As Amended by Senate Committee

Session of 2016

SENATE BILL No. 457

By Committee on Ways and Means

2-15

AN ACT concerning skilled nursing care facilities; relating to the quality
 care assessment; rate and sunset thereof; *quality care improvement panel membership; reporting requirements;* amending K.S.A. 2015
 Supp. 75-7435 and repealing the existing section.

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Be it enacted by the Legislature of the State of Kansas:

New Section 1. On and after July 1, 2016, notwithstanding the
provisions of section 109 of chapter 104 of the 2015 Session Laws of
Kansas, the provisions of K.S.A. 2015 Supp. 75-5958, and amendments
thereto, shall be in full force and effect.

11 Sec. 2. K.S.A. 2015 Supp. 75-7435 is hereby amended to read as 12 follows: 75-7435. (a) As used in this section unless the context requires 13 otherwise:

14 (1) Words and phrases have the meanings respectively ascribed 15 thereto by K.S.A. 39-923, and amendments thereto.

16 (2) "Skilled nursing care facility" means a licensed nursing facility, 17 nursing facility for mental health as defined in K.S.A. 39-923, and 18 amendments thereto, or a hospital long-term care unit licensed by the 19 department of health and environment, providing skilled nursing care, but 20 shall not include the Kansas soldiers' home or the Kansas veterans' home.

(3) "Licensed bed" means those beds within a skilled nursing care
 facility which the facility is licensed to operate.

23 (4) "Agent" means the Kansas department for aging and disability24 services.

(5) "Continuing care retirement facility" means a facility holding a
 certificate of registration issued by the commissioner of insurance pursuant
 to K.S.A. 40-2235, and amendments thereto.

(b) (1) Except as otherwise provided in this section and in subsection (f), there is hereby imposed and the secretary of health and environment shall assess an annual assessment per licensed bed, hereinafter called a quality care assessment, on each skilled nursing care facility. The assessment on all facilities in the aggregate shall be an amount fixed by rules and regulations of the secretary of health and environment, shall not exceed \$1,950 \$4,908 annually per licensed bed, shall be imposed as an

amount per licensed bed and shall be imposed uniformly on all skilled 1 2 nursing care facilities except that the assessment rate for skilled nursing 3 care facilities that are part of a continuing care retirement facility, small 4 skilled nursing care facilities and high medicaid volume skilled nursing 5 care facilities shall not exceed $\frac{1}{6}$ of the actual amount assessed all other 6 skilled nursing care facilities. No rules and regulations of the secretary of 7 health and environment shall grant any exception to or exemption from the 8 quality care assessment. The assessment shall be paid quarterly, with one 9 fourth of the annual amount due by the 30th day after the end of the month 10 of each calendar quarter. The secretary of health and environment is authorized to establish delayed payment schedules for skilled nursing care 11 12 facilities which are unable to make quarterly payments when due under 13 this section due to financial difficulties, as determined by the secretary of health and environment. As used in this subsection (b)(1) paragraph, the 14 terms "small skilled nursing care facilities" and "high medicaid volume 15 16 skilled nursing care facilities" shall have the meanings ascribed thereto by 17 the secretary of health and environment by rules and regulations, except 18 that the definition of small skilled nursing care facility shall not be lower 19 than 40 beds.

(2) (2) Beds licensed after July 1 each year shall pay a prorated amount of the applicable annual assessment so that the assessment applies only for the days such new beds are licensed. The proration shall be calculated by multiplying the applicable assessment by the percentage of days the beds are licensed during the year. Any change which reduces the number of licensed beds in a facility shall not result in a refund being issued to the skilled nursing care facility.

27 (3) If an entity conducts, operates or maintains more than one 28 licensed skilled nursing care facility, the entity shall pay the nursing 29 facility assessment for each facility separately. No skilled nursing care 30 facility shall create a separate line-item charge for the purpose of passing 31 through the quality care assessment to residents. No skilled nursing care 32 facility shall be guaranteed, expressly or otherwise, that any additional 33 moneys paid to the facility under this section will equal or exceed the 34 amount of its quality care assessment.

35 (4) The payment of the quality care assessment to the secretary of 36 health and environment shall be an allowable cost for medicaid 37 reimbursement purposes. A rate adjustment pursuant to paragraph (5) of 38 subsection (d)(5) shall be made effective on the date of imposition of the 39 assessment, to reimburse the portion of this cost imposed on medicaid 40 days.

(5) The secretary of health and environment shall seek a waiver from
the United States department of health and human services to allow the
state to impose varying levels of assessments on skilled nursing care

facilities based on specified criteria. It is the intent of the legislature that
 the waiver sought by the secretary of health and environment be structured
 to minimize the negative fiscal impact on certain classes of skilled nursing
 care facilities.

5 (c) Each skilled nursing care facility shall prepare and submit to the 6 secretary of health and environment any additional information required 7 and requested by the secretary of health and environment to implement or 8 administer the provisions of this section. Each skilled nursing care facility 9 shall prepare and submit quarterly to the secretary for aging and disability services the rate the facility charges to private pay residents, and the 10 secretary shall cause this information to be posted on the web site of the 11 12 department for aging and disability services.

13 (d) (1) There is hereby created in the state treasury the quality care 14 fund, which shall be administered by the secretary of health and environment. All moneys received for the assessments imposed pursuant 15 16 to subsection (b), including any penalty assessments imposed thereon pursuant to subsection (e), shall be remitted to the state treasurer in 17 18 accordance with K.S.A. 75-4215, and amendments thereto. Upon receipt 19 of each such remittance, the state treasurer shall deposit the entire amount 20 in the state treasury to the credit of the quality care fund. All expenditures 21 from the quality care fund shall be made in accordance with appropriation 22 acts upon warrants of the director of accounts and reports issued pursuant 23 to vouchers approved by the secretary of health and environment or the 24 secretary's agent.

25 (2) All moneys in the quality care fund shall be used to finance initiatives to maintain or improve the quantity and quality of skilled 26 27 nursing care in skilled nursing care facilities in Kansas. No moneys 28 credited to the quality care fund shall be transferred to or otherwise revert 29 to the state general fund at any time. Notwithstanding the provisions of 30 any other law to the contrary, if any moneys credited to the quality care 31 fund are transferred or otherwise revert to the state general fund, 30 days 32 following the transfer or reversion the quality care assessment shall 33 terminate and the secretary of health and environment shall discontinue the 34 imposition, assessment and collection of the assessment. Upon termination 35 of the assessment, all collected assessment revenues, including the moneys 36 inappropriately transferred or reverting to the state general fund, less any 37 amounts expended by the secretary of health and environment, shall be 38 returned on a pro rata basis to skilled nursing care facilities that paid the 39 assessment

40 (3) Any moneys received by the state of Kansas from the federal
41 government as a result of federal financial participation in the state
42 medicaid program that are derived from the quality care assessment shall
43 be deposited in the quality care fund and used to finance actions to

1 maintain or increase healthcare in skilled nursing care facilities.

2 (4) Moneys in the fund shall be used exclusively for the following 3 purposes:

4 (A) To pay administrative expenses incurred by the secretary of 5 health and environment or the agent in performing the activities authorized 6 by this section, except that such expenses shall not exceed a total of 1% of 7 the aggregate assessment funds collected pursuant to subsection (b) for the 8 prior fiscal year;

9 (B) to increase nursing facility payments to fund covered services to 10 medicaid beneficiaries within medicare upper payment limits, as may be 11 negotiated;

12 (C) to reimburse the medicaid share of the quality care assessment as 13 a pass-through medicaid allowable cost;

14 (D) to restore the medicaid rate reductions implemented January 1, 15 2010;

16 (E) to restore funding for fiscal year 2010, including rebasing and 17 inflation to be applied to rates in fiscal year 2011;

18 (F) the remaining amount, if any, shall be expended first to increase 19 the direct health care costs center limitation up to 150% of the case mix adjusted median, and then, if there are remaining amounts, for other 20 21 quality care enhancement of skilled nursing care facilities as approved by 22 the quality care improvement panel but shall not be used directly or 23 indirectly to replace existing state expenditures for payments to skilled 24 nursing care facilities for providing services pursuant to the state medicaid 25 program.

(5) Any moneys received by a skilled nursing care facility from the
quality care fund shall not be expended by any skilled nursing care facility
to provide for bonuses or profit-sharing for any officer, employee or parent
corporation but may be used to pay to employees who are providing direct
care to a resident of such facility.

(6) Adjustment payments may be paid quarterly or within the daily
 medicaid rate to reimburse covered medicaid expenditures in the aggregate
 within the upper payment limits.

34 (7) On or before the 10th day of each month, the director of accounts
35 and reports shall transfer from the state general fund to the quality care
36 fund interest earnings based on:

(A) The average daily balance of moneys in the quality care fund forthe preceding month; and

(B) the net earnings rate of the pooled money investment portfolio forthe preceding month.

(e) If a skilled nursing care facility fails to pay the full amount of the
quality care assessment imposed pursuant to subsection (b), when due and
payable, including any extensions of time granted under that subsection,

the secretary of health and environment shall assess a penalty in the amount of the lesser of \$500 per day or 2% of the quality care assessment owed for each day the assessment is delinquent. The secretary of health and environment is authorized to establish delayed payment schedules for skilled nursing care facilities that are unable to make installment payments when due under this section because of financial difficulties, as determined by the secretary of health and environment.

8 (f) (1) The secretary of health and environment shall assess and 9 collect quality care assessments imposed pursuant to subsection (b), 10 including any penalty assessments imposed thereon pursuant to subsection 11 (e), from skilled nursing care facilities on and after July 1, 2010, except 12 that no assessments or penalties shall be assessed under subsections (a) 13 through (h) until:

(A) An amendment to the state plan for medicaid, which increases the
rates of payments made to skilled nursing care facilities for providing
services pursuant to the federal medicaid program and which is proposed
for approval for purposes of subsections (a) through (h) is approved by the
federal government in which case the initial assessment is due no earlier
than 60 days after state plan approval; and

20 (B) the skilled nursing care facilities have been compensated 21 retroactively within 60 days after state plan approval at the increased rate 22 for services provided pursuant to the federal medicaid program for the 23 period commencing on and after July 1, 2010.

24 (2) The secretary of health and environment shall implement and 25 administer the provisions of subsections (a) through (h) in a manner 26 consistent with applicable federal medicaid laws and regulations. The 27 secretary of health and environment shall seek any necessary approvals by 28 the federal government that are required for the implementation of 29 subsections (a) through (h).

30 (3) The provisions of subsections (a) through (h) shall be null and 31 void and shall have no force and effect if one of the following occur:

(A) The medicaid plan amendment, which increases the rates of
 payments made to skilled nursing care facilities for providing services
 pursuant to the federal medicaid program and which is proposed for
 approval for purposes of subsections (a) through (h) is not approved by the
 federal centers for medicare and medicaid services;

(B) the rates of payments made to skilled nursing care facilities for
providing services pursuant to the federal medicaid program are reduced
below the rates calculated on December 31, 2009, increased by revenues in
the quality care fund and matched by federal financial participation and
rebasing as provided for in K.S.A. 2015 Supp. 75-5958, and amendments
thereto;

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(C) any funds are utilized to supplant funding for skilled nursing care

1 facilities as required by subsection (g);

2 (D) any funds are diverted from those purposes set forth in subsection 3 (d)(4); or

4 (E) upon the governor signing, or allowing to become law without 5 signature, legislation which by proviso or otherwise directs any funds from 6 those purposes set forth in subsection (d)(4) or which would propose to 7 suspend the operation of this section.

8 (g) On and after July 1, 2010, reimbursement rates for skilled nursing 9 care facilities shall be restored to those in effect during December 2009. 10 No funds generated by the assessments or federal funds generated 11 therefrom shall be utilized for such restoration, but such funds may be 12 used to restore the rate reduction in effect from January 1, 2010, to June 13 30, 2010.

14 (h) Rates of reimbursement shall not be limited by private pay 15 charges.

(i) If the provisions of subsections (a) through (h) are repealed, expire
or become null and void and have no further force and effect, all moneys
in the quality care fund which were paid under the provisions of
subsections (a) through (h) shall be returned to the skilled nursing care
facilities which paid such moneys on the basis on which such payments
were assessed and paid pursuant to subsections (a) through (h).

(j) The department of health and environment may adopt rules andregulations necessary to implement the provisions of this section.

24 (k) For purposes of administering and selecting the reimbursements 25 of moneys in the quality care assessment fund, the quality care improvement panel is hereby established. The panel shall consist of the 26 27 following members: Two persons appointed by *leadingage* Kansas-homes 28 and services for the aging; two persons appointed by the Kansas health 29 care association; one person appointed by Kansas advocates for better 30 care; one person appointed by the Kansas hospital association; one person 31 appointed by the governor who is a member of the Kansas adult care 32 executives association; one person appointed by the governor who is a 33 skilled nursing care facility resident or the family member of such a 34 resident; one person appointed by the Kansas foundation for medical care; 35 one person appointed by the governor from the department for aging and 36 disability services; and one person appointed by the governor from the 37 department of health and environment; one person appointed by the 38 president of the senate who is affiliated with an organization 39 representing and advocating the interests of retired persons in Kansas; 40 and one person appointed by the speaker of the house of representatives who is a volunteer with the office of the state long-term care 41 42 ombudsman established by the long-term care ombudsman act. The 43 person appointed by the governor from the department for aging and

disability services and the person appointed by the governor from the 1 department of health and environment shall be nonvoting members of the 2 panel. The panel shall meet as soon as possible subsequent to the effective 3 date of this act and shall elect a chairperson from among the members 4 5 appointed by the trade organizations specified in this subsection. The 6 members of the quality care improvement panel shall serve without 7 compensation or expenses. The quality care improvement panel shall 8 report annually on or before January 10 to the legislature senate 9 committees on public health and welfare and ways and means, the house committees on appropriations and health and human services and the 10 11 Robert G. (Bob) Bethell joint committee on home and community based 12 services and KanCare oversight concerning {the progress to reduce the incidence of antipsychotic drug use in elders with dementia, 13 participation in the nursing facility quality and efficiency outcome 14 15 incentive factor, participation in the culture change and person-centered 16 care incentive program, annual resident satisfaction ratings for Kansas skilled nursing care facilities and} the activities of the panel during the 17 18 preceding calendar year and any recommendations which the panel may 19 have concerning the administration of and expenditures from the quality 20 care assessment fund. 21 (1) The provisions of this section shall expire on July $1, \frac{2016}{2020}$.

- 22 Sec. 3. K.S.A. 2015 Supp. 75-7435 is hereby repealed.
- 23 Sec. 4. This act shall take effect and be in force from and after its 24 publication in the statute book.