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31 32 the legislature at least on a biennial basis.

Amendment to HB 2-FN-A-LOCAL

1	Amend the bill by replacing section 24 with the following:
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3	24 County Reimbursement of Funds; Limitations on Payments. Amend RSA 167:18-a to read
4	as follows:
5	167:18-a County Reimbursement of Funds; Limitations on Payments.
6	I. These expenditures shall in the first instance be made by the state, but each county shall
7	make monthly payments to the state for the amounts due under this section within 45 days from
8	notice thereof.
9	(a) Counties shall reimburse the state for expenditures for recipients for whom such
10	county is liable who are eligible for nursing home care and are receiving services from a licensed
11	nursing home, or in another New Hampshire setting as an alternative to a licensed nursing home
12	placement and are supported under the Medicaid home and community-based care waiver for the
13	elderly and chronically ill, as such waiver may be amended from time to time, to the extent of 100
14	percent of the non-federal share of such expenditures. If at any point the Federal Medical
15	Assistance Percentage increases, the counties' portion of the non-federal share shall be
16	reduced by the amount of the increased federal percentage, if allowable under federal law
17	and subject to any conditions on the funding. Expenditures shall not include payments made
18	for skilled care.
19	(b) Counties shall not be liable for Medicaid recipients in state institutions, the Crotched
20	Mountain Rehabilitation Center, and intermediate care facilities (ICF) approved by the department
21	of health and human services and servicing developmentally impaired persons.
22	II.(a) The total billings to all counties made pursuant to this section shall not exceed the
23	amounts set forth below for state fiscal years [2020-2021] 2022-2023:
24	(1) State fiscal year [2020] 2022, [\$123,372,750] \$129,362,411.

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m III.}(a)$ The cap in total billings shall not exceed an annual increase of 2 percent in any year of the biennium.

(b) The caps on total billings for fiscal years after fiscal year 2015 shall be established by

(2) State fiscal year [2021] **2023**, [\$126,923,933] **\$131,849,659**.

(b) The counties shall have an aggregate credit of \$5,000,000 against amounts due under this section for each fiscal year beginning July 1, 2008. The credit shall be allocated as follows:

Amendment to HB 2-FN-A-LOCAL - Page 2 -

(1) For fiscal year 2009, \$4,000,000 shall be allocated among the counties based upon the proportion each paid for such expenditures in the prior fiscal year, and \$1,000,000 shall be allocated among the counties based upon their relative proportions of residents age 65 or older who are Medicaid recipients.

- (2) For fiscal year 2010, \$2,000,000 shall be allocated among the counties based upon the proportion each paid for such expenditures in the prior fiscal year, and \$3,000,000 shall be allocated among the counties based upon their relative proportions of residents age 65 or older who are Medicaid recipients.
- (3) For fiscal year 2011 and for each fiscal year thereafter, \$5,000,000 shall be allocated among the counties based upon their relative proportions of residents age 65 or older who are Medicaid recipients.
- (4) For fiscal year 2021, in addition to the \$5,000,000 allocated pursuant to subparagraph III(b)(3), a credit of \$9,721,305 shall be allocated among the counties based upon their relative proportions of residents aged 65 years of age or older who are Medicaid recipients.
- [(b)] (c) The credit shall be made available as soon as possible after the start of the fiscal year. The department shall adopt county credit criteria in consultation with the county-state finance commission and in accordance with the provisions of RSA 541-A. The total aggregate obligation of the counties shall be reduced by the amount of the credit in each fiscal year.
- IV. Budgeted general funds shall be applied to the funding of Medicaid long-term services and supports after the allocation of the credit and prior to any county funds.
- V. Notwithstanding the procedures of paragraphs I-III of this section, no county shall be liable for total billings in fiscal year 2009 or fiscal year 2010 in an amount which would be greater than the amount of liability projected for that fiscal year using the methodology for determining county payments in former RSA 167:18-a, 167:18-b, and 167:18-f prior to its repeal together with the amount of liability projected for that fiscal year using the repealed methodology for determining county payments in RSA 169-B, 169-C, and 169-D.
- [V.] VI.(a) Any shortfall between the state audited Medicaid allowances incurred by the state's county operated nursing homes and amounts otherwise reimbursed by federal 50 percent Medicaid matching funds or other income, shall be certified as a public expenditure and be eligible for additional federal funding match.
- (b) The department of health and human services shall seek federal Medicaid assistance match for any state audited county nursing home Medicaid expense which is not fully reimbursed through rates. Any revenue realized through such a match shall be paid to the nursing homes which incurred the unreimbursed expense.