## LEGISLATIVE FISCAL OFFICE Fiscal Note



Fiscal Note On: **HCR** 

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**Analyst:** Shawn Hotstream

HLS 21RS 531

Bill Text Version: ENGROSSED

Opp. Chamb. Action: w/ SEN COMM AMD

Proposed Amd.: Sub. Bill For.:

**Date:** May 27, 2021

8:34 AM

Author: SCHEXNAYDER

Dept./Agy.:LDH/Medicaid

Subject: hospital stabilization formula

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HOSPITALS EG1 +\$106,646,197 SD RV See Note Provides for a hospital stabilization formula

Proposed resolution provides for a hospital assessment. Proposed resolution provides the total assessment for the state FY 22 shall not exceed the lessor of the following: 1) the state portion of the costs (non federal share) associated with Medicaid expansion that are directly attributable to payments to hospitals, excluding costs associated with Full Medicaid Pricing, supplemental payments and quality program payments; or 2) 1 percent of the total inpatient and outpatient hospital net patient revenue of all hospitals included in the assessment (as reported in the Medicare cost report ending in state FY 15. Proposed resolution provides that LDH pay hospital reimbursement rates in an amount no less than the reimbursement rates in effect for dates of service on or after January 1, 2021. Proposed resolution provides LDH to submit any state plan amendment to the Centers for Medicare and Medicaid no later than 120 days from the date the resolution is adopted. Proposed resolution provides the legislative auditor shall collect any information from LDH to provide a detailed analysis of the Medicaid hospital reimbursement methodology and supplemental payment system. Proposed resolution exempts any hospital with 32 or fewer beds from the hospital tax, subject to CMS approval.

<b>EXPENDITURES</b>	2021-22	2022-23	2023-24	2024-25	<u>2025-26</u>	<b>5 -YEAR TOTAL</b>
State Gen. Fd.	\$0	\$0	\$0	\$0	\$0	\$0
Agy. Self-Gen.	\$0	\$0	\$0	\$0	\$0	\$0
Ded./Other	\$106,646,197	\$81,911,202	\$81,911,202	\$81,911,202	\$81,911,202	\$434,291,005
Federal Funds	\$474,670,997	\$173,025,622	\$173,025,622	\$173,025,622	\$173,025,622	\$1,166,773,485
Local Funds	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>
Annual Total	\$581,317,194	\$254,936,824	\$254,936,824	\$254,936,824	\$254,936,824	\$1,601,064,490
REVENUES	2021-22	2022-23	2023-24	2024-25	2025-26	5 -YEAR TOTAL
State Gen. Fd.	\$0	\$0	\$0	\$0	\$0	\$0
Agy. Self-Gen.	\$0	\$0	\$0	\$0	\$0	\$0
Ded./Other	\$106,646,197	\$0	\$0	\$0	\$0	\$106,646,197
Federal Funds	\$474,670,997	\$0	\$0	\$0	\$0	\$474,670,997
Local Funds	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>
Local Fullus						

## **EXPENDITURE EXPLANATION**

The proposed resolution requires that the hospital reimbursement rates in effect on or after January 1, 2021, be maintained. The fiscal note assumes the cumulative rate increases authorized under prior hospital assessment resolutions remain in effect in future years and are not conditioned upon any future assessments (reflected in the expenditure table above for FY 23 through FY 26). Projections provided by LDH reflect the aggregate rate increases are estimated to cost \$254.9 M (\$74 M statutory dedication tax revenue used as state match) annually. The illustration below reflects the projected expenditure allocation of the FY 22 assessment revenue with associated federal matching funds.

		Balance FY 22 tax revenue	
	FY 22 Rate	allocated for Medicaid	FY 22
Expenditure:	<u>Increase</u>	Expansion costs	<u>Total</u>
Stat Ded.	\$74,008,160	\$32,638,037	\$10 <del>6,64</del> 6,197
<u>Federal</u>	<u>\$180,928,664</u>	<u>\$293,742,333</u>	<u>\$474,670,997</u>
Total	\$254,936,824*	\$326,380,370	\$581,317,194

<sup>\*</sup>The \$254.9 million is reflected in the totals for FY 23 through FY 26 with differences in the makeup of dedicated and federal funds due to Federal Medical Assistance Percentage (FMAP) rates.

## **REVENUE EXPLANATION**

Proposed resolution will generate approximately \$106.6 M in statutory dedication revenue (Hospital Stabilization Fund) in FY 22. The resolution provides that LDH shall calculate, levy, and collect a hospital provider assessment on certain hospitals. The annual assessment is calculated on the lesser of the following: 1) the state portion of the inpatient hospital costs associated with the Medicaid expansion (estimated to be \$170,676,371); or 2) 1% of the total inpatient and outpatient net patient revenues of all hospitals included in the assessment as reported in the Medicare cost report ending in state FY 15 (estimated to be \$113,459,367). However, only \$106.6 M is projected to be collected in FY 22, based on a Senate Finance Committee amendment that exempted approximately 59 hospitals from the tax (all hospitals with 32 or fewer beds are exempted). Assuming the exemptions, the assessment for FY 22 will be \$106.6 M, reflected as a statutory dedication revenue increase in the revenue table above. The statutory dedication revenue generated from this assessment will be used to draw federal matching funds for inpatient and outpatient rate increases and for a portion of the Medicaid expansion costs in FY 22. Revenue is not reflected beyond FY 21 as future resolutions must be filed and passed annually by the legislature to generate additional assessment revenue.

Note: A Senate Finance Committee amendment that exempts any hospital with 32 or fewer beds from the hospital assessment is subject to CMS approval.

Senate <u>Dual Referral Rules</u>   13.5.1 >= \$100,000 Annual Fiscal Cost {S & H}	House 6.8(F)(1) >= \$100,000 SGF Fiscal Cost {H & S}	Alan M. Bodberger
13.5.2 >= \$500,000 Annual Tax or Fee Change {S & H}	6.8(G) >= \$500,000 Tax or Fee Increase	Alan M. Boxberger Staff Director