## HOUSE SUBSTITUTE FOR SENATE BILL NO. 1038

A bill to amend 1939 PA 280, entitled "The social welfare act,"

(MCL 400.1 to 400.119b) by adding section 111m.

## THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

- 1 SEC. 111M. (1) AS USED IN THIS SECTION AND SECTION 111N:
- 2 (A) "AUDIT" MEANS A REVIEW OF THE FINANCIAL RECORDS USED TO
- 3 COMPLETE A MEDICAID COST REPORT FOR COMPLIANCE WITH ALLOWABLE COST
- 4 PRINCIPLES AND OTHER POLICY CONTAINED IN THE MEDICAID PROVIDER
- 5 MANUAL. AUDIT INCLUDES, BUT IS NOT LIMITED TO, A LIMITED-SCOPE
- 6 AUDIT OR AN ON-SITE AUDIT. AN AUDIT CAN BE OF LIMITED OR FULL
- 7 SCOPE.
- 8 (B) "COMPLETED AUDIT" MEANS ISSUANCE OF THE PRELIMINARY
- 9 SUMMARY OF AUDIT ADJUSTMENT NOTICE. COMPLETED AUDIT INCLUDES THE
- 10 EXIT MEETING WITH THE NURSING FACILITY PROVIDER.
- 11 (C) "MEDICAID COST REPORT" OR "COST REPORT" MEANS THE COST OF

- 1 CARE REPORTS SUBMITTED ANNUALLY BY A NURSING FACILITY THAT IS
- 2 PARTICIPATING IN THE MEDICAID PROGRAM AT A UTILIZATION RATE ON
- 3 AVERAGE OF AT LEAST 6 MEDICAID RESIDENTS, ON DEPARTMENT COST
- 4 REPORTING FORMS. A NURSING FACILITY PROVIDER WITH LESS THAN 6
- 5 MEDICAID RESIDENTS PER DAY MUST FILE A "LESS THAN COMPLETE" COST
- 6 REPORT AND IS NOT SUBJECT TO AUDIT.
- 7 (D) "SETTLEMENT" MEANS THE PROCESS OF RECONCILING A NURSING
- 8 FACILITY'S INTERIM PAYMENTS BASED ON FILED COST REPORT DATA TO
- 9 AUDITED COST REPORT DATA. A FINAL SETTLEMENT IS COMPUTED AFTER THE
- 10 COST REPORT HAS BEEN AUDITED.
- 11 (2) THE DEPARTMENT SHALL ACCEPT A MEDICAID COST REPORT FILED
- 12 BY A NURSING FACILITY NOT MORE THAN 60 CALENDAR DAYS AFTER THAT
- 13 NURSING FACILITY HAS FILED THE COST REPORT.
- 14 (3) THE DEPARTMENT SHALL ENSURE THAT AN AUDIT OF A MEDICAID
- 15 COST REPORT FILED BY A NURSING FACILITY PERFORMED BY THE DEPARTMENT
- 16 IS COMPLETED NOT MORE THAN 21 MONTHS AFTER THE FINAL ACCEPTANCE OF
- 17 THE COST REPORT. THE SETTLEMENT FOR AN AUDIT SHALL BE DELIVERED TO
- 18 THE PROVIDER NOT MORE THAN 60 CALENDAR DAYS AFTER THE PROVIDER
- 19 ACCEPTS THE FINAL SUMMARY OF AUDIT ADJUSTMENTS. IF A PROVIDER FAILS
- 20 TO RELEASE THE RECORDS NECESSARY TO VERIFY A SPECIFIC COST REPORT
- 21 EXPENSE WITHIN 15 BUSINESS DAYS OF A WRITTEN REQUEST FROM THE
- 22 DEPARTMENT, THE DEPARTMENT MAY DISALLOW THE COST ASSOCIATED WITH
- 23 THE ITEM IN QUESTION. THE TIME PERIOD DESCRIBED IN THIS SUBSECTION
- 24 DOES NOT INCLUDE TIME ASSOCIATED WITH AN APPEAL OR A CHARGE OF
- 25 FRAUD FILED AGAINST THE PROVIDER.
- 26 (4) AN ON-SITE AUDIT MAY BE PERFORMED AT AN INDIVIDUAL NURSING
- 27 FACILITY OR AT THE CORPORATE OFFICE IF A HOME OFFICE COST REPORT IS

- 1 FILED. AN ON-SITE AUDIT SHALL NOT LAST MORE THAN 30 CALENDAR DAYS
- 2 PER COST REPORT YEAR FOR AN INDIVIDUAL NURSING FACILITY AND NOT
- 3 MORE THAN 180 CALENDAR DAYS PER COST REPORT YEAR FOR MORE THAN 6
- 4 COMMONLY OWNED OR CONTROLLED NURSING FACILITIES, UNLESS THE NURSING
- 5 FACILITY AGREES TO AN EXTENDED TIMELINE. A LIMITED-SCOPE AUDIT
- 6 SHALL BE PERFORMED IN THE YEARS AN ON-SITE AUDIT IS NOT PERFORMED.
- 7 THE TIME PERIODS DESCRIBED IN THIS SUBSECTION MUST BE COMPLETED
- 8 WITHIN THE 21-MONTH TIME PERIOD DESCRIBED IN SUBSECTION (3).
- 9 (5) A CUSTOMER SATISFACTION SURVEY SHALL BE PROVIDED TO THE
- 10 NURSING FACILITIES THAT HAVE COMPLETED AUDITS IN THE PREVIOUS
- 11 QUARTER.
- 12 (6) A NURSING FACILITY SHALL MAKE AVAILABLE TO AN AUDITOR
- 13 DOCUMENTATION REQUIRED IN ACCORDANCE WITH THE MEDICAID STATE PLAN,
- 14 THE MEDICAID PROVIDER MANUAL, AND THE CODE OF FEDERAL REGULATIONS
- 15 RELATING TO MEDICARE OR MEDICAID. A NURSING FACILITY SHALL ENHANCE
- 16 UTILIZATION OF ELECTRONIC DOCUMENTS AND CORRESPONDENCE TO EXCHANGE
- 17 INFORMATION TO REDUCE TIME AND TRAVEL REQUIRED FOR NURSING FACILITY
- 18 AUDITS.
- 19 (7) IF AN AUDIT IS NOT COMPLETED WITHIN 21 MONTHS AS DESCRIBED
- 20 IN SUBSECTION (3), THE DEPARTMENT SHALL ACCEPT THE COST REPORT AS
- 21 FILED AND MOVE TO SETTLEMENT.
- 22 (8) THE DEPARTMENT SHALL PROVIDE AUDITOR EDUCATION TO ENSURE
- 23 CONSISTENCY IN APPLICATION OF DEPARTMENT POLICY. THE DEPARTMENT
- 24 SHALL INCLUDE AN ONGOING DISCUSSION OF ALL AUDIT ADJUSTMENTS TO
- 25 ENSURE CONSISTENCY IN APPLYING DEPARTMENT POLICY AND SHALL IDENTIFY
- 26 AND ELIMINATE ANY INCONSISTENCIES BETWEEN OFFICES WITH THIS
- 27 TRAINING.

- (9) NOT LATER THAN 2 YEARS AFTER THE EFFECTIVE DATE OF THE 1
- 2 AMENDATORY ACT THAT ADDED THIS SECTION, THE DEPARTMENT MUST
- 3 FINALIZE ALL AUDITS AND SETTLEMENTS FOR COST REPORTS THAT HAVE BEEN
- 4 FILED SINCE BEFORE THE EFFECTIVE DATE OF THE AMENDATORY ACT THAT
- ADDED THIS SECTION. A COST REPORT DESCRIBED UNDER THIS SUBSECTION 5
- THAT HAS NOT BEEN COMPLETED BY THE DEPARTMENT WITHIN 2 YEARS OF THE
- 7 EFFECTIVE DATE OF THE AMENDATORY ACT THAT ADDED THIS SECTION MUST
- BE ACCEPTED BY THE DEPARTMENT AS FILED BY THE NURSING FACILITY, AND 8
- A COST REPORT SETTLEMENT MUST BE ISSUED WITHIN 60 CALENDAR DAYS 9
- 10 AFTER ACCEPTANCE.
- 11 (10) BEGINNING 2 YEARS AFTER THE EFFECTIVE DATE OF THE
- 12 AMENDATORY ACT THAT ADDED THIS SECTION, THE DEPARTMENT SHALL
- 13 PROVIDE AN ANNUAL REPORT TO THE APPROPRIATE STAKEHOLDERS, INCLUDING
- AT LEAST 1 REPRESENTATIVE FROM EACH NURSING FACILITY PROVIDER TRADE 14
- ASSOCIATION, ON THE IMPLEMENTATION AND RESULTS OF THE COST REPORT 15
- AUDIT AND SETTLEMENT PROCESS ESTABLISHED UNDER THIS SECTION. THE 16
- REPORT SHALL INCLUDE, BUT IS NOT LIMITED TO, BOTH OF THE FOLLOWING: 17
- 18 (A) THE NUMBER OF LIMITED-SCOPE AUDITS, ON-SITE AUDITS, AND
- 19 ANY OTHER TYPE OF AUDIT PERFORMED DURING THE REPORTING PERIOD.
- 20 (B) RESULTS OF THE AUDIT SATISFACTION SURVEYS AND HOW THE
- 21 DEPARTMENT HAS RESPONDED TO THOSE SURVEYS.
- 22 Enacting section 1. This amendatory act takes effect 180 days
- 23 after the date it is enacted into law.