SENATE/HOUSE FILE BY (PROPOSED GOVERNOR'S BILL)

Passed	Senate,	Date	Passed	House,	Date	_
Vote:	Ayes	Nays	Vote:	Ayes	Nays	
	Aı	oproved			<u></u>	

A BILL FOR

1 An Act relating to psychiatric medical institution for children services and providing an effective date. 3 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA: 4 TLSB 1680XL 83

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- Section 1. PSYCHIATRIC MEDICAL INSTITUTIONS FOR CHILDREN 2 == REIMBURSEMENT.
 - 1. For the purposes of this section, unless the context 4 otherwise requires, "psychiatric institution" means a 5 psychiatric medical institution for children licensed under 6 chapter 135H and receiving medical assistance program 7 reimbursement.
- 2. The department of human services, in consultation with 9 psychiatric institution providers, shall develop a cost=based 10 rate setting methodology with levels of reimbursement based on 1 11 acuity for psychiatric institution providers in accordance 1 12 with this section.
- 1 13 3. a. For the fiscal year beginning July 1, 2009, and 1 14 ending June 30, 2010, the maximum reimbursement rate for 1 15 psychiatric institution providers shall be 103 percent of the 1 16 patient=day weighted statewide average cost of psychiatric 1 17 institution providers located within the state, based on the 1 18 cost reports as of December 31, 2009. However, the average 1 19 cost computation shall not include the psychiatric institution 20 at the state mental health institute located at Independence 21 and upon receiving federal approval, the reimbursement rate 1 22 for that psychiatric institution shall be as provided in the 1 23 state plan amendment under subsection 5.
- 1 24 b. Notwithstanding paragraph "a", on a case=by=case basis 1 25 for psychiatric institution services provided to children with 1 26 intensive needs who would otherwise require placement outside 27 the state, the department may apply an exception to policy 28 process to authorize provider reimbursement in excess of the 1 29 maximum reimbursement rate under paragraph "a".
- 4. a. By January 1, 2010, the department shall develop a 3.0 31 methodology for cost=based reimbursement with an acuity 1 32 adjustment based on the aggregate acuity level of each 33 psychiatric institution's patient mix. Under the methodology, 34 each psychiatric institution's aggregate acuity level shall be 35 recalculated periodically. The department shall work with 1 psychiatric institution provider representatives to develop 2 the methodology.
 - b. The department shall implement the cost=based 4 reimbursement with acuity adjustment methodology beginning on 5 July 1, 2010.
 6 5. The department shall submit a medical assistance state
- plan amendment to the centers for Medicare and Medicaid 8 services of the United States department of health and human 9 services requesting authorization to reimburse the psychiatric 2 10 institution at the state mental health institute located at 2 11 Independence at 100 percent of actual costs. Upon receiving 12 approval of the waiver, for the fiscal year beginning July 1, 2 13 2009, an amount equivalent to the resulting savings shall be 2 14 transferred from the appropriation for the state mental health 2 15 institute at Independence to the medical assistance 16 appropriation to be used for the purposes described in this 2 17 section.
- 2 18 The department shall track the number of admissions of 2 19 Iowa children to out=of=state psychiatric medical institutions

2 20 for children and the corresponding expenditures, and if 2 21 necessary, shall adopt utilization control strategies to 2 22 assure that utilization of such out=of=state admission is 2 23 reduced.

7. The department, in consultation with providers, shall 2 25 develop and implement outcome measures for all psychiatric 26 institution providers beginning on July 1, 2010.

8. The department of human services shall adopt rules

2 28 pursuant to chapter 17A to implement this section.

Sec. 2. Section 249A.31, Code 2009, is amended by adding the following new unnumbered paragraph:

31 NEW UNNUMBERED PARAGRAPH. Effective July a, 2010, the 32 department shall apply a cost=based reimbursement methodology 33 for reimbursement of psychiatric medical institution for 34 children providers.

Sec. 3. EFFECTIVE DATE. This Act, being deemed of 1 immediate importance, takes effect upon enactment. EXPLANATION

This bill relates to psychiatric medical institution for 4 children (PMIC) services by providing for development and implementation of a new reimbursement methodology that is 6 acuity=based and by addressing other PMIC service provisions.

The department of human services (DHS) is directed to work with PMIC providers in developing the new reimbursement 9 methodology to be implemented beginning on July 1, 2010. 10 fiscal year 2009=2010, the maximum reimbursement rate for PMIC 11 providers other than the PMIC at the state mental health 12 institute located at Independence, is limited to a specified 3 13 percentage of certain average costs. DHS may utilize the 3 14 exception to policy process on a case=by=case basis to 15 authorize a higher rate for services provided to children with 3 16 intensive needs who would otherwise be placed out=of=state. 3 17 DHS is required to track out=of=state PMIC placements and 3 18 apply utilization controls strategies to assure a reduction in 3 19 out=of=state PMIC admissions. 3 20

The department is required to apply for state medical 21 assistance plan amendment for authority to reimburse the PMIC 22 located at the state mental health institute for 100 percent 3 23 of actual costs. Any resulting savings to that institute's 24 appropriation for fiscal year 2009=2010 is to be transferred 25 to the medical assistance (Medicaid) program appropriation to 26 be used for the purposes in the bill.

3 27 The department is also required to work with PMIC providers 28 to develop and implement outcome measures for PMIC providers 29 beginning on July 1, 2010. 30 The department is required to adopt rules to implement the 3 30

31 bill.

Code section 249A.31, relating to cost=based reimbursement 33 under the Medicaid program, is amended to require permanent 34 cost=based reimbursement of PMICs effective July 1, 2010.

3 35 The bill takes effect upon enactment.

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