House File 378 - Introduced

HOUSE FILE 378 BY RINKER

A BILL FOR

- 1 An Act relating to annual automatic increases in Medicaid
- 2 provider reimbursement rates.
- 3 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

1 Section 1. MEDICAID PROVIDER REIMBURSEMENT RATES - ANNUAL 2 AUTOMATIC INCREASES. Notwithstanding any provision of law 3 to the contrary regarding inflation factors or indexing of 4 Medicaid provider reimbursement rates, and in addition to any 5 other change in reimbursement rates specified for a fiscal 6 year, the department of health and human services shall 7 automatically increase the reimbursement rate of a provider 8 enrolled in the Medicaid program on July 1, annually, by either 9 applying the percentage equal to the increase in the consumer 10 price index for all urban consumers for the midwest region for 11 the most recent available twelve-month period published in the 12 federal register by the United States department of labor, 13 bureau of labor statistics, or by applying a two and one-half 14 percent increase, whichever is less, to the specific provider's 15 current reimbursement rate.

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EXPLANATION

17The inclusion of this explanation does not constitute agreement with18the explanation's substance by the members of the general assembly.

19 This bill provides for an annual automatic increase in the 20 reimbursement rates for Medicaid providers.

The bill provides that notwithstanding any provision of law to the contrary regarding inflation factors or indexing Medicaid provider reimbursement rates, and in addition to any other change in reimbursement rates specified for a fiscal year, the department of health and human services shall automatically increase the reimbursement rate of a Medicaid provider on July 1, annually, by either applying the percentage equal to the increase in the consumer price index for all urban consumers for the midwest region for the most recent available l2-month period published in the federal register by the United States department of labor, bureau of labor statistics, or by applying a 2.5 percent increase, whichever is less, to the specific provider's current reimbursement rate.

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