

LONG-TERM CARE AMENDMENTS

2011 GENERAL SESSION

STATE OF UTAH

Chief Sponsor: Paul Ray

Senate Sponsor: Kevin T. Van Tassell

LONG TITLE

General Description:

This bill amends the Medical Assistance Act by directing the Department of Health to apply for an amendment to the New Choices Waiver.

Highlighted Provisions:

This bill:

▶ directs the Department of Health to apply for, on or before July 1, 2011, an amendment to the New Choices Waiver so an individual being evaluated for Medicaid benefits will not have to move from the individual's place of residence; and

▶ prohibits the department from requiring an individual to change residences in order to be evaluated for Medicaid benefits.

Money Appropriated in this Bill:

None

Other Special Clauses:

None

Utah Code Sections Affected:

ENACTS:

26-18-3.4, Utah Code Annotated 1953

Be it enacted by the Legislature of the state of Utah:



28 Section 1. Section **26-18-3.4** is enacted to read:

29 **26-18-3.4. Evaluating an individual for Medicaid benefits.**

30 (1) The department shall, on or before July 1, 2011, apply for an amendment to the
31 New Choices Waiver that will not require an individual to move to a nursing home, assisted
32 living facility, or to otherwise change the individual's current residence in order to be evaluated
33 for the receipt of benefits under the waiver.

34 (2) Except as provided in Subsection (3), the department may not require an individual
35 to change residences in order to be evaluated for the receipt of Medicaid benefits.

36 (3) Subsection (2) does not apply:

37 (a) to the New Choices Waiver, until the amendment described in Subsection (1) is
38 approved by the centers for Medicare and Medicaid services; or

39 (b) to the extent that it conflicts with federal law.

40 (4) The department shall allow an individual seeking Medicaid benefits to be evaluated
41 by any physician who is trained to evaluate a person's eligibility to receive Medicaid benefits.

Legislative Review Note
as of 2-25-11 7:36 AM

Office of Legislative Research and General Counsel

FISCAL NOTE

H.B. 357

SHORT TITLE: Long-term Care Amendments

SPONSOR: Ray, P.

2011 GENERAL SESSION, STATE OF UTAH

STATE GOVERNMENT (UCA 36-12-13(2)(b))

The bill costs the Department of Health \$1,664,300 ongoing General Fund beginning in FY 2012 to provide services to 237 newly eligible individuals in the New Choices Waiver. This is offset by a negative one-time General Fund of \$208,000 in FY 2012. The General Fund will bring in federal funds of \$3,569,700 in FY 2012 and \$4,079,700 in FY 2013. Additionally this bill costs the Department of Health \$16,100 ongoing General Fund and \$16,100 federal funds beginning in FY 2012 for 0.5 FTE to manage intake, referrals, and care plan approvals for the 237 new individuals. This bill also costs the Department of Workforce Services \$10,400 ongoing General Fund and \$10,400 federal funds for 0.3 FTE to determine the Medicaid eligibility of these 237 newly eligible individuals. Additionally, this bill costs the Department of Workforce Services \$3,600 one-time General Fund and \$3,600 federal funds in FY 2011 for 60 hours of programming and testing the changes to the eREP eligibility determination system.

STATE BUDGET DETAIL TABLE

	FY 2011	FY 2012	FY 2013
Revenue	\$0	\$0	\$0
Expenditure:			
General Fund	\$0	\$10,400	\$10,400
General Fund	\$0	\$16,100	\$16,100
General Fund	\$0	\$1,664,300	\$1,664,300
General Fund, One-Time	\$3,600	\$0	\$0
General Fund, One-Time	\$0	(\$208,000)	\$0
Federal Funds	\$3,600	\$0	\$0
Federal Funds	\$0	\$10,400	\$10,400
Federal Funds	\$0	\$16,100	\$16,100
Federal Funds	\$0	\$3,569,700	\$4,079,700
Total Expenditure	\$7,200	\$5,079,000	\$5,797,000
Net Impact, All Funds (Rev.-Exp.)	(\$7,200)	(\$5,079,000)	(\$5,797,000)
Net Impact, General/Education Funds	(\$3,600)	(\$1,482,800)	(\$1,690,800)

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LOCAL GOVERNMENTS (UCA 36-12-13(2)(c))

Enactment of this bill likely will not result in direct, measurable costs for local governments.

DIRECT EXPENDITURES BY UTAH RESIDENTS AND BUSINESSES (UCA 36-12-13(2)(d))

The increased costs to the Department of Health to provide services represent an increase in revenue to service providers in the New Choices Waiver. 237 more individuals will receive services in the New Choices Waiver.