Stricken language would be deleted from and underlined language would be added to the law as it existed prior to this session of the General Assembly.

1	State of Arkansas As Engrossed: S3/17/03 A Bill		
2		тт т	071
3	Regular Session, 2003SENATE B	ILL	9/1
4			
5	By: Senators Laverty, Broadway		
6	By: Representative J. Johnson		
7			
8	For An Act To Be Entitled		
9			
10 11	AN ACT TO LEVY A QUALITY PROGRAM ASSESSMENT UPON CERTAIN HEALTH CARE FACILITIES; AND FOR OTHER		
12	PURPOSES.		
12	rukruses.		
15	Subtitle		
15	TO LEVY A QUALITY PROGRAM ASSESSMENT		
16	UPON CERTAIN HEALTH CARE FACILITIES.		
17			
18			
19	BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF ARKANSAS:		
20			
21	SECTION 1. <u>Definitions.</u>		
22	For purposes of this act:		
23	(1) "Director" means the director of the division;		
24	(2) "Division" means the Division of Medical Services of the		
25	Department of Human Services;		
26	(3)(A) "Gross receipts" means gross receipts paid as compensation	on f	or
27	services provided to residents of a ten (10) bed intermediate care for	the	
28	mentally retarded facility including, but not limited to, client		
29	participation.		
30	(B) "Gross receipts" does not mean charitable contribution	ns;	
31	(4) "Medicaid" means the Medical Assistance Program established	by	
32	Title XIX of the Social Security Act, as in effect on January 1, 2003,	and	
33	administered by the division;		
34	(5) "Midnight census" means the count of:		
35	(A) Each patient occupying a ten (10) bed intermediate ca	re f	or
36	the mentally retarded facility bed at midnight of each day;		



1	(B) Those beds placed on hold during a period of time not to
2	exceed five (5) consecutive calendar days during which a patient is in a
3	hospital bed; and
4	(C) Those beds placed on hold during a period of time not to
5	exceed fourteen (14) consecutive calendar days during which a patient is on
6	therapeutic home leave;
7	(6) "Multiplier" means the fixed dollar amount used to calculate the
8	quality program assessment;
9	(7) "Resident days" means the number of patients in a ten (10) bed
10	intermediate care for the mentally retarded facility as determined by the
11	midnight census; and
12	(8)(A) "Ten (10) bed intermediate care for the mentally retarded
13	facility" means a facility licensed by the Office of Long-Term Care and an
14	intermediate care facility for the mentally retarded in the under fifteen
15	(15) bed category;
16	(B) "Ten (10) bed intermediate care for the mentally retarded
17	facility" does not mean offices of private physicians and surgeons, boarding
18	homes, residential care facilities, intermediate care facilities for the
19	mentally retarded, hospitals, institutions operated by the federal government
20	or licensed by the Division of Developmental Disabilities Services of the
21	Department of Human Services, or any facility which is conducted by and for
22	those who rely exclusively upon treatment by prayer for healing in accordance
23	with tenets or practices of any recognized religious denomination.
24	
25	SECTION 2. Calculation of quality program assessment.
26	(a) There is levied a quality program assessment on ten (10) bed
27	intermediate care for the mentally retarded facilities to be calculated in
28	accordance with subsections (b) of this section.
29	(b)(1) The quality program assessment shall be an amount determined
30	each month by multiplying the patient days as reported by each ten (10) bed
31	intermediate care for the mentally retarded facility for each day of the
32	month by the multiplier.
33	(2) Each multiplier shall be:
34	(A) Calculated by the division to produce an aggregate
35	annual quality program assessment payment equal to six percent (6%) of the
36	aggregate annual gross receipts; and

1	(B) Subject to prospective adjustment as necessary for
2	annual aggregate quality program assessment payments to equal six percent
3	(6%) of the aggregate annual gross receipts.
4	(c)(1) On and after July 1, 2003, and annually thereafter, the
5	multiplier shall be determined using the patient days and gross receipts
6	reported to the division for a period of at least six (6) months and shall be
7	annualized.
8	(2) The division shall determine the six-month period to be used
9	in order to calculate the multiplier.
10	
11	SECTION 3. <u>Reporting and collection.</u>
12	(a) On the tenth day of the first full month following the effective
13	date of this act, and on the tenth day of each month thereafter, each ten
14	(10) bed intermediate care for the mentally retarded facility shall file a
15	report with the division listing the patient days for the preceding month.
16	(b) The quality program assessment shall be due and payable for the
17	previous month by the thirtieth of each month.
18	(c) The payment of the quality program assessment by the ten (10) bed
19	intermediate care for the mentally retarded facilities shall be reported as
20	an allowable cost for Medicaid reimbursement purposes.
21	
22	SECTION 4. Administration.
23	(a) The administration of this act shall be exercised by the director
24	and shall be subject to the provisions of the Arkansas Administrative
25	Procedure Act.
26	(b)(1) The division, in accordance with the Arkansas Administrative
27	Procedure Act, shall promulgate rules and regulations and prescribe forms
28	<u>for:</u>
29	(A) The proper imposition and collection of the quality
30	program assessment;
31	(B)(i) The enforcement of this act including, but not
32	limited to, license non renewal, letters of caution, sanctions, or fines.
33	(ii) The fine shall be at least five hundred dollars
34	(\$500) but no more than one thousand dollars (\$1,000).
35	(iii) The fine and outstanding quality program
36	assessments shall accrue interest at the maximum rate permitted by law from

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1	the date the quality program assessment is due until payment of the quality
2	program assessment and the fine;
3	(C) The format for reporting by all ten (10) bed
4	intermediate care for the mentally retarded facilities, the total patient
5	days and gross receipts; and
6	(D) The administration of the provisions of this act.
7	(2) The rules and regulations shall not grant any exceptions to,
, 8	or exceptions from, the quality program assessment.
9	(c)(1) The quality program assessment charged and collected under this
10	act shall be deposited within a newly established account.
11	(2) The designated account shall be separate and distinct from
12	the general fund and shall be supplementary to the Arkansas Medicaid Program
13	Trust Fund.
14	(3) Funds in the account derived from ten (10) bed intermediate
15	care for the mentally retarded facilities that are not operated by a
16	governmental entity shall not be used to replace other general revenues
17	appropriated and funded by the General Assembly or other revenues used to
18	support Medicaid.
19	(4) This designated account shall be exempt from budgetary cuts,
20	reductions, or eliminations caused by a deficiency of general revenues.
21	(5) Earnings on investments from this designated account shall
22	remain a part of the designated account and shall not be deposited in the
23	general fund.
24	(d)(1) Except as necessary to reimburse any funds borrowed to
25	supplement funds in the designated account, the designated account moneys in
26	the trust fund and the matching federal financial participation under Title
27	XIX of the Social Security Act for expenditures from the Arkansas Medicaid
28	Program Trust Fund, shall only be used to reimburse additional costs paid to
29	Medicaid certified ten (10) bed intermediate care for the mentally retarded
30	facilities under Arkansas' State Medicaid Long-Term Care Cost Reimbursement
31	<u>Methodologies.</u>
32	(2) No ten (10) bed intermediate care for the mentally retarded
33	facility shall be guaranteed, expressly or otherwise, that any additional
34	moneys paid to the facility will equal or exceed the amount of its quality
35	program assessment.
36	

1	SECTION 5. If any section of this act or the application of this act
2	shall be adjudged by any court of competent jurisdiction to be invalid, the
3	judgment shall not affect, impair, or invalidate the remainder of this act,
4	but shall be confined in its operation to the provision directly involved in
5	the controversy in which the judgment shall have been rendered, and the
6	applicability of the provision to other persons or circumstances shall not be
7	affected.
8	
9	SECTION 6. The ten (10) bed intermediate care for the mentally
10	retarded facility shall not list the quality program assessment as a separate
11	charge on the billing statement to its patients because the quality program
12	assessment's calculation is based in part on the aggregate annual gross
13	receipts of the ten (10) bed intermediate care for the mentally retarded
14	facility."
15	
16	SECTION 7. EMERGENCY CLAUSE. It is found and determined by the
17	General Assembly of the State of Arkansas that ten (10) bed intermediate care
18	for the mentally retarded facilities are struggling to attain the resources
19	necessary to provide persons in the facilities with the proper services; that
20	<u>a quality program assessment will provide a desperately needed source of</u>
21	revenues for those facilities; that the imposition of the assessment will
22	allow those facilities to provide quality patient care enhancements; and that
23	this act is immediately necessary to ensure the safety of and a healthy
24	environment for patients in those facilities. Therefore, an emergency is
25	declared to exist and this act being immediately necessary for the
26	preservation of the public peace, health and safety shall become effective
27	<u>on:</u>
28	(1) The date of its approval by the Governor;
29	(2) If the bill is neither approved nor vetoed by the Governor, the
30	expiration of the period of time during which the Governor may veto the bill;
31	<u>or</u>
32	(3) If the bill is vetoed by the Governor and the veto is overridden,
33	the date the last house overrides the veto.
34	
35	/s/ Laverty