

Stricken language would be deleted from and underlined language would be added to present law.

State of Arkansas
92nd General Assembly
Regular Session, 2019

As Engrossed: H4/5/19
A Bill

HOUSE BILL 1975

By: Representative Boyd
By: Senator Flippo

For An Act To Be Entitled

AN ACT TO ESTABLISH THE MEDICAID REIMBURSEMENT RATE REVIEW ACT OF 2019; TO PROVIDE FOR ANNUAL MEDICAID REIMBURSEMENT RATE REVIEWS OF MEDICAID REIMBURSEMENT RATES AND METHODOLOGIES; TO DECLARE AN EMERGENCY; AND FOR OTHER PURPOSES.

Subtitle

TO ESTABLISH THE MEDICAID REIMBURSEMENT RATE REVIEW ACT OF 2019; TO PROVIDE FOR ANNUAL MEDICAID REIMBURSEMENT RATE REVIEWS OF MEDICAID REIMBURSEMENT RATES AND METHODOLOGIES; AND TO DECLARE AN EMERGENCY.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF ARKANSAS:

SECTION 1. Arkansas Code Title 20, Chapter 77, is amended to add an additional subchapter to read as follows:

Subchapter 29 – Medicaid Reimbursement Rate Review Act of 2019

20-77-2901. Title.

This subchapter shall be known and may be cited as the “Medicaid Reimbursement Rate Review Act of 2019.”

20-77-2902. Reimbursement rate review.

(a) The Department of Human Services shall establish a systematic



approach to review Medicaid reimbursement rates for all types of Medicaid providers on a regular, periodic schedule.

(b) The Medicaid reimbursement rate review shall:

(1) Ensure that Medicaid reimbursement rates under the service categories reported to the Centers for Medicare and Medicaid Services by the department are reviewed at least once every four (4) years;

(2) Prioritize types of Medicaid providers;

(3) Consider:

(A) The availability and access to care in each geographic region of the state; and

(B) The substantiality of Medicaid reimbursement rates while attracting a sufficient number of healthcare providers to deliver quality services; and

(4) Reward efficiency and quality of care.

(c) The department may require the submission of cost reports, Medicaid provider surveys, and other materials and data in order to complete the Medicaid reimbursement rate review.

(d) In advance of any Medicaid reimbursement rate review, the department shall report the Medicaid provider types to be reviewed in a quarterly report to:

(1) The Legislative Council;

(2) The Bureau of Legislative Research; and

(3) Arkansas Legislative Audit.

SECTION 2. EMERGENCY CLAUSE. It is found and determined by the General Assembly of the State of Arkansas that increases in the minimum wage have put Medicaid providers at risk of being unable to continue to provide healthcare services with current Medicaid reimbursement rates; that a reimbursement rate review in response to the increases in the minimum wage should be implemented as soon as possible in order to allow Medicaid providers to continue to provide services to Medicaid beneficiaries; that this act requires the Department of Human Services to implement a reimbursement rate review methodology and procedure; that this act requires the department to establish a Medicaid reimbursement rate review; that the establishment of the Medicaid reimbursement rate review may require the department to promulgate rules or submit a state plan amendment or waiver, or

both; and that this act is immediately necessary because the department needs to be able to promulgate rules or submit a state plan amendment request or waiver request, or both, at the earliest possible date to ensure certainty in the reimbursement rates of the Arkansas Medicaid Program. Therefore, an emergency is declared to exist, and this act being immediately necessary for the preservation of the public peace, health, and safety shall become effective on:

(1) The date of its approval by the Governor;

(2) If the bill is neither approved nor vetoed by the Governor, the expiration of the period of time during which the Governor may veto the bill; or

(3) If the bill is vetoed by the Governor and the veto is overridden, the date the last house overrides the veto.

/s/Boyd