

SENATE COMMITTEE OF REFERENCE AMENDMENT

Committee on Health & Human Services.

HB26-1096 be amended as follows:

1 Amend reengrossed bill, page 4, after line 23 insert:

2 "(5) (a) CONSISTENT WITH STATE AND FEDERAL PRIVACY LAWS,
3 INCLUDING THE FEDERAL "HEALTH INSURANCE PORTABILITY AND
4 ACCOUNTABILITY ACT OF 1996", 42 U.S.C. SEC. 1320d ET SEQ., A DIRECT
5 PRIMARY HEALTH-CARE PROVIDER RENDERING PRIMARY CARE SERVICES
6 TO A MEMBER SHALL SHARE RELEVANT HEALTH INFORMATION WITH THE
7 MEMBER'S ASSIGNED MANAGED CARE ENTITY WHEN REASONABLY
8 NECESSARY, AND WHEN REQUESTED BY THE MEMBER'S ASSIGNED
9 MANAGED CARE ENTITY, TO ENABLE THE FOLLOWING:

10 (I) CARE COORDINATION;

11 (II) CARE PLANNING;

12 (III) IDENTIFICATION OF GAPS IN CARE;

13 (IV) RISK STRATIFICATION; OR

14 (V) CONTINUITY OF TREATMENT.

15 (b) HEALTH INFORMATION THAT MAY BE SHARED PURSUANT TO
16 SUBSECTION (5)(a) OF THIS SECTION MAY INCLUDE:

17 (I) ENCOUNTER SUMMARIES;

18 (II) DIAGNOSES;

19 (III) MEDICATION LISTS;

20 (IV) LABORATORY OR IMAGING RESULTS ORDERED BY THE DIRECT
21 PRIMARY HEALTH-CARE PROVIDER; OR

22 (V) REFERRALS MADE BY THE DIRECT PRIMARY HEALTH-CARE
23 PROVIDER.

24 (c) A DIRECT PRIMARY CARE PROVIDER SHALL NOTIFY THE
25 MEMBER'S ASSIGNED MANAGED CARE ENTITY OF THE DIRECT PRIMARY
26 CARE AGREEMENT ESTABLISHED BETWEEN THE DIRECT PRIMARY
27 HEALTH-CARE PROVIDER AND THE MEMBER WITHIN FIVE DAYS AFTER THE
28 DIRECT PRIMARY CARE AGREEMENT IS ESTABLISHED.

29 (d) A DIRECT PRIMARY CARE PROVIDER SHALL NOTIFY THE
30 MEMBER'S ASSIGNED MANAGED CARE ENTITY OF THE TERMINATIONS OF
31 THE DIRECT PRIMARY CARE AGREEMENT ESTABLISHED BETWEEN THE
32 DIRECT PRIMARY HEALTH-CARE PROVIDER AND THE MEMBER WITHIN FIVE
33 DAYS AFTER THE DIRECT PRIMARY CARE AGREEMENT IS TERMINATED."

34 Renumber succeeding subsections accordingly.

** ** ** *