

MONTANA HOUSE OF REPRESENTATIVES



## SPONSOR'S REBUTTAL TO FISCAL NOTE

House Bill Number: HB485 Date Prepared: 02.25.21

**Short Title:** Establish reporting requirements for Medicaid/CHIP quality measures

**Sponsor:** Rep. Jane Gillette

## Generally, why do you disagree with the fiscal note?

The bill has 2 cost drivers:

- 1) The doubling of the Medicaid program audit sampling size, which according to DPHHS requires a new 1 FTE, a new office set-up, & 3% admin costs.
  - a. THIS SECTION OF THE BILL HAS BEEN AMMDENDED OUT AND IS THEREFORE NOT REQUIRED IN THE FISCAL NOTE.
- 2) The monitoring and reporting of meaningful health outcomes of the MT Medicaid/CHIP population to a public, state-comparison, national website.
  - a. DPHHS DID NOT FACTOR IN THE DATA AND REPORTING THAT IS ALREADY MAINTAINED AND COMPLETED BY DPHHS STAFF AND EXISITING SYSTEMS.

## Specifically, what in the fiscal note do you feel is flawed?

Errors present in the DPHHS fiscal note regarding the monitoring and reporting of meaningful health outcomes of the MT Medicaid/CHIP population to the public, state-comparison, national website.

- The DPHHS fiscal note says that there will be \$53,514 for the activation of a new "module" in the Medicaid IT system.
  - o However, the project can be completed without using any of the health measures which require the new module. The public national website gives states latitude in reporting on different health measures. It's evident by the fiscal note, that DPHHS did not check to see what health measures

- they can choose from before developing the fiscal note. The project can be completed by focusing only on health measures which rely on the claims data they already collect and report to the federal government.
- o Furthermore, DPHHS already reports on 4 of the 18 required health measures. Thus, DPHHS already has the IT platform, systems, and processes required to complete this project.
- The DPHHS fiscal note requires the hiring of a new FTE, a new office set-up, plus & 3% admin costs in order to complete bill activities. However,
  - DPHHS already has a staff member who reports to the national public website 4 of the 18 required measures. Since this reporting project already has a dedicated staff member working in DPHHS, no new FTE is needed, nor a new office, or 3% admin costs is required.
  - o In the fiscal note, what DPHHS is asserting is that it requires 1 new FTE, and associated expenses, in order to add only 3.5 new outcome measures each year.

## What is your estimate of the fiscal impact?

**Scenario 1:** No Budgetary Impact: If one assumes that the activities described in this bill are the normal course of business for DPHHS, then there is no budgetary impact.

**Scenario 2:** Average Annual Cost of \$38,250: If one assumes that the activities described in this bill will require an .9 FTE, then there is a projected impact of \$38,250 annually.

Total	38,390	37606	38463	38581
Staff	38,390	37,606	37,488	37,606
GF - monthly subscription			975	975
GF - modules set up one time cost		5351		
	2022	2023	2024	2025

**IMPORTANT:** Montana is the ONLY state in the entire nation which reports on less than ½ of the quality health measures contained on the public national website. <a href="https://www.medicaid.gov/state-overviews/scorecard/state-health-system-performance/index.html">https://www.medicaid.gov/state-overviews/scorecard/state-health-system-performance/index.html</a>

Sponsor Signature:	
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