

SB 5703-S - DIGEST

(DIGEST OF PROPOSED 1ST SUBSTITUTE)

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.

Provides that eligibility review periods for children and pregnant women eligible for medical assistance as defined in RCW 74.09.510, children eligible for the children's health program as defined in RCW 74.09.415, and children eligible for the children's health insurance program as defined in RCW 74.09.450 shall be no more frequent than every twelve months.

Provides that the department shall require that plans have up-to-date eligibility information, including plan and primary care provider status, accessible to providers at all times. Payments and authorizations shall be made based on this information.

Provides that the department shall require health care contractors to have primary care and specialty care networks in place within the geographic service area and that the contractors verify that those networks are up-to-date and that the information is accessible to primary 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.

Provides that the department of revenue shall develop, in consultation with the department of health, the department of social and health services, and the health care authority, a program to provide business and occupation tax credits for physicians who serve uninsured or state-purchased low-income health care patients in a private practice and shall submit proposed legislation to the legislature by December 15, 2005.