{deleted text} shows text that was in SB0197S02 but was deleted in SB0197S03. inserted text shows text that was not in SB0197S02 but was inserted into SB0197S03.

DISCLAIMER: This document is provided to assist you in your comparison of the two bills. Sometimes this automated comparison will NOT be completely accurate. Therefore, you need to read the actual bills. This automatically generated document could contain inaccuracies caused by: limitations of the compare program; bad input data; or other causes.

Senator Todd D. Weiler<u>Representative Stephanie Gricius</u> proposes the following substitute bill:

MEDICAID REIMBURSEMENT RATE AMENDMENTS

2024 GENERAL SESSION

STATE OF UTAH

Chief Sponsor: ⁺Todd D. Weiler

House Sponsor: + Stephanie Gricius

LONG TITLE

General Description:

This bill addresses Medicaid reimbursement rates.

Highlighted Provisions:

This bill:

- defines terms; and
- establishes a budgeting mechanism under which Medicaid reimbursement rates for applied behavior analysis may increase.

Money Appropriated in this Bill:

None

Other Special Clauses:

None

Utah Code Sections Affected:

AMENDS:

26B-3-203, as renumbered and amended by Laws of Utah 2023, Chapter 306

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

Section 1. Section 26B-3-203 is amended to read:

26B-3-203. Base budget appropriations for Medicaid accountable care organizations, behavioral health plans, and ABA services -- Forecast of behavioral health services cost.

(1) As used in this section:

(a) "ABA service" means a service applying applied behavior analysis, as that term is defined in Section 31A-22-642.

(b) "ABA service reimbursement rate" means the Medicaid reimbursement rate developed by the division, in accordance with Part 1, Health Care Assistance, and paid to a provider for providing an ABA service.

[(a)] (c) "ACO" means an accountable care organization that contracts with the state's Medicaid program for:

(i) physical health services; or

(ii) integrated physical and behavioral health services.

[(b)] (d) "Base budget" means the same as that term is defined in legislative rule.

[(c)] (e) "Behavioral health plan" means a managed care or fee for service delivery system that contracts with or is operated by the department to provide behavioral health services to Medicaid eligible individuals.

[(d)] (f) "Behavioral health services" means mental health or substance use treatment or services.

[(e)] (g) "General Fund growth factor" means the amount determined by dividing the next fiscal year ongoing General Fund revenue estimate by current fiscal year ongoing appropriations from the General Fund.

[(f)] (h) "Next fiscal year ongoing General Fund revenue estimate" means the next fiscal year ongoing General Fund revenue estimate identified by the Executive Appropriations Committee, in accordance with legislative rule, for use by the Office of the Legislative Fiscal

Analyst in preparing budget recommendations.

[(g)] (i) "PMPM" means per-member-per-month funding.

(2) If the General Fund growth factor is less than 100%, the next fiscal year base budget shall, subject to Subsection (5), 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), 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 {[},{]:

(a) subject to Subsection (5)[;]:

(a) include an appropriation to the department in an amount [necessary to ensure that the next fiscal year PMPM for ACOs and behavioral health plans is greater than or equal to the current fiscal year PMPM for the ACOs and behavioral health plans multiplied by 102% and less than or equal to the current fiscal year PMPM for the ACOs and behavioral health plans multiplied by the General Fund growth factor {[].] f_{\pm}

(b) include an appropriation to that would, prior to the application of Subsection (4)(b), allow the department {in an amount necessary to ensure that each ABA service reimbursement rate in }to ensure that the next fiscal year PMPM for ACOs and behavioral health plans is {:

(i) higher} greater than or equal to the current fiscal {year's ABA service reimbursement rate multiplied by a factor of 102%;

(ii) equal to or lower than the current fiscal year's ABA service reimbursement rate}year PMPM for the ACO's and behavioral health plans multiplied by the General Fund growth factor:

(b) subject to Subsection (4)(c), allocate the amount appropriated under Subsection (4)(a) to provide substantially the same year-over-year percentage point increases to:

(i) the PMPM for ACOs and behavioral health plans; and

(ii) each ABA service reimbursement rate; and

({iii}c) for the initial appropriation under Subsection (4)(b), {include a one-time additional appropriation in an amount sufficient to substantively}prior to providing the percentage point increases under Subsection (4)(b), allocate from the total amount appropriated under Subsection (4)(a) an amount necessary to increase and substantially equalize each of the ABA service reimbursement rates with a corresponding reimbursement rate paid{ to providers} for providing the same or substantively similar service under an ACO or a behavioral health plan.

(5) The appropriations provided to the department for behavioral health plans under this section shall be reduced by the amount contributed by counties in the current fiscal year for behavioral health plans in accordance with Subsections 17-43-201(5)(k) and 17-43-301(6)(a)(x).

(6) In order for the department to estimate the impact of Subsections (2) through (4) before identification of the next fiscal year ongoing General Fund revenue estimate, the Governor's Office of Planning and Budget shall, in cooperation with the Office of the Legislative Fiscal Analyst, develop an estimate of ongoing General Fund revenue for the next fiscal year and provide the estimate to the department no later than November 1 of each year.

(7) The Office of the Legislative Fiscal Analyst shall include an estimate of the cost of behavioral health services in any state Medicaid funding or savings forecast that is completed in coordination with the department and the Governor's Office of Planning and Budget.

Section 2. Effective date.

This bill takes effect on May 1, 2024.