1	State of Arkansas	A D:11	
2	88th General Assembly	A Bill	
3	Regular Session, 2011		HOUSE BILL 2106
4			
5	By: Representative Wardlaw		
6			
7	For An	Act To Be Entitled	
8	AN ACT TO ESTABLISH A	MEDICAID PROVIDER FEE FOR	
9	PSYCHIATRIC RESIDENTI	AL TREATMENT FACILITIES; A	ND FOR
10	OTHER PURPOSES.		
11			
12			
13		Subtitle	
14	AN ACT TO ESTABI	LISH A MEDICAID PROVIDER	
15	FEE FOR PSYCHIAT	TRIC RESIDENTIAL TREATMENT	
16	FACILITIES.		
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18			
19	BE IT ENACTED BY THE GENERAL ASSE	MBLY OF THE STATE OF ARKAN	SAS:
20			
21	SECTION 1. Arkansas Code T	itle 20, Chapter 48 is ame	nded to add an
22	additional subchapter to read as	follows:	
23	<u>Subchapter 10 — Provi</u>	der Fee on Psychiatric Res	idential Treatment
24	<u>Facilities</u>		
25			
26	20-48-1001. Definitions.		
27	As used in this subchapter,	"Medicaid" means the medi	<u>cal assistance</u>
28	program established by Title XIX	of the Social Security Act	, 42 U.S.C. § 1396
29	et seq., as it existed on January	1, 2011, and administered	by the Division
30	of Medical Services of the Depart	ment of Human Services.	
31			
32	20-48-1002. Provider fee.		
33	(a) There is assessed a pr	ovider fee on psychiatric	<u>residential</u>
34	treatment facilities services to	be calculated in accordance	e with this
35	section.		
36	(b)(1) The Division of Med	ical Services of the Depar	tment of Human

1	Services shall ensure that the rate of assessment of the provider fee		
2	established in this section does not exceed the maximum rate of assessment		
3	established under federal law and rule for healthcare-related provider fees		
4	without reduction in federal financial participation.		
5	(2) If the division determines that the rate of assessment of		
6	the provider fee established in this section exceeds the maximum rate of		
7	assessment that federal law and rule allow without reduction in federal		
8	financial participation, the division shall lower the rate of assessment of		
9	the provider fee to a rate that is equal to the maximum rate that federal law		
10	and rule allow without reduction in federal financial participation.		
11			
12	20-48-1003. Reporting.		
13	(a) The payment of the provider fee by a provider of psychiatric		
14	residential treatment facilities services shall be reported as an allowable		
15	cost for Medicaid reimbursement purposes.		
16	(b) A provider of psychiatric residential treatment facilities		
17	services shall not be guaranteed, expressly, or otherwise that any additional		
18	moneys paid to the provider for psychiatric residential treatment facilities		
19	services will equal or exceed the amount of its provider fee.		
20			
21	20-48-1004. Administration.		
22	(a) The administration of this subchapter shall be exercised by the		
23	<u>Director of the Division of Medical Services of the Department of Human</u>		
24	Services and shall be subject to the Arkansas Administrative Procedure Act, §		
25	<u>25-15-201 et seq.</u>		
26	(b)(1) Under the Arkansas Administrative Procedure Act, § 25-15-201 et		
27	seq., the Division of Medical Services of the Department of Human Services		
28	shall adopt rules and prescribe forms for:		
29	(A) The proper imposition and collection of the provider		
30	<u>fee</u> ;		
31	(B) The enforcement of this subchapter;		
32	(C) The format for reporting gross receipts; and		
33	(D) The administration of this subchapter.		
34	(2) The rules shall not grant any exceptions to or from the		
35	provider fee.		

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1	SECTION 2. Arkansas Code Title 19, Chapter 6, Subchapter 8 is amended		
2	to add an additional section to read as follows:		
3	19-6-819. Psychiatric Residential Treatment Facilities Provider Fee		
4	Fund.		
5	(a)(1) There is created on the books of the Treasurer of State, the		
6	Auditor of State, and the Chief Fiscal Officer of the State a special revenue		
7	fund to be known as the "Psychiatric Residential Treatment Facilities		
8	Provider Fee Fund".		
9	(2)(A) The Psychiatric Residential Treatment Facilities Provider		
10	Fee Fund shall consist of revenues obtained under § 20-48-1001 et seq. and		
11	any other revenue as may be provided by law.		
12	(B) Moneys from the Psychiatric Residential Treatment		
13	Facilities Fee Fund shall not supplant other local, state, or federal funds.		
14	(3) All provider fees assessed and collected under this		
15	subchapter shall be deposited into the State Treasury as special revenue and		
16	credited to the Psychiatric Residential Treatment Facilities Provider Fee		
17	Fund, there to be used for the support of services to persons in need of		
18	inpatient psychiatric residential treatment.		
19	(4)(A) Funds in the Psychiatric Residential Treatment Facilities		
20	Provider Fee Fund shall be placed in an interest bearing account.		
21	(B) Earnings on funds in the Psychiatric Residential		
22	Treatment Facilities Provider Fee Fund shall remain a part of the Psychiatric		
23	Residential Treatment Facilities Provider Fee Fund and shall not be deposited		
24	into the General Revenue Fund Account of the State Apportionment Fund.		
25	(b) The special revenues in the Psychiatric Residential Treatment		
26	Facilities Provider Fee Fund unused at the end of a fiscal year shall be		
27	carried forward.		
28	(c) The Psychiatric Residential Treatment Facilities Provider Fee Fund		
29	shall be exempt from budgetary cuts, reductions, or eliminations caused by a		
30	deficiency of general revenues.		
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