Bill No. CS/HB 7107 (2011)

Amendment No.

CHAMBER ACTION

Senate House

Representative Jones offered the following:

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Amendment (with title amendment)

Between lines 724 and 725, insert:

(4) MEDICAL LOSS RATIO FOR HEALTH PLANS.—An entity that contracts with the agency on a prepaid or fixed—sum basis for the provision of Medicaid services shall spend between 80 percent and 85 percent of the Medicaid capitation revenue for direct health services to enrollees. The plan is authorized to spend up to 17 percent of the Medicaid capitation revenue on costs other than direct health services, including, but not limited to, profit, salaries, bonuses, administration, and operating expenses. Administration and operating expenses include costs incurred by the entity and its subcontractors for prospective, concurrent, and retrospective utilization management, pharmacy benefit management, network development,

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and any other costs other than direct reimbursement to providers. The agency shall adopt rules to administer this subsection, including but not limited to, sanctions for violations of this requirement. Any fines collected shall be used to supplement the agency's Medicaid budget.

TITLE AMENDMENT

Remove line 50 and insert:

the agency to return prepaid plan overpayments; providing for a medical loss ratio for health plans for entities that contract with the agency on a prepaid or fixed-sum basis; requiring the agency to adopt rules; providing for collection of fines; creating