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By: Delegate Hurson

Introduced and read first time: February 7, 2003 Assigned to: Health and Government Operations

A BILL ENTITLED

1 AN ACT concerning

2

Medical Assistance Reimbursement Rate Commission

3 FOR the purpose of establishing a Medical Assistance Reimbursement Rate

- 4 Commission in the Department of Health and Mental Hygiene; establishing the
- 5 membership, terms of the members, selection of the chairman and vice
- 6 chairman, meeting requirements, reimbursement for expenses, and staffing of
- 7 the Commission; specifying the terms of the initial members of the Commission;
- 8 specifying the duties, responsibilities, and functions of the Commission;
- 9 providing for timely access to certain information; specifying that certain powers
- 10 of the Secretary do not apply to the Commission; requiring the Governor to
- 11 include certain funds in the State budget beginning with a certain fiscal year;
- 12 requiring the Commission to issue a certain report by a certain date; defining a
- 13 certain term; altering certain provisions of law relating to Medical Assistance
- 14 reimbursement; providing for the effective dates of this Act; and generally
- 15 relating to the establishment of a Medical Assistance Reimbursement Rate
- 16 Commission.

17 BY repealing and reenacting, with amendments,

- 18 Article Health General
- 19 Section 15-102.1(b)(8), 15-103(b)(2)(ii), (b)(18), and (e), 15-103.1, 15-103.3(d),
- 20 15-105(a) and (c)(1), 15-109(e)(4), 15-111(b)(2), 15-112, 15-113(b),
- 21 15-114(e)(5), 15-114.1, 15-116, 15-117(d), and 15-118(b) and (d)
- 22 Annotated Code of Maryland
- 23 (2000 Replacement Volume and 2002 Supplement)

24 BY repealing and reenacting, without amendments,

- 25 Article Health General
- 26 Section 15-103(b)(1), 15-103.3(a), 15-109(e)(1), 15-111(a), 15-114(c), and
- 27 15-117(b)(1)
- 28 Annotated Code of Maryland
- 29 (2000 Replacement Volume and 2002 Supplement)
- 30 BY adding to
- 31 Article Health General

- 2 7. Medical Assistance Reimbursement Rate Commission"
- 3 Annotated Code of Maryland

4 (2000 Replacement Volume and 2002 Supplement)

5 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF 6 MARYLAND, That the Laws of Maryland read as follows:

Article - Health - General

8 15-102.1.

9 (b) The Department shall, to the extent permitted, subject to the limitations of 10 the State budget:

11 (8) [Seek to provide] ASSIST THE MEDICAL ASSISTANCE

12 REIMBURSEMENT RATE COMMISSION IN PROVIDING appropriate levels of

13 reimbursement for providers to encourage greater participation by providers in the

14 Program;

15 15-103.

16 (b) (1) As permitted by federal law or waiver, the Secretary may establish a
17 program under which Program recipients are required to enroll in managed care
18 organizations.

19 (2) (ii) Subject to the limitations of the State budget AND THE RATES

20 ESTABLISHED BY THE MEDICAL ASSISTANCE REIMBURSEMENT RATE COMMISSION

21 UNDER § 15-705 OF THIS TITLE, and as permitted by federal law or waiver, the

22 Department shall provide reimbursement for medically necessary and appropriate

23 inpatient, intermediate care, and halfway house substance abuse treatment services

24 for substance abusing enrollees 21 years of age or older who are recipients of

25 temporary cash assistance under the Family Investment Program.

26 (18) [(i)] The Department shall make capitation payments to each

27 managed care organization [as provided in this paragraph] IN ACCORDANCE WITH28 RATES ESTABLISHED BY THE MEDICAL ASSISTANCE REIMBURSEMENT RATE

29 COMMISSION UNDER § 15-705 OF THIS TITLE.

30[(ii)In consultation with the Insurance Commissioner, the Secretary31 shall:

32 1. Set capitation payments at a level that is actuarially
33 adjusted to the benefits provided; and

34 2. Actuarially adjust the capitation payments to reflect the35 relative risk assumed by the managed care organization.]

36 (e) By regulation, the [Department] MEDICAL ASSISTANCE REIMBURSEMENT
 37 RATE COMMISSION ESTABLISHED UNDER SUBTITLE 7 OF THIS TITLE shall adopt a

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1 methodology to ensure that federally qualified health centers are paid reasonable cost

2 based reimbursement that is consistent with federal law.

3 15-103.1.

4 The Program, IN COLLABORATION WITH THE MEDICAL ASSISTANCE

5 REIMBURSEMENT RATE COMMISSION ESTABLISHED UNDER SUBTITLE 7 OF THIS

6 TITLE, shall use its leverage as a high volume purchaser to promote the cost

7 effectiveness of Maryland's health care system.

8 15-103.3.

9 (a) There is a HealthChoice Performance Incentive Fund established in the 10 Department.

11 (d) (1) The Secretary's designee shall administer the Fund.

12 (2) The Secretary, IN COLLABORATION WITH THE MEDICAL ASSISTANCE

13 REIMBURSEMENT RATE COMMISSION ESTABLISHED UNDER SUBTITLE 7 OF THIS

14 TITLE, shall adopt regulations to carry out the provisions of this section, including the

15 distribution of moneys from the Fund to managed care organizations.

16 15-105.

17 (a) The Department, IN COLLABORATION WITH THE MEDICAL ASSISTANCE

18 REIMBURSEMENT RATE COMMISSION ESTABLISHED UNDER SUBTITLE 7 OF THIS

19 TITLE, shall adopt rules and regulations for the reimbursement of providers under the

20 Program. However, except for an invoice that must be submitted to a Medicare

21 intermediary or Medicare carrier for an individual who may have both Medicare and

22 Medicaid coverage, payment may not be made for an invoice that is received more

23 than 1 year after the dates of the services given.

24 (c) (1) The Department, IN COLLABORATION WITH THE MEDICAL

25 ASSISTANCE REIMBURSEMENT RATE COMMISSION ESTABLISHED UNDER SUBTITLE 7

26 OF THIS TITLE, shall adopt regulations for the reimbursement of specialty outpatient

27 treatment and diagnostic services rendered to Program recipients at a freestanding

28 clinic owned and operated by a hospital that is under a capitation agreement

29 approved by the Health Services Cost Review Commission.

30 15-109.

31 (e) (1) Each resident of a nursing home who is a recipient of medical

32 assistance shall receive a personal needs allowance.

33 (4) The Secretary, IN COLLABORATION WITH THE MEDICAL ASSISTANCE

34 REIMBURSEMENT RATE COMMISSION ESTABLISHED UNDER SUBTITLE 7 OF THIS

35 TITLE, shall adopt regulations to implement this subsection.

1 15-111. 2 (a) The Department may authorize reimbursement of a licensed day care 3 center for the elderly or medically handicapped adults for medical care that the center 4 provides to a Program recipient who is certified as requiring nursing home care. 5 The reimbursement rate for medical day care: (b) (2)May not exceed a maximum per diem rate established by 6 (i) 7 regulation of the [Department] MEDICAL ASSISTANCE REIMBURSEMENT RATE 8 COMMISSION; and 9 (ii) Shall cover the following: 10 1. Administrative overhead; 11 2. Drugs, supplies, and equipment; 12 3. Food; 13 Medical services; 4. 5. Staff; and 14 15 6. Transportation. 16 15-112. 17 After consultation with the State Board of Pharmacy, AND IN ACCORDANCE 18 WITH REIMBURSEMENT RATES ESTABLISHED BY THE MEDICAL ASSISTANCE 19 REIMBURSEMENT RATE COMMISSION UNDER § 15-705 OF THIS TITLE, the Secretary 20 may authorize reimbursement of a physician for the dispensing of drugs to Program 21 recipients, on the same basis as a licensed pharmacist if: 22 The physician dispenses drugs on a regular basis in the physician's (1)23 office; and There is no pharmacy within 10 miles of that office. 24 (2)25 15-113. If an inmate of a public institution is eligible for federally funded 26 (b) (1)27 Medicaid benefits, the Department shall pay the custodial authority for any medical 28 care that is provided to the inmate during the month when the individual became an 29 inmate. 30 Payments under this subsection shall be made in accordance with (2)

- 31 applicable rules and regulations, INCLUDING RULES AND REGULATIONS
- 32 ESTABLISHED BY THE MEDICAL ASSISTANCE REIMBURSEMENT RATE COMMISSION
- 33 UNDER § 15-706 OF THIS TITLE, for the Program.

1 15-114.

2 (c) In accordance with subsection (e) of this section, the Department shall 3 reimburse each hospital-based related institution that:

4 (1) Is a distinct part of an acute or chronic hospital; and

5 (2) On and after July 1, 1980, is licensed as a related institution.

6 (e) (5) Beginning July 1, 1989, the Department shall reimburse at rates
7 determined under the [Program] regulations ADOPTED BY THE MEDICAL
8 ASSISTANCE REIMBURSEMENT RATE COMMISSION UNDER § 15-706 OF THIS TITLE
9 AND applicable to skilled and intermediate care nursing facilities.

10 15-114.1.

(a) In this section, "emergency service transporter" means a public entity or
volunteer fire, rescue, or emergency medical service that provides emergency medical
services.

14 (b) If an emergency service transporter charges for its services and requests
15 reimbursement from the Program, the Department shall reimburse the emergency
16 service transporter, in an amount not to exceed \$100 per transport, for the cost of:

17 (1) Transportation the emergency service transporter provides to a
18 Program recipient to a facility in response to a 911 call; and

19(2)Medical services the emergency service transporter provides to the20Program recipient while transporting the Program recipient to a facility in response21to a 911 call.

(c) The [Department] MEDICAL ASSISTANCE REIMBURSEMENT RATE
 COMMISSION ESTABLISHED UNDER SUBTITLE 7 OF THIS TITLE shall adopt any
 regulations necessary to carry out this section.

25 15-116.

The Department, IN ACCORDANCE WITH RATES ESTABLISHED BY THE MEDICAL
ASSISTANCE REIMBURSEMENT RATE COMMISSION UNDER § 15-705 OF THIS TITLE,
shall reimburse skilled nursing facilities for services provided to indigent or medically
indigent patients under the age of 21 years.

30 15-117.

31 (b) (1) To ensure that a bed is reserved for a Program recipient who is
32 absent temporarily from a nursing facility, the Program shall include the following
33 payments for nursing facilities that have made a provider agreement with the
34 Department.

(d) Payments required under this section shall be made according to the per
 diem payment procedures that the [Department] MEDICAL ASSISTANCE

1 REIMBURSEMENT RATE COMMISSION sets UNDER SUBTITLE 7 OF THIS TITLE and

2 may not be less than the per diem payments made to the nursing facility for days

3 when the Program recipient is present in the facility.

4 15-118.

5 (b) (1) Except as provided under paragraph (2) of this subsection, the 6 [Program] MEDICAL ASSISTANCE REIMBURSEMENT RATE COMMISSION 7 ESTABLISHED UNDER SUBTITLE 7 OF THIS TITLE shall establish maximum 8 reimbursement levels for the drug products for which there is a generic equivalent 9 authorized under § 12-504 of the Health Occupations Article, based on the cost of the 10 generic product.

11 (2) If a prescriber directs a specific brand name drug, the reimbursement 12 level shall be based on the cost of the brand name product.

(d) The Secretary AND THE MEDICAL ASSISTANCE REIMBURSEMENT RATE
 (d) COMMISSION, IN ACCORDANCE WITH § 15-706 OF THIS TITLE, shall adopt regulations
 (d) to carry out the provisions of this section.

16 SECTION 2. BE IT FURTHER ENACTED, That the Laws of Maryland read as 17 follows:

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Article - Health - General

19 SUBTITLE 7. MEDICAL ASSISTANCE REIMBURSEMENT RATE COMMISSION.

20 15-701.

21 (A) IN THIS SUBTITLE THE FOLLOWING WORDS HAVE THE MEANINGS 22 INDICATED.

23 (B) "COMMISSION" MEANS THE MEDICAL ASSISTANCE REIMBURSEMENT RATE 24 COMMISSION.

25 15-702.

26 (A) THERE IS A MEDICAL ASSISTANCE REIMBURSEMENT RATE COMMISSION.

27 (B) THE COMMISSION IS AN INDEPENDENT UNIT THAT FUNCTIONS WITHIN 28 THE DEPARTMENT.

29 15-703.

30(A)(1)THE COMMISSION SHALL CONSIST OF 11 MEMBERS APPOINTED BY31THE GOVERNOR WITH THE ADVICE AND CONSENT OF THE SENATE.

32 (2) NO MORE THAN 5 MEMBERS MAY HAVE A CONNECTION WITH THE
 33 MANAGEMENT OF AN ENTITY THAT RECEIVES PAYMENT FROM THE MEDICAL
 34 ASSISTANCE PROGRAM.

1 (B) (1) THE TERM OF A MEMBER IS 5 YEARS.

2 (2) THE TERMS OF MEMBERS ARE STAGGERED AS REQUIRED BY THE 3 TERMS PROVIDED FOR MEMBERS OF THE BOARD ON OCTOBER 1, 2003.

4 (3) AT THE END OF A TERM, A MEMBER CONTINUES TO SERVE UNTIL A 5 SUCCESSOR IS APPOINTED.

6 (4) IF A VACANCY OCCURS DURING THE TERM OF A MEMBER, THE 7 GOVERNOR SHALL APPOINT A SUCCESSOR WHO SHALL SERVE UNTIL THE TERM 8 EXPIRES.

9 (5) A MEMBER WHO SERVES TWO CONSECUTIVE FULL 5-YEAR TERMS 10 MAY NOT BE REAPPOINTED FOR 5 YEARS AFTER COMPLETION OF THOSE TERMS.

11 (C) EACH YEAR, FROM AMONG THE MEMBERS OF THE COMMISSION:

12 (1) THE GOVERNOR SHALL APPOINT A CHAIRMAN; AND

13 (2) THE CHAIRMAN SHALL APPOINT A VICE CHAIRMAN.

14 15-704.

15 (A) A QUORUM OF THE COMMISSION IS 6 MEMBERS.

16 (B) THE COMMISSION SHALL MEET AT LEAST 6 TIMES A YEAR AT THE TIMES 17 AND PLACES THAT IT DETERMINES.

18 (C) A MEMBER OF THE COMMISSION:

19(1)MAY NOT RECEIVE COMPENSATION FOR DUTIES PERFORMED AS A20MEMBER OF THE COMMISSION; BUT

21 (2) IS ENTITLED TO REIMBURSEMENT FOR EXPENSES UNDER THE 22 STANDARD STATE TRAVEL REGULATIONS, AS PROVIDED IN THE STATE BUDGET.

(D) THE COMMISSION MAY EMPLOY STAFF AND EXPEND FUNDS TO CARRY
OUT ITS DUTIES AND RESPONSIBILITIES UNDER THIS SUBTITLE IN ACCORDANCE
WITH THE STATE BUDGET.

26 15-705.

27 (A) BY JANUARY 1, 2005, THE COMMISSION SHALL ESTABLISH RATES FOR
28 REIMBURSEMENT OF MANAGED CARE ORGANIZATIONS AND HEALTH CARE SERVICES
29 PROVIDED UNDER THE MEDICAL ASSISTANCE PROGRAM AND MARYLAND
30 CHILDREN'S HEALTH PROGRAM.

31 (B) IN DEVELOPING THE REIMBURSEMENT RATES UNDER THIS SUBTITLE, 32 THE COMMISSION SHALL:

4 (2) ENSURE THAT THE COMPENSATION FOR HEALTH CARE SERVICES IS
5 REASONABLY RELATED TO THE COST OF PROVIDING THE HEALTH CARE SERVICE,
6 INCLUDING THE COST OF:

7 (I) PROFESSIONAL LIABILITY INSURANCE; AND

8 (II) COMPLYING WITH ALL FEDERAL, STATE, AND LOCAL 9 REGULATORY REQUIREMENTS;

10 (3) ENSURE THE PARTICIPATION OF A SUFFICIENT NUMBER OF 11 PROVIDERS;

12 (4) REFLECT RATES PAID BY OTHER PAYORS FOR SIMILAR SERVICES; 13 AND

14 (5) PROVIDE FOR AN ANNUAL INFLATIONARY ADJUSTMENT.

15(C)IN DEVELOPING THE REIMBURSEMENT RATES FOR MANAGED CARE16ORGANIZATIONS UNDER THIS SUBTITLE, THE COMMISSION SHALL:

17 (1) SET CAPITATION PAYMENTS AT A LEVEL THAT IS ACTUARIALLY18 ADJUSTED TO THE BENEFITS PROVIDED; AND

19(2)ACTUARIALLY ADJUST THE CAPITATION PAYMENTS TO REFLECT20THE RELATIVE RISK ASSUMED BY THE MANAGED CARE ORGANIZATION.

(D) REIMBURSEMENT RATES ESTABLISHED BY THE COMMISSION UNDER THIS
22 SECTION SHALL BE SUBJECT TO THE LIMITATIONS ESTABLISHED IN §§ 15-103, 15-110,
23 15-111, 15-112, 15-113, 15-114, 15-114.1, 15-116, 15-117, AND 15-118 OF THIS TITLE.

24 15-706.

THE GOVERNOR SHALL INCLUDE IN THE STATE BUDGET, BEGINNING WITH
FISCAL YEAR 2006, AT A MINIMUM, SUFFICIENT FUNDS FOR THE REIMBURSEMENT
RATES ESTABLISHED BY THE COMMISSION UNDER THIS SUBTITLE.

28 15-707.

29 (A) IN ADDITION TO THE POWERS AND DUTIES PROVIDED ELSEWHERE IN 30 THIS SUBTITLE, THE COMMISSION:

31 (1) SHALL ADOPT REGULATIONS TO CARRY OUT THE PROVISIONS OF 32 THIS SUBTITLE;

33 (2) MAY CREATE COMMITTEES FROM AMONG ITS MEMBERS; AND

1 (3) SUBJECT TO THE LIMITATIONS OF THIS SUBTITLE, MAY EXERCISE 2 ANY OTHER POWER THAT IS REASONABLY NECESSARY TO CARRY OUT THE 3 PURPOSES OF THIS SUBTITLE.

4 (B) THE COMMISSION SHALL HAVE TIMELY ACCESS TO INFORMATION FROM 5 THE EXECUTIVE BRANCH REQUIRED TO FULFILL THE RESPONSIBILITIES OF THE 6 COMMISSION UNDER THIS SUBTITLE.

7 15-708.

8 (A) THE POWER OF THE SECRETARY OVER PLANS, PROPOSALS, AND PROJECTS
9 OF UNITS IN THE DEPARTMENT DOES NOT INCLUDE THE POWER TO DISAPPROVE OR
10 MODIFY A DECISION OR DETERMINATION THAT THE COMMISSION MAKES UNDER
11 AUTHORITY SPECIFICALLY DESIGNATED TO THE COMMISSION BY LAW.

12 (B) THE POWER OF THE SECRETARY TO TRANSFER BY RULE, REGULATION, OR
13 WRITTEN DIRECTIVE ANY STAFF, FUNCTION, OR FUNDS OF UNITS IN THE
14 DEPARTMENT DOES NOT APPLY TO ANY STAFF, FUNCTION, OR FUNDS OF THE
15 COMMISSION.

16 15-709.

ON OR BEFORE OCTOBER 1, 2004, AND ON OR BEFORE OCTOBER 1 OF EACH YEAR
THEREAFTER, THE COMMISSION SHALL ISSUE A REPORT TO THE GOVERNOR, THE
SECRETARY, AND SUBJECT TO § 2-1246 OF THE STATE GOVERNMENT ARTICLE, THE
GENERAL ASSEMBLY THAT DISCUSSES ITS ACCOMPLISHMENTS.

21 SECTION 3. AND BE IT FURTHER ENACTED, That the terms of the initial 22 members of the Medical Assistance Reimbursement Rate Commission shall expire as 23 follows:

24 (1) two members in 2005;

- 25 (2) three members in 2006;
- 26 (3) three members in 2007; and
- 27 (4) three members in 2008.

28 SECTION 4. AND BE IT FURTHER ENACTED, That Section 1 of this Act shall 29 take effect on January 1, 2005.

30 SECTION 5. AND BE IT FURTHER ENACTED, That, subject to the provisions 31 of Section 4 of this Act, this Act shall take effect October 1, 2003.