ASSEMBLY BILL No. 652

Introduced by Assembly Member Mitchell

February 16, 2011

An act to add Section 1367.17 to the Health and Safety Code, to add Section 12693.625 to the Insurance Code, and to add Section 14132.19 to the Welfare and Institutions Code, relating to child health.

LEGISLATIVE COUNSEL'S DIGEST

AB 652, as introduced, Mitchell. Child health.

Existing law, the Knox-Keene Health Care Service Plan Act of 1975 (Knox-Keene Act), provides for the licensure and regulation of health care service plans by the Department of Managed Health Care and makes a willful violation of the act a crime. Existing law creates the Healthy Families Program, administered by the Managed Risk Medical Insurance Board, to arrange for the provision of health, dental, and vision benefits to eligible children pursuant to a federal program, the State Children’s Health Insurance Program. Existing law provides for the Medi-Cal program, which is administered by the State Department of Health Care Services, under which qualified low-income individuals receive health care services. The Medi-Cal program is, in part, governed and funded by federal Medicaid Program provisions.

This bill would provide that an initial health assessment, as defined, and a forensic medical evaluation, as defined, shall be covered benefits under the Healthy Families Program, the Medi-Cal program, and under health care service plans licensed pursuant to the Knox-Keene Health Care Service Plan Act of 1973, as prescribed. Because a willful violation of the bill’s provisions relative to health care service plans would be a crime, the bill would impose a state-mandated local program.
The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement. This bill would provide that no reimbursement is required by this act for a specified reason.


The people of the State of California do enact as follows:

SECTION 1. Section 1367.17 is added to the Health and Safety Code, to read:

1367.17. (a) For the purposes of this section, the following definitions shall apply:

(1) “Initial health assessment” means a medical or dental examination, or both, performed on a child for whom a case plan must be prepared pursuant to Section 16501.1 of the Welfare and Institutions Code and who has been placed in an out-of-home placement within the last 30 days, and that is designed to determine the child’s medical and dental status and further health care needs. An initial health assessment shall meet, and may exceed, the guidelines established by the Child Health and Disability Prevention Program for well child exams and includes, but is not limited to, diagnostic testing to the extent necessary to provide a complete assessment.

(2) “Forensic medical evaluation” means an examination performed by a qualified medical professional at the request of a local child welfare agency or local law enforcement agency pursuant to Section 324.5 of the Welfare and Institutions Code. A forensic medical examination includes, but is not limited to, diagnostic testing to the extent necessary to provide a complete evaluation.

(b) An individual or group health care service plan contract issued, amended, or renewed on or after January 1, 2012, shall cover an initial health assessment or forensic medical evaluation provided for any child who is an enrollee at the time the assessment or evaluation is performed. Notwithstanding any other provision of law, prior authorization shall not be required for the provision of an initial health assessment or forensic medical evaluation pursuant to this section.
(c) In the event that a local child welfare agency elects to limit
the health care providers that are eligible to receive payment
pursuant to this section, the obligation to pay providers shall only
apply to initial health assessments and forensic medical evaluations
performed by providers designated by the local child welfare
agency.
(d) Payments made to providers pursuant to this section shall
be equal to the reasonable value of the service, which shall in no
event be less than the amount the Medi-Cal program would pay
for the same service when rendered by the same provider to a
Medi-Cal beneficiary on a fee-for-service basis. A contract between
a provider and a plan obligated to make payment pursuant to this
section may provide for a different amount as long as the amount
is not less than the amount the Medi-Cal program would pay for
the same service when rendered by the same provider to a Medi-Cal
beneficiary on a fee-for-service basis.
(e) The obligation to pay a provider pursuant to this section
exists irrespective of whether the provider has a contract with the
plan obligated to make the payment and irrespective of whether
the provider is part of the plan’s network.
(f) A court, local law enforcement agency, or local child welfare
agency may consider or rely on a report by any qualified medical
professional regarding the health care status, needs, or findings of
a forensic medical evaluation concerning a child examined or
evaluated by the qualified medical professional, irrespective of
whether the medical professional may receive payment under this
section.
SEC. 2. Section 12693.625 is added to the Insurance Code, to
read:
12693.625. (a) For the purposes of this section, the following
definitions shall apply:
(1) “Initial health assessment” means a medical or dental
examination, or both, performed on a child for whom a case plan
must be prepared pursuant to Section 16501.1 of the Welfare and
Institutions Code and who has been placed in an out-of-home
placement within the last 30 days, and that is designed to determine
the child’s medical and dental status and further health care needs.
An initial health assessment shall meet, and may exceed, the
guidelines established by the Child Health and Disability
Prevention Program for well child exams and includes, but is not
limited to, diagnostic testing to the extent necessary to provide a complete assessment.

(2) “Forensic medical evaluation” means an examination performed by a qualified medical professional at the request of a local child welfare agency or local law enforcement agency pursuant to Section 324.5 of the Welfare and Institutions Code. A forensic medical examination includes, but is not limited to, diagnostic testing to the extent necessary to provide a complete evaluation.

(b) Coverage provided to subscribers under this part shall include an initial health assessment or forensic medical evaluation provided for any child who is a subscriber at the time the assessment or evaluation is performed. Notwithstanding any other provision of law, prior authorization shall not be required for the provision of an initial health assessment or forensic medical evaluation pursuant to this section.

(c) In the event that a local child welfare agency elects to limit the health care providers that are eligible to receive payment pursuant to this section, the obligation to pay providers shall only apply to initial health assessments and forensic medical evaluations performed by providers designated by the local child welfare agency.

(d) Payments made to providers pursuant to this section shall be equal to the reasonable value of the service, which shall in no event be less than the amount the Medi-Cal program would pay for the same service when rendered by the same provider to a Medi-Cal beneficiary on a fee-for-service basis. A contract between a provider and a plan obligated to make payment pursuant to this section may provide for a different amount as long as the amount is not less than the amount the Medi-Cal program would pay for the same service when rendered by the same provider to a Medi-Cal beneficiary on a fee-for-service basis.

(e) The obligation to pay a provider pursuant to this section exists irrespective of whether the provider has a contract with the plan obligated to make the payment and irrespective of whether the provider is part of the plan’s network.

(f) A court, local law enforcement agency, or local child welfare agency may consider or rely on a report by any qualified medical professional regarding the health care status, needs, or findings of a forensic medical evaluation concerning a child examined or
evaluated by the qualified medical professional, irrespective of whether the medical professional may receive payment under this section.

SEC. 3. Section 14132.19 is added to the Welfare and Institutions Code, to read:

14132.19. (a) For the purposes of this section, the following definitions shall apply:

(1) “Initial health assessment” means a medical or dental examination, or both, performed on a child for whom a case plan must be prepared pursuant to Section 16501.1 and who has been placed in an out-of-home placement within the last 30 days, and that is designed to determine the child’s medical and dental status and further health care needs. An initial health assessment shall meet, and may exceed, the guidelines established by the Child Health and Disability Prevention Program for well child exams and includes, but is not limited to, diagnostic testing to the extent necessary to provide a complete assessment.

(2) “Forensic medical evaluation” means an examination performed by a qualified medical professional at the request of a local child welfare agency or local law enforcement agency pursuant to Section 324.5. A forensic medical examination includes, but is not limited to, diagnostic testing to the extent necessary to provide a complete evaluation.

(b) To the extent permitted by federal law, an initial health assessment or forensic medical evaluation provided by a Medi-Cal provider, including a provider under a Medi-Cal managed care plan, as defined in Section 14093.07, shall be a covered benefit under this chapter for any child who is a Medi-Cal beneficiary at the time the assessment or evaluation is performed. Notwithstanding any other provision of law, prior authorization shall not be required for the provision of an initial health assessment or forensic medical evaluation pursuant to this section.

(c) In the event that a local child welfare agency elects to limit health care providers that are eligible to receive reimbursement under this section, the obligation to reimburse providers shall only apply to initial health assessments and forensic medical evaluations performed by providers designated by the local child welfare agency.

(d) Reimbursement paid to providers pursuant to this section shall be equal to the reasonable value of the service, which shall
in no event be less than the amount the Medi-Cal program would pay for the same service when rendered by the same provider to a Medi-Cal beneficiary on a fee-for-service basis. A contract between a provider and a plan obligated to reimburse the provider pursuant to this section may provide for a different amount as long as the amount is not less than amount the Medi-Cal program would pay for the same service when rendered by the same provider to a Medi-Cal beneficiary on a fee-for-service basis.

(e) If applicable, the obligation to reimburse a provider pursuant to this section exists irrespective of whether the provider has a contract with the plan obligated to make the payment and irrespective of whether the provider is part of the plan’s network.

(f) A court, local law enforcement agency, or local child welfare agency may consider or rely on a report by any qualified medical professional regarding the health care status, needs, or findings of a forensic medical evaluation concerning a child examined or evaluated by the qualified medical professional, irrespective of whether the medical professional may receive payment under this section.

SEC. 4. No reimbursement is required by this act pursuant to Section 6 of Article XIIIB of the California Constitution because the only costs that may be incurred by a local agency or school district will be incurred because this act creates a new crime or infraction, eliminates a crime or infraction, or changes the penalty for a crime or infraction, within the meaning of Section 17556 of the Government Code, or changes the definition of a crime within the meaning of Section 6 of Article XIII B of the California Constitution.