Document ID:	Title: National Clinic	cal Services (NCS) 523 Identification and Referral of Potential Quality	
AETAMA	of Care Concerns Policy & Procedure - Louisiana Medicaid		
<u>- 077865</u>			
Parent Document	ts: AETCSPS-073621		
Effective Date:	Last Review Date:	Business Process Owner (BPO):	
See Document	See Review and	Ld Dir, Business Consulting, CS Utilization Management Ops	
<u>Information</u>	Revision History		
<u>Page</u>	<u>Section</u>		
Exhibit(s): N/A			
Document Type:	Tool		

PURPOSE

This Amendment is written to meet regulatory and legislative requirements under Louisiana law/regulation that impact NCS 523 Identification and Referral of Potential Quality of Care Concerns policy. This amendment will be used in conjunction with NCS 523 to comply with Louisiana requirements.

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	Medicaid						

These requirements apply when the Controlling State is Louisiana.

POLICY

Legislation	Policy/Procedure Language Change:
2023 Louisiana Medicaid Managed Care	
Organization Model Contract, Section	
2.11.10.1	

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The Contractor shall deny payment to providers for PPCs that meet the following criteria:

The health plan will deny payment to providers for PPCs that meet the following criteria:

2.11.10.1.1

Is identified in the State Plan;

Is identified in the State Plan;

2.11.10.1.2

Has been found by the state, based upon a review of medical literature by qualified professionals, to be reasonably preventable through the application of procedures supported by evidence-based guidelines;

Has been found by the state, based upon a review of medical literature by qualified professionals, to be reasonably preventable through the application of procedures supported by evidence-based guidelines;

2.11.10.1.3

Has a negative consequence for the Beneficiary;

<u>Has a negative consequence for the</u> Beneficiary;

2.11.10.1.4

Is auditable; and

Is auditable; and

<u>2.11.10.1.5</u>

Includes, at a minimum, wrong surgical or other invasive procedure performed on a patient, surgical or other invasive procedure performed on the wrong body part, or surgical or other invasive procedure performed on the wrong patient.

Includes, at a minimum, wrong surgical or other invasive procedure performed on a patient, surgical or other invasive procedure performed on the wrong body part, or surgical or other invasive procedure performed on the wrong patient.

2023 Louisiana Medicaid Managed Care Organization Model Contract, Section 2.11.10.2

The Contractor shall require all providers to report PPCs associated with Claims for payment or Enrollee treatments for which payment would otherwise be made. PPCs should be identified on the Encounter file via

the Present on Admission (POA) indicators.

The health plan will require all providers to report provider-preventable conditions (PPCs) associated with Claims for payment or the member treatments for which payment would otherwise be made. PPCs should be identified on the Encounter file via the Present on Admission (POA) indicators.

Confidential and Proprietary

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PROCEDURE N/A			
<u>DEFINITIONS:</u> <u>N/A</u>			
REVIEW AND APPROVAI	<u>LS</u>		
Jess Hall, Chief Executive Officer		<u>Date</u>	
Antoinette K. Logarbo , M.D. Chief Medical Officer		<u>Date</u>	
Jared Wakeman, M.D. Behavioral Health Medical	<u>Director</u>	<u>Date</u>	

EXHIBIT(S): N/A