# 2021 -- S 0041 SUBSTITUTE A

LC000317/SUB A

#### STATE $\mathbf{OF}$ RHODE ISLAND

#### IN GENERAL ASSEMBLY

#### **JANUARY SESSION, A.D. 2021**

#### AN ACT

#### RELATING TO PUBLIC FINANCE -- MEDICAL ASSISTANCE AND PUBLIC ASSISTANCE CASELOAD ESTIMATING CONFERENCES

Introduced By: Senators DiPalma, Seveney, Paolino, Pearson, and Murray

Date Introduced: January 19, 2021

Referred To: Senate Finance

It is enacted by the General Assembly as follows:

1 SECTION 1. Sections 35-17-1 and 35-17-3 of the General Laws in Chapter 35-17 entitled

"Medical Assistance and Public Assistance Caseload Estimating Conferences" are hereby amended

3 to read as follows:

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### 35-17-1. Purpose and membership.

5 (a) In order to provide for a more stable and accurate method of financial planning and

budgeting, it is hereby declared the intention of the legislature that there be a procedure for the

7 determination of official estimates of anticipated medical assistance expenditures and public

assistance caseloads, upon which the executive budget shall be based and for which appropriations

9 by the general assembly shall be made.

10 (b) The state budget officer, the house fiscal advisor, and the senate fiscal advisor shall

meet in regularly scheduled caseload estimating conferences (C.E.C.). These conferences shall be

open public meetings.

13 (c) The chairpersonship of each regularly scheduled C.E.C. will rotate among the state

budget officer, the house fiscal advisor, and the senate fiscal advisor, hereinafter referred to as

principals. The schedule shall be arranged so that no chairperson shall preside over two (2)

successive regularly scheduled conferences on the same subject. 16

(d) Representatives of all state agencies are to participate in all conferences for which their

18 input is germane.

(e) The department of human services shall provide monthly data to the members of the caseload estimating conference by the fifteenth day of the following month. Monthly data shall include, but is not limited to, actual caseloads and expenditures for the following case assistance programs: Rhode Island Works, SSI state program, general public assistance, and child care. For individuals eligible to receive the payment under § 40-6-27(a)(1)(vi), the report shall include the number of individuals enrolled in a managed care plan receiving long-term care services and supports and the number receiving fee-for-service benefits. The executive office of health and human services shall report relevant caseload information and expenditures for the following medical assistance categories: hospitals, long-term care, managed care, pharmacy, and other medical services. In the category of managed care, caseload information and expenditures for the following populations shall be separately identified and reported: children with disabilities, children in foster care, and children receiving adoption assistance and RIte Share enrollees under § 40-8.4-12(j). The information shall include the number of Medicaid recipients whose estate may be subject to a recovery and the anticipated amount to be collected from those subject to recovery, the total recoveries collected each month and number of estates attached to the collections and each month, the number of open cases and the number of cases that have been open longer than three months.

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(f) Beginning July 1, 2021, the department of behavioral healthcare, developmental disabilities and hospitals (the "department") shall provide monthly data to the members of the caseload estimating conference by the fifteenth day of the following month. Monthly data shall include, but is not limited to, actual caseloads and expenditures for the private community developmental disabilities services program. Information shall include, but not be limited to, the number of cases and expenditures from the beginning of the fiscal year at the beginning of the prior month; cases added and denied during the prior month; expenditures made; and the number of cases and expenditures at the end of the month. The information concerning cases added and denied shall include summary information and profiles of the service-demand request for eligible adults meeting the state statutory definition for services from the division of developmental disabilities as determined by the division, including age, Medicaid eligibility and agency selection placement with a list of the services provided, and the reasons for the determinations of ineligibility for those cases denied. The department shall also provide, monthly, the number of individuals in a shared-living arrangement and how many may have returned to a twenty-four (24) hour residential placement in that month. The department shall also report, monthly, any and all information for the consent decree that has been submitted to the federal court as well as the number of unduplicated individuals employed; the place of employment; and the number of hours working. The department shall also provide the amount of funding allocated to individuals above the assigned resource levels; the number of individuals and the assigned resource level; and the reasons for the approved additional resources. The department will also collect and forward to the house fiscal advisor, the senate fiscal advisor, and the state budget officer, by November 1 of each year, the annual cost reports for each community-based provider for the prior fiscal year. The department shall also provide the amount of patient liability to be collected and the amount collected as well as the number of individuals who have a financial obligation. The department will also provide a list of community-based providers awarded an advanced payment for residential and community-based day programs; the address for each property; and the value of the advancement. If the property is sold, the department must report the final sale, including the purchaser, the value of the sale, and the name of the agency that operated the facility. If a residential property is sold, the department must provide the number of individuals residing in the home at the time of sale and identify the type of residential placement to which the individual(s) will be moving. The department must report if the property will continue to be licensed as a residential facility. The department will also report any newly licensed twentyfour (24) hour group home; the provider operating the facility; and the number of individuals residing in the facility. Prior to December 1, 2017, the department will provide the authorizations for community-based and day programs, including the unique number of individuals eligible to receive the services and at the end of each month the unique number of individuals who participated in the programs and claims processed.

(g) The executive office of health and human services shall provide direct assistance to the department of behavioral healthcare, developmental disabilities and hospitals to facilitate compliance with the monthly reporting requirements in addition to preparation for the caseload estimating conferences.

#### 35-17-3. Additional meetings.

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(a) Any time during a fiscal year that any principal feels that the recommendations of the caseload estimating conference are no longer valid, then that principal, with the appropriate notice, may convene a caseload estimating conference. The principal requesting the additional conference shall be the chairperson for that conference.

(b) If at any time during a fiscal year any participant feels that the recommendations of the caseload estimating conference are no longer valid with the respect to their caseload sources then that participant has a duty to and shall notify each of the principals. The director of the department of human services secretary of the executive office of health and human services shall review the concerns of each participant and determine whether the problems are sufficient to request an additional conference.

SECTION 2. Section 40.1-22-39 of the General Laws in Chapter 40.1-22 entitled "Developmental Disabilities" is hereby repealed.

#### 40.1-22-39. Monthly reports to the general assembly.

On or before the fifteenth (15th) day of each month, the department shall provide a monthly report of monthly caseload and expenditure data, pertaining to eligible, developmentally disabled adults, to the chairperson of the house finance committee; the chairperson of the senate finance committee; the house fiscal advisor; the senate fiscal advisor; and the state budget officer. The monthly report shall be in such form, and in such number of copies, and with such explanation as the house and senate fiscal advisors may require. It shall include, but is not limited to, the number of cases and expenditures from the beginning of the fiscal year at the beginning of the prior month; cases added and denied during the prior month; expenditures made; and the number of cases and expenditures at the end of the month. The information concerning cases added and denied shall include summary information and profiles of the service demand request for eligible adults meeting the state statutory definition for services from the division of developmental disabilities as determined by the division, including age, Medicaid eligibility and agency selection placement with a list of the services provided, and the reasons for the determinations of ineligibility for those cases denied.

The department shall also provide, monthly, the number of individuals in a shared living arrangement and how many may have returned to a 24-hour residential placement in that month. The department shall also report, monthly, any and all information for the consent decree that has been submitted to the federal court as well as the number of unduplicated individuals employed; the place of employment; and the number of hours working.

The department shall also provide the amount of funding allocated to individuals above the assigned resource levels; the number of individuals and the assigned resource level; and the reasons for the approved additional resources. The department will also collect and forward to the house fiscal advisor, the senate fiscal advisor, and the state budget officer, by November 1 of each year, the annual cost reports for each community based provider for the prior fiscal year.

The department shall also provide the amount of patient liability to be collected and the amount collected as well as the number of individuals who have a financial obligation.

The department will also provide a list of community based providers awarded an advanced payment for residential and community based day programs; the address for each property; and the value of the advancement. If the property is sold, the department must report the final sale, including the purchaser, the value of the sale, and the name of the agency that operated the facility. If residential property, the department must provide the number of individuals residing

1	in the home at the time of sale and identify the type of residential placement that the individual(s)
2	will be moving to. The department must report if the property will continue to be licensed as a
3	residential facility. The department will also report any newly licensed twenty-four hour (24) group
4	home; the provider operating the facility; and the number of individuals residing in the facility.
5	Prior to December 1, 2017, the department will provide the authorizations for community-
6	based and day programs, including the unique number of individuals eligible to receive the services
7	and at the end of each month the unique number of individuals who participated in the programs
8	and claims processed.

SECTION 3. This act shall take effect upon passage.

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# **EXPLANATION**

# BY THE LEGISLATIVE COUNCIL

OF

# AN ACT

# RELATING TO PUBLIC FINANCE -- MEDICAL ASSISTANCE AND PUBLIC ASSISTANCE CASELOAD ESTIMATING CONFERENCES

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This act would require behavioral healthcare, development disabilities and hospitals to provide monthly data to the members of the case load estimating conference. This act would also repeal the monthly reporting requirement to the general assembly.

This act would take effect upon passage.

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