

CONFIDENTIAL
LEGISLATIVE BILL REVIEW FORM: 2016

Bill Number: S. 256 **Name of Bill:** An act relating to extending the moratorium on home health agency certificates of need

Agency/ Dept: AoA

Author of Bill Review: Jordan Keene /Robin Lunge

Date of Bill Review: 5/06/16

Related Bills and Key Players S.167, H.812, H.761

Status of Bill: (check one): ☐ Upon Introduction ☐ As passed by 1st body ☒ As passed by both

Recommended Position:

☐ Support ☐ Oppose ☒ Remain Neutral ☐ Support with modifications identified in #8 below

Analysis of Bill

- 1. Summary of bill and issue it addresses.** This bill extends the moratorium/suspension for certificates of need requirements for new home health agencies until January 1, 2020. The bill requires the GMCB continue to provide status reports on health care reform implementation, including accountable care organizations and the all-payer model, which will significantly impact home health agencies. The status reports could trigger a change in the moratorium.
- 2. Is there a need for this bill?** The not for profit home health agencies believe that extending the moratorium of CONs allows for the State and the GMCB to analyze CON impact on for profit home health agencies. The moratorium has been in place since 2010, so this maintains the status quo.
- 3. What are likely to be the fiscal and programmatic implications of this bill for this Department?**
No fiscal implications. Programmatic implication- AoA will likely want to keep track of any adjusted quality measures required by MCOs and ACOs in order to determine whether the current capacity in the home health network is sufficient and providing high quality care.
- 4. What might be the fiscal and programmatic implications of this bill for other departments in state government, and what is likely to be their perspective on it?**
GMCB will have to continue dedicating resources to doing the status reports. The GMCB already allocates resources to producing status reports. AHS will need to continue to monitor quality and access for services to beneficiaries.
- 5. What might be the fiscal and programmatic implications of this bill for others, and what is likely to be their perspective on it?** *(for example, public, municipalities, organizations,*

business, regulated entities, etc)

No fiscal implications,

ACOs, MCOs/Insurers: Will be interested in development of status reports for home health agencies

6. Other Stakeholders:

6.1 Who else is likely to support the proposal and why?

Nonprofit hospices and the Visiting Nurse Associations. Allows more time to refine standard for home health agencies and maintains their near monopoly.

6.2 Who else is likely to oppose the proposal and why?

TLC, a private duty nurse service, other private home health nursing organizations. This bill limits their program expansion.

7. Rationale for recommendation: This maintains the status quo but allows for changes if there are quality or access problems.

8. Specific modifications that would be needed to recommend support of this bill: *Not meant to rewrite bill, but rather, an opportunity to identify simple modifications that would change recommended position.*

None.

9. Will this bill create a new board or commission AND/OR add or remove appointees to an existing one? If so, which one and how many?

No.

Secretary/Commissioner has reviewed this document: Robin Lunge Date: ____5/6/2016____