

**Senate File 2010 - Introduced**

SENATE FILE 2010

BY HATCH

**A BILL FOR**

1 An Act relating to home and community-based services under the  
2 medical assistance program.

3 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

1 Section 1. MEDICAL ASSISTANCE PROGRAM — HOME AND  
2 COMMUNITY-BASED SERVICES.

3 1. The department of human services shall submit an  
4 application to the centers for Medicare and Medicaid services  
5 of the United States department of health and human services  
6 to participate in the medical assistance state balancing  
7 incentive payments program created pursuant to section 10202  
8 of the federal Patient Protection and Affordable Care Act of  
9 2010, Pub. L. No. 111-148 (2010), as amended by the Health Care  
10 and Education Reconciliation Act of 2010, Pub. L. No. 111-152.  
11 If selected for participation in the grant program, the  
12 department shall comply with the requirements of the program  
13 including developing a no wrong door single entry point system;  
14 providing a conflict-free case management system; providing  
15 core standardized assessment instruments within six months of  
16 submitting the application; and complying with data collection  
17 requirements relating to services, quality, and outcomes. No  
18 later than October 1, 2015, the department shall meet the  
19 applicable target spending percentage required under the state  
20 balancing incentive payments program to rebalance long-term  
21 care spending under the medical assistance program between home  
22 and community-based services and institution-based services.  
23 Funding received under the federal grant shall be used for new  
24 or expanded medical assistance program noninstitutionally based  
25 long-term care services and supports.

26 2. Beginning July 1, 2012, home health care providers under  
27 the medical assistance program shall be reimbursed based on the  
28 Medicare low utilization payment adjustment methodology rather  
29 than a cost-based methodology.

30 EXPLANATION

31 This bill relates to home and community-based services  
32 under the medical assistance (Medicaid) program. The bill  
33 directs the department of human services (DHS) to submit an  
34 application to the centers for Medicare and Medicaid services  
35 of the United States department of health and human services to

1 participate in the medical assistance state balancing incentive  
2 payments program created under the federal Patient Protection  
3 and Affordable Care Act. If selected for participation in the  
4 grant program, DHS is required to comply with the requirements  
5 of the program including developing a no wrong door single  
6 entry point system; providing a conflict-free case management  
7 system; providing core standardized assessment instruments  
8 within six months of submitting the application; and complying  
9 with data collection requirements relating to services,  
10 quality, and outcomes. Additionally, no later than October 1,  
11 2015, DHS is required to meet the applicable target spending  
12 percentage required under the state balancing incentive  
13 payments program to rebalance long-term care spending under the  
14 Medicaid program between home and community-based services and  
15 institution-based services. Funding received under the federal  
16 grant must be used for new or expanded medical assistance  
17 program noninstitutionally based long-term care services and  
18 supports.

19 The bill also requires that beginning July 1, 2012, home  
20 health care providers under the medical assistance program  
21 shall be reimbursed based on the Medicare low utilization  
22 payment adjustment methodology rather than a cost-based  
23 methodology.