Session of 2020

SENATE BILL No. 409

By Committee on Ways and Means

2-11

AN ACT concerning skilled nursing care facilities; relating to the quality 1 2 care assessment imposed on such facilities; making such assessment 3 permanent; amending K.S.A. 75-7435 and repealing the existing 4 section. 5 6 *Be it enacted by the Legislature of the State of Kansas:* 7 Section 1. K.S.A. 75-7435 is hereby amended to read as follows: 75-8 7435. (a) As used in this section unless the context requires otherwise: 9 (1) Words and phrases have the meanings respectively ascribed 10 thereto mean the same as defined by K.S.A. 39-923, and amendments 11 thereto. 12 "Skilled nursing care facility" means a licensed nursing facility, (2)13 nursing facility for mental health as defined in K.S.A. 39-923, and amendments thereto, or a hospital long-term care unit licensed by the 14 department of health and environment, providing skilled nursing care, but 15 16 shall not include the Kansas soldiers' home or the Kansas veterans' home. (3) "Licensed bed" means those beds within a skilled nursing care 17 18 facility which that the facility is licensed to operate. 19 (4) "Agent" means the Kansas department for aging and disability 20 services. 21 "Continuing care retirement facility" means a facility holding a (5)22 certificate of registration issued by the commissioner of insurance pursuant 23 to K.S.A. 40-2235, and amendments thereto. 24 (b) (1) Except as otherwise provided in this section and in subsection 25 (f), there is hereby imposed and the secretary of health and environment 26 shall assess an annual assessment per licensed bed, hereinafter called a 27 quality care assessment, on each skilled nursing care facility. The 28 assessment on all facilities in the aggregate shall be an amount fixed by 29 rules and regulations of the secretary of health and environment, shall not 30 exceed \$4,908 annually per licensed bed, shall be imposed as an amount 31 per licensed bed and shall be imposed uniformly on all skilled nursing care 32 facilities except that the assessment rate for skilled nursing care facilities 33 that are part of a continuing care retirement facility, small skilled nursing care facilities and high medicaid volume skilled nursing care facilities 34 35 shall not exceed $\frac{1}{6}$ of the actual amount assessed all other skilled nursing care facilities. No rules and regulations of the secretary of health and 36

1 environment shall grant any exception to or exemption from the quality 2 care assessment. The assessment shall be paid quarterly, with one fourth of 3 the annual amount due by the 30th day after the end of the month of each 4 calendar guarter. The secretary of health and environment is authorized to 5 establish delayed payment schedules for skilled nursing care facilities 6 which that are unable to make quarterly payments when due under this 7 section due to financial difficulties, as determined by the secretary of 8 health and environment. As used in this paragraph, the terms "small skilled 9 nursing care facilities" and "high medicaid volume skilled nursing care 10 facilities" shall-have the meanings ascribed thereto be defined by the secretary of health and environment by rules and regulations, except that 11 12 the definition of "small skilled nursing care facility" shall not be-lower 13 fewer than 40 beds.

14 (2) Beds licensed after July 1 each year shall pay a prorated amount 15 of the applicable annual assessment so that the assessment applies only for 16 the days such new beds are licensed. The proration shall be calculated by 17 multiplying the applicable assessment by the percentage of days the beds 18 are licensed during the year. Any change-which *that* reduces the number of 19 licensed beds in a facility shall not result in a refund being issued to the 20 skilled nursing care facility.

21 (3) If an entity conducts, operates or maintains more than one 22 licensed skilled nursing care facility, the entity shall pay the nursing 23 facility assessment for each facility separately. No skilled nursing care 24 facility shall create a separate line-item charge for the purpose of passing 25 through the quality care assessment to residents. No skilled nursing care facility shall be guaranteed, expressly or otherwise, that any additional 26 27 moneys paid to the facility under this section will equal or exceed the 28 amount of its quality care assessment.

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

41 (c) Each skilled nursing care facility shall prepare and submit to the
 42 secretary of health and environment any additional information required
 43 and requested by the secretary of health and environment to implement or

administer the provisions of this section. Each skilled nursing care facility
 shall prepare and submit quarterly to the secretary for aging and disability
 services the rate the facility charges to private pay residents, and the
 secretary shall cause this information to be posted on the web site of the
 department for aging and disability services.

6 (d) (1) There is hereby created in the state treasury the quality care 7 fund, which shall to be administered by the secretary of health and 8 environment. All moneys received for the assessments imposed pursuant 9 to subsection (b), including any penalty assessments imposed thereon pursuant to subsection (e), shall be remitted to the state treasurer in 10 accordance with K.S.A. 75-4215, and amendments thereto. Upon receipt 11 12 of each such remittance, the state treasurer shall deposit the entire amount 13 in the state treasury to the credit of the quality care fund. All expenditures 14 from the quality care fund shall be made in accordance with appropriation 15 acts upon warrants of the director of accounts and reports issued pursuant 16 to vouchers approved by the secretary of health and environment or the 17 secretary's agent.

18 (2) All moneys in the quality care fund shall be used to finance 19 initiatives to maintain or improve the quantity and quality of skilled 20 nursing care in skilled nursing care facilities in Kansas. No moneys 21 credited to the quality care fund shall be transferred to or otherwise revert 22 to the state general fund at any time. Notwithstanding the provisions of 23 any other law to the contrary, if any moneys credited to the quality care 24 fund are transferred or otherwise revert to the state general fund, 30 days 25 following the transfer or reversion the quality care assessment shall 26 terminate and the secretary of health and environment shall discontinue the 27 imposition, assessment and collection of the assessment. Upon termination 28 of the assessment, all collected assessment revenues, including the moneys 29 inappropriately transferred or reverting to the state general fund, less any 30 amounts expended by the secretary of health and environment, shall be 31 returned on a pro rata basis to skilled nursing care facilities that paid the 32 assessment.

(3) Any moneys received by the state of Kansas from the federal
government as a result of federal financial participation in the state
medicaid program that are derived from the quality care assessment shall
be deposited in the quality care fund and used to finance actions to
maintain or increase healthcare in skilled nursing care facilities.

38 (4) Moneys in the fund shall be used exclusively for the following39 purposes:

40 (A) To pay administrative expenses incurred by the secretary of 41 health and environment or the agent in performing the activities authorized 42 by this section, except that such expenses shall not exceed a total of 1% of 43 the aggregate assessment funds collected pursuant to subsection (b) for the 1 prior fiscal year;

2 (B) to increase nursing facility payments to fund covered services to 3 medicaid beneficiaries within medicare upper payment limits, as may be 4 negotiated;

5 (C) to reimburse the medicaid share of the quality care assessment as 6 a pass-through medicaid allowable cost;

7 (D) to restore the medicaid rate reductions implemented January 1, 8 2010;

9 (E) to restore funding for fiscal year 2010, including rebasing and 10 inflation to be applied to rates in fiscal year 2011; *and*

(F) the remaining amount, if any, shall be expended first to increase 11 the direct health care costs center limitation up to 150% of the case mix 12 adjusted median, and then, if there are remaining amounts, for other 13 quality care enhancement of skilled nursing care facilities as approved by 14 15 the quality care improvement panel but shall not be used directly or 16 indirectly to replace existing state expenditures for payments to skilled 17 nursing care facilities for providing services pursuant to the state medicaid 18 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.

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

30 (A) The average daily balance of moneys in the quality care fund for31 the preceding month; and

32 (B) the net earnings rate of the pooled money investment portfolio for33 the preceding month.

34 (e) If a skilled nursing care facility fails to pay the full amount of the 35 quality care assessment imposed pursuant to subsection (b), when due and 36 payable, including any extensions of time granted under that subsection, 37 the secretary of health and environment shall assess a penalty in the 38 amount of the lesser of \$500 per day or 2% of the quality care assessment 39 owed for each day the assessment is delinquent. The secretary of health 40 and environment is authorized to establish delayed payment schedules for 41 skilled nursing care facilities that are unable to make installment payments 42 when due under this section because of financial difficulties, as determined 43 by the secretary of health and environment.

1 (f) (1) The secretary of health and environment shall assess and 2 collect quality care assessments imposed pursuant to subsection (b), 3 including any penalty assessments imposed thereon pursuant to subsection 4 (e), from skilled nursing care facilities on and after July 1, 2010, except 5 that no assessments or penalties shall be assessed under subsections (a) 6 through (h) until:

7 (A) An amendment to the state plan for medicaid, which *that* 8 increases the rates of payments made to skilled nursing care facilities for 9 providing services pursuant to the federal medicaid program and which 10 *that* is proposed for approval for purposes of subsections (a) through (h) is 11 approved by the federal government, in which case the initial assessment 12 is due-no *not* earlier than 60 days after state plan approval; and

13 (B) the skilled nursing care facilities have been compensated 14 retroactively within 60 days after state plan approval at the increased rate 15 for services provided pursuant to the federal medicaid program for the 16 period commencing on and after July 1, 2010.

17 (2) The secretary of health and environment shall implement and 18 administer the provisions of subsections (a) through (h) in a manner 19 consistent with applicable federal medicaid laws and regulations. The 20 secretary of health and environment shall seek any necessary approvals by 21 the federal government that are required for the implementation of 22 subsections (a) through (h).

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

(A) The medicaid plan amendment, which that increases the rates of
payments made to skilled nursing care facilities for providing services
pursuant to the federal medicaid program and which that is proposed for
approval for purposes of subsections (a) through (h) is not approved by the
federal United States 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. 75-5958, and amendments thereto;

(C) any funds are utilized to supplant funding for skilled nursing care
 facilities as required by subsection (g);

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

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

43 (g) On and after July 1, 2010, reimbursement rates for skilled nursing

care facilities shall be restored to those in effect during December 2009.
 No funds generated by the assessments or federal funds generated
 therefrom shall be utilized for such restoration, but such funds may be
 used to restore the rate reduction in effect from January 1, 2010, to June
 30, 2010.

6 (h) Rates of reimbursement shall not be limited by private pay 7 charges.

8 (i) If the provisions of subsections (a) through (h) are repealed, expire 9 or become null and void and have no further force and effect, all moneys 10 in the quality care fund-which *that* were paid under the provisions of 11 subsections (a) through (h) shall be returned to the skilled nursing care 12 facilities-which *that* paid such moneys on the basis on which such 13 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.

(k) For purposes of administering and selecting the reimbursements 16 17 of moneys in the quality care assessment fund, the quality care 18 improvement panel is hereby established. The panel shall consist of the 19 following members: Two persons appointed by leadingage Kansas; two 20 persons appointed by the Kansas health care association; one person 21 appointed by Kansas advocates for better care; one person appointed by 22 the Kansas hospital association; one person appointed by the governor 23 who is a member of the Kansas adult care executives association; one 24 person appointed by the governor who is a skilled nursing care facility 25 resident or the family member of such a resident; one person appointed by the Kansas foundation for medical care; one person appointed by the 26 27 governor from the department for aging and disability services; one person 28 appointed by the governor from the department of health and environment; one person appointed by the president of the senate who is affiliated with 29 30 an organization representing and advocating the interests of retired persons 31 in Kansas; and one person appointed by the speaker of the house of 32 representatives who is a volunteer with the office of the state long-term 33 care ombudsman established by the long-term care ombudsman act. The 34 person appointed by the governor from the department for aging and disability services and the person appointed by the governor from the 35 36 department of health and environment shall be nonvoting members of the 37 panel. The panel shall meet as soon as possible subsequent to the effective 38 date of this act and shall elect a chairperson from among the members 39 appointed by the trade organizations specified in this subsection. The 40 members of the quality care improvement panel shall serve without 41 compensation or expenses. The quality care improvement panel shall 42 report annually on or before January 10 to the senate committees on public 43 health and welfare and ways and means, the house committees on

appropriations and health and human services and the Robert G. (Bob) 1 2 Bethell joint committee on home and community based services and KanCare oversight concerning the progress to reduce the incidence of 3 antipsychotic drug use in elders with dementia, participation in the nursing 4 facility quality and efficiency outcome incentive factor, participation in the 5 6 culture change and person-centered care incentive program, annual 7 resident satisfaction ratings for Kansas skilled nursing care facilities and 8 the activities of the panel during the preceding calendar year and any 9 recommendations-which that the panel may have concerning the administration of and expenditures from the quality care assessment fund. 10

- 11 (1) The provisions of this section shall expire on July 1, 2020.
- 12 Sec. 2. K.S.A. 75-7435 is hereby repealed.

Sec. 3. This act shall take effect and be in force from and after itspublication in the statute book.