Proposed amendment

Senate Committee on Ways and Means

Prepared by Scott Abbott Assistant Revisor of Statutes

hospital providers through a combination of medicaid access improvement payments and increased medicaid rates on designated diagnostic related groupings, procedures or codes;

- $\frac{(2)}{(B)}$  not more than 20% of assessment revenues shall be disbursed to providers who are persons licensed to practice medicine and surgery or dentistry through increased medicaid rates on designated procedures and codes; and
- $\frac{(3)}{(C)}$  not more than 3.2% of hospital provider assessment revenues shall be used to fund healthcare access improvement programs in undergraduate, graduate or continuing medical education, including the medical student loan act.
- (2) Any increased medicaid rates implemented in accordance with this subsection after the effective date of the amendments made to this subsection by this act shall not be subsequently reduced. If, during any subsequent fiscal year, revenues from the hospital provider assessment are insufficient to fund such increased rates, the department of health and environment shall fund such increased rates using moneys appropriated to the department of health and environment from the state general fund or in any appropriate special revenue fund or funds during such fiscal year.
- (b) Assessment revenues generated from the health maintenance organization assessment shall be disbursed as follows:
- (1) Not less than 53% of health maintenance organization assessment revenues shall be disbursed to health maintenance organizations that have a contract with the department through increased medicaid capitation payments;
- (2) not more than 30% of health maintenance organization assessment revenues shall be disbursed to fund activities to increase access to dental care, primary care safety net clinics, increased medicaid rates on designated procedures and codes for providers who are persons licensed to practice dentistry, and home and community-based services;
- (3) not more than 17% of health maintenance organization assessment revenues shall be disbursed to pharmacy providers through increased medicaid rates.
- (c) For the purposes of administering and selecting the disbursements described in subsections (a) and (b) of this section, the healthcare access improvement panel is hereby established. The panel shall consist of the following: Three members appointed by the Kansas hospital association, two members who are persons licensed to practice medicine and surgery appointed by the Kansas medical society, one member appointed by each health maintenance organization that has a medicaid managed care contract with the Kansas department for aging and disability services of health and environment, one member appointed by the community care network of Kansas—association for the medically underserved; and one

[stricken material in lines 12 through 33]

(2) The department of health and environment, with approval of the healthcare access improvement panel, shall make adjustments to the disbursement of moneys for medicaid rates in accordance with this subsection on July 1 of each year to cause such adjusted medicaid rates to be paid solely from moneys appropriated from the healthcare access improvement fund. The healthcare access improvement fund shall not be supplemented by appropriations from the state general fund for the purpose of paying increased medicaid rates under this subsection.

SB 225

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representative of the department of health and environment appointed by the governor. The panel shall meet as soon as possible subsequent to the effective date of this aet and shall elect a chairperson from among the members appointed by the Kansas hospital association. A representative of the panel shall be required to make an annual report to the legislature regarding the collection and distribution of all funds received and distributed under this act.

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- (d) The healthcare access improvement panel shall submit a report to the house of representatives standing committee on appropriations and the senate standing committee on ways and means on or before January 10, 2022, and on or before the first day of each third regular session of the legislature thereafter, that includes the expenditures needed to maintain increased medicaid rates at the fiscal year 2020 level and a recommendation on whether the hospital provider assessment rate should be adjusted to address needed expenditures.
- (e) (1) The department of health and environment shall submit to the United States centers for medicare and medicaid services any approval request necessary to implement the amendments made to this section by this act.
- (2) The department of health and environment shall cause notice of such approval by the United States centers for medicare and medicaid services to be published in the Kansas register.
- (2) The amendments made to subsections (a), (c) and (d) by this act shall take effect on and after January 1 or July 1 immediately following such publication.
  - Sec. 3. K.S.A. 65-6208 and 65-6218 are hereby repealed.
- Sec. 4. This act shall take effect and be in force from and after its publication in the Kansas register.

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, and such report shall include analysis demonstrating that medicaid rates adjusted in accordance with subsection (a) are budget neutral to the state general fund.

[stricken material in lines 8 through 15]

And by redesignating subelements accordingly