

2003-04 EXECUTIVE BUDGET
30-Day Amendments

**Amendments to Senate 1408, Assembly 2108
(Health and Mental Hygiene Article VII Bill)**

Part H, relating to authorizing the department of health to establish certain payments to general hospitals, in relation to extending the authorization for the department of health to continue those payments to general hospitals, is amended to:

- Make a technical correction to mirror statutory language pertaining to county IGT payments, in regards to reconciled data.

Part K, relating to authorizing the restructuring of the Medicaid program, containing Medicaid costs, and making Medicaid Managed Care permanent, is amended to:

- Exempt Article 16, 31 and 32 clinics and hospital inpatient and outpatient and freestanding clinics under Article 28 from the limitation placed on Medicaid reimbursement for certain services provided to recipients eligible for both Medicaid and Medicare.
- Clarify that the State will retain one-hundred percent of the non-Federal share of outpatient drug rebates paid by drug manufacturers effective April 1, 2003 consistent with Financial Plan estimates.
- Clarify hospital length of stay adjustment which eliminates the enhancement which provides hospitals with higher Medicaid rates as the duration of patient hospital stays decline to be effective prospectively (i.e., adjustments to 2003 rates and after).
- Repeal the requirement to establish a new program to regulate the provision of Home Medical Equipment (HME) since most HME dealers are Medicaid providers and, as such, are already subject to State oversight.
- Amend effective dates of certain cost containment proposals, including AWP -15%, pharmacy co-payments, and Medicare Crossover to account for implementation lag and other adjustments.

Part L, relating to the reauthorization of HCRA and Child Health Plus through June 30, 2005, is amended to:

- Modify the HCRA amnesty language to eliminate interest and penalty payments for health plans who voluntarily remitted delayed assessment and surcharge payments prior to the enactment of this provision.
- Allow Family Health Plus (FHP) applicants determined to be eligible after February 1, 2003 and prior to the effective date of the income standard established in the provision to continue to receive benefits until the recertification of eligibility or at any other time deemed practicable by the commissioner of health.

Part N, related to authorizing the restructuring of the Early Intervention program, is amended to:

- Correct language, which inadvertently affects Medicaid reimbursement for EI Transportation.