN INDIRECT GUARANTEE TO HOLD 29 HARMLESS, AS THOSE TERMS ARE USED IN 42 CFR 433.68(F). IF THE 30 DEPARTMENT IMPLEMENTS AN ASSESSMENT ON COUNTY NURSING

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FACILITIES, THE DEPARTMENT SHALL ALLOCATE ASSESSMENT REVENUES 1 2 AVAILABLE TO [MAINTAIN AND INCREASE PROGRAM PAYMENTS] MAKE 3 PROGRAM PAYMENTS THROUGH FEE-FOR-SERVICE OR MANAGED CARE TO BOTH COUNTY AND NON COUNTY NURSING FACILITIES IN A MANNER THAT IS 4 CONSISTENT WITH FEDERAL LAW AND WITHOUT CREATING A DIRECT OR AN 5 INDIRECT GUARANTEE TO HOLD ANY NURSING FACILITY HARMLESS. THE 6 SECRETARY SHALL SUBMIT ANY [STATE MEDICAID PLAN] TITLE XIX STATE 7 8 PLAN AMENDMENTS TO THE UNITED STATES DEPARTMENT OF HEALTH AND 9 HUMAN SERVICES THAT ARE NECESSARY TO MAKE THE [PAYMENT 10 INCREASES] PAYMENTS. 11 SECTION 6. SECTION 815-A OF THE ACT, AMENDED JUNE 30, 2012 (P.L.668, NO.80), AMENDMENT DECLARED UNCONSTITUTIONAL, 188 A.3D 12 13 1135 (PA. 2018), AND AMENDED JULY 8, 2016 (P.L.480, NO.76), IS 14 REENACTED AND AMENDED TO READ: 15 Section 815-A. Time periods. -- The assessment authorized in this article shall [not be imposed prior to July 1, 2003, or 16 <---17 after June 30, +2012] <u>BE IMPOSED JULY 1, 2003, THROUGH JUNE 30,</u> <--2022. 18 19 SECTION 7. THE DEFINITIONS OF "DEPARTMENT" AND "SECRETARY" <--20 IN SECTION 801-C OF THE ACT ARE AMENDED TO READ: 21 SECTION 801-C. DEFINITIONS. 22 THE FOLLOWING WORDS AND PHRASES WHEN USED IN THIS ARTICLE 23 SHALL HAVE THE MEANINGS GIVEN TO THEM IN THIS SECTION UNLESS THE 24 CONTEXT CLEARLY INDICATES OTHERWISE: 25 \* \* \* 26 ["DEPARTMENT." THE DEPARTMENT OF HUMAN SERVICES OF THE 27 COMMONWEALTH.] \* \* \* 28

29 ["SECRETARY." THE SECRETARY OF HUMAN SERVICES OF THE

30 COMMONWEALTH.]

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\* \* \* 1 2 SECTION 8. SECTION 811-C(B) AND 808-E(A) OF THE ACT ARE AMENDED TO READ: 3 Section 811-C. Time periods. 4 \* \* \* 5 6 (b) Cessation.--The assessment authorized under this article shall cease June 30, [2019] 2022 2024, or earlier, if required <--7 8 by law. 9 Section 808-E. Time period. 10 (a) Cessation.--The assessment authorized under this article shall cease June 30, [2019] 2022. 11 \* \* \* 12 SECTION 9. REPEALS ARE AS FOLLOWS: 13 <---14 (1)THE GENERAL ASSEMBLY DECLARES THAT THE REPEAL UNDER 15 PARAGRAPH (2) IS NECESSARY TO EFFECTUATE THE REENACTMENT OR AMENDMENT OF SECTIONS 801-A, 807-A, 810-A(3), 813-A AND 815-A 16 17 OF THE ACT. 18 (2) SECTION 1729-E(2)(II) OF THE ACT OF APRIL 9, 1929 19 (P.L.343, NO.176), KNOWN AS THE FISCAL CODE, IS REPEALED.

20 Section 2 10. This act shall take effect immediately. <--

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