

ICF/IID Funding Assistance Needed for FY 18-19

***** The community ICF/IID program needs to be funded at \$266,878,559 for FY 18-19.

- The request is based on ICF/IID facilities' cost report data submitted to AHCA for calculation of the July 2017 rates with a modest inflationary factor.
- The FY 17-18 appropriation is only \$254,270,666 which resulted in a \$9,790,723 negative trend adjustment even though cost reports supported funding at about \$265 million.
- This cost reimbursement program needs to fund the cost of care based on AHCA approved facility rates and to ensure compliance to stringent federal requirements.
- Community ICF/IID care is at least \$27,000 less costly than state institutional care on an annual basis and is therefore more cost effective. Additionally, community ICF/IIDs have the added benefit of providing individuals access to community involvement.

New Proviso Language is needed.

General Appropriations Act proviso language amendments are needed to remove language that ties provider reimbursement rates (approved by AHCA) to a fixed appropriation. The following language would prevent more rate cuts.

For FY 18-19, the ICF/IID rate methodology will be based on the rate levels reported in each ICF/IID facility's 2017 cost report filing as adjusted for the QAF, the Medicaid Trend Adjustments and a 2% inflationary factor.

During FY 18-19, ICF/IID representatives will work with the Agency for Health Care Administration to develop a new rate reimbursement methodology for ICF/IID facilities not publicly owned and operated.