WEST VIRGINIA LEGISLATURE

2022 REGULAR SESSION

Introduced

House Bill 4698

BY DELEGATE PUSHKIN

[Introduced February 15, 2022; Referred to the

Committee on Health and Human Resources then

Finance]

A BILL to amend the Code of West Virginia, 1931, as amended, by adding thereto a new section,
designated §9-5-29, relating to the West Virginia Medicaid program; requiring West
Virginia Medicaid managed care organizations to contract with any otherwise qualified
provider.

Be it enacted by the Legislature of West Virginia:

ARTICLE 5. MISCELLANEOUS PROVISIONS.

§9-5-29. Contracts with Managed Care Organizations or Related Entities.

- 1 All West Virginia Medicaid managed care organizations shall contract with any willing
- 2 hospital, doctor, behavioral health provider, or other provider to provide services in a Medicaid
- 3 region if the provider is willing to accept the payments and terms offered comparable providers.
- 4 Any provider that meets all applicable Medicaid enrollment, professional and business licensing
- 5 requirements set by law and regulation, has a Medicaid provider number, and meets all managed
- 6 care organizations' credentialing requirements for similar providers, and is not otherwise
- 7 disgualified from participating in Medicare or Medicaid, is eligible to be designated as an approved
- 8 provider.

NOTE: The purpose of this bill is to require West Virginia Medicaid managed care organizations to allow in their network any willing provider which is otherwise qualified and credentialed, at the same reimbursement rate and other terms the same as comparable providers.

Strike-throughs indicate language that would be stricken from a heading or the present law and underscoring indicates new language that would be added.