HB 2216-2 (LC 711) 3/6/13 (LHF/ps)

## PROPOSED AMENDMENTS TO HOUSE BILL 2216

On page 1 of the printed bill, delete lines 3 through 6 and insert "414.746 and sections 2, 3, 6, 7, 8, 9, 10, 12 and 13, chapter 736, Oregon Laws 2003; repealing ORS 414.746;".

4 In line 7, delete "Oregon Laws 2009;".

5 Delete lines 10 through 30 and delete pages 2 through 9 and insert:

"SECTION 1. (1) As used in this section, 'hospital' means a hospital
that is subject to the assessment imposed under section 2, chapter 736,
Oregon Laws 2003.

9 "(2) In consultation with the President of the Senate and the 10 Speaker of the House of Representatives, the Director of the Oregon 11 Health Authority shall appoint a hospital performance metrics advi-12 sory committee consisting of nine members, including:

13 "(a) Four members who represent hospitals;

"(b) Three members who have expertise in measuring health out comes; and

16 "(c) Two members who represent coordinated care organizations.

17 "(3) The hospital performance metrics advisory committee shall 18 recommend three to five performance standards that are reasonably 19 attainable by hospitals within the biennium beginning July 1, 2013, and 20 that are consistent with state and national quality standards.

"(4) The Oregon Health Authority shall adopt by rule the proce dures for distributing to hospitals the moneys described in section 9

(2)(d), chapter 736, Oregon Laws 2003, to ensure that such moneys are
 distributed as follows:

"(a) The authority shall distribute 50 percent of the moneys based
upon each hospital's compliance with data submission requirements.

"(b) The authority shall distribute the remainder of the moneys
based upon each hospital's achievement of the performance standards
recommended by the hospital performance metrics advisory committee
under subsection (3) of this section.

"<u>SECTION 2.</u> Section 2, chapter 736, Oregon Laws 2003, as amended by
section 1, chapter 780, Oregon Laws 2007, section 51, chapter 828, Oregon
Laws 2009, and section 17, chapter 867, Oregon Laws 2009, is amended to
read:

"Sec. 2. (1) An assessment is imposed on the net revenue of each hospital 13 in this state that is not a waivered hospital. The assessment shall be imposed 14 at a rate determined by the Director of the Oregon Health Authority by rule 15 that is the director's best estimate of the rate needed to fund the services 16 and costs identified in section 9, chapter 736, Oregon Laws 2003. The rate 17 of assessment shall be imposed on the net revenue of each hospital subject 18 to assessment. The director shall consult with representatives of hospitals 19 before setting the assessment. 20

"(2) The assessment shall be reported on a form prescribed by the Oregon Health Authority and shall contain the information required to be reported by the authority. The assessment form shall be filed with the authority on or before the 75th day following the end of the calendar quarter for which the assessment is being reported. Except as provided in subsection (6) of this section, the hospital shall pay the assessment at the time the hospital files the assessment report. The payment shall accompany the report.

"(3)(a) To the extent permitted by federal law, aggregate assessments imposed under this section may not exceed the total of the following amounts received by the hospitals that are reimbursed by Medicare based on diag1 nostic related groups:

2 "[(A) The adjustment to the capitation rate paid to Medicaid managed care
3 organizations under section 15, chapter 867, Oregon Laws 2009;]

4 "[(B)] (A) 30 percent of payments made to **the** hospitals on a fee-for-5 service basis by the authority for inpatient hospital services; [and]

6 "[(C)] (B) 41 percent of payments made to the hospitals on a fee-for-7 service basis by the authority for outpatient hospital services[.]; and

"(C) Payments made to the hospitals using a payment methodology
established by the authority that advances the goals of the Oregon
Integrated and Coordinated Health Care Delivery System described in
ORS 414.620 (3).

"(b) Notwithstanding paragraph (a) of this subsection, aggregate assessments imposed for the biennium beginning July 1, [2009] **2013**, may exceed the total of the amounts described in paragraph (a) of this subsection to the extent necessary to compensate for any reduction of funding in the legislatively adopted budget for that biennium for hospital services under ORS [414.705 to 414.750] **414.631**, **414.651 and 414.688 to 414.750**.

"(4) Notwithstanding subsection (3) of this section, a hospital is not guaranteed that any additional moneys paid to the hospital in the form of payments for services shall equal or exceed the amount of the assessment paid by the hospital.

"(5) Hospitals operated by the United States Department of Veterans Affairs and pediatric specialty hospitals providing care to children at no charge
are exempt from the assessment imposed under this section.

<sup>25</sup> "(6)(a) The authority shall develop a schedule for collection of the as-<sup>26</sup> sessment for the calendar quarter ending September 30, [2013] **2015**, that will <sup>27</sup> result in the collection occurring between December 15, [2013] **2015**, and the <sup>28</sup> time all Medicaid cost settlements are finalized for that calendar quarter.

"(b) The authority shall prescribe by rule criteria for late payment ofassessments.

"SECTION 3. Section 3, chapter 736, Oregon Laws 2003, is amended to
read:

"Sec. 3. (1) Notwithstanding section 2, [of this 2003 Act] chapter 736,
Oregon Laws 2003, the Director of [Human Services] the Oregon Health
Authority shall reduce the rate of assessment imposed under section 2, [of
this 2003 Act] chapter 736, Oregon Laws 2003, to the maximum rate allowed
under federal law if the reduction is required to comply with federal law.

"(2) If federal law requires a reduction in the rate of assessments,
the director shall, after consulting with representatives of the hospitals that are subject to the assessments, first reduce the distribution
of moneys described in section 9 (2)(d), chapter 736, Oregon Laws 2003,
by a corresponding amount.

"SECTION 4. Section 6, chapter 736, Oregon Laws 2003, is amended to
 read:

<sup>15</sup> "Sec. 6. (1) Any hospital that has paid an amount that is not required <sup>16</sup> under sections 1 to 9, [of this 2003 Act] chapter 736, Oregon Laws 2003, <sup>17</sup> may file a claim for refund with the [Department of Human Services] Oregon <sup>18</sup> Health Authority.

"(2) Any hospital that is aggrieved by an action of the [Department of Human Services] authority or by an action of the Director of [Human Services] the Oregon Health Authority taken pursuant to subsection (1) of this section shall be entitled to notice and an opportunity for a contested case hearing under ORS chapter 183.

<sup>24</sup> "<u>SECTION 5.</u> Section 7, chapter 736, Oregon Laws 2003, is amended to <sup>25</sup> read:

"Sec. 7. The [Department of Human Services] Oregon Health Authority may audit the records of any hospital in this state to determine compliance with sections 1 to 9, [of this 2003 Act] chapter 736, Oregon Laws 2003, and section 1 of this 2013 Act. The [department] authority may audit records at any time for a period of five years following the date an assessment is due

HB 2216-2 3/6/13 Proposed Amendments to HB 2216 1 to be reported and paid under section 2, [of this 2003 Act] chapter 736,

2 **Oregon Laws 2003**.

"SECTION 6. Section 8, chapter 736, Oregon Laws 2003, as amended by
section 1, chapter 757, Oregon Laws 2005, is amended to read:

"Sec. 8. Amounts collected by the [Department of Human Services]  $\mathbf{5}$ **Oregon Health Authority** from the assessments imposed under section 2, 6 chapter 736, Oregon Laws 2003, shall be deposited in the Hospital Quality 7 Assurance Fund established under section 9, chapter 736, Oregon Laws 2003. 8 **"SECTION 7.** Section 9, chapter 736, Oregon Laws 2003, as amended by 9 section 2, chapter 757, Oregon Laws 2005, section 2, chapter 780, Oregon 10 Laws 2007, section 53, chapter 828, Oregon Laws 2009, section 19, chapter 867, 11 Oregon Laws 2009, and section 59, chapter 602, Oregon Laws 2011, is 12 amended to read: 13

"Sec. 9. (1) The Hospital Quality Assurance Fund is established in the State Treasury, separate and distinct from the General Fund. Interest earned by the Hospital Quality Assurance Fund shall be credited to the Hospital Quality Assurance Fund.

"(2) Amounts in the Hospital Quality Assurance Fund are continuously
 appropriated to the Oregon Health Authority for the purpose of:

"(a) Paying refunds due under section 6, chapter 736, Oregon Laws 2003
[, and];

"(b) Funding services under ORS [414.705 to 414.750] 414.631, 414.651 and
414.688 to 414.750, including but not limited to[:]

<sup>24</sup> "[(*a*)] increasing reimbursement rates for inpatient and outpatient hospi-<sup>25</sup> tal services under ORS [414.705 to 414.750] **414.631, 414.651 and 414.688 to** <sup>26</sup> **414.750**;

"[(b) Maintaining, expanding or modifying services for persons described
 in ORS 414.025 (3)(s);]

"[(c) Maintaining or increasing the number of persons described in ORS
 414.025 (3)(s) who are enrolled in the medical assistance program; and]

HB 2216-2 3/6/13 Proposed Amendments to HB 2216 "[(d)] (c) Making payments described in section 2 (3)(a)(C), chapter
736, Oregon Laws 2003;

"(d) Making distributions, as described in section 1 (4) of this 2013
Act, of an amount of moneys equal to the federal financial participation received from one percentage point of the rate assessed under
section 2, chapter 736, Oregon Laws 2003; and

"(e) Paying administrative costs incurred by the authority to administer
section 1 of this 2013 Act and the assessments imposed under section 2,
chapter 736, Oregon Laws 2003.

"(3) Except for assessments imposed pursuant to section 2 (3)(b), chapter
736, Oregon Laws 2003, the authority may not use moneys from the Hospital
Quality Assurance Fund to supplant, directly or indirectly, other moneys
made available to fund services described in subsection (2) of this section.

"SECTION 8. Section 10, chapter 736, Oregon Laws 2003, as amended by
 section 3, chapter 780, Oregon Laws 2007, and section 20, chapter 867, Oregon
 Laws 2009, is amended to read:

"Sec. 10. Sections 1 to 9, chapter 736, Oregon Laws 2003, apply to net revenues earned by hospitals during a period beginning October 1, [2009] 2013, and ending the earlier of September 30, [2013] 2015, or the date on which the assessment no longer qualifies for federal [matching funds] financial participation under Title XIX or XXI of the Social Security Act.

SECTION 9. Section 12, chapter 736, Oregon Laws 2003, as amended by
 section 4, chapter 780, Oregon Laws 2007, and section 21, chapter 867, Oregon
 Laws 2009, is amended to read:

Sec. 12. Sections 1 to 9, chapter 736, Oregon Laws 2003, and section 1
of this 2013 Act are repealed on January 2, [2015] 2017.

"<u>SECTION 10.</u> Section 13, chapter 736, Oregon Laws 2003, as amended
by section 5, chapter 780, Oregon Laws 2007, and section 22, chapter 867,
Oregon Laws 2009, is amended to read:

<sup>30</sup> "Sec. 13. Nothing in the repeal of sections 1 to 9, chapter 736, Oregon

HB 2216-2 3/6/13 Proposed Amendments to HB 2216 Laws 2003, and section 1 of this 2013 Act by section 12, chapter 736, Oregon
 Laws 2003, affects the imposition and collection of a hospital assessment
 under sections 1 to 9, chapter 736, Oregon Laws 2003, for a calendar quarter
 beginning before September 30, [2013] 2015.

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"SECTION 11. ORS 414.746 is amended to read:

"414.746. (1) The Oregon Health Authority [shall] may establish an adjustment to the payments made to a coordinated care organization [defined
in section 9, chapter 867, Oregon Laws 2009].

9 "(2) The contracts entered into between the authority and coordinated 10 care organizations [*must*] **may** include provisions that ensure that the ad-11 justment to the payments established under subsection (1) of this section is 12 distributed by the coordinated care organizations to hospitals located in 13 Oregon that receive Medicare reimbursement based upon diagnostic related 14 groups.

<sup>15</sup> "[(3) The adjustment to the capitation rate paid to coordinated care organ-<sup>16</sup> izations shall be established in an amount consistent with the legislatively <sup>17</sup> adopted budget and the aggregate assessment imposed pursuant to section 2, <sup>18</sup> chapter 736, Oregon Laws 2003.]

## 19 "SECTION 12. ORS 414.746 is repealed.

20 "SECTION 13. (1) The Director of the Oregon Health Authority shall 21 apply to the federal Centers for Medicare and Medicaid Services for 22 any approval necessary to secure federal financial participation in the 23 distributions described in section 9 (2)(d), chapter 736, Oregon Laws 24 2003, as amended by section 7 of this 2013 Act, and in using the pay-25 ment methodology described in section 2 (3)(a)(C), chapter 736, Oregon 26 Laws 2003, as amended by section 2 of this 2013 Act.

"(2) The Director of the Oregon Health Authority shall immediately
 notify the Legislative Counsel upon receipt of federal approval or dis approval under this section.

30 "SECTION 14. (1) Section 1 of this 2013 Act and the amendments to

ORS 414.746 and sections 2, 3, 6, 7, 8, 9, 10, 12 and 13, chapter 736, Oregon Laws 2003, by sections 2 to 11 of this 2013 Act become operative on the date that the Director of the Oregon Health Authority notifies the Legislative Counsel that the director received federal approval as described in section 13 of this 2013 Act.

"(2) The repeal of ORS 414.746 by section 12 of this 2013 Act becomes
operative April 1, 2014.

8 "SECTION 15. This 2013 Act takes effect on the 91st day after the 9 date on which the 2013 regular session of the Seventy-seventh Legis-10 lative Assembly adjourns sine die.".

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