

**STATE
FISCAL IMPACT**

Drafting Number: LLS 13-0783
Prime Sponsor(s): Sen. Steadman
 Rep. Gerou

Date: February 8, 2013
Bill Status: Senate Appropriations
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TITLE: CONCERNING INTERMEDIATE CARE FACILITIES FOR INDIVIDUALS WITH INTELLECTUAL DISABILITIES.

Fiscal Impact Summary	FY 2012-13	FY 2013-2014	FY 2014-2015
State Revenue	See State Revenue section.		
State Transfers	See State Transfers section.		
State Expenditures	Minimal reduction in workload. See State Expenditures section.		
FTE Position Change			
Effective Date: Upon signature of the Governor, or upon becoming law without his signature.			
Appropriation Summary for FY 2013-2014: See State Appropriations section.			
Local Government Impact: None.			

Summary of Legislation

Recommended by the Joint Budget Committee, this bill makes technical changes to the terminology used to reference facilities providing care to persons with intellectual disabilities. In addition, it changes which state agency is authorized to collect the provider fee from intermediate care facilities. Under current law, the fee may be levied by the Department of Human Services (DHS). This bill authorizes the Department of Health Care Policy and Financing (HCPF) to collect the fee instead.

State Revenue

This bill does not change state revenue, although it includes an appropriation adjustment as a result of a decision to restore collection of the statutorily-authorized provider fee on intermediate care facilities. This fee is authorized under current law, but was not collected in FY 2011-12 while the state worked with the federal government to address technical issues about how the fee is applied.

State Transfers

House Bill 12-1338 transfers any General Fund surplus in FY 2012-13 to the State Education Fund. By including a reduction of \$1,162,256 in General Fund appropriations in this bill for HCPF in FY 2012-13, it will cause a corresponding increase of \$1,162,256 in the amount transferred to the State Education Fund in FY 2013-14.

State Expenditures

This bill does not alter current state expenditures, but it eliminates a minimal amount of work in the future to once again begin collecting the provider fee on intermediate care facilities. Currently, HCPF transfers Medicaid dollars to DHS to reimburse covered expenses incurred at intermediate care facilities. To collect the provider fee, the DHS would perform billing, then transfer the fee back to HCPF to obtain an enhanced federal match. This bill allows HCPF to directly collect the provider fee, eliminating the need to transfer moneys between DHS and HCPF. As such, it eliminates reappropriated funds and 0.9 FTE from DHS and allocates these resources to HCPF.

State Appropriations

Table 1 shows the adjustments in appropriations for the current FY 2012-13. Adjustments for FY 2013-14 are shown in Table 2.

Table 1. Appropriations Adjustments for FY 2012-13					
Line	TF	GF	CF	RF	FF
HCPF					
Medical Services Premiums	\$457,906	(\$177,364)	\$406,318	\$0	\$228,952
Regional Centers	1,866,611	(984,892)	3,785,854	(1,867,655)	933,304
Total HCPF	2,324,517	(1,162,256)	4,192,172	(1,867,655)	1,162,256
DHS					
Provider Fee	1,866,611	0	0	1,866,611	0
TOTAL	\$4,191,128	(\$1,162,256)	\$4,192,172	(\$1,044)	\$1,162,256

Table 2. Appropriations Adjustments for FY 2013-14					
Line	TF	GF	CF	RF	FF
HCPF					
Executive Director's Office					
Personal Services	\$52,955	\$0	\$26,478	\$0	\$26,477
Operating Expenses	871	0	435	0	436
FTE - 0.9					
Medical Services Premiums	228,953	(88,682)	203,159	0	114,476
Regional Centers	1,892,927	0	1,892,927	0	0
Total HCPF	2,175,706	(88,682)	2,122,999	0	141,389
DHS					
Provider Fee	1,892,927	0	0	1,892,927	0
TOTAL	\$4,068,633	(\$88,682)	\$2,122,999	\$1,892,927	\$141,389

Departments Contacted

Joint Budget Committee Staff