HOUSE AMENDMENT

Bill No. HB 7223 (2010)

		CHAMBER ACTION	
	Senate		House
Representa	tive Homan offe	ered the followin	d:
Amend	lment (with tit)	Le amendment)	
Remov	re lines 831-895	5 and insert:	
(3)	PERFORMANCE MEA	ASUREMENTEach p	lan shall monitor the
quality an	d performance o	of each participa	ting provider. At the
beginning	of the contract	c period, each pl	an shall notify all its
network pr	oviders of the	metrics used by	the plan for evaluating
the provid	ler's performanc	ce and determinin	g continued
participat	ion in the netw	work.	
(4)	PREGNANCY AND	INFANT HEALTHEa	ch plan shall establish
specific p	programs and pro	ocedures to impro	ve pregnancy outcomes
and infant	health, includ	ding, but not lim	ited to, coordination
with the H	lealthy Start p	rogram, immunizat	ion programs, and
referral t	o the Special S	Supplemental Nutr	ition Program for
	-	-	
601607			
Approved F	or Filing: 4/14		
	Amend Remov (3) quality an beginning network pr the provid participat (4) specific p and infant with the H referral t	Representative Homan offe Amendment (with tit: Remove lines 831-899 (3) PERFORMANCE MEZ quality and performance of beginning of the contract network providers of the the provider's performance participation in the network (4) PREGNANCY AND : specific programs and pro- and infant health, include with the Healthy Start pro- referral to the Special S 601607	Representative Homan offered the followin Amendment (with title amendment) Remove lines 831-895 and insert: (3) PERFORMANCE MEASUREMENTEach p quality and performance of each participa beginning of the contract period, each pl network providers of the metrics used by the provider's performance and determinin participation in the network. (4) PREGNANCY AND INFANT HEALTHEa specific programs and procedures to impro and infant health, including, but not lim with the Healthy Start program, immunizat referral to the Special Supplemental Nutr

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16	Amendment No. Women, Infants, and Children, and the Children's Medical
17	Services program for children with special health care needs.
18	(5) SCREENING RATEEach plan shall achieve an annual
19	Early and Periodic Screening, Diagnosis, and Treatment Service
20	screening rate of at least 60 percent for those recipients
21	continuously enrolled for at least 8 months.
22	(6) PROVIDER PAYMENTPlans and hospitals shall negotiate
23	mutually acceptable rates, methods, and terms of payment. At a
24	minimum, plans shall pay hospitals the Medicaid rate. Payments
25	to hospitals shall not exceed 150 percent of the Medicaid rate,
26	unless specifically approved by the agency. For purposes of this
27	subsection, the Medicaid rate is the rate the agency would have
28	paid on the first day of the contract between the provider and
29	the plan. Payment rates may be updated periodically.
30	(7) CONFLICT RESOLUTIONThe agency shall establish a
31	process for resolving disputes between qualified plans Medicaid
32	inpatient hospital providers when the agency is notified by
33	either party of irreconcilable differences and the agency
34	determines that the dispute jeopardizes access to or quality of
35	services for Medicaid recipients. The agency may contract with
36	an outside entity for any portion of this process. When this
37	process is invoked by one or both of the parties, the agency is
38	authorized to establish payment rates, contract terms, and other
39	conditions on either or both parties. This process may not be
40	used to review and reverse any plan decision to exclude any
41	provider that fails to meet quality standards. Administration
42	costs of each instance of conflict resolution shall be paid by
43	the entities which invoke it, in equal parts.
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	Amendment No.
44	(8) MEDICALLY NEEDY ENROLLEESEach selected plan shall
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48	TITLE AMENDMENT
49	Remove lines 80-81 and insert:
50	in the first year; requiring plans to monitor the
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