

## HB 1705 - DIGEST

Declares an intent to preserve the number of private medical practitioners providing essential safety net care to uninsured and medicaid patients by addressing barriers to private practice participation. Private practitioners are critical to preserving health care access for lower-income patients.

Declares an intent to provide targeted economic incentives for private provider participation in safety net care and calls for the streamlining of medicaid administrative procedures and a reduction of the administrative burden on private medical providers.

Requires the department to reverify eligibility for medical assistance on an annual basis.

Provides that the department shall not charge copremiums for medical and dental coverage of children.

Requires the department to upgrade the medicaid management information system and participate in a single secure eligibility verification system used by carriers and health care providers.

Provides that the department shall require health care contractors to develop policies and practices to support collaborative efforts to promote a new model of chronic disease management.

Requires the department to provide retroactive payment to health care providers when patient medicaid eligibility and health contractor verification is not available at the time of service.

Provides that the department shall require health care contractors to have primary care and specialty care networks in place and shall verify the integrity of their primary care and specialty care networks, that those networks are geographically within the service area, and that the providers are actually open to accepting referrals before the department signs or extends contracts. If an out-of-county specialist is needed for a medicaid client because of an inadequate specialist network within the county, written documentation is not required.

Directs the department to develop a grant program to reimburse providers who serve individuals who are medically indigent.

Provides that the department of health shall develop, in consultation with the department of revenue, a program to provide business and occupation tax credits for physicians who serve uninsured and medicaid patients in a private practice or a reduced fee access program for the uninsured and shall submit proposed legislation to the legislature by December 15, 2005.