Second Regular Session Sixty-eighth General Assembly STATE OF COLORADO

REREVISED

This Version Includes All Amendments Adopted in the Second House

LLS NO. 12-0237.01 Brita Darling x2241

SENATE BILL 12-128

SENATE SPONSORSHIP

Roberts,

HOUSE SPONSORSHIP

Summers,

Senate Committees Health and Human Services **House Committees**

Health and Environment

A BILL FOR AN ACT

101	CONCERNING ACHIEVING EF	FICIENCIE	S IN THE MEI	DICAID LONG-TE	ERM
102	CARE PROGRAM T	THROUGH	GREATER	UTILIZATION	OF
103	ALTERNATIVE CARE I	FACILITIES	•		

Bill Summary

(Note: This summary applies to this bill as introduced and does not reflect any amendments that may be subsequently adopted. If this bill passes third reading in the house of introduction, a bill summary that applies to the reengrossed version of this bill will be available at http://www.leg.state.co.us/billsummaries.)

The bill establishes the 3-year alternative care facilities pilot program (pilot program) designed to increase the utilization of alternative care facilities in the medicaid program. Alternative care facilities participating in the pilot program will receive a reimbursement for not

3rd Reading Unam ended April18,2012 HOUSE

Am ended 2nd Reading

3rd Reading Unam ended SENATE

ended 2nd Reading

SENATE

Am

more than 1000 clients equal to \$3000 per client, per month, after considering the client portion of the cost, to provide long-term care services to clients who have been residing in a nursing facility prior to the referral to an alternative care facility. The single entry point agency shall assess the client residing in a nursing facility to determine whether the client will achieve the same or better health outcomes and client satisfaction in the alternative care facility.

On or before September 1, 2013, September 1, 2014, and September 1, 2015, the department of health care policy and financing shall report to the joint budget committee of the general assembly and the health and human services committee of the senate and the health and environment committee of the house of representatives concerning the design, implementation, and outcomes of the pilot program on client health outcomes, costs, and client satisfaction.

The pilot program repeals on July 1, 2016.

1	Be it enacted by the General Assembly of the State of Colorado:
2	SECTION 1. In Colorado Revised Statutes, add 25.5-6-113 as
3	<u>follows:</u>
4	25.5-6-113. Alternative care facilities - reimbursement
5	programs - legislative declaration - report - repeal. (1) (a) THE
6	GENERAL ASSEMBLY HEREBY FINDS AND DECLARES THAT:
7	(I) THE NUMBER OF COLORADANS NEEDING LONG-TERM CARE IS
8	INCREASING;
9	(II) STATE GENERAL FUND EXPENDITURES FOR LONG-TERM CARE
10	ALREADY REPRESENT A SIGNIFICANT PORTION OF THE STATE'S MEDICAL
11	ASSISTANCE BUDGET;
12	(III) MANY PERSONS IN NEED OF LONG-TERM CARE ARE OFTEN
13	UNAWARE THAT THEY MAY BE ABLE TO RECEIVE LONG-TERM CARE
14	SERVICES IN A HOME-LIKE ENVIRONMENT, AT A LOWER COST TO THE
15	MEDICAID PROGRAM;
16	(IV) STUDIES HAVE BEEN CONDUCTED INFORMING THE STATE THAT
17	AN ENHANCED REIMBURSEMENT METHODOLOGY IS NECESSARY FOR THE

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1	ESTABLISHMENT OF A STRONG CONTINUUM OF CARE FOR LONG-TERM
2	CARE;
3	(V) OTHER ALTERNATIVES TO NURSING HOME CARE SHOULD BE
4	DEVELOPED AND IMPLEMENTED; AND
5	(VI) <u>Unless Colorado implements new methods for</u>
6	FINANCING LONG-TERM CARE, THE COST TO THE STATE FOR LONG-TERM
7	CARE SERVICES WILL CONTINUE TO RISE PRECIPITOUSLY.
8	(b) Therefore, the General assembly finds that it is
9	APPROPRIATE TO ESTABLISH A PROGRAM TO PROVIDE GREATER FINANCIAL
10	INCENTIVES TO ALTERNATIVE CARE FACILITIES THAT ARE ABLE TO MEET
11	THE NEEDS OF MEDICAID CLIENTS AT A LOWER COST TO THE MEDICAID
12	PROGRAM.
13	(2) In order to decrease the number of costly
14	READMISSIONS TO NURSING FACILITIES, THE STATE DEPARTMENT MAY
15	CREATE AN ENHANCED REIMBURSEMENT PROGRAM IN WHICH AN
16	ALTERNATIVE CARE FACILITY RECEIVES A TEMPORARY INCREASE IN THE
17	MEDICAID PER DIEM REIMBURSEMENT RATE FOR A MEDICAID CLIENT
18	DISCHARGED FROM A NURSING FACILITY TO AN ALTERNATIVE CARE
19	FACILITY. THE STATE DEPARTMENT SHALL DEVELOP THE CRITERIA FOR
20	PARTICIPATION IN THE ENHANCED REIMBURSEMENT PROGRAM.
21	(3) IN ORDER TO ADDRESS THE NEEDS OF MEDICAID CLIENTS WHO
22	ARE AT RISK OF NURSING HOME PLACEMENT, THE STATE DEPARTMENT MAY
23	ALSO CREATE A PROGRAM, INFORMED BY PRIOR STUDIES, THAT MAY
24	INCLUDE, BUT NEED NOT BE LIMITED TO, TIERED-RATE, ACUITY, AND
25	ENHANCED REIMBURSEMENTS FOR ALTERNATIVE CARE FACILITIES AND
26	ENHANCED ALTERNATIVE CARE SERVICES. ANY PROGRAM CREATED BY
27	THE STATE DEPARTMENT PURSUANT TO THIS SUBSECTION (3) SHALL BE

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1	BUDGET-NEUTRAL OR SHALL PRODUCE COST SAVINGS TO THE STATE
2	DEPARTMENT.
3	(4) AS PART OF ITS ANNUAL REPORTING REQUIREMENT, THE STATE
4	DEPARTMENT SHALL SUBMIT A WRITTEN REPORT TO THE JOINT BUDGET
5	COMMITTEE OF THE GENERAL ASSEMBLY, THE HEALTH AND HUMAN
6	SERVICES COMMITTEE OF THE SENATE, OR ANY SUCCESSOR COMMITTEE,
7	AND THE HEALTH AND ENVIRONMENT COMMITTEE OF THE HOUSE OF
8	REPRESENTATIVES, OR ANY SUCCESSOR COMMITTEE, CONCERNING THE
9	DESIGN, IMPLEMENTATION, AND OUTCOME OF ANY PROGRAM CREATED
10	PURSUANT TO SUBSECTIONS (2) OR (3) OF THIS SECTION.
11	(5) This section is repealed, effective July 1, 2015.
12	SECTION 2. Act subject to petition - effective date. This act
13	takes effect at 12:01 a.m. on the day following the expiration of the
14	ninety-day period after final adjournment of the general assembly (August
15	8, 2012, if adjournment sine die is on May 9, 2012); except that, if a
16	referendum petition is filed pursuant to section 1 (3) of article V of the
17	state constitution against this act or an item, section, or part of this act
18	within such period, then the act, item, section, or part will not take effect
19	unless approved by the people at the general election to be held in
20	November 2012 and, in such case, will take effect on the date of the
21	official declaration of the vote thereon by the governor.

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