

COMMITTEE ON LEGISLATIVE RESEARCH
OVERSIGHT DIVISION

FISCAL NOTE

L.R. No.: 2828S.01I
Bill No.: SB 1
Subject: Ambulances And Ambulance Districts; Health Care; Health Care Professionals;
Hospitals; Medicaid; Nursing And Boarding Homes; Pharmacy; Social Services,
Department Of
Type: Original
Date: June 24, 2021

Bill Summary: This proposal extends the sunset on certain health care provider federal reimbursement allowances and modifies provisions relating to certain family planning health care services.

FISCAL SUMMARY

| ESTIMATED NET EFFECT ON GENERAL REVENUE FUND | | | |
|--|----------------|----------------|----------------|
| FUND AFFECTED | FY 2022 | FY 2023 | FY 2024 |
| | | | |
| Total Estimated Net Effect on General Revenue | \$0 | \$0 | \$0 |

Numbers within parentheses: () indicate costs or losses.

| ESTIMATED NET EFFECT ON OTHER STATE FUNDS | | | |
|---|------------------------|------------------------|------------------------|
| FUND AFFECTED | FY 2022 | FY 2023 | FY 2024 |
| Ambulance Services Reimbursement Allowance* (0958) | \$6,550,000 | \$8,700,000 | \$8,700,000 |
| Nursing Facility Federal Reimbursement Allowance** (0196) | \$139,940,000 | \$186,600,000 | \$186,600,000 |
| Federal Reimbursement Allowance*** (0142) | \$991,000,000 | \$1,321,000,000 | \$1,321,000,000 |
| Pharmacy Reimbursement Allowance**** (0144) | \$53,220,000 | \$71,000,000 | \$71,000,000 |
| ICR/MR Reimbursement Allowance***** (0901) | \$4,800,000 | \$6,400,000 | \$6,400,000 |
| Total Estimated Net Effect on <u>Other</u> State Funds | \$1,195,510,000 | \$1,593,700,000 | \$1,593,700,000 |
| | | | |

* Oversight assumes expenditure of approximately \$8.7 million annually for a net of \$0.

** Oversight assumes expenditure of approximately \$186.6 million annually for a net of \$0.

*** Oversight assumes expenditure of approximately \$1.321 billion annually for a net of \$0.

**** Oversight assumes expenditure of approximately \$71 million annually for a net of \$0.

***** Oversight assumes expenditure of approximately \$6.4 million annually for a net of \$0.

| ESTIMATED NET EFFECT ON FEDERAL FUNDS | | | |
|---|------------|------------|------------|
| FUND AFFECTED | FY 2022 | FY 2023 | FY 2024 |
| Federal* | \$0 | \$0 | \$0 |
| Total Estimated Net Effect on <u>All</u> Federal Funds | \$0 | \$0 | \$0 |

* FRA Income and expenditures of approximately \$3.067 billion annually and net to \$0.

| ESTIMATED NET EFFECT ON FULL TIME EQUIVALENT (FTE) | | | |
|---|----------|----------|----------|
| FUND AFFECTED | FY 2022 | FY 2023 | FY 2024 |
| | | | |
| Total Estimated Net Effect on FTE | 0 | 0 | 0 |

- Estimated Net Effect (expenditures or reduced revenues) expected to exceed \$250,000 in any of the three fiscal years after implementation of the act or at full implementation of the act.
- Estimated Net Effect (savings or increased revenues) expected to exceed \$250,000 in any of the three fiscal years after implementation of the act or at full implementation of the act.

| ESTIMATED NET EFFECT ON LOCAL FUNDS | | | |
|--|------------|------------|------------|
| FUND AFFECTED | FY 2022 | FY 2023 | FY 2024 |
| Local Government | \$0 | \$0 | \$0 |

FISCAL ANALYSIS

ASSUMPTION

§§190.839, 198.439, 208.437, 208.480, 338.550, and 633.401 - Provider reimbursement allowance taxes

Officials from the **Department of Social Services (DSS)** state passage of the proposed legislation would not fiscally impact DSS for §§190.839, 198.439, 208.437, 208.480, 338.550 and 633.401. However, if the proposed legislation does not pass, additional funding will be needed to maintain the current level of services. The numbers provided are based on an annual total for each program.

§190.839 - Ambulance Provider Tax: The proposed legislation allows the MO HealthNet Division (MHD) to collect approximately \$8.7 million in Ambulance Tax annually in FY 2022 to FY 2026 which will allow MHD to draw in federal funds of approximately \$16.3 million each year. The FY 2022 budget submitted by the DSS assumes the ambulance tax would continue through fiscal year 2022. If this proposed legislation does not pass, additional General Revenue (GR) funds of \$8.7 million annually in FY 2022 through FY 2025 would be needed to continue the current level of services.

§198.439 - Nursing Facility Reimbursement Allowance Tax: **DSS** states the proposed legislation allows the MHD to collect \$186.6 million annually in FY 2022 to FY 2026 in Nursing Facility Tax which will allow MHD to draw in federal funds of \$348.5 million each year. The FY 2022 budget submitted by the DSS assumes the nursing facility tax would continue through fiscal year 2022. If this proposed legislation does not pass, additional GR funds of \$186.6 million annually in FY 2022 through FY 2025 would be needed to continue the current level of services.

§208.437 - Medicaid Managed Care Provider Tax: The MHD is not currently collecting the Managed Care Provider Tax. The federal sunset for the managed care organization reimbursement allowance was September 30, 2009. This section of the proposed legislation will not have an impact on MO HealthNet.

As the MHD is not currently collecting the Managed Care Provider Tax, **Oversight** is not including this tax in the fiscal note tables.

§208.480 - Hospital Federal Reimbursement Allowance: **DSS** states the proposed legislation allows the MHD to collect approximately \$1.32 billion in Hospital Tax annually in FY 2022 to FY 2026 which will allow MHD to draw in federal funds of approximately \$2.565 billion each year. The FY 2022 budget submitted by the DSS and the FY23 budget that will be submitted assumes the hospital tax would continue through fiscal years 2022 to FY 2026. If this proposed legislation does not pass, additional GR funds of \$1.32 billion would be needed annually FY 2022 through FY 2025 to continue the current level of services.

§338.550 - Pharmacy Provider Tax: The proposed legislation allows the MHD to collect \$71 million annually in FY 2022 to FY 2026 in pharmacy tax which will allow MHD to draw in federal funds of \$132.5 million each year. The FY 2022 budget submitted by the DSS assumes the pharmacy tax would continue through fiscal year 2022. If this proposed legislation does not pass, additional GR funds of \$71 million annually in FY 2022 through FY 2025 would be needed to continue the current level of services.

Oversight notes the Pharmacy Provider Tax (PFRA) estimates for the current fiscal note are much higher than the previous year's estimates of collection of \$18 million with a federal draw down of \$34.3 million. The FY 2020 tax rate was 0.43%. The FY 2021 tax rate is 1.40% resulting in an increase in the PFRA collected and a corresponding increase in the federal draw down. In discussions with DSS officials, Oversight discovered the change was related to the supplemental new decision item for PFRA this past fall. DSS is engaged in ongoing discussions with the Centers for Medicare and Medicaid (CMS) around the level of the Pharmacy Dispensing Fee, which is partially funded by PFRA, and which initially resulted in adjustments lowering the rate in anticipation of a lower CMS-approved Dispensing Fee. As part of the CMS discussion, MHD initiated a Provider survey and provided this to CMS. More recent guidance from CMS indicates a higher level of Dispensing Fee will be approved than anticipated. The tax rate was restored in July 2020 to reflect levels consistent with previous years.

Oversight does not have any information to the contrary. Therefore, Oversight will reflect the fiscal impact provided by DSS for fiscal note purposes.

§633.401 - Intermediate Care Facility for the Intellectually Disabled Provider Tax (ICF/ID): DSS states the proposed legislation allows the MHD to collect approximately \$6.4 million in FY 2022 in intermediate care facilities for the intellectually disabled tax which will allow MHD to draw in federal funds of \$4.7 million. The FY 2022 budget submitted by the Department of Mental Health assumes the ICF/ID tax would continue through fiscal year 2022. If this proposed legislation does not pass, additional General Revenue funds of \$6.4 million annually in FY 2022 through FY 2025 would be needed to continue the current level of services.

Oversight notes the ICF/ID provider tax name has been changed from the ICF/Mentally Retarded (MR) provider tax. As of FY 2020, the fund name appears on the State Treasurer's Fund Balance Report as the ICF/ID Reimbursement Allowance Fund.

Oversight does not have any information to the contrary. Therefore, Oversight will reflect the provider taxes needed to draw down federal matching funds as provided by DSS for fiscal note purposes.

Officials from the **Department of Mental Health (DMH)** assume no fiscal impact should the sunset be extended to June 30, 2026. The provider assessment for ICF/IDs generates approximately \$6 million in revenue for DMH. The provider assessment for hospitals generates approximately \$14.1 million in additional revenues for DMH.

Oversight notes the DSS is the designated state agency that works with the federal government on Medicaid programs. Therefore, Oversight will use the DSS provider tax numbers for the ICF/ID and hospital provider tax programs.

Oversight notes, with the exception of certain state-owned facilities, all ambulance districts, nursing facilities, hospitals, pharmacies and ICF/IDs are required to pay provider taxes for the privilege of operating/providing services in the state of Missouri.

For fiscal note purposes, **Oversight** is presenting the provider taxes collected under each of the reimbursement allowance tax categories. However, Oversight assumes expenses equal to the amount of provider taxes collected would be spent on services and the net effect would be \$0.

Responses regarding the proposed legislation as a whole

Officials from the **Attorney General's Office**, the **Department of Commerce and Insurance**, the **Department of Health and Senior Services**, the **Office of Administration, Division of Budget & Planning (B&P)** and the **Office of the State Courts Administrator** each assumed the proposal will have no fiscal impact on their respective organizations. **Oversight** does not have any information to the contrary. Therefore, Oversight will reflect a zero impact in the fiscal note for these agencies.

Oversight only reflects the responses that we have received from state agencies and political subdivisions; however, other hospitals were requested to respond to this proposed legislation but did not. A general listing of political subdivisions included in our database is available upon request.

| <u>FISCAL IMPACT – State Government</u> | FY 2022 (9 Mo.) | FY 2023 | FY 2024 |
|---|-----------------------------|-------------------------------|-------------------------------|
| AMBULANCE SERVICE REIMBURSEMENT ALLOWANCE FUND (Provider tax) (0958) | | | |
| <u>Income - DSS</u> (§190.839) Assessment on ambulance organizations | \$6,550,000 | \$8,700,000 | \$8,700,000 |
| ESTIMATED NET EFFECT ON THE AMBULANCE SERVICE REIMBURSEMENT ALLOWANCE FUND* | <u>\$6,550,000</u> | <u>\$8,700,000</u> | <u>\$8,700,000</u> |
| NURSING FACILITY FEDERAL REIMBURSEMENT ALLOWANCE FUND (Provider tax) (0196) | | | |
| <u>Income - DSS</u> (§198.439) Assessment on nursing facility organizations | \$139,940,000 | \$186,600,000 | \$186,600,000 |
| ESTIMATED NET EFFECT ON THE NURSING FACILITY FEDERAL REIMBURSEMENT ALLOWANCE FUND* | <u>\$139,940,000</u> | <u>\$186,600,000</u> | <u>\$186,600,000</u> |
| FEDERAL REIMBURSEMENT ALLOWANCE FUND (Hospital provider tax) (0142) | | | |
| <u>Income - DSS</u> (§208.480) Assessment on hospital organizations | \$991,000,000 | \$1,321,000,000 | \$1,321,000,000 |
| ESTIMATED NET EFFECT ON THE FEDERAL REIMBURSEMENT ALLOWANCE FUND* | <u>\$991,000,000</u> | <u>\$1,321,000,000</u> | <u>\$1,321,000,000</u> |

| <u>FISCAL IMPACT – State Government (continued)</u> | FY 2022 (9 Mo.) | FY 2023 | FY 2024 |
|--|----------------------------|----------------------------|----------------------------|
| PHARMACY REIMBURSEMENT ALLOWANCE FUND (Provider tax) (0144) | | | |
| <u>Income - DSS (\$338.550)</u> Assessment on pharmacy organizations | <u>\$53,220,000</u> | <u>\$71,000,000</u> | <u>\$71,000,000</u> |
| ESTIMATED NET EFFECT ON THE PHARMACY REIMBURSEMENT ALLOWANCE FUND* | <u>\$53,220,000</u> | <u>\$71,000,000</u> | <u>\$71,000,000</u> |
| ICF/ID REIMBURSEMENT ALLOWANCE FUND (Provider tax) (0901) | | | |
| <u>Income - DSS (\$633.401)</u> Assessment on ICF/ID organizations | <u>\$4,800,000</u> | <u>\$6,400,000</u> | <u>\$6,400,000</u> |
| ESTIMATED NET EFFECT ON THE ICF/ID REIMBURSEMENT ALLOWANCE FUND* | <u>\$4,800,000</u> | <u>\$6,400,000</u> | <u>\$6,400,000</u> |
| * Oversight assumes expenses equal to the amount of provider taxes collected would be spent on services. | | | |
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| <u>FISCAL IMPACT – State Government (continued)</u> | FY 2022 (9 Mo.) | FY 2023 | FY 2024 |
| | | | |

| | | | |
|---|------------------------|------------------------|------------------------|
| FEDERAL FUNDS | | | |
| <u>Income - DSS</u> | | | |
| Assessment on ambulance organizations (§190.839) | \$12,228,000 | \$16,300,000 | \$16,300,000 |
| Assessment on nursing facility organizations (§198.439) | \$261,400,000 | \$348,500,000 | \$348,500,000 |
| Assessment on hospital organizations (§208.480) | \$1,924,000,000 | \$2,565,000,000 | \$2,565,000,000 |
| Assessment on pharmacy organizations (§338.550) | \$99,400,000 | \$132,570,000 | \$132,570,000 |
| Assessment on ICF/ID organizations (§633.401) | \$3,500,000 | \$4,700,000 | \$4,700,000 |
| Total Income - DSS | \$2,300,250,000 | \$3,067,000,000 | \$3,067,000,000 |
| <u>Costs - DSS</u> | | | |
| Medicaid program expenditures | (\$2,300,250,000) | (\$3,067,000,000) | (\$3,067,000,000) |
| ESTIMATED NET EFFECT ON FEDERAL FUNDS | <u>\$0</u> | <u>\$0</u> | <u>\$0</u> |

| <u>FISCAL IMPACT – Local Government</u> | FY 2022 (10 Mo.) | FY 2023 | FY 2024 |
|---|---------------------|-------------------|-------------------|
| | <u>\$0</u> | <u>\$0</u> | <u>\$0</u> |

FISCAL IMPACT – Small Business

A direct fiscal impact to small business pharmacies would be expected as a result of this proposal.

FISCAL DESCRIPTION

This act extends the sunsets from September 30, 2021, to June 30, 2026, for the Ground Ambulance, Nursing Facility, Medicaid Managed Care Organization, Hospital, Pharmacy, and Intermediate Care Facility for the Intellectually Disabled Federal Reimbursement Allowances (§§190.839; 198.439; 208.437; 208.480; 338.550 and 633.401).

This act excludes from MO HealthNet coverage of family planning services certain "abortifacient drugs or devices", which include mifepristone in a regimen with or without misoprostol when used to induce an abortion; misoprostol alone when used to induce an abortion; levonorgestrel (Plan B) when used to induce an abortion, ulipristal acetate (ella) or

other progesterone antagonists when used to induce an abortion, an intrauterine device (IUD) or a manual vacuum aspirator (MVA) when used to induce an abortion, or any other FDA-approved drug or device that is intended to cause the destruction of an unborn child (§208.152).

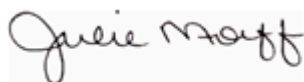
A provider shall not be eligible for reimbursement under the "Uninsured Women's Health Program" if such provider is an abortion facility or any affiliate or associate thereof (§208.659).

This act contains a severability clause.

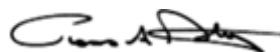
This legislation is not federally mandated, would not duplicate any other program and would not require additional capital improvements or rental space.

SOURCES OF INFORMATION

Attorney General's Office
Department of Commerce and Insurance
Department of Health and Senior Services
Department of Mental Health
Department of Social Services
Office of Administration - Division of Budget & Planning
Office of the State Courts Administrator



Julie Morff
Director
June 24, 2021



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June 24, 2021