

NOTICE OF INTENT

Department of Health Bureau of Health Services Financing

Out-of-State Medical Services (LAC 50:I.701)

The Department of Health, Bureau of Health Services Financing proposes to amend LAC 50:I.701 as authorized by R.S. 36:254 and 254.3, 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 out-of-state medical services in order to reflect current practices and to align the administrative Rule with Centers for Medicare and Medicaid Services regulations regarding out-of-state care.

Title 50

PUBLIC HEALTH—MEDICAL ASSISTANCE

Part I. Administration

Subpart 1. General Provisions

Chapter 7. Out-of-State Services

§701. Out-of-State Medical Care

A. ~~Medicaid coverage is provided to eligible individuals who are absent from the state.~~ Medical claims for out-of-state services are honored when:

1. medical services are needed because of a medical emergency;

2. medical services are needed and the beneficiary's health would be in danger if the beneficiary were required to travel to the beneficiary's state of residence;

3. the state determines, on the basis of medical advice, that the needed medical services, or necessary supplementary resources, are more readily available in the other state; or

4. it is general practice for beneficiaries in a particular locality to use medical resources in another state.

B. ~~Medical claims~~ Prior authorization is required for out-of-state ~~services are honored when:~~ non-emergency care.

~~1. an emergency arises from an accident or illness;~~

~~2. the health of the recipient would be endangered if he undertook travel or if care and services are postponed until he returns to the state;~~

~~3. it is general practice for residents of a particular locality to use medical resources in the medical trade areas outside the state; and~~

~~4. the medical care and services or needed supplementary resources are not available within the state.~~

~~Prior authorization is required for out-of-state care.~~ 1. - 4.

Repealed.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 Human Resources, LR 5:24 (February 1979), amended LR 6:491 (August 1980), amended by the Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing, LR 32:847 (May 2006), amended by the Department of Health, Bureau of Health Services Financing, LR 46:

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.

Family Impact Statement

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 and autonomy as described in R.S. 49:972.

Poverty Impact Statement

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

in relation to individual or community asset development as described in R.S. 49:973.

Small Business Analysis

In compliance with Act 820 of the 2008 Regular Session of the Louisiana Legislature, the economic impact of this proposed Rule on small businesses has been considered. It is anticipated that this proposed Rule will have no impact on small businesses, as described in R.S. 49:965.2 et seq.

Provider Impact Statement

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.

Public Comments

Interested persons may submit written comments to Ruth Johnson, Bureau of Health Services Financing, P.O. Box 91030, Baton Rouge, LA 70821-9030. Ms. Johnson is responsible for responding to inquiries regarding this proposed Rule. The

deadline for submitting written comments is at 4:30 p.m. on August 29, 2020.

Interested persons may submit a written request to conduct a public hearing by U.S. mail to the Office of the Secretary ATTN: LDH Rulemaking Coordinator, Post Office Box 629, Baton Rouge, LA 70821-0629; however, such request must be received no later than 4:30 p.m. on August 10, 2020. If the criteria set forth in R.S. 49:953(A)(2)(a) are satisfied, LDH will conduct a public hearing at 9:30 a.m. on August 27, 2020 in Room 118 of the Bienville Building, which is located at 628 North Fourth Street, Baton Rouge, LA. To confirm whether or not a public hearing will be held, interested persons should first call Allen Enger at (225) 342-1342 after August 10, 2020. If a public hearing is to be held, all interested persons are invited to attend and present data, views, comments, or arguments, orally or in writing. In the event of a hearing, parking is available to the public in the Galvez Parking Garage, which is located between North Sixth and North Fifth/North and Main Streets (cater-corner from the Bienville Building). Validated parking for the Galvez Garage may be available to public hearing attendees when the parking ticket is presented to LDH staff at the hearing.

Dr. Courtney N. Phillips

Secretary

