

*Request to Amend House Bill 29, as Introduced*

	<u>Item #</u>		<u>Short Title</u>
<b>Health and Human Resources</b>			
<b>Brink</b>	<b>315</b>	2 h	Provide Funds for Part C Early Intervention Services
<b>Hodges</b>	<b>315</b>	3 h	Start-up Funds for State Training Centers and Other Discharges
<b>Ingram</b>	<b>307</b>	1 h	Requirements for Funding Opioid Treatment Services
	<b>315</b>	1 h	Requirements for Funding Opioid Treatment Services
<b>Knight</b>	<b>307</b>	2 h	Supplemental Payments to Physician Affiliated with EVMS
<b>Pogge</b>	<b>315</b>	4 h	Provide Additional LIPOS Funds to Region V CSBs
<b>Scott, Edward</b>	<b>195</b>	1 h	Transfer UVA Hospital Funds to DMAS for Supplemental Payments
	<b>307</b>	3 h	Supplemental Payments to Qualifying Private Hospital Partners - UVA Culpeper Hospital

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Chief Patron: Brink

Item 315 #2h

Co-Patron(s): Ingram, O'Bannon

<b>Health and Human Resources</b>	<b>FY 12-13</b>	<b>FY 13-14</b>	
Grants To Localities	\$0	\$400,000	GF

**Language:**

Page 163, line 45, strike "\$331,621,560" and insert "\$332,021,560".

**Explanation:**

(This amendment provides \$400,000 the second year from the general fund to cover projected caseload in the Part C Early Intervention Program. Without the addition of this funding, local lead agencies will have to place infants and toddlers with disabilities on waiting lists and/or reduce services.)

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Chief Patron: Hodges

Item 315 #3h

Co-Patron(s): BaCote

<b>Health and Human Resources</b>	<b>FY 12-13</b>	<b>FY 13-14</b>	
Grants To Localities	\$0	\$944,000	GF

**Language:**

Page 163, line 45, strike "\$331,621,560" and insert "\$332,565,560".

Page 167 after line 32, insert:

"BB. Out of this appropriation, \$944,000 the second year from the general fund shall be provided as start-up funding for individuals with intellectual and developmental disability discharged from state training centers, intermediate care facilities-intellectual disability, or nursing homes. Start-up funding shall not exceed \$4,000 per individual being discharged."

**Explanation:**

(This amendment adds \$944,000 the second year from the general fund to provide up to \$4,000 for each individual being discharged from the state-owned training centers, Intermediate Care Facilities-Intellectual Disability (ICF/IDs), or nursing homes. Examples of items to be covered include: (i) bedroom furniture, (ii) adaptive equipment items, (iii) purchasing specialized equipment allowing participation in day support programs or employment programs, (iv) additional specialized assessments/evaluations for the individual to be enrolled in the most appropriate program, and (v) clothes and personal items that they do not currently own.)

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Chief Patron: Ingram

Item 307 #1h

**Health and Human Resources**

Department Of Medical Assistance  
Services

Language

**Language:**

Page 158, after line 26, insert:

"UUUU. Out of this appropriation, no funds shall be used to support the treatment of persons with opiate addiction through the use of methadone or other opioid replacements by any providers licensed by the Department of Behavioral Health and Developmental Services located within one-half mile of a public or private licensed day care center or a public or private elementary or secondary school, except when such service is provided by a hospital licensed by the Board of Health or the Commissioner of the Department of Behavioral Health and Developmental Services or is owned by an agency of the Commonwealth."

**Explanation:**

(This amendment prohibits funding to support the treatment of persons with opiate addiction through the use of methadone or other opioid replacements by any providers licensed by the Department of Behavioral Health and Developmental Services located within one-half mile of a public or private licensed day care center or a public or private elementary or secondary school, except when such service is provided by a hospital licensed by the Board of Health or the Commissioner of the Department of Behavioral Health and Developmental Services or is owned by an agency of the Commonwealth.)

Chief Patron: Ingram

Item 315 #1h

**Health and Human Resources**

Grants To Localities

Language

**Language:**

Page 167, after line 32, insert:

"BB. Out of this appropriation, no funds shall be used to support the treatment of persons with opiate addiction through the use of methadone or other opioid replacements by any providers licensed by the Department of Behavioral Health and Developmental Services located within one-half mile of a public or private licensed day care center or a public or private elementary or secondary school, except when

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such service is provided by a hospital licensed by the Board of Health or the Commissioner, or is owned or operated by an agency of the Commonwealth."

**Explanation:**

(This amendment bars the funding of opioid treatment by providers closely located to schools and day care centers, with certain exceptions.)

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Chief Patron: Knight

Item 307 #2h

**Health and Human Resources**

Department Of Medical Assistance  
Services

Language

**Language:**

Page 158, after line 26, insert:

"UUUU. The Department of Medical Assistance Services shall promulgate regulations to make Medicaid supplemental payments to Medicaid physician providers with a medical school located in Eastern Virginia that is a political subdivision of the Commonwealth. The amount of the supplemental payment shall be based on the difference between the average commercial rate approved by the Centers for Medicare and Medicaid Services (CMS) and the payments otherwise made to physicians. Funding for the state share for the Medicaid payments is authorized in Item 245. The Department shall have the authority to implement these reimbursement changes consistent with the effective date in the State Plan Amendment approved by CMS and prior to completion of any regulatory process in order to effect such changes."

**Explanation:**

(This amendment provides DMAS with the authority to make supplemental Medicaid payments to physicians of Eastern Virginia Medical School. The state share of the Medicaid payments will be made by EVMS.)

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Chief Patron: Pogge

Item 315 #4h

**Health and Human Resources**

Grants To Localities

**FY 12-13**

\$0

**FY 13-14**

\$706,000 GF

**Language:**

Page 163, line 45, strike "\$331,621,560" and insert "\$332,327,560".

Page 165, line 49, strike second "1,900,000" and insert "2,606,000".

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**Explanation:**

(This amendment adds \$706,000 the second year from the general fund to provide Region V adequate funding to meet the need for local inpatient service funds to delay or deter placement in a state mental health facility. Without these additional funds, the Community Services Boards will experience a financial shortfall for adult acute hospitalization in the community.)

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Chief Patron: Scott, Edward

Item 195 #1h

**Education: Higher Education**

University Of Virginia

Language

**Language:**

Page 104, after line 3, insert:

"P. In order to provide the state share for Medicaid supplemental payments to Medicaid provider private hospitals in which the UVA Medical Center has a nonmajority interest, the University of Virginia shall transfer to the Department of Medical Assistance Services (DMAS) public funds that comply with 42 C.F.R. Section 433.51."

**Explanation:**

(This amendment proposes language that obligates the UVA Medical Center to make the nongeneral fund transfers to DMAS as match for federal Medicaid funds. A companion amendment in Item 307 provides authority for the payment from the Medicaid program.)

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Chief Patron: Scott, Edward

Item 307 #3h

**Health and Human Resources**

Department Of Medical Assistance  
Services

Language

**Language:**

Page 158, after line 26, insert:

"UUUU. There is hereby appropriated sum-sufficient nongeneral funds for the Department of Medical Assistance Services to pay the state share of supplemental payments for qualifying private hospital partners of Type One hospitals (consisting of state-owned teaching hospitals) as provided in the State Plan for Medical Assistance Services. Qualifying private hospitals shall consist of any hospital currently enrolled

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as a Virginia Medicaid provider and owned or operated by a private entity in which a Type One hospital has a nonmajority interest. The supplemental payments shall be based upon the reimbursement methodology established for such payments in Attachments 4.19-A and 4.19-B of the State Plan for Medical Assistance Services. The Department of Medical Assistance Services shall enter into a transfer agreement with any Type One hospital whose private hospital partner qualifies for such supplemental payments, under which the Type One hospital shall provide the state share in order to match federal Medicaid funds for the supplemental payments to the private hospital partner. The Department shall have the authority to implement this reimbursement change effective upon passage of this act for all payment periods approved in the State Plan, and prior to the completion of any regulatory process undertaken in order to effect such change."

**Explanation:**

(This amendment adds language authorizing the Department of Medical Assistance Services (DMAS), allow for Medicaid supplemental payments for qualifying private hospital partners of state-owned teaching hospitals. The state's share of the supplemental payments shall be provided by the state-owned teaching hospital to draw down matching federal Medicaid funds. The University of Virginia Medical Center has a partnership agreement with Culpeper Regional Hospital. The agreement includes collaborative efforts in the areas of medical care, medical residences, patient access, capital, and a joint business plan. A plan approved by the federal government allows the University of Virginia (UVA) Medical Center to provide nongeneral funds to the federal Centers for Medicare and Medicaid (CMS) through the Department of Medical Assistance Services (DMAS) that will be matched with federal Medicaid funds and provided to Culpeper Regional Hospital. The funds will be used to enhance payment for the treatment of Medicaid patients. The UVA Medical Center has committed to provide the matching funds and would like to remove financial barriers to transferring low-acuity Medicaid patients who live in the Culpeper County area to the Culpeper Regional Hospital, which, in many cases, is the most appropriate provider setting. A companion amendment in Item 197 provides language to effectuate the transfer of funds from UVA to DMAS for this purpose.)

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