HOUSE AMENDMENTS TO HOUSE BILL 2221

By COMMITTEE ON HUMAN SERVICES AND HOUSING

April 14

1	On page 1 of the printed bill, line 5, delete "Each calendar quarter," and insert "(1) Every 1
2	months,".
3	After line 10, insert:

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- "(2) At any time the authority determines that there are insufficient funds in each coordinated care organization's global budget or reserves, or from another available source, to pay the costs of complying with ORS 414.762, the authority shall immediately report the amount of the shortfall to the Joint Committee on Ways and Means during the period when the Legislative Assembly is in session or, during the interim period between sessions, to the Emergency Board or the Joint Interim Committee on Ways and Means and the interim committees of the Legislative Assembly related to health and human services. The authority shall include with the report:
 - "(a) An explanation of why it does not prioritize child abuse intervention services; and
- 12 "(b) Recommendations for budgetary actions or other steps that may be taken to ensure ade-13 quate funding for child abuse intervention services.".
 - In line 11, delete "Each calendar quarter" and insert "(1) Every 12 months,".
- 15 After line 14, insert:
 - "(2) If the department has failed to fully implement and enforce the provisions of ORS 743A.252, or there has been inadequate compliance by persons with certificates of authority to transact insurance in this state, the report must include:
 - "(a) An explanation of why the department and insurers do not prioritize child abuse intervention services; and
 - "(b) Recommendations to improve compliance with ORS 743A.252.".
 - Delete lines 15 through 28 and insert:
- "SECTION 3. ORS 414.762 is amended to read: 23
- 24 "414.762. (1) As used in this section:
- 25 "(a) 'Child abuse medical assessment' has the meaning given that term in ORS 418.782.
- 26 "(b) 'Community assessment center' has the meaning given that term in ORS 418.782.
- 27 "(2) The Oregon Health Authority shall [reimburse] ensure that a community assessment center 28 is reimbursed by a coordinated care organization for the services the center provides:
 - "(a) In conducting a child abuse medical assessment of a child who is [eligible for medical assistance] enrolled in the coordinated care organization; and
 - "(b) That are related to the child abuse medical assessment including, but not limited to:
- 32 "(A) A forensic interview; and
- "(B) Mental health treatment. 33
- 34 "[(3) The authority shall adopt billing and payment mechanisms to ensure that the reimbursement is proportionate to the scope and intensity of the services provided by the community assessment 35

center.]

"(3) A payment to a community assessment center must fully reimburse the cost of the services provided by the community assessment center:

- "(a) As determined by the community assessment center; or
- "(b) Using an alternative payment methodology agreed to by the community assessment center.
- "(4) A claim for reimbursement made by a community assessment center must be paid no later than 60 days after the claim is submitted.
- "(5) A coordinated care organization shall report to the authority any claims for reimbursement by a community assessment center that have not been paid in accordance with subsection (4) of this section. The authority shall include the information reported by coordinated care organizations under this subsection in the report required by section 1 of this 2017 Act.".

On page 2, delete lines 1 through 4.

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