

## **NOTICE OF INTENT**

### **Department of Health Bureau of Health Services Financing**

#### **Outpatient Hospital Services Duration of Outpatient Status (LAC 50:V.5107)**

The Department of Health, Bureau of Health Services Financing proposes to repeal LAC 50:V.5107 in the Medical Assistance Program as authorized by R.S. 36:254 and pursuant to Title XIX of the Social Security Act. This proposed Rule is promulgated in accordance with the provisions of the Administrative Procedure Act, R.S. 49:950 et seq.

The Department of Health, Bureau of Health Services Financing proposes to amend the provisions governing outpatient hospital services in order to repeal the provisions governing duration of outpatient status to remove these procedural requirements from the *Louisiana Administrative Code*.

#### **Title 50 PUBLIC HEALTH—MEDICAL ASSISTANCE Part V. Hospital Services Subpart 5. Outpatient Hospital Services**

##### **Chapter 51. General Provisions**

##### **§5107. Duration of Outpatient Status**

~~A. The Medicaid Program will reimburse medically necessary services rendered to a recipient in outpatient status up to a time period not to exceed 30 hours.~~

~~B. This time period is used by the physician to observe the recipient and to determine the need for the following actions:~~

- ~~1. further treatment;~~
- ~~2. admission to inpatient status; or~~
- ~~3. discharge.~~

~~C. It is the responsibility of the physicians providing the recipient's outpatient hospital care to determine whether he/she should be admitted to inpatient status.~~ Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and Title XIX of the Social Security Act.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Bureau of Health Services Financing, LR 37:1600 (June 2011), repealed by the Department of Health, Bureau of Health Services Financing, LR 44:

Implementation of the provisions of this Rule may be contingent upon the approval of the U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services (CMS), if it is determined that submission to CMS for review and approval is required.

In compliance with Act 1183 of the 1999 Regular Session of the Louisiana Legislature, the impact of this proposed Rule on the family has been considered. It is anticipated that this

proposed Rule will have no impact on family functioning, stability or autonomy as described in R.S. 49:972.

In compliance with Act 854 of the 2012 Regular Session of the Louisiana Legislature, the poverty impact of this proposed Rule has been considered. It is anticipated that this proposed Rule will have no impact on child, individual, or family poverty as described in R.S. 49:973.

In compliance with House Concurrent Resolution (HCR) 170 of the 2014 Regular Session of the Louisiana Legislature, the provider impact of this proposed Rule has been considered. It is anticipated that this proposed Rule will have no impact on the staffing level requirements or qualifications required to provide the same level of service, no direct or indirect cost to the provider to provide the same level of service, and will have no impact on the provider's ability to provide the same level of service as described in HCR 170.

Interested persons may submit written comments to Jen Steele, Bureau of Health Services Financing, P.O. Box 91030, Baton Rouge, LA 70821-9030 or by email to [MedicaidPolicy@la.gov](mailto:MedicaidPolicy@la.gov). Ms. Steele is responsible for responding to inquiries regarding this proposed Rule. A public hearing on this proposed Rule is scheduled for Wednesday, August 29, 2018 at 9:30 a.m. in Room 118, Bienville Building, 628 North Fourth Street, Baton Rouge, LA. At that time all interested persons will be afforded an

opportunity to submit data, views or arguments either orally or in writing. The deadline for receipt of all written comments is 4:30 p.m. on the next business day following the public hearing.

Rebekah E. Gee MD, MPH

Secretary