House Bill 2850

Sponsored by Representative MAURER, Senator MONNES ANDERSON; Representatives D EDWARDS, GREENLICK, MINNIS, MORGAN, OLSON, READ, RICHARDSON, ROBLAN, G SMITH, WHISNANT, Senators DEVLIN, METSGER

SUMMARY

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure **as introduced.**

Requires Department of Human Services and local public health authorities to compile Kids' Network List of medical providers available in each county to provide primary care services to children. Prohibits health insurer from denying coverage for services received from provider on list. Requires department to reimburse for primary care services rendered by provider on list to child who receives or qualifies for medical assistance.

A BILL FOR AN ACT

Relating to primary care health services for children; creating new provisions; and amending ORS 743 701

Be It Enacted by the People of the State of Oregon:

SECTION 1. (1) In cooperation with local public health authorities, the Department of Human Services shall identify all private and public health care providers in each county that are qualified and willing to provide primary care services to children through the Kids' Network. The department shall compile a Kids' Network List for each county. The department shall publish each list and disseminate it widely within each county for the purpose of improving the ability of children to access primary care where they live and go to school. The department shall regularly update each list. The department also shall publicize the Kids' Network on a statewide basis.

- (2) With data from local public health authorities, the department shall analyze and evaluate the availability of primary care for children in each county to identify areas that are underserved or where access to care is impeded and shall work with health authorities to address the lack of available health care providers and the barriers to access. The department also shall analyze and evaluate the local infrastructure in each county to determine the health care systems that are most accessible to children, most cost effective and best able to manage a large patient load.
- (3) A primary care provider that is on a Kids' Network List described in subsection (1) of this section and that is qualified to receive state Medicaid funds may not deny to any child primary care services that are within the services offered by the provider. The services must be provided using a health home model that ensures that every patient receives appropriate primary care as well as a facilitated referral to necessary specialty care.
- (4) The department must reimburse a primary care provider that is on Kids' Network Lists described in subsection (1) of this section at the Medicaid fee-for-service rate adopted by the department for providing primary care services to a child who would have qualified for medical assistance under ORS chapter 414 if the child had applied for such assistance,

as long as the provider enters into a Medicaid provider agreement with the department.

- (5) If a child receives medical assistance under ORS chapter 414 and obtains primary care services from a provider that is on a Kids' Network List described in subsection (1) of this section but the provider is not participating in the managed care plan in which the child is enrolled, the department must reimburse the provider for the services at the Medicaid feefor-service rate adopted by the department.
- (6) Payments made by the department under this section shall constitute payment in full for all primary care services for which such payments were made.
- (7) The provisions of this section apply with respect to private providers and publicly funded providers.
 - (8) As used in this section:
 - (a) "Child" means a person under 19 years of age.
 - (b) "Local public health authority" means the entity described in ORS 431.375.
- (c) "Primary care" means patient care within the areas of family practice, general practice, internal medicine, pediatrics, mental health, obstetrics and gynecology.
 - (d) "Provider" means a health professional licensed in this state to provide patient care. **SECTION 2.** ORS 743.701 is amended to read:

743.701. [No] A policy of health insurance [shall] may not exclude from payment or reimbursement losses incurred by an insured for any covered service because the service was rendered at any hospital owned or operated by the State of Oregon, [or] any state approved community mental health and developmental disabilities program or a primary care provider on a Kids' Network List described in section 1 of this 2007 Act.

SECTION 3. For the biennium beginning July 1, 2007, the provisions of section 1 of this 2007 Act apply only to four counties identified by the Department of Human Services as representative of the availability of primary care services in various regions of the state.

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