	LONG-TERM CARE FACILITY - MEDICAID
	CERTIFICATION FOR BED CAPACITY AMENDMENTS
	2010 GENERAL SESSION
	STATE OF UTAH
	Chief Sponsor: Luz Robles
	House Sponsor: Larry B. Wiley
I	LONG TITLE
(General Description:
	This bill amends provisions for the Medicaid certification of nursing care facility
p	programs.
E	Highlighted Provisions:
	This bill:
	 allows the Division of Health Care Financing within the Department of Health
u	under certain conditions, to renew Medicaid certification of a nursing care facility
p	program not currently certified; and
	 makes technical corrections.
١	Monies Appropriated in this Bill:
	None
(Other Special Clauses:
	None
J	Utah Code Sections Affected:
P	AMENDS:
	26-18-503 , as last amended by Laws of Utah 2008, Chapter 347



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28	26-18-503. Authorization to renew, transfer, or increase Medicaid certified
29	programs Reimbursement methodology.
30	(1) (a) The division may renew Medicaid certification of a certified program if the
31	program, without lapse in service to Medicaid recipients, has its nursing care facility program
32	certified by the division at the same physical facility as long as the licensed and certified bed
33	capacity at the facility has not been expanded, unless the director has approved additional beds
34	in accordance with Subsection (5).
35	(b) The division may renew Medicaid certification of a nursing care facility program
36	not currently certified if:
37	(i) since the program last operated with Medicaid certification:
38	(A) the physical facility where the program last operated with Medicaid certification
39	has functioned continuously and only as a nursing care facility; and
40	(B) the owner of the program has not, under this section or Section 26-18-505,
41	transferred to another nursing care facility program the license for any of the Medicaid beds in
42	the program;
43	(ii) at the time the program last operated with Medicaid certification, all beds in the
44	physical facility where the program operated were Medicaid certified; and
45	(iii) the number of beds granted renewed Medicaid certification does not exceed the
46	number of beds certified at the time the program last operated with Medicaid certification.
47	(2) (a) The division may issue a Medicaid certification for a new nursing care facility
48	program if a current owner of the Medicaid certified program transfers its ownership of the
49	Medicaid certification to the new nursing care facility program and the new nursing care
50	facility program meets all of the following conditions:
51	(i) the new nursing care facility program operates at the same physical facility as the
52	previous Medicaid certified program;
53	(ii) the new nursing care facility program gives a written assurance to the director in
54	accordance with Subsection (4);
55	(iii) the new nursing care facility program receives the Medicaid certification within
56	one year of the date the previously certified program ceased to provide medical assistance to a
57	Medicaid recipient; and
58	(iv) the licensed and certified bed capacity at the facility has not been expanded, unless

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59 the director has approved additional beds in accordance with Subsection (5).

(b) A nursing care facility program that receives Medicaid certification under the provisions of Subsection (2)(a) does not assume the Medicaid liabilities of the previous nursing care facility program if the new nursing care facility program:

- (i) is not owned in whole or in part by the previous nursing care facility program; or
- (ii) is not a successor in interest of the previous nursing care facility program.
- (3) The division may issue a Medicaid certification to a nursing care facility program that was previously a certified program but now resides in a new or renovated physical facility if the nursing care facility program meets all of the following:
- (a) the nursing care facility program met all applicable requirements for Medicaid certification at the time of closure;
- (b) the new or renovated physical facility is in the same county or within a five-mile radius of the original physical facility;
- (c) the time between which the certified program ceased to operate in the original facility and will begin to operate in the new physical facility is not more than three years;
- (d) if Subsection (3)(c) applies, the certified program notifies the department within 90 days after ceasing operations in its original facility, of its intent to retain its Medicaid certification;
- (e) the provider gives written assurance to the director in accordance with Subsection (4) that no third party has a legitimate claim to operate a certified program at the previous physical facility; and
- (f) the bed capacity in the physical facility has not been expanded unless the director has approved additional beds in accordance with Subsection (5).
- (4) (a) The entity requesting Medicaid certification under Subsections (2) and (3) [must] shall give written [assurances] assurance satisfactory to the director or [his] the director's designee that:
 - (i) no third party has a legitimate claim to operate the certified program;
- (ii) the requesting entity agrees to defend and indemnify the department against any claims by a third party who may assert a right to operate the certified program; and
- (iii) if a third party is found, by final agency action of the department after exhaustion of all administrative and judicial appeal rights, to be entitled to operate a certified program at

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90 the physical facility the certified program shall voluntarily comply with Subsection (4)(b).

(b) If a finding is made under the provisions of Subsection (4)(a)(iii):

- (i) the certified program shall immediately surrender its Medicaid certification and comply with division rules regarding billing for Medicaid and the provision of services to Medicaid patients; and
- (ii) the department shall transfer the surrendered Medicaid certification to the third party who prevailed under Subsection (4)(a)(iii).
- (5) (a) As provided in Subsection 26-18-502(2)(b), the director shall issue additional Medicaid certification when requested by a nursing care facility or other interested party if there is insufficient bed capacity with current certified programs in a service area. A determination of insufficient bed capacity shall be based on the nursing care facility or other interested party providing reasonable evidence of an inadequate number of beds in the county or group of counties impacted by the requested Medicaid certification based on:
- (i) current demographics which demonstrate nursing care facility occupancy levels of at least 90% for all existing and proposed facilities within a prospective three-year period;
 - (ii) current nursing care facility occupancy levels of 90%; or
- (iii) no other nursing care facility within a 35-mile radius of the nursing care facility requesting the additional certification.
- (b) In addition to the requirements of Subsection (5)(a), a nursing care facility program [must] shall demonstrate by an independent analysis that the nursing care facility can financially support itself at an after tax break-even net income level based on projected occupancy levels.
- (c) When making a determination to certify additional beds or an additional nursing care facility program under Subsection (5)(a):
- (i) the director shall consider whether the nursing care facility will offer specialized or unique services that are underserved in a service area;
- (ii) the director shall consider whether any Medicaid certified beds are subject to a claim by a previous certified program that may reopen under the provisions of Subsections (2) and (3); and
- (iii) the director may consider how to add additional capacity to the long-term care delivery system to best meet the needs of Medicaid recipients.

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121	(6) The department shall adopt administrative rules in accordance with Title 63G,
122	Chapter 3, Utah Administrative Rulemaking Act, to adjust the Medicaid nursing care facility
123	property reimbursement methodology to:
124	(a) beginning July 1, 2008, only pay that portion of the property component of rates,
125	representing actual bed usage by Medicaid clients as a percentage of the greater of:
126	(i) actual occupancy; or
127	(ii) (A) for a nursing care facility other than a facility described in Subsection
128	(6)(a)(ii)(B), 85% of total bed capacity; or
129	(B) for a rural nursing care facility, 65% of total bed capacity; and
130	(b) beginning July 1, 2008, not allow for increases in reimbursement for property
131	values without major renovation or replacement projects as defined by the department by rule.

Legislative Review Note as of 2-16-10 10:26 AM

Office of Legislative Research and General Counsel

Fiscal Note

S.B. 238 - Long-term Care Facility - Medicaid Certification for Bed Capacity Amendments

2010 General Session State of Utah

State Impact

Enactment of this bill will not require additional appropriations.

Individual, Business and/or Local Impact

Enactment of this bill likely will not result in direct, measurable costs and/or benefits for individuals local governments. Business may be impacted due to the proposed change in statute.

2/18/2010, 3:42:43 PM, Lead Analyst: Schoenfeld, J.D./Attny: CJD

Office of the Legislative Fiscal Analyst