Department of Legislative Services

Maryland General Assembly 2001 Session

FISCAL NOTE Revised

Senate Bill 636

(Senator Kelley, et al.)

Finance

Environmental Matters

Medicaid Managed Care Organizations - Continuity of Care

This bill requires the Department of Health and Mental Hygiene (DHMH) to adopt regulations that allow a Medicaid enrollee to choose: (1) the Medicaid managed care organization (MCO) in which to enroll; and (2) the primary care provider (PCP) to whom the enrollee is assigned.

The bill takes effect June 1, 2001.

Fiscal Summary

State Effect: The adoption of regulations and the study could be handled with existing budgeted DHMH resources. No effect on revenues.

Local Effect: None.

Small Business Effect: None.

Analysis

Bill Summary: If a Medicaid enrollee disenrolls from Medicaid and then reenrolls within 120 days, DHMH must assign the enrollee to his or her former MCO, which in turn must assign the enrollee to his or her former PCP. An MCO that withdraws from participation in the HealthChoice program must: (1) provide an enrollee with at least 60 days' prior written notice, including contact information for the new PCP and the enrollment broker; and (2) within 30 days after withdrawal, provide DHMH with a list of enrollees and their PCPs. Upon receiving the list from a departing MCO, DHMH must

provide the list to the enrollment broker and the remaining MCOs for the purpose of providing outreach to MCO enrollees and linking enrollees with new PCPs.

In addition, DHMH, as part of the HealthChoice evaluation, must study DHMH and subcontractor costs associated with transitioning enrollees of departing MCOs. DHMH must report to the House Environmental Matters and Senate Finance committees by January 1, 2002 on: (1) the findings of the study; (2) current reenrollment procedures and funding sources for transitioning enrollees; and (3) recommendations for mechanisms that reimburse costs associated with transitioning enrollees.

Current Law: DHMH must establish mechanisms to maintain continuity of care for Medicaid managed care enrollees. The department must identify an enrollee's PCP at the time of enrollment.

Additional Information

Prior Introductions: None.

Cross File: HB 1227 (Delegate Oaks) – Environmental Matters.

Information Source(s): Department of Health and Mental Hygiene (Medicaid),

Department of Legislative Services

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Revised – Enrolled Bill – May 2, 2001

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