

Amend SB 1096 (house committee report) as follows:

(1) On page 1, line 6, strike "Subsection (i)" and substitute "Subsections (f), (g), (h), and (i)".

(2) On page 1, between lines 6 and 7, insert the following:

(f) The commission shall ensure that the care coordinator for a managed care organization that contracts with the commission to provide health care services to recipients under the STAR Kids managed care program offers a recipient's parent or legally authorized representative the opportunity to review the recipient's completed care needs assessment. The commission shall ensure the review does not delay the determination of the services to be provided to the recipient or the ability to authorize and initiate services. The commission shall require the parent's or representative's signature to verify the parent or representative received the opportunity to review the assessment with the care coordinator. The managed care organization may not delay the delivery of care pending the signature. The commission shall provide a parent or representative who disagrees with a care needs assessment an opportunity to dispute the assessment with the commission through a peer-to-peer review with the treating physician of choice.

(g) The commission, in consultation with stakeholders, shall redesign the care needs assessment used in the STAR Kids managed care program to ensure the assessment collects useable and actionable data pertinent to a child's physical, behavioral, and long-term care needs. This subsection expires September 1, 2021.

(h) The advisory committee or a successor committee shall provide recommendations to the commission for the redesign of the private duty nursing assessment tools used in the STAR Kids managed care program based on observations from other states to be more comprehensive and allow for the streamlining of the documentation for prior authorization of private duty nursing. This subsection expires September 1, 2021.