WEST VIRGINIA LEGISLATURE EIGHTY-SECOND LEGISLATURE REGULAR SESSION, 2015

ENROLLED

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Senate Bill No. 398

(By Senators Ferns, D. Hall and Stollings)

[Passed February 27, 2015; in effect July 1, 2015.]

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AN ACT to amend and reenact §11-27-38 of the Code of West Virginia, 1931, as amended, relating generally to health care provider taxes; modifying expiration date for tax rate on eligible acute care hospitals; changing tax rate on eligible acute care hospitals; and providing for disbursement of any funds remaining in the Eligible Acute Care Provider Enhancement Account.

Be it enacted by the Legislature of West Virginia:

That §11-27-38 of the Code of West Virginia, 1931, as amended, be amended and reenacted to read as follows:

ARTICLE 27. HEALTH CARE PROVIDER TAXES.

§11-27-38. Contingent increase of tax rate on certain eligible acute care hospitals.

(a) In addition to the rate of the tax imposed by sections
 nine and fifteen of this article on providers of inpatient and
 outpatient hospital services, there is imposed on certain
 eligible acute care hospitals an additional tax of seventy-two
 one hundredths of one percent on the gross receipts received
 or receivable by eligible acute care hospitals that provide

Enr.	S. B. No. 398] 2
7 8	inpatient or outpatient hospital services in this state through a Medicaid upper payment limit program.
9 10 11	(b) For purposes of this section, the term "eligible acute care hospital" means any inpatient or outpatient hospital conducting business in this state that is not:
12	(1) A state-owned or -designated facility;
13 14	(2) A nonstate, but government-owned facility such as a county or city hospital;
15 16	(3) A critical access hospital, designated as a critical access hospital after meeting all federal eligibility criteria;
17 18	(4) A licensed free-standing psychiatric or medical rehabilitation hospital; or
19	(5) A licensed long-term acute care hospital.
20 21	(c) The taxes imposed by this section may not be imposed or collected until all of the following have occurred:
22 23 24	(1) A state plan amendment is developed by the Bureau for Medical Services, as authorized by the Secretary of the Department of Health and Human Resources;
25 26	(2) The state plan amendment is reviewed by the Medical Fund Services Advisory Council;
27 28 29	(3) A comment period of not less than thirty days for public comment on the state plan amendment shall have passed; and
30 31	(4) The state plan amendment is approved by the Centers for Medicare and Medicaid Services.

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32 (d) The state plan amendment shall include all of the33 following:

34 (1) The provisions of the proposed upper payment limit35 program or programs;

36 (2) A state maintenance of effort to maintain adequate37 Medicaid funding; and

(3) A provision that any other state Medicaid program
will not negatively impact the hospital upper payment limit
payments. The taxes imposed and collected may be imposed
and collected beginning on the earliest date permissible under
applicable federal law under the upper payment limit
program, as determined by the secretary.

44 (e) There is continued a special revenue account in the 45 State Treasury designated the Medicaid State Share Fund. 46 The amount of taxes collected under this section, including 47 any interest, additions to tax and penalties collected under 48 article ten of this chapter, less the amount of allowable 49 refunds, the amount of any interest payable with respect to 50 such refunds and costs of administration and collection, shall 51 be deposited into the Special Revenue Fund and may not 52 revert to general revenue. The Tax Commissioner shall 53 establish and maintain a separate account and accounting for 54 the funds collected under this section in an account to be 55 designated as the Eligible Acute Care Provider Enhancement 56 Account. The amounts collected shall be deposited, within 57 fifteen days after receipt by the Tax Commissioner, into the 58 Eligible Acute Care Provider Enhancement Account. 59 Disbursements from the Eligible Acute Care Provider Enhancement Account within the Medicaid State Share Fund 60 61 may only be used as set forth in this section.

Enr. S. B. No. 398]

4

62 (f) The imposition and collection of taxes imposed by
63 this section is suspended immediately upon the occurrence of
64 any of the following:

65 (1) The effective date of any action by Congress that
66 would disqualify the taxes imposed by this section from
67 counting toward state Medicaid funds available to be used to
68 determine the federal financial participation;

69 (2) The effective date of any decision, enactment or 70 other determination by the Legislature or by any court, 71 officer, department, agency of office of state or federal 72 government that has the effect of disqualifying the tax from 73 counting toward state Medicaid funds available to be used to 74 determine federal financial participation for Medicaid 75 matching funds or creating for any reason a failure of the 76 state to use the assessment of the Medicaid program as 77 described in this section; and

78 (3) The effective date of an appropriation for any state 79 fiscal year for hospital payments under the state Medicaid 80 program that is less than the amount appropriate for state 81 fiscal year ending June 30, 2011. Fifty percent of any funds 82 remaining in the Eligible Acute Care Provider Enhancement 83 Account as of June 30, 2015, shall be transferred to the West 84 Virginia Medical Services Fund. This transfer shall occur no 85 later than September 30, 2015. These funds shall be used 86 during state fiscal year 2016 at the discretion of the Bureau 87 for Medical Services. The remaining fifty percent of any 88 funds in the Eligible Acute Care Provider Enhancement 89 Account as of June 30, 2015, shall remain in the Eligible 90 Acute Care Provider Enhancement Account and shall be used 91 in state fiscal year 2016. If the program expires on June 30, 92 2016, as set forth in subsection (h) of this section, fifty 93 percent of any funds remaining as of June 30, 2017, shall be 94 transferred on that date to the West Virginia Medical Services

[Enr. S. B. No.-298-398 []]

95 Fund. This transfer shall occur only after state fiscal year 96 2016 fourth quarter tax collections and program payments. The remaining fifty percent of the funds shall be distributed 97 98 to the eligible acute care providers no later than June 30, 99 2017. The distribution of funds to the eligible acute care providers shall be made in the same proportion as the taxes 100 101 paid by the eligible acute care providers into the Eligible 102 Acute Care Provider Enhancement Fund during state fiscal 103 year 2016.

- (g) The changes to the tax rate in this section enacted in
 the 2015 Regular Session are effective July 1, 2015, upon the
 approval of the state plan amendment.
- 107 (h) The tax imposed by this section expires on and after108 June 30, 2016, unless otherwise extended by the Legislature.

The Joint Committee on Enrolled Bills hereby certifies that the forgoing bill is correctly enroyed.

Chairman Senate Committee Chairman House Committee 2015 MAR Originated in the Senate. ÷ In effect July 1, 2015. ⊳ C ę. Clerk of the Senate N 0 Clerk of the House of Delegates President of the Senate Speaker of the House of Delegates The within *La. appl. Me.* this the SE Day of, 2015. Jenstelen

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PRESENTED TO THE GOVERNOR

MAR 0 3 2015

Time 3:00 pm