

BY: Finance Committee

AMENDMENTS TO SENATE BILL NO. 638

(First Reading File Bill)

AMENDMENT NO. 1

On page 1, in line 4, after “the” insert “Maryland”; in line 5, after “and” insert “Maryland”; strike beginning with “permit” in line 6 down through “time” in line 8 and substitute “ensure that certain providers are reimbursed for certain services provided to newborns; requiring certain managed care organizations to reimburse certain providers for certain services at certain rates until a certain time; requiring a certain assignment of a certain primary care provider to a newborn; requiring a certain managed care organization to designate a certain staff member as a newborn care coordinator; requiring a newborn care coordinator to perform certain duties”; in line 9, strike “certain care” and substitute “a program for newborns”; in the same line, after the third “certain” insert “health care services provided for certain”; in line 10, after “the” insert “Maryland”; in the same line, after “and” insert “Maryland”; in line 13, strike “and 15-103(b)(29)”; and in line 18, after “Section” insert “15-103(b)(30) and”.

AMENDMENT NO. 2

On page 2, strike in their entirety lines 4 through 22, inclusive, and substitute:

“(b) (30) (I) IN THIS PARAGRAPH, “ELIGIBLE NEWBORN” MEANS A NEWBORN WHOSE MOTHER IS RECEIVING MEDICAL ASSISTANCE ON THE DATE OF THE NEWBORN’S BIRTH.

“(II) TO ENSURE PROMPT AND APPROPRIATE CARE OF NEWBORNS AND TO ELIMINATE GAPS IN THEIR CARE, THE DEPARTMENT SHALL ENSURE THAT PROVIDERS WHO FURNISH MEDICALLY NECESSARY SERVICES TO AN ELIGIBLE NEWBORN ARE REIMBURSED FOR THE SERVICES PROVIDED.

“(III) THE MANAGED CARE ORGANIZATION OF A MOTHER OF AN ELIGIBLE NEWBORN SHALL REIMBURSE THE COST OF PRIMARY CARE, PHARMACY,

(Over)

LABORATORY, AND OTHER HEALTH CARE SERVICES PROVIDED TO AN ELIGIBLE NEWBORN AT:

1. ITS FEE-FOR-SERVICE RATE FOR AN IN-NETWORK PROVIDER; AND

2. THE PROGRAM FEE-FOR-SERVICE RATE FOR AN OUT-OF-NETWORK PROVIDER.

(IV) THE MANAGED CARE ORGANIZATION OF A MOTHER OF AN ELIGIBLE NEWBORN SHALL REIMBURSE IN-NETWORK AND OUT-OF-NETWORK PROVIDERS OF SERVICES FOR SERVICES PROVIDED TO AN ELIGIBLE NEWBORN UNTIL THE ELIGIBLE NEWBORN IS:

1. ENROLLED IN THE MEDICAL ASSISTANCE PROGRAM;

2. ENROLLED WITH THE MANAGED CARE ORGANIZATION OF THE MOTHER OR THE MANAGED CARE ORGANIZATION OF THE ELIGIBLE NEWBORN'S SIBLING; AND

3. ASSIGNED TO A PRIMARY CARE PROVIDER OF THE MOTHER'S CHOICE.

(V) THE DEPARTMENT SHALL ESTABLISH A NEWBORN CARE PROGRAM THAT:

1. FACILITATES SELECTION OF A PRIMARY CARE PROVIDER BEFORE THE BIRTH OF AN ELIGIBLE NEWBORN; AND

2. ENSURES THAT A MANAGED CARE ORGANIZATION ASSIGNS A PRIMARY CARE PROVIDER OF THE MOTHER'S CHOICE TO HER ELIGIBLE NEWBORN.

(VI) THE DEPARTMENT SHALL ENSURE THAT EACH MANAGED

CARE ORGANIZATION DESIGNATES AN APPROPRIATE STAFF MEMBER TO BE A NEWBORN CARE COORDINATOR.

(VII) A NEWBORN CARE COORDINATOR IS RESPONSIBLE FOR:

1. RESEARCHING AND CONFIRMING THE ASSIGNMENT OF AN ELIGIBLE NEWBORN TO A MANAGED CARE ORGANIZATION;

2. FACILITATING THE SELECTION OF A PRIMARY CARE PROVIDER FOR AN ELIGIBLE NEWBORN;

3. FACILITATING CLAIMS PAYMENT FOR SERVICES PROVIDED TO AN ELIGIBLE NEWBORN;

4. PROVIDING GENERAL GUIDANCE TO PROVIDERS AND THEIR OFFICE STAFF ON QUESTIONS RELATING TO NEWBORNS; AND

5. COORDINATING WITH ANCILLARY CARE PROVIDERS TO FACILITATE APPROPRIATE DELIVERY OF CARE AND PAYMENT OF CLAIMS.”.

AMENDMENT NO. 3

On page 2, after line 23, insert:

“(A) IN THIS SECTION, “ELIGIBLE NEWBORN” MEANS A NEWBORN WHOSE MOTHER IS RECEIVING MEDICAL ASSISTANCE ON THE DATE OF THE NEWBORN’S BIRTH.”;

in line 24, strike “(A)” and substitute “(B)”; in line 26, strike “MCHP” and substitute “MARYLAND CHILDREN’S HEALTH PROGRAM”; in line 28, strike “(B)” and substitute “(C)”; in the same line, strike “IN ORDER”; and strike beginning with “PERMIT” in line 29 down through “CARE:” in line 30 and substitute “ENSURE THAT PROVIDERS WHO FURNISH MEDICALLY NECESSARY SERVICES TO AN ELIGIBLE NEWBORN ARE REIMBURSED FOR THE SERVICES PROVIDED.”.

(Over)

AMENDMENT NO. 4

On pages 2 and 3, strike in their entirety the lines beginning with line 31 on page 2 through line 9 on page 3, inclusive, and substitute:

“(D) THE MANAGED CARE ORGANIZATION OF A MOTHER OF AN ELIGIBLE NEWBORN SHALL REIMBURSE THE COST OF PRIMARY CARE, PHARMACY, LABORATORY, AND OTHER HEALTH CARE SERVICES PROVIDED TO AN ELIGIBLE NEWBORN AT:

(1) ITS FEE-FOR-SERVICE RATE FOR AN IN-NETWORK PROVIDER; AND

(2) THE PROGRAM FEE-FOR-SERVICE RATE FOR AN OUT-OF-NETWORK PROVIDER.

(E) THE MANAGED CARE ORGANIZATION OF A MOTHER OF AN ELIGIBLE NEWBORN SHALL REIMBURSE IN-NETWORK AND OUT-OF-NETWORK PROVIDERS OF SERVICES FOR SERVICES PROVIDED TO AN ELIGIBLE NEWBORN UNTIL THE ELIGIBLE NEWBORN IS:

(1) ENROLLED IN THE MEDICAL ASSISTANCE PROGRAM;

(2) ENROLLED WITH THE MANAGED CARE ORGANIZATION OF THE MOTHER OR THE MANAGED CARE ORGANIZATION OF THE ELIGIBLE NEWBORN’S SIBLING; AND

(3) ASSIGNED TO A PRIMARY CARE PROVIDER OF THE MOTHER’S CHOICE.

(F) THE DEPARTMENT SHALL ESTABLISH A NEWBORN CARE PROGRAM THAT:

(1) FACILITATES SELECTION OF A PRIMARY CARE PROVIDER BEFORE THE BIRTH OF AN ELIGIBLE NEWBORN; AND

(2) ENSURES THAT A MANAGED CARE ORGANIZATION ASSIGNS A PRIMARY CARE PROVIDER OF THE MOTHER’S CHOICE TO HER ELIGIBLE NEWBORN.

(G) THE DEPARTMENT SHALL ENSURE THAT EACH MANAGED CARE ORGANIZATION DESIGNATES AN APPROPRIATE STAFF MEMBER TO BE A NEWBORN CARE COORDINATOR.

(H) A NEWBORN CARE COORDINATOR IS RESPONSIBLE FOR:

(1) RESEARCHING AND CONFIRMING THE ASSIGNMENT OF AN ELIGIBLE NEWBORN TO A MANAGED CARE ORGANIZATION;

(2) FACILITATING THE SELECTION OF A PRIMARY CARE PROVIDER FOR AN ELIGIBLE NEWBORN;

(3) FACILITATING CLAIMS PAYMENT FOR SERVICES PROVIDED TO AN ELIGIBLE NEWBORN;

(4) PROVIDING GENERAL GUIDANCE TO PROVIDERS AND THEIR OFFICE STAFF ON NEWBORN-RELATED QUESTIONS; AND

(5) COORDINATING WITH ANCILLARY CARE PROVIDERS TO FACILITATE APPROPRIATE DELIVERY OF CARE AND PAYMENT OF CLAIMS.”.

AMENDMENT NO. 5

On page 3, in line 11, strike “October” and substitute “July”.