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Medicaid Provider Reimbursement Amendments

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2025 GENERAL SESSION STATE OF UTAH

Chief Sponsor: Derrin R. Owens

House Sponsor: 2 3 **LONG TITLE** 4 **General Description:** 5 This bill provides for an annual increase in Medicaid rates for certain providers. 6 **Highlighted Provisions:** 7 This bill: 8 defines terms: and 9 requires the annual base budget to include a Medicaid rate increase for certain providers. 10 Money Appropriated in this Bill: 11 None 12 **Other Special Clauses:** 13 None **Utah Code Sections Affected:** 14 15 AMENDS: 16 **26B-3-203**, as last amended by Laws of Utah 2024, Chapters 264, 284 17 18 *Be it enacted by the Legislature of the state of Utah:* Section 1. Section **26B-3-203** is amended to read: 19 20 26B-3-203. Base budget appropriations for Medicaid accountable care 21 organizations and behavioral health plans -- Forecast of behavioral health services cost, 22 behavioral health plans, and ABA services -- Forecast of behavioral health services cost. 23 (1) As used in this section: 24 (a) "ABA service" means a service applying applied behavior analysis, as that term is 25 defined in Section 31A-22-642. 26 (b) "ABA service reimbursement rate" means the Medicaid reimbursement rate 27 developed by the division, in accordance with Part 1, Health Care Assistance, and 28 paid to a provider for providing an ABA service. 29

(c) "ACO" means a Medicaid accountable care organization that contracts with the

state's Medicaid program for:

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31	(i) physical health services; or
32	(ii) integrated physical and behavioral health services.
33	(d) "Air ambulance provider" means an entity licensed under Section 53-2d-512.
34	[(d)] (e) "Base budget" means the same as that term is defined in legislative rule.
35	[(e)] (f) "Behavioral health plan" means a managed care or fee-for-service delivery
36	system that contracts with or is operated by the department to provide behavioral
37	health services to Medicaid eligible individuals, including a medication assisted
38	treatment plan.
39 40	[(f)] (g) "Behavioral health services" means mental health or substance use treatment or services.
41	(h) "DSPD services" means home and community based Medicaid waiver services
42	operated by the Division of Services for People with Disabilities created in Section
43	26B-6-402.
44	[(g)] (i) "General Fund growth factor" means the amount determined by dividing the nex
45	fiscal year ongoing General Fund revenue estimate by current fiscal year ongoing
46	appropriations from the General Fund.
47	(j) "Intermediate care facilities for people with an intellectual disability" or "ICF" means
48	a facility licensed under Section 26B-2-212.
49	[(h)] (k) "Next fiscal year ongoing General Fund revenue estimate" means the next fiscal
50	year ongoing General Fund revenue estimate identified by the Executive
51	Appropriations Committee, in accordance with legislative rule, for use by the Office
52	of the Legislative Fiscal Analyst in preparing budget recommendations.
53	(l) "Medication assisted treatment plan" means the same as that term is defined in
54	Section 64-13-25.1.
55 5.5	[(i)] (m) "Member" means an enrollee.
56	(n) "Nursing facility" means the same as that term is defined in Section 26B-2-201.
57	[(j)] (o) "PMPM" means per-member-per-month funding.
58	(p) "Professional rates" means rates for Current Procedural Terminology codes except
59	for the following codes:
60	(i) laboratory;
61	(ii) radiology;
62	(iii) ABA services;
63	(iv) COVID-19 counseling; and
64	(v) behavioral health.

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(2) If the General Fund growth factor is less than 100%, the next fiscal year base budget shall, subject to Subsection [(5)] (7), include an appropriation to the department in an amount necessary to ensure that the next fiscal year PMPM for ACOs and behavioral health plans equals the current fiscal year PMPM for the ACOs and behavioral health plans multiplied by 100%.

- (3) If the General Fund growth factor is greater than or equal to 100%, but less than 102%, the next fiscal year base budget shall, subject to Subsection [(5)] (7), include an appropriation to the department in an amount necessary to ensure that the next fiscal year PMPM for ACOs and behavioral health plans equals the current fiscal year PMPM for the ACOs and behavioral health plans multiplied by the General Fund growth factor.
- (4) If the General Fund growth factor is greater than or equal to 102%, the next fiscal year base budget shall, subject to Subsection [(5)] (7):
 - (a) in fiscal years 2025 and 2026:

- (i) include an appropriation to the department in an amount that would, prior to the application of Subsection (4)(a)(ii), allow the department to ensure that the next fiscal year PMPMs for ACOs and behavioral health plans is greater than or equal to the current fiscal year PMPMs for the ACOs and behavioral health plans multiplied by 102%;
- (ii) subject to Subsection (4)(a)(iii), allocate the amount appropriated under Subsection (4)(a)(i) to provide substantially the same year-over-year percentage point increase to:
 - (A) the PMPMs for ACOs and behavioral health plans; and
 - (B) each ABA service reimbursement rate; and
- (iii) for the initial appropriation under Subsection (4)(a)(i), prior to providing the percentage point increases under Subsection (4)(a)(ii), allocate from the total amount appropriated under Subsection (4)(a)(i) an amount necessary to increase and substantially equalize each of the ABA service reimbursement rates with a corresponding reimbursement rate paid for providing the same or substantially similar service under an ACO or a behavioral health plan; and
- (b) beginning in fiscal year 2027, include an appropriation to the department in an amount necessary to ensure that the next fiscal year PMPMs for ACOs and behavioral health plans is greater than or equal to the current fiscal year PMPMs for the ACOs and the behavioral health plans multiplied by 102%, and less than or equal to the current fiscal year PMPMs for the ACOs and the behavioral health plans

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99	multiplied by the General Fund growth factor.
100	(5)(a) Subject to Subsection (5)(c), beginning in fiscal year 2026, each fiscal year base
101	budget shall:
102	(i) include an appropriation to the department that:
103	(A) is proportional to the amount provided under Subsections (2) through (4)
104	contained in the base budget; and
105	(B) is used to ensure that the fiscal year fee-for-service rates increase for air
106	ambulance provider rates, DSPD rates, ICF rates, and nursing facility rates; and
107	(ii) include an additional appropriation for an ACO to match the fee-for-service rate
108	increase for services described in Subsection (5)(a)(i)(B) paid for by an ACO.
109	(b) In accordance with Subsection (5)(a)(ii), an ACO shall match the fee-for-service rate
110	increase for applicable services paid by the ACO.
111	(c) For nursing facility and ICF rates, any annual appropriation may not cause the rates
112	to exceed the upper payment limit established by CMS.
113	(6) Beginning in fiscal year 2028, each fiscal year base budget shall include an
114	appropriation to the department that:
115	(a) is proportional to the amount provided under Subsections (2) through (4) that is
116	contained in the base budget; and
117	(b) is used to ensure that the fiscal year fee-for-service rates increase for ABA services.
118	[(5)] (7) The appropriations provided to the department for behavioral health plans under
119	this section shall be reduced by the amount contributed by counties in the current fiscal
120	year for behavioral health plans in accordance with Subsections 17-43-201(5)(k) and
121	17-43-301(6)(a)(x).
122	[(6)] (8) In order for the department to estimate the impact of Subsections (2) through $[(4)]$
123	(6) before identification of the next fiscal year ongoing General Fund revenue estimate,
124	the Governor's Office of Planning and Budget shall, in cooperation with the Office of
125	the Legislative Fiscal Analyst, develop an estimate of ongoing General Fund revenue for
126	the next fiscal year and provide the estimate to the department no later than November 1
127	of each year.
128	[(7)] <u>(9)</u> The Office of the Legislative Fiscal Analyst shall include an estimate of the cost of
129	behavioral health services in any state Medicaid funding or savings forecast that is
130	completed in coordination with the department and the Governor's Office of Planning
131	and Budget.
132	Section 2 Effective Date

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133 This bill takes effect on May 7, 2025.