

THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE BILL

No. 1829 Session of
1989

INTRODUCED BY PISTELLA, ROBINSON, HALUSKA, DORR, F. TAYLOR,
VAN HORNE, KOSINSKI, COLAIZZO, DeWEESE, GODSHALL, GIGLIOTTI,
JOSEPHS, FOX, BELARDI, TIGUE, KUKOVICH, PRESTON, DALEY,
THOMAS, RYBAK, DeLUCA, CORRIGAN, McHALE, COWELL, FARGO,
MELIO, TRICH, BATTISTO, VEON, CAPPABIANCA, MICHLOVIC, PESCI,
TRELLO, MAIALE, HOWLETT, HAYDEN, FREEMAN, ITKIN, J. TAYLOR
AND E. Z. TAYLOR, JUNE 30, 1989

REFERRED TO COMMITTEE ON YOUTH AND AGING, JUNE 30, 1989

AN ACT

1 Amending the act of June 13, 1967 (P.L.31, No.21), entitled "An
2 act to consolidate, editorially revise, and codify the public
3 welfare laws of the Commonwealth," providing for
4 determination of eligibility for skilled nursing and
5 intermediate care benefits, and further providing for medical
6 assistance payments for institutional care.

7 The General Assembly of the Commonwealth of Pennsylvania
8 hereby enacts as follows:

9 Section 1. The act of June 13, 1967 (P.L.31, No.21), known
10 as the Public Welfare Code, is amended by adding a section to
11 read:

12 Section 442.2. Medical Assistance Eligibility
13 Determinations.--The department or its designees shall make
14 determinations of eligibility for skilled nursing care benefits
15 under medical assistance for all persons for whom a
16 determination of their eligibility is sought (either by the
17 person, his family, an agency or a health care facility)

1 regardless of whether they are residents of or applying for
2 admission to a facility that is enrolled as a provider in the
3 medical assistance program.

4 Section 2. Section 443.1 of the act, amended July 15, 1976
5 (P.L.993, No.202), is amended to read:

6 Section 443.1. Medical Assistance Payments for Institutional
7 Care.--(a) The following medical assistance payments shall be
8 made in behalf of eligible persons whose institutional care is
9 prescribed by physicians:

10 (1) The reasonable cost of inpatient hospital care, as
11 specified by regulations of the department adopted under Title
12 XIX of the Federal Social Security Act and certified to the
13 department by the Auditor General for a bed patient on a
14 continuous twenty-four hour a day basis in a multi bed
15 accommodation of a hospital, exclusive of a hospital or distinct
16 part of a hospital wherein twenty-five percent of patients
17 remain six months or more. To be eligible for such payments a
18 hospital must be qualified to participate under Title XIX of the
19 Federal Social Security Act and have entered into a written
20 agreement with the department regarding matters designated by
21 the secretary as necessary to efficient administration, such as
22 hospital utilization, maintenance of proper cost accounting
23 records and access to patients' records. Such efficient
24 administration shall require the department to permit
25 participating hospitals to utilize the same fiscal intermediary
26 for this Title XIX program as such hospitals use for the Title
27 XVIII program;

28 (2) The cost of skilled nursing and intermediate nursing
29 care in State-owned geriatric centers, institutions for the
30 mentally retarded, institutions for the mentally ill, and in

1 county homes which meet the State and Federal requirements for
2 participation under Title XIX of the Federal Social Security Act
3 and which are approved by the department. This cost in county
4 homes shall be as specified by the regulations of the department
5 adopted under Title XIX of the Federal Social Security Act and
6 certified to the department by the Auditor General; elsewhere
7 the cost shall be determined by the department;

8 (3) Rates on a cost-related basis established by the
9 department for skilled nursing home or intermediate care in a
10 non-public nursing home, when furnished by a nursing home
11 licensed or approved by the department and qualified to
12 participate under Title XIX of the Federal Social Security Act;

13 (4) The cost of care in any mental hospital or in a public
14 tuberculosis hospital. To be eligible for such payments a
15 hospital must be qualified to participate under Title XIX of the
16 Federal Social Security Act and have entered into a written
17 agreement with the department regarding matters designated by
18 the secretary as necessary to efficient administration, such as
19 hospital utilization, maintenance of proper cost accounting
20 records and access to patients' records. Care in a private
21 mental hospital shall be limited to sixty days in a benefit
22 period. Only persons aged twenty-one years or under and aged
23 sixty-five years or older shall be eligible for care in a public
24 mental or tuberculosis hospital. This cost shall be the
25 reasonable cost, as determined by the department for a State
26 institution or as specified by regulations of the department
27 adopted under Title XIX of the Federal Social Security Act and
28 certified to the department by the Auditor General for county
29 and non-public institutions.

30 (b) For purposes of clauses (2) and (3) of subsection (a),

1 for newly constructed nursing homes or wings or units of
2 existing nursing homes, reimbursable costs shall include capital
3 costs as defined by the department if:

4 (1) the skilled nursing home or intermediate care nursing
5 home is located within an area determined by the local Health
6 Systems Agency, or the Department of Health if there is no local
7 Health Systems Agency, to have a shortage of nursing home beds;

8 (2) the county in which the skilled nursing home or
9 intermediate care nursing home is located has a system in place
10 for State-approved preadmission assessment of persons applying
11 for admission to a nursing home; and

12 (3) sixty-five percent of the annual patient bed days
13 provided in the newly constructed unit, wing or nursing home are
14 provided to persons who are recipients of medical assistance.

15 Section 3. This act shall take effect in 60 days.