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PORTABILITY OF MEDICAL ASSISTANCE

FUNDS

2007 GENERAL SESSION



described in this bill;

provides that the Department of Health may contract with the Department of Human

services necessary to care for an aged person outside of a nursing home;

Services or other agencies to make the determinations or provide the services

	• provides for the portability of funds, that would have been used to place of maintain							
	a person in a nursing home, to fund the home or community-based services for that person if the waiver funds designated for that purpose are inadequate.							
	Monies Appropriated in this Bill:							
	None							
	Other Special Clauses: None Utah Code Sections Affected:							
ENACTS:								
	26-18-601 , Utah Code Annotated 1953							
	26-18-602 , Utah Code Annotated 1953							
	26-18-603 , Utah Code Annotated 1953							
	26-18-604 , Utah Code Annotated 1953							
	Be it enacted by the Legislature of the state of Utah:							
	Section 1. Section 26-18-601 is enacted to read:							
	Part 6. Portability of Medical Assistance Funds							
	26-18-601. Title.							
	This part is known as "Portability of Medical Assistance Funds."							
	Section 2. Section 26-18-602 is enacted to read:							
	26-18-602. Definitions.							
	As used in this part:							
	(1) "Aged" means a person 65 years of age or older.							
	(2) "Medical assistance" means financial assistance or other services paid for under the							
	state plan for Medicaid under Title XIX of the Social Security Act.							
	Section 3. Section 26-18-603 is enacted to read:							
	26-18-603. Requirement to provide home or community-based services							
	Authority to contract.							
	(1) $\hat{S} \rightarrow [\frac{The}{The}]$ Within funds appropriated by the Legislature for this purpose, and							
	subject to approval by the federal government, the \(\mathcal{L}\hat{S}\) department shall provide home or							
	community-based services to an aged person							
	<u>if:</u>							
	(a) the aged person:							

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57	(i) is a resident of this state;					
58	(ii) qualifies for medical assistance to fund the aged person's placement or maintenance					
59	in a nursing home;					
60	(iii) applies for home or community-based services in order to avoid being placed in, or					
61	remaining in, a nursing home; and					
62	(iv) may be safely and adequately cared for outside of a nursing home; and					
63	(b) the cost to the state of providing the home or community-based services described					
64	in this Subsection (1) is less than, or equal to, $\hat{S} \rightarrow \underline{50}$ percent of $\leftarrow \hat{S}$ the cost to the state of					
64a	providing care to the					
65	person in a nursing home.					
66	(2) If a person qualifies under Subsection (1) for, and chooses to receive, home or					
67	community-based services, the department shall, on an ongoing basis:					
68	(a) determine the extent of the resources already available to the person;					
69	(b) determine the home and community-based services needed to safely and adequately					
70	care for the person outside of a nursing home; and					
71	(c) arrange for or provide the services described in Subsection (2)(b).					
72	(3) The department may contract with the Department of Human Services or other					
73	qualified agencies to make the determinations, or provide the services, described in this					
74	section.					
75	Section 4. Section 26-18-604 is enacted to read:					
76	26-18-604. Funding for home or community-based services.					
77	(1) Except as provided in Subsection (2), the costs of the home or community-based					
78	services described in Section 26-18-603 shall be paid for with the applicable Medicaid					
79	waiver funds designated for that purpose.					
80	(2) If the funds described in Subsection (1) are not adequate to pay the costs of the					
81	home and community-based services described in Section 26-18-603:					
82	(a) the costs shall be paid from the funds that would have been used to pay the costs of					
83	maintaining the person in a nursing home; and					
84	(b) if the services are provided by, or through a contract with, the Department of					
85	Human Services or another agency, the department shall execute a revenue transfer to the					
86	Department of Human Services or the other agency in order to comply with Subsection (2)(a).					
87	(3) A revenue transfer described in Subsection (2)(b) is exempt from the requirements					

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88 of Title 63, Chapter 38, Budgetary Procedures Act.

Fiscal Note

S.B. 61 1st Sub. (Green) - Portability of Medical Assistance Funds - As Amended

2007 General Session State of Utah

State Impact

Enactment of this bill will require an ongoing appropriation of \$2,000,000 from the General Fund beginning in FY 2008. This will be matched with \$2,581,100 Federal Funds. The Department of Human Services will receive \$1,305,600 (\$1,058,600 General Fund) of this appropriation, while the Department of Health will be allocated \$3,275,500 (\$941,400 General Fund) to implement the provisions of the bill.

Based on current federal and state statute and policy, the long-term fiscal impact of this legislation could be savings and cost avoidance for Utah's Medicaid Program and long-term care services.

	FY 2007	FY 2008 <u>Approp.</u>	FY 2009 <u>Approp.</u>	FY 2007 Revenue	FY 2008 <u>Revenue</u>	FY 2009 Revenue
	Approp.					
General Fund	\$0	\$2,000,000	\$2,000,000		\$0	
Federal Funds	\$0	\$2,581,100	\$2,581,100	\$0	\$2,581,100	\$2,581,100
Total	\$0	\$4,581,100	\$4,581,100	\$0	\$2,581,100	\$2,581,100

Individual, Business and/or Local Impact

Enactment of this bill will provide financial assistance to qualified Medicaid clients to receive selected services. There could be both increased costs and additional federal revenue to local governments and increased revenue to local providers that supply community and home-based services for the elderly.

2/22/2007, 8:59:13 AM, Lead Analyst: Greer, W.

Office of the Legislative Fiscal Analyst