NOTICE OF INTENT

Department of Health Bureau of Health Services Financing

Laboratory and Radiology Services Termination of Coverage for Proton Beam Radiation Therapy (LAC 50:XIX.4334)

The Department of Health, Bureau of Health Services

Financing proposes to amend LAC 50:XIX.4334 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 currently provides Medicaid coverage and
reimbursement for proton beam radiation therapy services
under the laboratory and radiology benefit. Proton beam
radiation is a type of external radiation therapy utilized
in the treatment of malignant and benign tumors and
arteriovenous malformations. National best practice
standards indicate that the therapy is most appropriate for
treatment of tumors in individuals who are under the age of
21.

As the Medicaid Program continues to look for cost containment measures to ensure fiscal responsibility, we

also strive to ensure Medicaid recipients receive the most appropriate, quality services. Therefore, it is imperative that our coverage policies align with best practice standards which is a fiscally sound approach to health care service delivery.

Hence, the department proposes to amend the provisions governing laboratory and radiology services to terminate coverage and reimbursement of proton beam radiation therapy for recipients 21 years of age and older. The services will continue to be available for recipients under the age of 21 when deemed medically necessary.

Title 50

PUBLIC HEALTH-MEDICAL ASSISTANCE

Part XIX. Other <u>Healthcare</u> Services

Subpart 3. Laboratory and <u>X-RayRadiology Services</u>

Chapter 43. Billing and Reimbursement

Subchapter B. Reimbursement

§4334. Radiology Services

A. - K.3. ...

L. Effective for dates of service on or after

February 20, 2018, or upon promulgation of this Rule, the

Medicaid Program terminates coverage and reimbursement for

proton beam radiation therapy (PBRT) for recipients 21

years of age and older.

1. For recipients under the age of 21, coverage and reimbursement shall be provided when PBRT services are deemed medically necessary.

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 30:1026 (May 2004), amended LR 35:1898 (September 2009),
amended LR 36:1248 (June 2010), LR 36:2563 (November 2010),
LR 37:3029 (October 2011), LR 39:1284 (May 2013), LR 41:540
(March 2015), amended 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 in relation to individual or community asset development 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, but may have a minimal increase in direct or indirect cost to the provider to provide the same level of service due to the termination of Medicaid payments for these services for recipients 21 and over. The proposed Rule may also have a minimal adverse impact on the provider's ability to provide the same level of service as described in HCR 170 if the reduction in payments adversely impacts the provider's financial standing.

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. Ms. Steele is responsible for

responding to inquiries regarding this proposed Rule. A public hearing on this proposed Rule is scheduled for Thursday, December 28, 2017 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