House File 2483

H-8389

- 1 Amend House File 2483 as follows:
- 2 1. Page 3, after line 29 by inserting:
- 3 <d. A managed care organization shall provide written</p>
- 4 notice to all affected individuals at least sixty days prior
- 5 to a significant change in administrative procedures relating
- 6 to the scope or coverage of benefits, billings and collections
- 7 provisions, provider network provisions, member or provider
- 8 services, prior authorization requirements, or any other terms
- 9 of a managed care contract or agreement as determined by the
- 10 department of human services. A managed care organization may
- 11 comply with the requirement of providing written notice under
- 12 this paragraph by posting such written notice on the managed
- 13 care organization's internet site.
- 14 e. The department of human services shall engage dedicated
- 15 provider relations staff to assist Medicaid providers in
- 16 resolving billing conflicts with managed care organizations
- 17 including those involving denied claims, technical omissions,
- 18 or incomplete information. If the provider relations staff
- 19 observe trends evidencing fraudulent claims or improper
- 20 reimbursement, the staff shall forward such evidence to the
- 21 department of human services for further review.
- 22 f. The department of human services shall adopt rules
- 23 pursuant to chapter 17A to require the inclusion by a managed
- 24 care organization of advanced registered nurse practitioners
- 25 and physician assistants as primary care providers for the
- 26 purposes of population health management.>

HEATON of Henry