

SPONSOR: Sen. Hoffner & Sen. S. McBride & Sen. Townsend &

Rep. K. Johnson

Sens. Hansen, Sokola, Sturgeon, Walsh, Wilson; Reps.

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Baumbach, Heffernan

DELAWARE STATE SENATE 152nd GENERAL ASSEMBLY

SENATE BILL NO. 240

AN ACT TO AMEND TITLE 16 OF THE DELAWARE CODE RELATING TO HOME CARE DATA.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF DELAWARE:

1	WHEREAS, Delawareans prefer to obtain care in their homes; and
2	WHEREAS, as the medical field and health-care industry is evolving to provide an increasing amount of home
3	care to patients and clients in their homes as opposed to hospitals, clinics, and doctor offices; and
4	WHEREAS, as the demographics and age distribution in Delaware are becoming increasingly older, resulting in
5	increasing demand statewide for home care services; and
6	WHEREAS, in addition to aging populations, there are children and other medically dependent people, who either
7	require or would benefit from care delivered to them in their home setting; and
8	WHEREAS, the Delaware Division of Medicaid and Medical Assistance is responsible for overseeing the
9	governance of Medicaid, a critical program for providing Delawareans from all walks of life with lifesaving and life
10	sustaining care; and
11	WHEREAS, access to accurate and robust data is important for policy makers and home care providers for
12	assessing the changing care needs of the population, monitoring trends in the home care workforce, and developing
13	appropriate strategic action plans.
14	Section 1. Amend Title 16 of the Delaware Code by making deletions as shown by strike through and insertions as
15	shown by underline as follows and by redesignating accordingly:
16	Part XV. Home Care Services.
17	Chapter 106. Home Care Services.
18	§ 10601. Declaration of purpose.
19	The General Assembly finds that accurate data collection and reporting is essential for assessing and monitoring
20	trends in home care services and the home care industry within the State. The General Assembly further finds that home
21	care providers should have access to claims data to better serve residents and ensure the efficient use of resources for

Page 1 of 4

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residents of this State.

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23	§ 10602. Definitions.
24	As used in this chapter:
25	(1) "Division" means the Division of Medicaid and Medical Assistance as established in § 7931 of Title
26	<u>29.</u>
27	(2) "Fee for service" means home care services that are paid by the state to a provider for each covered
28	home care service.
29	(3) "Home care services" means services that are provided to a client in the client's home which are
30	billable through a fee for service payment system or through a Medicaid Managed Care system.
31	(4) "Qualified home care codes" means the following billing codes as classified by the Healthcare
32	Common Procedure Coding System (HCPCS), produced by the Centers for Medicare and Medicaid Services. The
33	following codes are "qualified home care codes" for purposes of this chapter:
34	a. The private duty nursing codes of S9123, S9124, G0299, and G0300.
35	b. The Medicaid Long-Term Services and Support service codes of G0156, S5130, S5125
36	S5150, and T1005.
37	(5) "Medicaid Managed Care" means payments made by a managed care plan to a provider for services
38	provided.
39	(6) "MMCO" means Medicaid Managed Care Organizations.
40	(7) "NPI" means National Provider Identifier as provided in the Health Insurance Portability and
41	Accountability Act (HIPAA) Administrative Simplification Standard.
42	§ 10603. Reporting and data sharing.
43	(a) The Division shall produce a report on or before March 31, 2025, regarding the use of home care services
44	throughout Delaware during the 2024, 2023, 2022, 2021, and 2020 calendar years as documented by the qualified home
45	care codes listed in § 10602(4) of this title. For each of these calendar years, the Division must report on each qualified
46	home care code at the state and county level, listing fee for service data and Medicaid Managed Care data by individual
47	MMCOs separately, as follows:
48	(1) The number of unduplicated recipients by age or pre-defined age-related category and any pre-defined
49	enrollment category.
50	(2) The monetary value of claims.
51	(3) Authorized Medicaid units of service compared to billed Medicaid units of service.
52	(4) The volume of units of service, monetary claims, and number of recipients by provider name and NPI.

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53	(5) The average and median time, in days, between initial application by beneficiaries and eligibility
54	determinations, with times for approval of services or denial of services, reported separately.
55	(6) The average and median time, in days, between the approval of services and the following:
56	a. Plan of care development.
57	b. Authorization of services.
58	c. Start of Services.
59	(b) For each of the calendar years referenced in subsection (a) of this section, the Division shall list all the HCPCS
60	codes and their corresponding fee for service, related fee schedule, or reasonably equivalent Medicaid reimbursement rate.
61	(c) The Division shall submit this report to the to the Controller General, the Director of the Office of Management
62	and Budget, the Co-Chairs of the Joint Finance Committee, the General Assembly, the Director and Librarian of the
63	Division of Research of Legislative Council, and the Delaware Association for Home & Community Care. The Division
64	shall also make the report available to the public on the Division's state website.
65	§ 10604. Annual reports and data sharing.
66	(a) The Division shall annually prepare a report detailing the use of home care services for the prior calendar year
67	by providing the data identified in § 10603(a) and (b) of this title.
68	(b) The Division shall submit its annual report to all of the following not later than March 31 of each year:
69	(1) The Controller General.
70	(2) The Director of the Office of Management and Budget.
71	(3) The Co-Chairs of the Joint Finance Committee.
72	(4) The President Pro Tempore and Secretary of the Senate, for distribution to all Senators.
73	(5) The Speaker and Chief Clerk of the House of Representatives, for distribution to all Representatives.
74	(6) The Director and Librarian of the Division of Research of Legislative Council.
75	(7) The Director of the Delaware Public Archives.
76	(8) The Governor.
77	(9) The Delaware Association for Home & Community Care.
78	(c) The Division shall also make the report available to the public on the Division's state website not later than
79	March 31 of each year.
80	8 10605 Independent third-party report

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- (a) No later than 60 days following the enactment of this section, the Division must select a third-party organization to create an independent report using the data from the annual report provided by the Division in § 10603 and § 10604 of this title.
- (b) No later than March 31 of each year, the Division shall provide the data required by § 10604(a) of this title to a third-party organization to produce an annual report analyzing the state of the home care industry. The annual report must include a consideration of emerging trends, an analysis of access to care, and an analysis of the home care workforce. The third-party agency shall make its annual report publicly available no later than December 31 of each year.

SYNOPSIS

This Act requires the Division of Medicaid and Medical Assistance ("Division") to produce a report by March 31, 2025, that documents home care services as measured using the most common billing codes for the home care industry. The Act identifies the specific billing codes which are defined as "qualified home care codes."

The Act creates a duty for the Division to provide an annual report on March 31 of every year to document the use of home care services in the State by tracking the use of qualified home care codes. Additionally, an independent, third-party organization will be identified to create an annual report.

Author: Senator Hoffner

Released: 03/13/2024 02:29 PM

Page 4 of 4

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