

BY: Finance Committee

AMENDMENTS TO SENATE BILL NO. 486

(First Reading File Bill)

AMENDMENT NO. 1

On page 1, in line 5, strike “assistance and assigning the recipient to that provider” and substitute “assistance, maintaining continuity of care with that provider, and promoting continuity of care for a newborn”; strike beginning with “the” in line 7 down through “circumstances” in line 10 and substitute “a particular primary care provider and to honor a request to change primary care providers; allowing a recipient to disenroll from a managed care organization under certain circumstances; requiring the Department to provide a certain notification; requiring a managed care organization to establish a certain system to identify the name of a certain primary care provider”; after line 16, insert:

“BY adding to

Article - Health - General

Section 15-103(b)(9)(xvi) and (f)

Annotated Code of Maryland

(1994 Replacement Volume and 1998 Supplement)”;

and in line 14, strike “15-102.1, 15-102.5, and 15-103(b)(23)” and substitute “15-102.5 and 15-103(b)(9)(xiv) and (xv) and (23)”.

AMENDMENT NO. 2

On pages 1 through 3, strike in their entirety the lines beginning with line 20 on page 1 through line 21 on page 3, inclusive.

On page 3, in line 23, strike “SUBSECTION (B) OF THIS SECTION” and substitute “§ 15-103(F) OF THIS SUBTITLE”; strike in their entirety lines 28 through 33, inclusive; and in line 34, strike “(C)” and substitute “(B)”.

(Over)

AMENDMENT NO. 3

On page 4, in line 2, after “(b)” insert:

“(9) Each managed care organization shall:

(xiv) Maintain as part of the enrollee's medical record the following information:

1. The basic health risk assessment conducted on enrollment;

2. Any information the managed care organization receives that results from an assessment of the enrollee conducted for the purpose of any early intervention, evaluation, planning, or case management program;

3. Information from the local department of social services regarding any other service or benefit the enrollee receives, including assistance or benefits under Article 88A of the Code; and

4. Any information the managed care organization receives from a school-based clinic, a core services agency, a local health department, or any other person that has provided health services to the enrollee; [and]

(xv) Upon provision of information specified by the Department under paragraph (19) of this subsection, pay school-based clinics for services provided to the managed care organization's enrollees; AND

(XVI) ESTABLISH A USER-FRIENDLY SYSTEM THAT OPERATES AT LEAST 8 HOURS PER DAY, 5 DAYS PER WEEK, TO QUICKLY AND EFFICIENTLY IDENTIFY THE NAME OF THE PRIMARY CARE PROVIDER ASSIGNED TO AN ENROLLEE.”;

in line 4, strike “SUBPARAGRAPH (III) OF THIS PARAGRAPH” and substitute “SUBSECTION (F)(4) AND (5) OF THIS SECTION”; in line 7, strike the brackets; and strike beginning with the semicolon in line 8 down through “CONTRACT” in line 23.

AMENDMENT NO. 4

On page 4, after line 23, insert:

“(F) (1) THE DEPARTMENT SHALL ESTABLISH MECHANISMS FOR:

(I) IDENTIFYING A PROGRAM RECIPIENT’S PRIMARY CARE PROVIDER AT THE TIME OF ENROLLMENT INTO A MANAGED CARE PROGRAM;

(II) MAINTAINING CONTINUITY OF CARE WITH THE PRIMARY CARE PROVIDER IF:

1. THE PROVIDER HAS A CONTRACT WITH A MANAGED CARE ORGANIZATION OR A CONTRACTED MEDICAL GROUP OF A MANAGED CARE ORGANIZATION TO PROVIDE PRIMARY CARE SERVICES; AND

2. THE RECIPIENT DESIRES TO CONTINUE CARE WITH THE PROVIDER; AND

(III) PROMOTING CONTINUITY OF CARE FOR A NEWBORN, INCLUDING:

1. FACILITATING IDENTIFICATION OF THE PRIMARY CARE PROVIDER FOR A NEWBORN PRIOR TO BIRTH;

2. ASSURING ENROLLMENT OF A NEWBORN WITH A PRIMARY CARE PROVIDER WHO PARTICIPATES IN THE MANAGED CARE ORGANIZATION OF THE MOTHER; AND

3. ASSURING REIMBURSEMENT TO THE PRIMARY CARE PROVIDER WHO DELIVERS CARE DURING THE NEWBORN PERIOD.

(2) IF A PROGRAM RECIPIENT ENROLLS IN A MANAGED CARE ORGANIZATION AND REQUESTS ASSIGNMENT TO A PARTICULAR PRIMARY CARE PROVIDER WHO HAS A CONTRACT WITH THE MANAGED CARE ORGANIZATION OR A CONTRACTED GROUP OF THE MANAGED CARE ORGANIZATION, THE MANAGED

(Over)

CARE ORGANIZATION SHALL ASSIGN THE RECIPIENT TO THE PRIMARY CARE PROVIDER.

(3) A PROGRAM RECIPIENT MAY REQUEST A CHANGE OF PRIMARY CARE PROVIDERS AT ANY TIME AND, IF THE PRIMARY CARE PROVIDER HAS A CONTRACT WITH THE MANAGED CARE ORGANIZATION OR A CONTRACTED GROUP OF THE MANAGED CARE ORGANIZATION, THE MANAGED CARE ORGANIZATION SHALL HONOR THE REQUEST.

(4) WHEN THERE IS A CHANGE OF MANAGED CARE ORGANIZATION OWNERSHIP OR WHEN A MANAGED CARE ORGANIZATION TERMINATES ITS CONTRACT WITH THE DEPARTMENT, A PROGRAM RECIPIENT MAY DISENROLL FROM A MANAGED CARE ORGANIZATION IN ACCORDANCE WITH WRITTEN GUIDANCE PROVIDED BY THE FEDERAL HEALTH CARE FINANCING ADMINISTRATION.

(5) A PROGRAM RECIPIENT MAY DISENROLL FROM A MANAGED CARE ORGANIZATION TO MAINTAIN CONTINUITY OF CARE WITH A PRIMARY CARE PROVIDER IF:

(I) THE CONTRACT BETWEEN THE PRIMARY CARE PROVIDER AND THE MANAGED CARE ORGANIZATION OR CONTRACTED GROUP OF THE MANAGED CARE ORGANIZATION TERMINATES BECAUSE:

1. THE MANAGED CARE ORGANIZATION OR CONTRACTED GROUP OF THE MANAGED CARE ORGANIZATION TERMINATES THE PROVIDER'S CONTRACT FOR A REASON OTHER THAN QUALITY OF CARE; OR

2. THE MANAGED CARE ORGANIZATION OR CONTRACTED GROUP OF THE MANAGED CARE ORGANIZATION PROPOSES TO REDUCE THE PRIMARY CARE PROVIDER'S COMPENSATION RATE AND THE PROVIDER AND THE MANAGED CARE ORGANIZATION OR CONTRACTED GROUP OF THE MANAGED CARE ORGANIZATION ARE UNABLE TO NEGOTIATE A MUTUALLY ACCEPTABLE RATE; AND

(II) 1. THE PROGRAM RECIPIENT DESIRES TO CONTINUE TO RECEIVE CARE FROM THE PRIMARY CARE PROVIDER;

2. THE PROVIDER CONTRACTS WITH AT LEAST ONE OTHER MANAGED CARE ORGANIZATION OR CONTRACTED GROUP OF A MANAGED CARE ORGANIZATION; AND

3. THE ENROLLEE NOTIFIES THE DEPARTMENT OR THE DEPARTMENT'S DESIGNEE OF THE ENROLLEE'S INTENTION WITHIN 90 DAYS AFTER THE CONTRACT TERMINATION.

(6) THE DEPARTMENT SHALL PROVIDE TIMELY NOTIFICATION TO THE AFFECTED MANAGED CARE ORGANIZATION OF AN ENROLLEE'S INTENTION TO DISENROLL UNDER THE PROVISIONS OF PARAGRAPH (5) OF THIS SUBSECTION.'.