A BILL FOR AN ACT

RELATING TO HEALTH.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

1 SECTION 1. Hawaii's health care system consists of a 2 myriad of services that must be coordinated and integrated to 3 ensure access to quality care at an appropriate level for all Hawaii residents. An individual often accesses different 4 5 healthcare providers who deliver different products and services 6 and the individual may transition from one level of care to 7 another over time. The legislature believes it is important to 8 effectively manage patient transition to facilities that provide 9 an appropriate level of care to maintain an availability of services at all levels, more accurately address patient needs, 10 11 and ensure efficient and cost-effective service delivery. 12 The legislature finds that such a transition has been 13 particularly difficult between acute care hospitals and long-14 term care facilities. Often, patients who no longer need 15 hospitalization but require medical services are waitlisted for long-term care due to the shortage of available space in long-16 term care facilities. The result is a shortage of available **17** 18 space and service delivery at acute care hospitals. Moreover,



- 1 acute care hospitals face great financial hardship due to the
- 2 manner in which medicaid reimbursements are allocated.
- 3 When a medicaid-eligible patient is treated by an acute
- 4 care hospital, medicaid pays a rate based on the level of care
- 5 needed by the patient. When the patient is well enough to be
- 6 transferred to long-term care, the medicaid reimbursement is
- 7 reduced to a rate that is twenty to thirty per cent of the
- 8 actual cost of acute care hospitalization. If the hospital is
- 9 unable to transfer the patient to long-term care, it must absorb
- 10 the financial loss, thus creating a fiscal burden on the acute
- 11 care hospital as its cost of care is generally more fixed due to
- 12 stringent regulatory and quality-control requirements.
- 13 At any time, a total of about two hundred patients in
- 14 Hawaii's hospitals are waiting to be transferred to a long-term
- 15 care facility. Patients with certain conditions have been
- 16 waitlisted for up to a year. The total loss to hospitals is
- 17 estimated at about \$75,000,000 annually, with a significant
- 18 portion of that loss due to underpayment by medicaid and its
- 19 contracted health plans. Medicaid is, in effect, a public-
- 20 private partnership because the public sector provides the
- 21 funding and the private sector provides the services.
- 22 Unfortunately, medicaid reimbursements seldom cover the actual



- 1 cost of services provided, thus resulting in fiscally-weakened
- 2 healthcare facilities and instability in the healthcare system
- 3 as a whole.
- 4 In the past, acute care hospitals were able to absorb
- 5 medicaid losses using payments from commercial and other payers
- 6 to offset under-funded medicaid reimbursements. However, as the
- 7 cost of healthcare has increased and significant developments in
- 8 medical technology has required acute care hospitals to increase
- 9 their capital investments, even these payments are no longer
- 10 adequate to bridge the fiscal gap. The result for many of these
- 11 hospitals is financial failure such as the case of Kahuku
- 12 hospital which would have ceased operations because of
- 13 bankruptcy if it had not been transferred to the Hawaii health
- 14 systems corporation, which is subsidized by the State. The
- 15 legislature finds that underpayment by medicaid is one of the
- 16 major reasons that led to Kahuku hospital's dire financial
- 17 difficulties.
- 18 The legislature further finds that long-term care
- 19 facilities also face financial hardship due to inappropriate
- 20 medical reimbursements. Therefore, payments for patients with
- 21 complex medical conditions who require additional care should be



| 1 | cost-based rather than acuity-based to address disparities in |
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| 2 | the cost of services and service delivery. |
| 3 | The purpose of this Act is to provide fair compensation to |
| 4 | (1) Acute care hospitals for services they provide to |
| 5 | medicaid patients who have been treated for acute |
| 6 | illnesses and injuries and who have recovered |
| 7 | sufficiently but for whom long-term care is not |
| 8 | available; and |
| 9 | (2) Long-term care facilities for patients with medically- |
| 10 | complex conditions when their level of care changes |
| 11 | from acute to long-term care. |
| 12 | SECTION 2. Chapter 346, Hawaii Revised Statutes, is |
| 13 | amended by adding a new section to be appropriately designated |
| 14 | and to read as follows: |
| 15 | "§346- Medicaid reimbursements. (a) Reimbursements by |
| 16 | medicaid and its contracted health plans to hospitals for |
| 17 | patients occupying acute-licensed beds who are on a waitlist for |
| 18 | long-term care shall be at least equal to the rate paid for |
| 19 | acute care services. |
| 20 | (b) Reimbursements by medicaid and its contracted health |
| 21 | plans to facilities with long-term care beds for patients with |
| 22 | medically-complex conditions who, prior to admission to the |
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- 1 facility, were receiving acute care services in an acute care
- 2 hospital, shall be at least equal to the rate paid for subacute
- 3 care.
- 4 (c) As used in this section:
- 5 "Medically-complex condition" means a combination of
- 6 chronic physical conditions, illnesses, or other medically-
- 7 related factors that significantly impact an individual's health
- 8 and manner of living and cause reliance upon technological,
- 9 pharmacological, and other therapeutic interventions to sustain
- 10 life.
- 11 "Subacute care" means a level of care that is needed by a
- 12 patient not requiring acute care, but who needs more intensive
- 13 skilled nursing care than is provided to the majority of
- 14 patients in a skilled nursing facility."
- 15 SECTION 3. Section 346D-1.5, Hawaii Revised Statutes, is
- 16 amended to read as follows:
- 17 "§346D-1.5 Medicaid reimbursement equity. Not later than
- 18 July 1, 2008, there shall be no distinction between hospital-
- 19 based and nonhospital-based reimbursement rates for
- 20 institutionalized long-term care under medicaid. Reimbursement
- 21 for institutionalized intermediate care facilities and
- 22 institutionalized skilled nursing facilities shall be based

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- 1 solely on the level of care rather than the location. This
- 2 section shall not apply to critical access hospitals[-] or to
- 3 reimbursements made in accordance with section 346- ."
- 4 SECTION 4. There is appropriated out of the general
- 5 revenues of the State of Hawaii the sum of \$ or so much
- 6 thereof as may be necessary for fiscal year 2012-2013 for
- 7 increased medicaid reimbursement in accordance with this Act.
- 8 The sum appropriated shall be expended by the department of
- 9 human services for the purposes of this Act.
- 10 SECTION 5. Statutory material to be repealed is bracketed
- 11 and stricken. New statutory material is underscored.
- 12 SECTION 6. This Act shall take effect on July 1, 2012.

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INTRODUCED BY:

HB HMS 2012-1061

Report Title:

Medicaid Reimbursements

Description:

Provides reimbursements by medicaid and its contracted health plans to hospitals for patients occupying acute-licensed beds who are waitlisted for long-term care and to facilities with long-term care beds for patients with medically-complex conditions who prior to admission to the facility were receiving acute care services in an acute care hospital. Effective July 1, 2012.

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