Representative Jefferson S. Burton proposes the following substitute bill:

NURSING CARE FACILITY AMENDMENTS
2024 GENERAL SESSION
STATE OF UTAH
Chief Sponsor: Jefferson S. Burton
Senate Sponsor:
LONG TITLE
General Description:
This bill amends Medicaid provisions impacting nursing care facilities.
Highlighted Provisions:
This bill:
 Allows a state-owned veterans nursing care facility to obtain a one-time approva
for up to five total Medicaid certified beds, without the facility first proving bed
capacity insufficiency or financial viability.
Money Appropriated in this Bill:
None
Other Special Clauses:
None
Utah Code Sections Affected:
AMENDS:
26B-3-311 , as renumbered and amended by Laws of Utah 2023, Chapter 306
26B-3-313 , as renumbered and amended by Laws of Utah 2023, Chapter 306

26 26B-3-311. Authorization to renew, transfer, or increase Medicaid certified 27 programs -- Reimbursement methodology. (1) (a) The division may renew Medicaid certification of a certified program if the 28 29 program, without lapse in service to Medicaid recipients, has its nursing care facility program certified by the division at the same physical facility as long as the licensed and certified bed 30 31 capacity at the facility has not been expanded, unless the director has approved additional beds 32 in accordance with Subsection (5). 33 (b) The division may renew Medicaid certification of a nursing care facility program 34 that is not currently certified if: 35 (i) since the day on which the program last operated with Medicaid certification: (A) the physical facility where the program operated has functioned solely and 36 37 continuously as a nursing care facility; and 38 (B) the owner of the program has not, under this section or Section 26B-3-313, 39 transferred to another nursing care facility program the license for any of the Medicaid beds in 40 the program; and 41 (ii) except as provided in Subsection 26B-3-310(4), the number of beds granted renewed Medicaid certification does not exceed the number of beds certified at the time the 42 43 program last operated with Medicaid certification, excluding a period of time where the 44 program operated with temporary certification under Subsection 26B-3-312(3). (2) (a) The division may issue a Medicaid certification for a new nursing care facility 45 program if a current owner of the Medicaid certified program transfers its ownership of the 46 47 Medicaid certification to the new nursing care facility program and the new nursing care facility program meets all of the following conditions: 48 49 (i) the new nursing care facility program operates at the same physical facility as the 50 previous Medicaid certified program; 51 (ii) the new nursing care facility program gives a written assurance to the director in 52 accordance with Subsection (4); 53 (iii) the new nursing care facility program receives the Medicaid certification within one year of the date the previously certified program ceased to provide medical assistance to a 54 Medicaid recipient; and 55 56 (iv) the licensed and certified bed capacity at the facility has not been expanded, unless

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- 57 the director has approved additional beds in accordance with Subsection (5).
- 58 (b) A nursing care facility program that receives Medicaid certification under the 59 provisions of Subsection (2)(a) does not assume the Medicaid liabilities of the previous nursing 60 care facility program if the new nursing care facility program:
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(i) is not owned in whole or in part by the previous nursing care facility program; or

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(ii) is not a successor in interest of the previous nursing care facility program.

- 63 (3) The division may issue a Medicaid certification to a nursing care facility program 64 that was previously a certified program but now resides in a new or renovated physical facility 65 if the nursing care facility program meets all of the following:
- 66 (a) the nursing care facility program met all applicable requirements for Medicaid 67 certification at the time of closure;
- 68 (b) the new or renovated physical facility is in the same county or within a five-mile 69 radius of the original physical facility:
- 70 (c) the time between which the certified program ceased to operate in the original 71 facility and will begin to operate in the new physical facility is not more than three years, 72 unless:
- 73 (i) an emergency is declared by the president of the United States or the governor, 74 affecting the building or renovation of the physical facility:
- 75 (ii) the director approves an exception to the three-year requirement for any nursing 76 care facility program within the three-year requirement;
- 77 (iii) the provider submits documentation supporting a request for an extension to the 78 director that demonstrates a need for an extension; and
- 79 (iv) the exception does not extend for more than two years beyond the three-year 80 requirement;
- 81 (d) if Subsection (3)(c) applies, the certified program notifies the department within 90 82 days after ceasing operations in its original facility, of its intent to retain its Medicaid 83 certification;
- 84 (e) the provider gives written assurance to the director in accordance with Subsection 85 (4) that no third party has a legitimate claim to operate a certified program at the previous 86 physical facility; and
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(f) the bed capacity in the physical facility has not been expanded unless the director

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88 has approved additional beds in accordance with Subsection (5). 89 (4) (a) The entity requesting Medicaid certification under Subsections (2) and (3) shall 90 give written assurances satisfactory to the director or the director's designee that: 91 (i) no third party has a legitimate claim to operate the certified program; 92 (ii) the requesting entity agrees to defend and indemnify the department against any 93 claims by a third party who may assert a right to operate the certified program; and 94 (iii) if a third party is found, by final agency action of the department after exhaustion 95 of all administrative and judicial appeal rights, to be entitled to operate a certified program at the physical facility the certified program shall voluntarily comply with Subsection (4)(b). 96 (b) If a finding is made under the provisions of Subsection (4)(a)(iii): 97 98 (i) the certified program shall immediately surrender its Medicaid certification and 99 comply with division rules regarding billing for Medicaid and the provision of services to 100 Medicaid patients: and 101 (ii) the department shall transfer the surrendered Medicaid certification to the third 102 party who prevailed under Subsection (4)(a)(iii). 103 (5) (a) The director may approve additional nursing care facility programs for Medicaid 104 certification, or additional beds for Medicaid certification within an existing nursing care 105 facility program, if a nursing care facility or other interested party requests Medicaid 106 certification for a nursing care facility program or additional beds within an existing nursing 107 care facility program, and the nursing care facility program or other interested party complies 108 with this section. 109 (b) [The] Except as provided under Subsection (5)(e), a nursing care facility or other 110 interested party requesting Medicaid certification for a nursing care facility program or 111 additional beds within an existing nursing care facility program under Subsection (5)(a) shall 112 submit to the director: 113 (i) proof of the following as reasonable evidence that bed capacity provided by 114 Medicaid certified programs within the county or group of counties impacted by the requested 115 additional Medicaid certification is insufficient: 116 (A) nursing care facility occupancy levels for all existing and proposed facilities will 117 be at least 90% for the next three years: 118 (B) current nursing care facility occupancy is 90% or more; or

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119	(C) there is no other nursing care facility within a 35-mile radius of the nursing care
120	facility requesting the additional certification; and
121	(ii) an independent analysis demonstrating that at projected occupancy rates the nursing
122	care facility's after-tax net income is sufficient for the facility to be financially viable.
123	(c) Any request for additional beds as part of a renovation project are limited to the
124	maximum number of beds allowed in Subsection (7).
125	(d) The director shall determine whether to issue additional Medicaid certification by
126	considering:
127	(i) whether bed capacity provided by certified programs within the county or group of
128	counties impacted by the requested additional Medicaid certification is insufficient, based on
129	the information submitted to the director under Subsection (5)(b);
130	(ii) whether the county or group of counties impacted by the requested additional
131	Medicaid certification is underserved by specialized or unique services that would be provided
132	by the nursing care facility;
133	(iii) whether any Medicaid certified beds are subject to a claim by a previous certified
134	program that may reopen under the provisions of Subsections (2) and (3);
135	(iv) how additional bed capacity should be added to the long-term care delivery system
136	to best meet the needs of Medicaid recipients; and
137	(v) (A) whether the existing certified programs within the county or group of counties
138	have provided services of sufficient quality to merit at least a two-star rating in the Medicare
139	Five-Star Quality Rating System over the previous three-year period; [and]
140	(B) information obtained under Subsection (9)[-]; and
141	(vi) subject to Subsection (5)(e), for a state-owned veterans nursing care facility,
142	whether the facility has previously been approved for a Medicaid certified bed increase under
143	this Subsection (5).
144	(e) For a state-owned veterans nursing care facility that has not previously been
145	approved for a certified bed increase under this Subsection (5):
146	(i) the facility is exempt from the requirements under Subsection (5)(b); and
147	(ii) the director may approve, for that facility location only, up to five total Medicaid
148	certified beds.
149	(6) The department shall adopt administrative rules in accordance with Title 63G,

150 Chapter 3, Utah Administrative Rulemaking Act, to adjust the Medicaid nursing care facility 151 property reimbursement methodology to:

152 (a) only pay that portion of the property component of rates, representing actual bed 153 usage by Medicaid clients as a percentage of the greater of:

154 (i) actual occupancy; or

155 (ii) (A) for a nursing care facility other than a facility described in Subsection

156 (6)(a)(ii)(B), 85% of total bed capacity; or

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(B) for a rural nursing care facility. 65% of total bed capacity: and

- 158 (b) not allow for increases in reimbursement for property values without major 159 renovation or replacement projects as defined by the department by rule.
- 160 (7) (a) Except as provided in Subsection 26B-3-310(3), if a nursing care facility does 161 not seek Medicaid certification for a bed under Subsections (1) through (6), the department shall, notwithstanding Subsections 26B-3-312(3)(a) and (b), grant Medicaid certification for 162 additional beds in an existing Medicaid certified nursing care facility that has 90 or fewer 163 164 licensed beds, including Medicaid certified beds, in the facility if:
- 165 (i) the nursing care facility program was previously a certified program for all beds but 166 now resides in a new facility or in a facility that underwent major renovations involving major structural changes, with 50% or greater facility square footage design changes, requiring review 167 168 and approval by the department;
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(ii) the nursing care facility meets the quality of care regulations issued by CMS; and 170 (iii) the total number of additional beds in the facility granted Medicaid certification 171 under this section does not exceed 10% of the number of licensed beds in the facility.

172 (b) The department may not revoke the Medicaid certification of a bed under this 173 Subsection (7) as long as the provisions of Subsection (7)(a)(ii) are met.

174 (8) (a) If a nursing care facility or other interested party indicates in its request for 175 additional Medicaid certification under Subsection (5)(a) that the facility will offer specialized 176 or unique services, but the facility does not offer those services after receiving additional 177 Medicaid certification, the director shall revoke the additional Medicaid certification.

178 (b) The nursing care facility program shall obtain Medicaid certification for any 179 additional Medicaid beds approved under Subsection (5) or (7) within three years of the date of 180 the director's approval, or the approval is void.

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181	(9) (a) If the director makes an initial determination that quality standards under
182	Subsection $(5)(d)(v)$ have not been met in a rural county or group of rural counties over the
183	previous three-year period, the director shall, before approving certification of additional
184	Medicaid beds in the rural county or group of counties:
185	(i) notify the certified program that has not met the quality standards in Subsection
186	(5)(d)(v) that the director intends to certify additional Medicaid beds under the provisions of
187	Subsection (5)(d)(v); and
188	(ii) consider additional information submitted to the director by the certified program
189	in a rural county that has not met the quality standards under Subsection $(5)(d)(v)$.
190	(b) The notice under Subsection (9)(a) does not give the certified program that has not
191	met the quality standards under Subsection $(5)(d)(v)$, the right to legally challenge or appeal the
192	director's decision to certify additional Medicaid beds under Subsection (5)(d)(v).
193	Section 2. Section 26B-3-313 is amended to read:
194	26B-3-313. Authorization to sell or transfer licensed Medicaid beds Duties of
195	transferor Duties of transferee Duties of division.
196	(1) This section provides a method to transfer or sell the license for a Medicaid bed
197	from a nursing care facility program to another entity that is in addition to the authorization to
198	transfer under Section 26B-3-311.
199	(2) (a) A nursing care facility program may transfer or sell one or more of its licenses
200	for Medicaid beds in accordance with Subsection (2)(b) if:
201	(i) at the time of the transfer, and with respect to the license for the Medicaid bed that
202	will be transferred, the nursing care facility program that will transfer the Medicaid license
203	meets all applicable regulations for Medicaid certification;
204	(ii) the nursing care facility program gives a written assurance, which is postmarked or
205	has proof of delivery 30 days before the transfer, to the director and to the transferee in
206	accordance with Subsection 26B-3-311(4);
207	(iii) the nursing care facility program that will transfer the license for a Medicaid bed
208	notifies the division in writing, which is postmarked or has proof of delivery 30 days before the
209	transfer, of:
210	(A) the number of bed licenses that will be transferred;
211	(B) the date of the transfer; and

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212 (C) the identity and location of the entity receiving the transferred licenses; and 213 (iv) if the nursing care facility program for which the license will be transferred or 214 purchased is located in an urban county with a nursing care facility average annual occupancy 215 rate over the previous two years less than or equal to 75%, the nursing care facility program 216 transferring or selling the license demonstrates to the satisfaction of the director that the sale or 217 transfer: 218 (A) will not result in an excessive number of Medicaid certified beds within the county 219 or group of counties that would be impacted by the transfer or sale; and 220 (B) best meets the needs of Medicaid recipients. 221 (b) Except as provided in Subsection (2)(c), a nursing care facility program may 222 transfer or sell one or more of its licenses for Medicaid beds to: 223 (i) a nursing care facility program that has the same owner or successor in interest of 224 the same owner: 225 (ii) a nursing care facility program that has a different owner; or 226 (iii) a related-party nonnursing-care-facility entity that wants to hold one or more of the 227 licenses for a nursing care facility program not yet identified, as long as: 228 (A) the licenses are subsequently transferred or sold to a nursing care facility program 229 within three years: and 230 (B) the nursing care facility program notifies the director of the transfer or sale in 231 accordance with Subsection (2)(a)(iii). 232 (c) A nursing care facility program may not transfer or sell one or more of its licenses 233 for Medicaid beds to: 234 (i) an entity under Subsection (2)(b)(i), (ii), or (iii) that is located in a rural county 235 unless the entity requests, and the director issues, Medicaid certification for the beds under 236 Subsection 26B-3-311(5)[-]; or 237 (ii) another entity or nursing care facility program that has been approved for any 238 additional beds under Subsection 26B-3-311(5)(e). 239 (3) A nursing care facility program or entity under Subsection (2)(b)(i), (ii), or (iii) that 240 receives or purchases a license for a Medicaid bed under Subsection (2)(b): 241 (a) may receive a license for a Medicaid bed from more than one nursing care facility 242 program;

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243	(b) shall give the division notice, which is postmarked or has proof of delivery within
244	14 days of the nursing care facility program or entity seeking Medicaid certification of beds in
245	the nursing care facility program or entity, of the total number of licenses for Medicaid beds
246	that the entity received and who it received the licenses from;
247	(c) may only seek Medicaid certification for the number of licensed beds in the nursing
248	care facility program equal to the total number of licenses for Medicaid beds received by the
249	entity;
250	(d) does not have to demonstrate need or seek approval for the Medicaid licensed bed
251	under Subsection 26B-3-311(5), except as provided in Subsections (2)(a)(iv) and (2)(c);
252	(e) shall meet the standards for Medicaid certification other than those in Subsection
253	26B-3-311(5), including personnel, services, contracts, and licensing of facilities under Chapter
254	2, Part 2, Health Care Facility Licensing and Inspection; and
255	(f) shall obtain Medicaid certification for the licensed Medicaid beds within three years
256	of the date of transfer as documented under Subsection (2)(a)(iii)(B).
257	(4) (a) When the division receives notice of a transfer of a license for a Medicaid bed
258	under Subsection (2)(a)(iii)(A), the department shall reduce the number of licenses for
259	Medicaid beds at the transferring nursing care facility:
260	(i) equal to the number of licenses transferred; and
261	(ii) effective on the date of the transfer as reported under Subsection (2)(a)(iii)(B).
262	(b) For purposes of Section 26B-3-310, the division shall approve Medicaid
263	certification for the receiving nursing care facility program or entity:
264	(i) in accordance with the formula established in Subsection (3)(c); and
265	(ii) if:
266	(A) the nursing care facility seeks Medicaid certification for the transferred licenses
267	within the time limit required by Subsection (3)(f); and
268	(B) the nursing care facility program meets other requirements for Medicaid
269	certification under Subsection (3)(e).
270	(c) A license for a Medicaid bed may not be approved for Medicaid certification
271	without meeting the requirements of Sections 26B-3-310 and 26B-3-311 if:
272	(i) the license for a Medicaid bed is transferred under this section but the receiving
273	entity does not obtain Medicaid certification for the licensed bed within the time required by

- 274 Subsection (3)(f); or
- (ii) the license for a Medicaid bed is transferred under this section but the license is no
- 276 longer eligible for Medicaid certification.
- 277 Section 3. Effective date.
- 278 This bill takes effect on May 1, 2024.