

1 HOUSE BILL NO. 917
2 INTRODUCED BY B. KEENAN, J. ESP, L. JONES, J. GILLETTE
3
4 A BILL FOR AN ACT ENTITLED: "AN ACT IMPLEMENTING THE PROVISIONS OF HOUSE BILL NO. 2;
5 REQUIRING THE EVALUATION OF THE SUPPLEMENTAL PAYMENT METHODOLOGY; ESTABLISHING
6 THE PERFORMANCE-BASED PAYMENT ACCOUNT; REVISING ALLOCATIONS OF PROCEEDS FROM
7 THE COLLECTION OF UTILIZATION FEES; SUSPENDING ADDITIONAL PAYMENTS TO DIRECT CARE
8 WORKERS IF NURSING HOME DAILY RATES EXCEED A CERTAIN AMOUNT; REVISING LICENSING FOR
9 NURSING HOME FACILITY BED CAPACITY RATES DEPENDING ON A FACILITY'S AVERAGE ACTUAL
10 OCCUPIED BED RATE; PROVIDING DIRECTION ON THE USE OF FEDERAL FUNDS; PROVIDING
11 AUTHORIZATION ON POSTPARTUM CARE; ESTABLISHING INTERIM REPORTING REQUIREMENTS;
12 PROVIDING RULEMAKING AUTHORITY; AMENDING SECTIONS 15-60-210, 15-60-211, 50-5-204, AND
13 SECTION 53-4-211, MCA; AND PROVIDING AN EFFECTIVE DATE."

14
15 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:

16
17 NEW SECTION. Section 1. — **Evaluation of noncritical access hospital supplemental payment**

18 ~~methodology — rules — report.~~ (1) The department of public health and human services shall evaluate
19 supplemental payment methodology, including but not limited to how medicaid rate increases and hospital
20 costs impact the upper payment limit, the integrity of the cost-to-charge ratio calculation, and alternative upper
21 payment limit calculation methods that may result in more precision. The department shall also require
22 hospitals to provide evidence annually of how the upper payment limit payments impact efficiency, economy,
23 quality of care, and access.

24 (2) — Additionally, the department shall adopt rules that define excessive outlier hospital utilization
25 fees and upper payment limits and assess graduated penalties to noncritical access hospitals that fit within that
26 definition.

27 (3) — The department shall report on the activities described in this section to the joint appropriations

Amendment - 2nd Reading-yellow - Requested by: Steve Fitzpatrick - (S) Committee of Whole

- 2023

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Drafter: Julie Johnson, 406-444-4024

HB0917.003.001

1 **Section 4.** Section 53-4-211, MCA, is amended to read:

2 **"53-4-211. Administration of programs funded under temporary assistance for needy families**

3 **block grant.** (1) The department is authorized and is charged with the general administration and supervision
4 of programs funded under the temporary assistance for needy families block grant under the powers, duties,
5 and functions as prescribed in chapter 2 of this title.

6 (2) The state of Montana shall maintain a fiscal effort equivalent to at least 75% of its historic state
7 expenditures, as defined in 42 U.S.C. 609(a)(7)(B)(iii), governing maintenance of effort necessary to draw down
8 the temporary assistance to needy families block grant.

9 (3) The department shall administer funds in accordance with federal regulations, including for
10 initiatives and services that strengthen families, increase family self-sufficiency, and reduce family dependence
11 on government programs. These initiatives and services may include those related to career development,
12 training, and job search support, increasing child support cooperation, promoting and supporting marriage and
13 two-parent households, and responsible fatherhood and positive parenting skills. The department shall, as
14 appropriate, coordinate or consult with the legislature and other state agencies to ensure that these initiatives
15 and services are the most impactful, are nonduplicative, and are the best at achieving the outcomes sought by
16 the department."

17
18 ~~NEW SECTION. Section 9. Codification instruction. [Sections 1 through 3] are intended to be~~
19 ~~codified as an integral part of Title 50, chapter 2, and the provisions of Title 50, chapter 2, apply to [sections 1~~
20 ~~through 3].~~

21
22 NEW SECTION. Section 5. Postpartum coverage. The appropriation in House Bill No. 2 for the
23 health resources division includes funds to extend medicaid and children's health insurance program coverage
24 to postpartum women from 60 days to 12 months after the conclusion of pregnancy, consistent with sections
25 9812 and 9822 of the American Rescue Plan Act of 2021, 42 U.S.C. 1396a(e)(16) and 1397gg(e)(1)(J), and the
26 department of public health and human services is authorized to provide this extended coverage not
27 withstanding any other provision of law.