#### FIRST ENGROSSMENT

Sixty-fifth Legislative Assembly of North Dakota

**ENGROSSED HOUSE BILL NO. 1012** 

Introduced by

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**Appropriations Committee** 

1 A BILL for an Act to provide an appropriation for defraying the expenses of the department of 2 human services; to authorize the department of human services to convey land in Walsh 3 County; to amend and reenact section 50-24.1-37 subsection 1 of section 23-09.3-01.1 and 4 subsection 1 of section 23-16-01.1 of the North Dakota Century Code, relating to Medicaid-5 expansion; to repeal section 50-24.1-37 of the North Dakota Century Code, relating to the 6 Medicaid expansion programthe moratorium on basic care and nursing facility bed capacity; to 7 provide for exemptions; to provide statements of legislative intent; to provide a report or reports 8 to the legislative management; to provide for a legislative management study; to provide 9 appropriations; to provide an expiration date; to provide a contingent effective date; and to 10 declare an emergency.

#### BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:

12 SECTION 1. APPROPRIATION. The funds provided in this section, or so much of the 13 funds as may be necessary, are appropriated out of any moneys in the general fund in the state 14 treasury, not otherwise appropriated, and from special funds derived from federal funds and 15 other income, to the department of human services for the purpose of defraying the expenses 16 of its various divisions, for the biennium beginning July 1, 2017, and ending June 30, 2019, as 17 follows: Subdivision 1 18

Subdivision	1.

	MANAGEMENT		
		Adjustments or	
	Base Level	<b>Enhancements</b>	<u>Appropriation</u>
Salaries and wages	\$28,049,386	(\$4,612,071)	<del>\$23,437,315</del>
Operating expenses	87,542,966	71,922,860	159,465,826
Capital assets	26,000	(26,000)	θ

MANAGEMENT

## Sixty-fifth Legislative Assembly

1	Grants	<u>0</u>	204,000	204,000
2	Total all funds	<del>\$115,618,352</del>	\$67,488,789	<del>\$183,107,141</del>
3	Less estimated income	71,324,758	<u>56,767,760</u>	128,092,518
4	Total general fund	\$44,293,594	<del>\$10,721,029</del>	<del>\$55,014,623</del>
5	Salaries and wages	\$28,049,386	\$144,142	\$28,193,528
6	Operating expenses	87,542,966	73,025,478	160,568,444
7	Capital assets	26,000	(26,000)	0
8	Grants	0	204,000	204,000
9	Total all funds	\$115,618,352	\$73,347,620	\$188,965,972
10	Less estimated income	71,324,758	59,038,552	130,363,310
11	Total general fund	\$44,293,594	\$14,309,068	\$58,602,662

12 Subdivision 2.

### PROGRAM AND POLICY

13			Adjustments or	
14		Base Level	<b>Enhancements</b>	<u>Appropriation</u>
15	Salaries and wages	\$58,102,898	\$2,884,535	<del>\$60,987,433</del>
16	Operating expenses	107,383,843	17,207,206	124,591,049
17	Capital assets	0	10,000	10,000
18	Grants	457,953,280	5,921,488	463,874,768
19	Grants - medical assistance	2,384,560,568	(30,582,216)	<del>2,353,978,352</del>
20	Total all funds	\$3,008,000,589	(\$4,558,987)	\$3,003,441,602
21	Less estimated income	1,995,024,801	(90,849,740)	<u>1,904,175,061</u>
22	Total general fund	\$1,012,975,788	\$86,290,753	\$1,099,266,541
23	Salaries and wages	\$58,102,898	\$3,618,130	\$61,721,028
24	Operating expenses	107,383,843	17,540,098	124,923,941
25	Capital assets	0	10,000	10,000
26	Grants	457,953,280	7,106,488	465,059,768
27	Grants - medical assistance	2,384,560,568	(426,491,266)	1,958,069,302
28	Total all funds	\$3,008,000,589	(\$398,216,550)	\$2,609,784,039
29	Less estimated income	1,995,024,801	(445,431,810)	1,549,592,991
30	Total general fund	\$1,012,975,788	\$47,215,260	\$1,060,191,048

1	Subdivision 3.			
2		FIELD SERVICES		
3			Adjustments or	
4		Base Level	Enhancements	<u>Appropriation</u>
5	Human service centers	\$198,888,443	(\$3,083,589)	\$195,804,854
6	Institutions	139,587,498	<u>258,930</u>	139,846,428
7	Total all funds	\$338,475,941	(\$2,824,659)	<del>\$335,651,282</del>
8	Less estimated income	132,820,302	<u>5,301,710</u>	138,122,012
9	Total general fund	\$205,655,639	(\$8,126,369)	<del>\$197,529,270</del>
10	Human service centers	\$198,888,443	(\$1,791,587)	\$197,096,856
11	Institutions	139,587,498	1,167,951	140,755,449
12	Total all funds	\$338,475,941	(\$623,636)	\$337,852,305
13	Less estimated income	132,820,302	6,293,949	139,114,251
14	Total general fund	\$205,655,639	(\$6,917,585)	\$198,738,054
15	Subdivision 4.			
16		BILL TOTAL		
17			Adjustments or	
18		Base Level	Enhancements	<u>Appropriation</u>
19	Grand total general fund	\$1,262,925,021	\$88,885,413	<del>\$1,351,810,434</del>
20	Grand total special funds	<u>2,199,169,861</u>	(28,780,270)	2,170,389,591
21	Grand total all funds	\$3,462,094,882	\$60,105,143	\$3,522,200,025
22	Full-time equivalent positions	2,211.08	(74.85)	2,136.23
23	Grand total general fund	\$1,262,925,021	\$54,606,743	\$1,317,531,764
24	Grand total special funds	2,199,169,861	(380,099,309)	1,819,070,552
25	Grand total all funds	\$3,462,094,882	(\$325,492,566)	\$3,136,602,316
26	Full-time equivalent positions	2,211.08	(45.85)	2,165.23
27	SECTION 2. HEALTH INSUR	RANCE INCREASE. The	appropriation in sec	tion 1 of this Act
28	includes the sum of <del>\$6,376,445</del> <u>\$5</u>	5,914,453, of which <del>\$5,3</del>	<del>50,004</del> <u>\$4,962,381</u> is	from the general
29	fund, for increases in employee h	ealth insurance premium	s from \$1,130 to <del>\$1,</del>	<del>249</del> <u>\$1,241</u> per

#### 1 SECTION 3. ONE-TIME FUNDING - EFFECT ON BASE BUDGET - REPORT TO 2 SIXTY-SIXTH LEGISLATIVE ASSEMBLY. The following amounts reflect the one-time funding 3 items approved by the sixty-fourth legislative assembly as adjusted for the 2015-17 biennium 4 and the 2017-19 biennium one-time funding items included in the appropriations in section 1 of 5 this Act: 6 One-Time Funding Description 2015-17 2017-19 7 \$10,000 \$0 Developmental disabilities equipment 8 0 Heating plant repairs and upgrades - state hospital 1,156,000 9 75,000 0 Heating plant repairs and upgrades - life skills and 10 transition center 11 44,000 0 Window replacement - life skills and transition center 12 Equipment over \$5,000 - state hospital 275,000 0 13 0 Equipment over \$5,000 - life skills and transition center 200,000 14 1,000,000 0 Extraordinary repairs - state hospital 15 Extraordinary repairs - life skills and transition center 1,250,000 0 16 0 Assistive technology services 80,000 17 Modification of eligibility systems 60,872,269 0 18 Child care licensing and data system 0 3,000,000 19 Health information network/care coordination 0 40,800,000 20 Total all funds \$64,962,269 \$43,800,000 21 Less estimated income 46,870,102 43,800,000 22 \$18,092,167 \$0 Total general fund 23 The 2017-19 biennium one-time funding amounts are not a part of the entity's base budget for 24 the 2019-21 biennium. The department of human services shall report to the appropriations 25 committees of the sixty-sixth legislative assembly on the use of this one-time funding for the 26 biennium beginning July 1, 2017, and ending June 30, 2019. 27 SECTION 4. FUNDING TRANSFERS - EXCEPTION - AUTHORIZATION. Notwithstanding 28 section 54-16-04, the department of human services may transfer appropriation authority 29 between line items within subdivisions 1, 2, and 3 of section 1 of this Act for the biennium 30 beginning July 1, 2017, and ending June 30, 2019. The department of human services shall 31 notify the office of management and budget and the legislative council of any transfer made

- 1 pursuant to this section. The department shall report to the budget section after June 30, 2018,
- 2 any transfer made in excess of \$50,000 and to the appropriations committees of the sixty-sixth
- 3 legislative assembly regarding any transfers made pursuant to this section.
- 4 **SECTION 5. EXEMPTION.** The amount appropriated for the replacement of the Medicaid
- 5 management information system and related projects in chapter 50 of the 2007 Session Laws
- 6 and chapter 38 of the 2011 Session Laws is not subject to the provisions of section 54-44.1-11.
- 7 Any unexpended funds from these appropriations approved under section 54-44.1-11 for
- 8 continuation into the 2009-11 biennium and then the 2011-13 biennium and then the 2013-15
- 9 biennium and then the 2015-17 biennium are available for the completion of the Medicaid
- 10 management information system and related projects during the biennium beginning July 1,
- 11 2017, and ending June 30, 2019.
- 12 **SECTION 6. EXEMPTION.** The amount appropriated for the modification of the department
- of human services' eligibility systems in chapter 578 of the 2011 Special Session Session Laws
- 14 is not subject to the provisions of section 54-44.1-11. Any unexpended funds from this
- appropriation approved under section 54-44.1-11 for continuation into the 2013-15 biennium
- and then the 2015-17 biennium are available for the completion of the modification of the
- 17 eligibility systems project during the biennium beginning July 1, 2017, and ending June 30,
- 18 2019.
- 19 **SECTION 7. EXEMPTION.** The amount appropriated for the development of the electronic
- 20 health records system in chapter 12 of the 2013 Session Laws is not subject to the provisions of
- 21 section 54-44.1-11. Any unexpended funds from this appropriation approved under section
- 22 54-44.1-11 for continuation into the 2015-17 biennium are available for the completion of the
- electronic health records system during the biennium beginning July 1, 2017, and ending
- 24 June 30, 2019.
- 25 **SECTION 8. ESTIMATED INCOME.** Of funds appropriated in section 1 of this Act,
- of defraying expenses in the medical services division, for the biennium beginning July 1, 2017,
- 28 and ending June 30, 2019.
- 29 **SECTION 9. ESTIMATED INCOME.** Of funds appropriated in section 1 of this Act.
- 30 \$686,191 is from the health care trust fund for the purpose of defraying expenses of long-term
- 31 care services programs, for the biennium beginning July 1, 2017, and ending June 30, 2019.

**SECTION 10. APPROPRIATION - 2015-17 BIENNIUM.** There is appropriated out of special funds derived from federal funds, not otherwise appropriated, the sum of \$9,000,000, or so much of the sum as may be necessary, to the department of human services for the purpose of defraying medical assistance grant costs, for the period beginning with the effective date of this Act and ending June 30, 2017.

**SECTION 11. APPROPRIATION - 2015-17 BIENNIUM - REBASING-AND, OPERATING MARGINS, AND INCENTIVES.** There is appropriated out of any moneys in the general fund in the state treasury, not otherwise appropriated, the sum of \$329,636\$417,010, or so much of the sum as may be necessary, and from special funds derived from federal funds and other income, the sum of \$329,636\$417,010, or so much of the sum as may be necessary, to the department of human services for the purpose of adjusting long-term care facility rates relating to rebasing and, operating margins, and incentives, for the period beginning June 1, 2017, and ending June 30, 2017.

SECTION 12. APPROPRIATION - 2015-17 BIENNIUM - SUBSTANCE USE DISORDER VOUCHER PROGRAM. There is appropriated out of any moneys in the general fund in the state treasury, not otherwise appropriated, the sum of \$200,000, or so much of the sum as may be necessary, to the department of human services for the purpose of defraying the expenses of the substance use disorder voucher program, for the period beginning with the effective date of this Act, and ending June 30, 2017.

SECTION 13. LEGISLATIVE INTENT - RESTORATION FUNDING FOR BASIC CARE. It is the intent of the sixty-fifth legislative assembly that the funding appropriated to the department of human services for the restoration of basic care provider rates be prioritized in the following order:

- 1. Operating margin;
- 2. Medical leave days; and then
  - 3. Increase to limits.

SECTION 14. LEGISLATIVE INTENT - POLICY CHANGES AND CLARIFICATION

RELATED TO HOME HEALTH. It is the intent of the sixty-fifth legislative assembly that the department of human services adopt rules in accordance with the Medicaid program, face-to-face requirements for home health services; policy changes and clarifications related to home health final rule published by the centers for Medicare and Medicaid services on

- 1 February 2, 2016; title 42, Code of Federal Regulations, part 440. It is further the intent of the
- 2 legislative assembly that the department require certified home health agencies to ensure a
- 3 face-to-face visit occurred between a physician and Medicaid beneficiary before initiating home
- 4 health services, and to ensure a face-to-face visit between a physician or nonphysician provider
- 5 occurred before providing medical equipment, supplies, and appliances. It is further the intent of
- 6 the legislative assembly that the department adopt rules to define medical equipment, supplies,
  - and appliances and specify allowable time frames for the face-to-face visits.

SECTION 15. LEGISLATIVE INTENT - CARE COORDINATION AGREEMENTS. It is the intent of the sixty-fifth legislative assembly that the department of human services establish requisite agreements with tribal health care organizations that will result in one hundred percent federal funding for eligible medical assistance provided to American Indians through care coordination agreements for the biennium beginning July 1, 2017, and ending July 30, 2019.

PLAN AMENDMENT. It is the intent of the sixty-fifth legislative assembly that the department of human services apply for a include services for individuals with a brain injury as part of the comprehensive assessment for a Medicaid 1915(i) state plan amendment for traumatic brain injury services. The department may utilize an existing 0.5 full-time equivalent position and funding available in the department's budget for this purpose enhancing services through a Medicaid 1915(i) state plan amendment for individuals with a brain injury for the biennium beginning July 1, 2017, and ending June 30, 2019.

SECTION 17. LEGISLATIVE INTENT - GRAFTON JOB SERVICE NORTH DAKOTA

BUILDING PURCHASE. It is the intent of the sixty-fifth legislative assembly that the department of human services purchase the Grafton job service North Dakota building using donated funds for the use of the life skills and transition center, but only if anticipated revenues generated from use of the building will be sufficient to provide for the operating and maintenance costs of the building.

SECTION 18. STAFF OVERTIME FUNDING - UNSPENT APPROPRIATION AUTHORITY.

The appropriations in section 1 of this Act, include \$1,832,267, of which \$1,082,857 is from the general fund, for compliance with state and federal laws and regulations relating to staff overtime. Any funding not needed specifically for complying with state or federal overtime

ı	regulations may not be spent and must be included in the department's unspent appropriation
2	authority canceled pursuant to section 54-44.1-11, at the end of the 2017-19 biennium.
3	SECTION 19. CONVEYANCE OF LAND AUTHORIZED - LIFE SKILLS AND TRANSITION
4	CENTER. The state of North Dakota by and through the department of human services may
5	convey real property containing 3.46 acres, more or less, associated with the life skills and
6	transition center in Grafton. The department may convey a parcel of land described as follows:
7	the north fifty-eight feet of said north half of the southeast quarter of section twenty-five less the
8	railroad right-of-way and the south forty feet of the north ninety-eight feet of the west one
9	hundred twenty-three feet of said north half of the southeast quarter of section twenty-five less
10	the railroad right-of-way on the terms and conditions determined appropriate by the department
11	and the attorney general. Section 54-01-05.2 and 54-01-05.5 do not apply to this conveyance.
12	SECTION 20. LEGISLATIVE INTENT - DEVELOPMENTAL DISABILITIES CASE
13	MANAGEMENT. It is the intent of the sixty-fifth legislative assembly that the department of
14	human services provide case management services for individuals with a developmental
15	disability within the ratio provided pursuant to North Dakota Administrative Code for the
16	biennium beginning July 1, 2017, and ending June 30, 2019. If case management services for
17	individuals with a developmental disability exceed the ratio requirement provided in the North
18	Dakota Administrative Code, the department may hire temporary staff or the department may
19	propose a change to North Dakota Administrative Code to meet the ratio requirement.
20	SECTION 21. LEGISLATIVE INTENT - DEVELOPMENTAL DISABILITIES -
21	PROGRAMMATIC AND ADMINISTRATIVE REQUIREMENTS. It is the intent of the sixty-fifth
22	legislative assembly that the department of human services report all new programmatic and
23	administrative requirements to the centers for Medicare and Medicaid services and seek
24	waivers of the same unless the director finds immediate full compliance necessary for
25	individuals with disabilities.
26	SECTION 22. LEGISLATIVE INTENT - DEVELOPMENTAL DISABILITIES - CONFLICT-
27	FREE CASE MANAGEMENT. It is the intent of the sixty-fifth legislative assembly that the
28	department of human services request waivers or delays of implementation of conflict-free case
29	management rules and requirements for individuals with a developmental disability.
30	SECTION 23. LEGISLATIVE INTENT - DEVELOPMENTAL DISABILITIES - VARIANCE. It
31	is the intent of the sixty-fifth legislative assembly that during the 2017-19 biennium, the

department of human services may authorize a treatment or care center's variance request relating to the treatment or care center's bedrooms or bathrooms, if the department determines the variance does not pose a health or safety risk. It is also the intent that the department of human services adopt rules to establish a variance process that allows the department to grant a variance if the variance will not pose a danger to the health or safety of an individual served by the treatment or care center.

**SECTION 24. LEGISLATIVE INTENT - PROCESS AND OUTCOME MEASURES.** It is the intent of the sixty-fifth legislative assembly that behavioral health service providers that receive funding from the department of human services submit process and outcome measures to the department for programs and services supported by state funding.

SECTION 25. LEGISLATIVE INTENT - TELEPHONE SUPPORT AND DIRECTORY

SERVICES. It is the intent of the sixty-fifth legislative assembly that the vendor of telephone and directory services, under contract with the department of human services, include private behavioral health service providers in the vendor's directory at no cost to the private behavioral health service providers.

SECTION 26. REPORTING REQUIREMENTS - YOUTH ACCESS TO TOBACCO. The operating expenses line item in subdivision 2 of section 1 of this Act includes \$75,000 from the tobacco prevention and control trust fund for costs of complying with youth access to tobacco reporting requirements under title 45, Code of Federal Regulations, part 96, section 130, for the biennium beginning July 1, 2017, and ending June 30, 2019. The state department of health and local public health units shall collect and disclose all required data reporting elements to the department of human services.

**SECTION 27. LEGISLATIVE INTENT - FULL-TIME EQUIVALENT POSITIONS.** It is the intent of the sixty-fifth legislative assembly that, based on staffing needs, the department of human services transfer full-time equivalent positions as necessary among the department's programs.

SECTION 28. ROBINSON RECOVERY CENTER FUNDING. Notwithstanding the designation of funding for the Robinson recovery center in the appropriation for the department of human services in section 1 of this Act, the department of human services may utilize other providers for substance use disorder treatment services if the current contractor is unable to

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29 30 provide the full capacity of services anticipated under the current contract for the biennium beginning July 1, 2017, and ending June 30, 2019.

**SECTION 29. LEGISLATIVE INTENT - OPERATING EXPENSES.** It is the intent of the sixty-fifth legislative assembly that the department of human services analyze its budgetary needs and allocate up to \$1,102,618 from the general fund included in the operating expenses line item in subdivision 1 of section 1 of this Act to other subdivisions within section 1 of this Act based on the department's priorities resulting from its analysis.

SECTION 30. LEGISLATIVE MANAGEMENT DEPARTMENT OF HUMAN SERVICES

STUDY - STATE MEDICAL ASSISTANCE PROGRAMS - REPORTS TO LEGISLATIVE

MANAGEMENT.

- During the 2017-18 interim, the legislative management department of human services shall consider studyingstudy options to operate the state medical assistance program and other related programs, as managed care. The study must:
  - a. Identify and review populations to consider for managed care, including individuals eligible under traditional medical assistance, Medicaid expansion, the children's health insurance program, and individuals receiving services through the long-term care and developmental disabilities programs.
  - Consider the needs of individuals receiving services from managed care programs in similar-sized states, and the alignment of benefit packages.
  - c. Review populations covered by the program of all-inclusive care for the elderly in other states.
  - d. Consider options for including services under a managed care arrangement.
  - e. Consider developing a proposed plan, cost estimates, and potential timeline for implementing the managed care options identified.
  - f. Consider preparing and distributing a request for information from managed care organizations regarding the managed care options identified.
- 2. The legislative management department of human services shall provide periodic updates and report its findings and recommendations, together with any legislation necessary to implement the recommendations, to the sixty-sixth legislative assembly legislative management.

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# SECTION 31. LEGISLATIVE MANAGEMENT STUDY - HOME- AND COMMUNITY-BASED SERVICES. During the 2017-18 interim, the legislative management shall consider studying the quality and availability of home- and community-based services for individuals across the state who have developmental disabilities. The study must identify whether there are gaps in service and make recommendations to address identified gaps. The study also must include an evaluation of the funding, mission, and caseload at the life skills and transition center, including the center's transition plan and the number of clients determined eligible for community placement. The legislative management shall report its findings and recommendations, together with any legislation required to implement the recommendations, to the sixty-sixth legislative assembly. SECTION 32. LEGISLATIVE MANAGEMENT STUDY OF STATE HOSPITAL LAND. During the 2017-18 interim, the legislative management shall consider studying the use of land at the state hospital to determine the most effective and efficient use of the land. The study must include the feasibility and desirability of selling land owned by the state hospital. The legislative management shall report its findings and recommendations, together with any legislation required to implement the recommendations, to the sixty-sixth legislative assembly. SECTION 33. LEGISLATIVE MANAGEMENT STUDY - BEHAVIORAL HEALTH AND **DEVELOPMENTAL DISABILITIES SERVICES.** During the 2017-18 interim, the legislative management shall consider studying state and federal laws and regulations relating to the care and treatment of individuals with developmental disabilities or behavioral health needs. The study must include a review of the following: The state's services and delivery systems, including whether changes are necessary to maintain compliance with state and federal laws and regulations; 2. Efforts by other states to comply with the 1999 Olmstead v. L.C. case, including the planning and implementation process for any new programs; Community- and non-community-based services, including the costs and effectiveness 3. of services; Noncompliance with state and federal laws and regulations, including a review of the 4. fees and penalties for noncompliance: 5. A comparison of voluntary and involuntary compliance with state and federal laws and

regulations, including a review of long-term costs and effectiveness;

- 6. The impact of implementation and expansion of selected programs that were added to address unmet needs, including the impact on costs and effectiveness of new programs;
- Needed changes to address noncompliance and a timeline for completing changes;
   and
- 8. Data on the number of individuals that would be impacted by voluntary compliance efforts, and data on the type of services that may need changing, including housing, peer counseling, outpatient treatment, crisis line access, and transportation services.

The legislative management shall report its findings and recommendations, together with any legislation necessary to implement those recommendations, to the sixty-sixth legislative assembly.

**SECTION 34. AMENDMENT.** Subsection 1 of section 23-09.3-01.1 of the North Dakota Century Code is amended and reenacted as follows:

- 1. Basic care beds may not be added to the state's licensed bed capacity during the period between August 1, 20152017, and July 31, 20172019, except when:
  - a. A nursing facility converts nursing facility beds to basic care;
  - An entity licenses bed capacity transferred as basic care bed capacity under section 23-16-01.1;
  - c. An entity demonstrates to the state department of health and the department of human services that basic care services are not readily available within a designated area of the state or that existing basic care beds within a fifty-mile [80.47-kilometer] radius have been occupied at ninety percent or more for the previous twelve months. In determining whether basic care services will be readily available if an additional license is issued, preference may be given to an entity that agrees to any participation program established by the department of human services for individuals eligible for services under the medical assistance program under title XIX of the Social Security Act [42 U.S.C. 1396 et seq.]; or
  - d. The state department of health and the department of human services grant approval of new basic care beds to an entity. The approved entity shall license the beds within forty-eight months from the date of approval.

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SECTION 35. AMENDMENT. Subsection 1 of section 23-16-01.1 of the North Dakota Century Code is amended and reenacted as follows:

Notwithstanding sections 23-16-06 and 23-16-10, except when a facility reverts basic care beds to nursing facility beds or relicenses nursing facility beds delicensed after July 31, 2011, nursing facility beds may not be added to the state's licensed bed capacity during the period between August 1, 20152017, and July 31, 20172019. A nursing facility may not delicense nursing facility bed capacity, relicense nursing facility bed capacity, convert licensed nursing bed capacity to basic care bed capacity, revert licensed basic care bed capacity back to nursing facility bed capacity, or otherwise reconfigure licensed nursing facility bed capacity more than one time in a twelve-month period.

SECTION 36. AMENDMENT. Section 50-24.1-37 of the North Dakota Century Code is amended and reenacted as follows:

50-24.1-37. (Effective January 1, 2014, through July 31, 20172019) Medicaid expansion - Legislative management report.

- The department of human services shall expand medical assistance coverage as authorized by the federal Patient Protection and Affordable Care Act [Pub. L. 111-148], as amended by the Health Care and Education Reconciliation Act of 2010 [Pub. L. 111-152] to individuals under sixty-five years of age with income below one hundredthirty-eight percent of the federal poverty level, based on modified adjusted grossincome.
- The department of human services shall inform new enrollees in the medicalassistance program that benefits may be reduced or eliminated if federal participationdecreases or is eliminated.
- 3. Effective January 1, 2018, medical assistance expansion program applicants and recipients who are at least nineteen but less than twenty-one years of age mustreceive coverage through traditional medical assistance.
- 4. The department shall implement the expansion by bidding through private carriers or utilizing the health insurance exchange.
- <u>5.</u> The contract between the department and the private carrier must:

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1 Provide a reimbursement methodology for all medications and dispensing fees 2 which identifies the minimum amount paid to pharmacy providers for each 3 medication. The reimbursement methodology, at a minimum, must: 4 (1) Be available on the department's website; and 5 Encompass all types of pharmacy providers regardless of whether the 6 pharmacy benefits are being paid through the private carrier or contractor or 7 subcontractor of the private carrier under this section. 8 Provide full transparency of all costs and all rebates in aggregate. 9 Allow an individual to obtain medication from a pharmacy that provides mail order 10 service; however, the contract may not require mail order to be the sole method-11 of service. 12 Ensure that pharmacy services obtained in jurisdictions other than this state and 13 its three contiguous states are subject to prior authorization and reporting to the 14 department for eligibility verification. 15 Ensure the payments to pharmacy providers do not include a required payback 16 amount to the private carrier or one of the private carrier's contractors or 17 subcontractors which is not representative of the amounts allowed under the 18 reimbursement methodology provided in subdivision a. 19 -Any 20 The contract between the department and the private carrier must provide the 21 department with full access to provider reimbursement rates. The department shall-22 consider provider reimbursement rate information in selecting a private carrier under-23 this section. Before August first of each even-numbered year, the department shall-24 submit a report to the legislative management regarding provider reimbursement rates 25 under the medical assistance expansion program. This report may provide cumulative 26 data and trend data but may not disclose identifiable provider reimbursement rates. 27 Provider reimbursement rate information received by the department under this 28 section and any information provided to the department of human services or any 29 audit firm by a pharmacy benefit manager under this section is confidential under-30 section 44-04-17.1, except the department may use the reimbursement rate

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program.

8 **SECTION 36. EMERGENCY.** Sections 10, 11, 12, and 1519 of this Act are declared to be an emergency measure.

and the legislative council the federal government ended the medical assistance expansion-