Overview of 2013 Legislative Session

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Perhaps Some Legislators Understanding of Health Care

“Well, yes, we could fix it in Photoshop, but your arm would still be broken.”
Permit of Approval (CON) Issues

• SB 141 Irvin – Revises procedures for determining service area boundaries for Hospice. (Never brought to committee)

• HB 2192 Hobbs – Repeals the requirement for CON/POA for health care facilities, except nursing homes and assisted living facilities. (Never brought to committee)

• ISP 34/35/36/37 – Hobbs – Study Repealing POA for all, plus moving ARHSPA to Dept. of Health
HB 1384 – Miller - Drug Testing/Background Checks

• All Medicaid Caregivers
• New Hire Drug Screen Test after 9/1/13
• Random Sampling after 9/1/13 to ensure testing once every 5 years
• State criminal background check or federal if new to state last 5 years
• Department of Human Services to adopt rules
SB 755 – Bledsoe - Caregiver Training

• Paid caregiver must complete 40 hours of training in specified skills
• Exemptions: CNA, LPN, Family member, Physician, RN, Licensed social worker, Court appointed guardian, direct-care worker providing services to a participant in any program licensed, etc by DHS that is already subject to training
• Department of Health to adopt rules
SB 914 – Irvin - Medicaid Fairness Act

• First enacted in 2005, these changes incorporate the Health Payment Improvement Initiative
• Clarifies what is a “technical deficiency” that cannot trigger a recoupment
• Moves the appeal process for Medicaid providers appeal hearings out of DHS to Dept. of Health where 2 independent administrative judges will preside
HB 1853 – Wardlaw - RAC Audits

• Currently Medicaid Recovery Audit Contractors are paid on a contingency fee basis
• This act requires DHS to seek a waiver from CMS to pay the AR Medicaid RAC’s on a flat fee basis
SB 1039 – Irvin – Health Care Quality Payment and Advisory Committee

- Sets up advisory committees that DHS is required to consult with before implementing any new payment reform measures that affect providers
HB 1482 – Ferguson – Medicaid Primary Care Case Management Program

• DHS shall contract with an experienced vendor to implement a 2 year pilot program in 39 counties (delta and north AR) to begin 1/1/14

• Exemptions – Patient Centered Medical Home Program, Comprehensive Primary Care Initiative, or a similar home health program

• Also excluded-Alternatives for person with Disabilities, DDS Alternative Community, Elder Choices, Living Choices assisted living , PACE
SB 914 – Sanders – AR Tax Law and Medicaid Providers

• By 12/1 each year DHS Shall submit to DFA a list of tax ID numbers of each person or entity enrolled to furnish Medicaid Services

• DHS shall notify the affected provider that DHS will terminate enrollment with Medicaid unless provider can show good cause.
SB 914 – Sanders – Medicaid Inspector General

• Forms independent Office of Medicaid Inspector General in the Governor’s office

• Sets up a series of penalties if it is proven that a medical provider knowingly submitted false information to obtain payment from any public or private health plan.

• Any provider who receives $750,000 or more annually from Medicaid is required to have a formal compliance plan

• All the existing Medicaid Program Integrity positions will be moved to that office
SB 1020 & HB 1143 – The Health Care Independence Act of 2013

• Provides for Private Health Care Options (Private Option)
• Eligible individuals include adults between 19 and 65 with an income less than 138% of the federal poverty level
  • Federal Poverty Guidelines 2013
  • Household 138%
  • 1 $15,856
  • 2 21,404
  • 3 26,951
  • 4 32,499
  • 5 38,047
  • 6 43,594
New Records Set

- Total Bills Filed – 2,530
- Total Acts Signed by Governor – 1,520

- Questions?????