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By: Delegate Hurson Introduced and read first time: February 13, 1998 Assigned to: Environmental Matters
Committee Report: Favorable with amendments House action: Adopted Read second time: March 27, 1998
CHAPTER
1 AN ACT concerning
 Medical Assistance - Federally Qualified Health Centers - Supplemental Payment
4 FOR the purpose of establishing a supplemental payment to federally qualified 5 health centers to be paid by the Department of Health and Mental Hygiene in 6 an amount that equals the difference between the payment received by the 7 centers from managed care organizations and the reasonable cost to the centers 8 in providing these services to enrollees who are Maryland Medical Assistance 9 Program recipients; providing for the reduction and termination of the 10 supplemental payment; requiring the Department to conduct a review of 11 payments to the centers from managed care organizations and, under certain 12 circumstances, to set aside a certain amount from the capitation payment to the 13 managed care organizations; requiring a certain report; and providing for the 14 termination of this Act.
15 BY adding to 16 Article - Health - General 17 Section 15-103(e) 18 Annotated Code of Maryland 19 (1994 Replacement Volume and 1997 Supplement)
20 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF 21 MARYLAND, That the Laws of Maryland read as follows:

1 Article - Health - General

- 2 15-103.
- 3 (E) (1) AT LEAST QUARTERLY, THE DEPARTMENT SHALL PAY TO A
- 4 FEDERALLY QUALIFIED HEALTH CENTER THE DIFFERENCE BETWEEN THE
- 5 PAYMENT RECEIVED BY THE CENTER FROM A MANAGED CARE ORGANIZATION FOR
- 6 SERVICES PROVIDED TO ENROLLEES OF THE MANAGED CARE ORGANIZATION AND
- 7 THE REASONABLE COST TO THE CENTER IN PROVIDING THOSE SERVICES.
- 8 (2) THE REASONABLE COST TO A FEDERALLY QUALIFIED HEALTH
- 9 CENTER IN PROVIDING SERVICES TO ENROLLEES SHALL BE DETERMINED IN
- 10 ACCORDANCE WITH § 1902(A)(13)(C)(I) OF THE SOCIAL SECURITY ACT, AS AMENDED BY
- 11 THE BALANCED BUDGET ACT OF 1997, AND ANY APPLICABLE REGULATIONS.
- 12 (3) (I) AT THE REQUEST OF A FEDERALLY QUALIFIED HEALTH
- 13 CENTER, THE DEPARTMENT SHALL REVIEW THE PAYMENTS MADE TO THE CENTER
- 14 BY A MEDICAID MANAGED CARE ORGANIZATION THAT HAS A CONTRACTUAL
- 15 ARRANGEMENT WITH THE CENTER TO DETERMINE THE DIFFERENCE BETWEEN THE
- 16 PAYMENTS MADE TO THE CENTER AND THE REASONABLE COST TO THE CENTER IN
- 17 PROVIDING SERVICES TO ENROLLEES OF THE MANAGED CARE ORGANIZATION.
- 18 (II) IF A MANAGED CARE ORGANIZATION PAYMENT TO A CENTER IS
- 19 LESS THAN THE CENTER'S REASONABLE COST, THE DEPARTMENT SHALL SET ASIDE
- 20 A PORTION OF THE CAPITATION PAYMENT TO THE MANAGED CARE ORGANIZATION
- 21 FOR A SUPPLEMENTAL PAYMENT TO THE CENTER, IN ACCORDANCE WITH THE
- 22 PROVISIONS OF PARAGRAPHS (1) AND (2) OF THIS SUBSECTION.
- 23 (3) (4) IN CARRYING OUT THE PAYMENT REQUIREMENTS OF THIS
- 24 SUBSECTION, THE DEPARTMENT:
- 25 (I) MAY NOT DELEGATE RESPONSIBILITY FOR SUCH PAYMENTS TO
- 26 THE MANAGED CARE ORGANIZATION OR ANY OTHER ENTITY; AND
- 27 (II) SHALL BE RESPONSIBLE FOR MAKING SUCH PAYMENTS
- 28 DIRECTLY TO THE FEDERALLY QUALIFIED HEALTH CENTER.
- 29 (5) PAYMENTS UNDER THIS SUBSECTION SHALL BE REDUCED EACH
- 30 YEAR AND SHALL END IN FISCAL YEAR 2004.
- 31 SECTION 2. AND BE IT FURTHER ENACTED, That the Department of
- 32 Health and Mental Hygiene shall report to the Senate Finance Committee and the
- 33 House Environmental Matters Committee on the implementation of this Act on or
- 34 before September 1, 1998.
- 35 SECTION 2. 3. AND BE IT FURTHER ENACTED, That this Act shall take
- 36 effect July 1, 1998. It shall remain effective for a period of 6 years and, at the end of
- 37 June 30, 2004, with no further action required by the General Assembly, this Act shall
- 38 be abrogated and of no further force and effect.