THE GENERAL ASSEMBLY OF PENNSYLVANIA

SENATE BILL No. 912 Session of 2017

INTRODUCED BY BROOKS, STREET, WHITE, BREWSTER, GREENLEAF, MENSCH, COSTA, HAYWOOD, BROWNE, VULAKOVICH, SCHWANK, MARTIN, BAKER, HUGHES, LEACH, VOGEL, TARTAGLIONE, WAGNER, REGAN AND SCAVELLO, OCTOBER 5, 2017

AS AMENDED ON THIRD CONSIDERATION, OCTOBER 2, 2018

AN ACT

1 2 3 4 5 6	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, providing for medical assistance deemed eligibility program for home care, home health and older adult daily living center services.
7	The General Assembly of the Commonwealth of Pennsylvania
8	hereby enacts as follows:
9	Section 1. The act of June 13, 1967 (P.L.31, No.21), known
10	as the Human Services Code, is amended by adding a section to
11	read:
12	Section 443.13. Medical Assistance Deemed Eligibility
13	Program for Home Care, Home Health and Older Adult Daily Living
14	<u>Center Services(a) The SUBJECT TO FEDERAL APPROVAL, THE</u> <
15	department shall establish a deemed eligibility program for home
16	care services, home health services and older adult daily living
17	center services to prevent the unnecessary and costly
18	institutionalization of individuals who are eligible for medical
19	assistance nursing facility services and want to receive home

1	care and assistance with daily living in a less restrictive	
2	setting.	
3	(b) The program shall:	
4	(1) be designed to provide home care services, home health	
5	services and older adult daily living center services only for	
6	individuals who are sixty-five years of age or older and nursing	-
7	facility clinically eligible;	
8	(2) permit a qualified entity to submit an application for	
9	medical assistance on behalf of individuals to the department;	
10	(3) permit an individual who is applying for medical	
11	assistance to declare income and assets on an application form	
12	and attest to the accuracy of the income and assets provided on	
13	the application form; and	
14	(4) permit a qualified entity to determine the deemed	
15	eligibility of individuals to receive medical assistance.	
16	(c) The following apply:	
17	(1) If a qualified entity determines that an individual is	
18	deemed eligible to receive medical assistance under subsection	
19	(b)(4), the individual may begin receiving home care services,	
20	home health services and older adult daily living center	
21	services from a medical assistance provider as soon as THE	<
22	INDIVIDUAL SIGNS a preliminary service plan is developed FOR	<
23	THOSE SERVICES. As authorized under Federal law, the department	
24	shall apply a final determination of medical assistance	
25	eligibility beginning on the date that a qualified entity	
26	determines that an individual is deemed eligible for medical	
27	assistance under subsection (b)(4).	
28	(2) If a qualified entity determines that an individual is	
29	deemed eligible under subsection (b)(4), and the individual is	
30	subsequently determined to be ineligible for home care services,	-
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1	home health services and older adult daily living center_
2	services by the department, the medical assistance provider_
3	which provided home care services, home health services and
4	<u>older adult daily living center services under clause (1) shall</u>
5	not be reimbursed by RECEIVE PAYMENT FROM the Commonwealth for <
6	the cost of the home care services, home health services and <
7	older adult daily living center services provided during the
8	period of deemed eligibility. If the individual provided
9	fraudulent information under this section, the medical
10	assistance provider may seek reimbursement PAYMENT from the <
11	individual for the cost of home care services, home health <
12	services and older adult daily living center services provided
13	during the period of deemed eligibility.
14	(3) Once the department makes a final determination of
15	eligibility, the department shall authorize medical assistance
16	payments FOR THE INDIVIDUAL for the first sixty days of AFTER <
17	THE DATE THE INDIVIDUAL SIGNS A PRELIMINARY SERVICE PLAN LIMITED
18	TO THE home care services, home health services and older adult
19	daily living center services provided during the period of <
20	deemed eligibility following the date that the gualified entity
21	established the preliminary service plan.
22	(4) The department shall verify the information on the
23	application and make a final determination of medical assistance
24	eligibility. The department may request additional information
25	from an applicant for the purpose of completing the verification
26	process under this clause.
20	
	(d) Upon request, the department shall provide information
28	to a qualified entity about Commonwealth policies and procedures
29	on how to determine whether an individual may be deemed eligible
30	for medical assistance under subsection (b)(4).
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1	(e) The department shall issue a medical assistance bulletin
2	which contains the Commonwealth policies and procedures
3	necessary to implement this section. POLICIES AND PROCEDURES <
4	UNDER THIS SUBSECTION ARE NOT SUBJECT TO THE ACT OF JULY 31,
5	1968 (P.L.769, NO.240), REFERRED TO AS THE COMMONWEALTH
6	DOCUMENTS LAW; THE ACT OF OCTOBER 15, 1980 (P.L.950, NO.164),
7	KNOWN AS THE COMMONWEALTH ATTORNEYS ACT; OR THE ACT OF JUNE 25,
8	1982 (P.L.633, NO.181), KNOWN AS THE REGULATORY REVIEW ACT. The
9	publication of the medical assistance bulletin under this
10	subsection shall not delay the implementation of this section.
11	(f) Within seventy-five ONE HUNDRED EIGHTY days of the <
12	effective date of this subsection, the department shall apply
13	for any necessary Federal waiver or State plan amendment
14	REQUIRED UNDER TITLE XIX OF THE SOCIAL SECURITY ACT (49 STAT. <
15	620, 42 U.S.C. 1396 ET SEQ.). Fifteen days prior to applying for
16	any necessary Federal waiver or State plan amendment, the
17	department shall submit the proposed application to the Health
18	and Human Services Committee of the Senate, the Health Committee
19	of the House of Representatives and the Human Services Committee
20	of the House of Representatives. The department shall maximize
21	the use of Federal money for the program.
22	(g) Within seventy five days of the effective date of this <
23	subsection, the department shall issue any revisions to the
24	State medical assistance plan as required under Title XIX of the
25	Social Security Act (49 Stat. 620, 42 U.S.C. § 1396 et seq.).
26	Fifteen days prior to issuing any revisions, the department
27	shall submit the proposed revisions to the Health and Human
28	Services Committee of the Senate, the Health Committee of the
29	House of Representatives and the Human Services Committee of the
30	House of Representatives.

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2 shall issue a report to the General Assembly with the following. 3 information about the program: 4 (1) The number of individuals who participated in the 5 program. 6 (2) The average cost for each individual in the program. 7 (3) The number of qualified entities in the program. 8 (4) The administration costs. 9 (5) The estimated savings. 10 (1) (H) The Legislative Budget and Finance Committee shall 11 conduct a study of the fiscal impact and effectiveness of the 12 deemed eligibility program. The committee shall submit a final. 13 report with its findings and recommendations to the Secretary of 14 the Senate and the Chief Clerk of the House of Representatives 15 by October 31, 2023. 16 (1) This section shall expire October 31, 2024. 17 (k) (J) As used in this section, the following words and 18 phrases shall have the following meanings: 19 "Home care services." As defined in 28 Pa. Code \$ 611.5	_ <
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	<
19 "Home care services." As defined in 28 Pa. Code § 611.5	
20 <u>(relating to definitions).</u>	
21 <u>"Home health services." Part-time, intermittent skilled</u>	
22 nursing services and therapy services provided under 28 Pa. Code	<u>de</u>
23 <u>Ch. 601 (relating to home health care agencies) at an</u>	
24 <u>individual's place of residence.</u>	
25 <u>"Nursing facility clinically eligible." An individual who:</u>	
26 <u>(1) is certified by a physician to be nursing facility</u>	
27 <u>clinically eligible;</u>	
28 (2) has been diagnosed with an illness, injury, disability	<
29 CLINICALLY ELIGIBLE AFTER THE INDIVIDUAL HAS BEEN DIAGNOSED WITH	<
	<

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1	physician which requires the individual to receive health	
2	services in accordance with the following:	<
3	(i) Skilled THE DEFINITION OF SKILLED nursing and skilled <	<
4	rehabilitation services as defined in 42 CFR 409.31 (relating to <	<
5	<pre>level of care requirement) -;</pre>	<
6	(ii) 42 CFR 409.32 (relating to criteria for skilled	
7	services and the need for skilled services)-;	<
8	(iii) 42 CFR 409.33 (relating to examples of skilled nursing	
9	and rehabilitation services)-;	<
10	(iv) 42 CFR 409.34 (relating to criteria for "daily	
11	basis")-; AND	<
12	(v) 42 CFR 409.35 (relating to criteria for "practical	
13	<pre>matter")-; OR</pre>	<
14	(3) (2) needs health services on a regular basis in the	<
15	context of a planned program of health care and management which	
16	was only previously available through an institutional facility.	
17	"Nursing facility services." As defined in 42 CFR 440.40	
18	(relating to nursing facility services for individuals age 21 or	
19	older (other than services in an institution for mental	
20	disease), EPSDT, and family planning services and supplies) or	
21	42 CFR 440.155 (relating to nursing facility services, other	
22	than in institutions for mental diseases).	
23	"Older adult daily living center services." Services	
24	provided to assist an individual with activities of daily living	
25	and essential activities of daily living at an older adult daily	
26	living center as defined under 6 Pa. Code § 11.3 (relating to	
27	<u>definitions).</u>	
28	"Program." The deemed eligibility program established by the	
29	department under subsection (a).	
30	"Qualified entity." A home care agency, home health agency,	
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1 <u>older adult daily living center or an organization authorized by</u>
2 <u>the department which elects to determine the deemed eligibility</u>
3 <u>of individuals to receive medical assistance under subsection</u>
4 <u>(b) (4).</u>

5 Section 2. The Secretary of Human Services shall transmit to <--</p>
6 the Legislative Reference Bureau, for publication in the
7 Pennsylvania Bulletin, notice of approval of any necessary
8 Federal waiver or State plan amendment under section 443.13 of
9 the act.

10 SECTION 2. IF A NECESSARY FEDERAL WAIVER OR STATE PLAN <---AMENDMENT UNDER SECTION 443.13 OF THE ACT IS APPROVED BY THE 11 CENTERS FOR MEDICARE AND MEDICAID SERVICES FOR FEDERAL 12 REIMBURSEMENT FOR SERVICES PROVIDED TO AN INDIVIDUAL DEEMED 13 ELIGIBLE FOR HOME CARE SERVICES, HOME HEALTH SERVICES OR OLDER 14 ADULT DAILY LIVING SERVICES, THE SECRETARY OF HUMAN SERVICES 15 SHALL TRANSMIT NOTICE OF THE APPROVAL TO THE LEGISLATIVE 16 17 REFERENCE BUREAU FOR PUBLICATION IN THE PENNSYLVANIA BULLETIN. Section 3. This act shall take effect as follows: 18 19 (1) Except as set forth in paragraph (2), the addition of section 443.13 of the act shall take effect 30 days 20 21 following publication of the notice in which the Centers for <--22 Medicare and Medicaid Services approve Federal reimbursement 23 for services provided to an individual deemed eligible for 24 home care services, home health services and older adult 25 daily living center services under section 2.

26 (2) The addition of section 443.13(f) of the act shall27 take effect immediately.

(3) The remainder of this act shall take effectimmediately.

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