2015 Session

Budget Bill - HB1400 (Introduced)

Bill Order » Office of Health and Human Resources » Item 304

Department of Medical Assistance Services

Item 304	First Year - FY2015	Second Year - FY2016
Administrative and Support Services (49900)	~~$143,673,278~~ *$143,769,927*	~~$144,263,040~~ *$164,659,411*
General Management and Direction (49901)	~~$126,421,666~~ *$126,518,315*	~~$126,648,663~~ *$147,045,034*
Information Technology Services (49902)	$14,532,855	$14,895,620
Administrative Support for the Family Access to Medical Insurance Security Plan (49932)	$2,718,757	$2,718,757
Fund Sources:		
General	~~$49,500,215~~ *$49,524,364*	~~$49,789,078~~ *$54,475,433*
Special	$1,565,000	$1,565,000
Federal Trust	~~$92,608,063~~ *$92,680,563*	~~$92,908,962~~ *$108,618,978*

Authority: Title 32.1, Chapters 9 and 10, Code of Virginia; P.L. 89-97, as amended, Titles XIX and XXI, Social Security Act, Federal Code.

A. By November 15 of each year, the Department of Planning and Budget, in cooperation with the Department of Medical Assistance Services, shall prepare and submit a forecast of Medicaid expenditures, upon which the Governor's budget recommendations will be based, for the current and subsequent two years to the Chairmen of the House Appropriations and Senate Finance Committees.

B. The Department of Medical Assistance Services shall submit expenditure reports of the Medicaid program to the Department of Planning and Budget and the Chairmen of the House Appropriations and Senate Finance Committees. These reports shall be submitted on a quarterly basis.

C. Out of this appropriation, $50,000 the first year and $50,000 the second year from the special fund is appropriated to the Department of Medical Assistance Services for the administration of the disbursement of civil money penalties levied against and collected from Medicaid nursing facilities for violations of rules identified during survey and certification as required by federal law and regulation. Based on the nature and seriousness of the deficiency, the Agency or the Centers for Medicare and Medicaid Services may impose a civil money penalty, consistent with the severity of the violations, for the number of days a facility is not in substantial compliance with the facility's Medicaid participation agreement. Civil money penalties collected by the Commonwealth must be applied to the protection of the health or property of residents of nursing facilities found to be deficient. Penalties collected are to be used for (1) the payment of costs incurred by the Commonwealth for relocating residents to other facilities; (2) payment of costs incurred by the Commonwealth related to operation of the facility pending correction of the deficiency or closure of the facility; and (3) reimbursement of residents for personal funds or property lost at a facility as a result of actions by the facility or individuals used by the facility to provide services to residents. These funds are to be administered in accordance with the revised federal regulations and law, 42 CFR

488.400 and the Social Security Act § 1919(h), for Enforcement of Compliance for Long-Term Care Facilities with Deficiencies. Any special fund revenue received for this purpose, but unexpended at the end of the fiscal year, shall remain in the fund for use in accordance with this provision.

D. The Department of Medical Assistance Services, to the extent permissible under federal law, shall enter into an agreement with the Department of Behavioral Health and Developmental Services to share Medicaid claims and expenditure data on all Medicaid-reimbursed mental health, intellectual disability and substance abuse services, and any new or expanded mental health, intellectual disability retardation and substance abuse services that are covered by the State Plan for Medical Assistance. The information shall be used to increase the effective and efficient delivery of publicly funded mental health, intellectual disability and substance abuse services.

E. In addition to any regional offices that may be located across the Commonwealth, any statewide, centralized call center facility that operates in conjunction with a brokerage transportation program for persons enrolled in Medicaid or the Family Access to Medical Insurance Security plan shall be located in Norton, Virginia.

F. The Department of Planning and Budget, is authorized to transfer amounts, as needed, from Medicaid Program Services (45600), Medical Assistance Services for Low Income Children (46600) and Children's Health Insurance Program Delivery (44600), to Administrative and Support Services (49900), to fund administrative expenditures associated with contracts between the department and companies providing dental benefit services, consumer-directed payroll services, claims processing, behavioral health management services and disease state / chronic care programs for Medicaid and FAMIS recipients.

G. The Department of Medical Assistance Services shall, to the extent possible, require web-based electronic submission of provider enrollment applications, revalidations and other related documents necessary for participation in the fee-for-service program under the State Plans for Title XIX and XXI of the Social Security Act.

H. The Department of Medical Assistance Services shall report on efforts to ensure validation of meaningful and reliable encounter data for the purposes of rate setting, program monitoring, providing data to policy makers and the general public, and detection of fraud, waste and abuse. The department shall submit the report to the Director, Department of Planning and Budget and the Chairmen of the House Appropriations and Senate Finance Committees by September 1, 2015.

I . The Department of Medical Assistance Services shall report on the operations and costs of the Medicaid call center (also known as the Cover Virginia Call Center). This report shall include number of calls received on a monthly basis, the purpose of the call, the number of applications for Medicaid submitted through the call center, and the costs of the contract. The department shall submit the report for FY 2015 by August 15, 2015, and for FY 2016 by August 15, 2016. The report shall be submitted to the Director, Department of Planning and Budget and the Chairmen of the House Appropriations and Senate Finance Committees.

J.1. Out of the this appropriation, $150,000 the first year and $150,000 the second year from the general fund and $150,000 the first year and $150,000 the second year from nongeneral funds shall be provided for Medicaid's share of the costs of participating in the Commonwealth's Health Information Exchange (ConnectVirginia). This appropriation is contingent on approval by the federal Centers for Medicare and Medicaid Services of federal financial participation for these costs.

2. Out of this appropriation $100,000 the first year and $100,000 the second year from the general fund and $900,000 the first year and $900,000 the second year from nongeneral funds shall be provided to assist in the costs of onboarding Medicaid providers to the Commonwealth's Health Information Exchange (ConnectVirginia).

K. Out of this appropriation, ~~$100,000 the first year and~~ $100,000 the second year from the general fund shall be provided to contract with the Virginia Center for Health Innovation for research, development and tracking of innovative approaches to healthcare delivery.