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HOUSE JOINT RESOLUTION NO. 577

Offered January 13, 2021

Establishing a joint subcommittee to study oversight of Medicaid managed care organizations and provider networks in the Commonwealth. Report.

Patrons—Price, Adams, D.M., Bagby, Carter, Helmer, Mundon King, Plum, Rasoul, Reid, Simon and Simonds

Referred to Committee on Rules

WHEREAS, the Department of Medical Assistance Services works to improve the health and well-being of residents of the Commonwealth by providing access to high-quality health care coverage for eligible Virginians through programs known, collectively, as Medicaid; and

WHEREAS, most Medicaid enrollees are served through health plans made available to eligible enrollees pursuant to a contract between the Department of Medical Assistance Services and a managed care organization; and

WHEREAS, health plans offered to Medicaid enrollees by managed care organizations include a network of primary care providers, specialists, hospitals, and other inpatient and outpatient health care providers and services; and

WHEREAS, contracts between the Department of Medical Assistance Services and managed care organizations include requirements related to network adequacy, composition, recruitment and selection, provider licensure and certification standards, access to care, and monitoring and oversight of participating providers, but managed care organizations exercise a degree of autonomy with regard to specific providers included in provider networks; and

WHEREAS, some providers report being dropped from managed care organizations' provider networks without receiving notice or information regarding why they are being dropped from the network or steps they may be able to take to address problems that may contribute to their exclusion from provider networks; and

WHEREAS, ensuring that providers have access to information and assistance to ensure they comply with all requirements and continue to satisfy contractual obligations can improve the quality of health care for all Medicaid enrollees while also ensuring access to a range of providers that reflect the diversity of the Commonwealth; and

WHEREAS, a better understanding of the role of the Department of Medical Assistance Services, managed care organizations, and providers providing services to Medicaid enrollees allows for improvement of the Medicaid program and services for residents of the Commonwealth; now, therefore, be it

RESOLVED by the House of Delegates, the Senate concurring, That a joint subcommittee be established to study oversight of Medicaid managed care organizations and provider networks in the Commonwealth. The joint subcommittee shall have a total membership of six members that shall consist of six legislative members. Members shall be appointed as follows: four members of the House of Delegates to be appointed by the Speaker of the House of Delegates in accordance with the principles of proportional representation contained in the Rules of the House of Delegates, and two members of the Senate to be appointed by the Senate Committee on Rules. If a companion joint resolution of the other chamber is agreed to, written authorization of both Clerks shall be required. The joint subcommittee shall elect a chairman and vice-chairman from among its membership, who shall be members of the General Assembly.

In conducting its study, the joint subcommittee shall (i) review the current process by which the Department of Medical Assistance Services enters into contracts with managed care organizations for the delivery of services to Medicaid enrollees and the requirements of such contracts; (ii) review the process by which managed care organizations enter into and terminate contracts with providers in the Commonwealth, including any procedural requirements that must be met before a provider agreement is terminated and any opportunity for communication and correction by the provider; (iii) review information about managed care organizations' provider networks, including demographic information about enrolled providers and recent changes in managed care organizations' provider networks, including demographic information about providers that have been added to or removed from provider networks in recent years; (iv) determine whether changes should be made to contracts between the Department of Medical Assistance Services and managed care organizations to ensure providers are able to meet agreements set forth in provider agreements while ensuring the safety and well-being of Medicaid enrollees; and (v) develop recommendations for improving the process by which providers of Medicaid

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58 services are recruited, enrolled in, participate in, and are terminated from provider networks to ensure
59 access to a diverse array of services and providers for all Medicaid enrollees in the Commonwealth.

60 Administrative staff support shall be provided by the Office of the Clerk of the House of Delegates.
61 Legal, research, policy analysis, and other services as requested by the joint subcommittee shall be
62 provided by the Division of Legislative Services. Technical assistance shall be provided by the
63 Department of Medical Assistance Services. All agencies of the Commonwealth shall provide assistance
64 to the joint subcommittee for this study, upon request.

65 The joint subcommittee shall be limited to four meetings for the 2021 interim, and the direct costs of
66 this study shall not exceed \$11,280. Approval for unbudgeted nonmember-related expenses shall require
67 the written authorization of the chairman of the joint subcommittee and the respective Clerk. If a
68 companion joint resolution of the other chamber is agreed to, written authorization of both Clerks shall
69 be required.

70 No recommendation of the joint subcommittee shall be adopted if a majority of the House members
71 or a majority of the Senate members appointed to the joint subcommittee (a) vote against the
72 recommendation and (b) vote for the recommendation to fail notwithstanding the majority vote of the
73 joint subcommittee.

74 The joint subcommittee shall complete its meetings by November 30, 2021, and the chairman shall
75 submit to the Division of Legislative Automated Systems an executive summary of its findings and
76 recommendations no later than the first day of the 2022 Regular Session of the General Assembly. The
77 executive summary shall state whether the joint subcommittee intends to submit to the General
78 Assembly and the Governor a report of its findings and recommendations for publication as a House or
79 Senate document. The executive summary and the report shall be submitted as provided in the
80 procedures of the Division of Legislative Automated Systems for the processing of legislative documents
81 and reports and shall be posted on the General Assembly's website.

82 Implementation of this resolution is subject to subsequent approval and certification by the Joint
83 Rules Committee. The Committee may approve or disapprove expenditures for this study, extend or
84 delay the period for the conduct of the study, or authorize additional meetings during the 2021 interim.