## A-Engrossed House Bill 2221

Ordered by the House April 14 Including House Amendments dated April 14

Sponsored by Representative WHISNANT, Senators GELSER, TAYLOR, Representative STARK; Representatives DOHERTY, HACK, MARSH, NOBLE, SMITH DB, SMITH WARNER, WITT (Presession filed.)

## **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.

Requires Oregon Health Authority and Department of Consumer and Business Services to report annually to Legislative Assembly [each calendar quarter] on implementation of requirements to reimburse cost of child abuse medical assessments conducted by community assessment centers. Requires authority and department, if there are insufficient funds to implement requirements, to report funding shortfall to Joint Committee on Ways and Means and relevant legislative policy committees and provide explanation for why implementation is not given priority consideration.

Requires authority to [pay nine percent interest if claim not paid] ensure that coordinated care organizations pay cost-based reimbursement to community assessment center for child abuse medical assessment and to make payment within 60 days [from date payment is due].

Declares emergency, effective on passage.

## A BILL FOR AN ACT

- Relating to reimbursement of child abuse medical assessments; creating new provisions; amending ORS 414.762 and 743A.252; and declaring an emergency.
  - Be It Enacted by the People of the State of Oregon:
  - SECTION 1. (1) Every 12 months, the Oregon Health Authority shall report to the Legislative Assembly, in the manner provided in ORS 192.245, on the implementation of ORS 414.762, including, but not limited to, the number of reimbursements paid to community assessment centers for child abuse medical assessments and the number of grievances and contested case hearings requested with respect to the authority's obligations under ORS 414.762.
  - (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
  - (b) Recommendations for budgetary actions or other steps that may be taken to ensure adequate funding for child abuse intervention services.
    - SECTION 2. (1) Every 12 months, the Department of Consumer and Business Services

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- shall report to the Legislative Assembly, in the manner provided in ORS 192.245, on the implementation of ORS 743A.252, including, but not limited to, a report on consumer complaints regarding compliance with ORS 743A.252.
  - (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.
- SECTION 3. ORS 414.762 is amended to read:
- 11 414.762. (1) As used in this section:

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- (a) "Child abuse medical assessment" has the meaning given that term in ORS 418.782.
- 13 (b) "Community assessment center" has the meaning given that term in ORS 418.782.
- 14 (2) The Oregon Health Authority shall [reimburse] ensure that a community assessment center 15 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:
- 19 (A) A forensic interview; and
- 20 (B) Mental health treatment.
- [(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 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.
    - **SECTION 4.** ORS 743A.252 is amended to read:
- 37 743A.252. (1) As used in this section:
- 38 (a) "Child abuse medical assessment" has the meaning given that term in ORS 418.782.
- 39 (b) "Community assessment center" has the meaning given that term in ORS 418.782.
- 40 (c) "Health benefit plan" has the meaning given that term in ORS 743B.005.
- 41 (2) A health benefit plan shall provide payment to or reimburse a community assessment center 42 for the services provided by the center:
  - (a) In conducting a child abuse medical assessment of a child enrolled in the plan; and
- 44 (b) That are related to the child abuse medical assessment including, but not limited to:
- 45 (A) A forensic interview; and

1	(B) Mental health treatment.
2	(3) The payment or reimbursement made in accordance with this section must [be proportionate
3	to] fully take into account the scope and intensity of the services provided by the community as-
4	sessment center.
5	(4) This section is exempt from ORS 743A.001.
6	SECTION 5. Sections 1 and 2 of this 2017 Act become operative 30 days after the effective

date of this 2017 Act.

SECTION 6. This 2017 Act being necessary for the immediate preservation of the public peace, health and safety, an emergency is declared to exist, and this 2017 Act takes effect

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on its passage.