
HOUSE COMMITTEE AMENDMENTS

Amendments proposed by House Committee on Health and Welfare to Original House Bill No. 392 by Representative Stuart Bishop

1 AMENDMENT NO. 1

2 On page 1, line 6, after "providers;" and before "to provide" insert "to provide for
3 exemptions;"

4 AMENDMENT NO. 2

5 On page 1, at the end of line 13, insert "AND EXEMPTIONS"

6 AMENDMENT NO. 3

7 On page 3, between lines 12 and 13, insert the following:

8 "§460.42. Exemptions

9 The provisions of this Part shall not apply to any entity that contracts with the
10 department to provide fiscal intermediary services in processing claims of health care
11 providers."

12 AMENDMENT NO. 4

13 On page 3, at the beginning of line 15, change "A.(1)" to "A."

14 AMENDMENT NO. 5

15 On page 3, at the beginning of line 25, change "(2)(a)" to "B.(1)"

16 AMENDMENT NO. 6

17 On page 4, at the beginning of line 1, change "(b)" to "(2)"

18 AMENDMENT NO. 7

19 On page 4, at the beginning of line 4, change "(3)" to "C."

20 AMENDMENT NO. 8

21 On page 4, at the beginning of line 11, change "(a)" to "(1)"

22 AMENDMENT NO. 9

23 On page 4, at the beginning of line 13, change "(b)" to "(2)"

24 AMENDMENT NO. 10

25 On page 4, delete lines 15 through 17 in their entirety

26 AMENDMENT NO. 11

27 On page 7, delete lines 5 through 7 in their entirety and insert in lieu thereof the following:

28 "D. All managed care organizations shall recognize in their fee schedules all
29 CPT codes which are included in the Medicaid fee-for-service fee schedule."

1 AMENDMENT NO. 12

2 On page 7, delete lines 9 through 17 in their entirety and insert in lieu thereof the following:

3 "Each managed care organization shall compensate, at a minimum, the
4 Medicaid fee-for-service rate in effect for the dates of service for all primary care
5 services rendered to a newborn Medicaid beneficiary within thirty days of the
6 beneficiary's birth regardless of whether the Medicaid provider rendering the
7 services is contracted with the managed care organization."