

**NOTICE OF INTENT**

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

**Targeted Case Management  
Reimbursement Methodology  
Early and Periodic Screening, Diagnosis and Treatment  
(LAC 50:XV.10701)**

The Department of Health, Bureau of Health Services Financing proposes to amend LAC 50:XV.10701 in the Medical Assistance Program as authorized by R.S. 36:254 and pursuant to Title XIX of the Social Security Act. This 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 amended the provisions governing the reimbursement methodology for targeted case management (TCM) services provided to New Opportunities Waiver recipients in order to adopt a payment methodology based on a flat monthly rate rather than 15-minute increments (*Louisiana Register*, Volume 40, Number 9).

The department has now determined that it is necessary to amend the provisions governing reimbursement for TCM services provided to participants in the Early and Periodic Screening, Diagnosis and Treatment Program in order to adopt a payment methodology based on a flat monthly rate rather than 15-minute increments.

**Title 50**

**PUBLIC HEALTH—MEDICAL ASSISTANCE**  
**Part XV. Services for Special Populations**  
**Subpart 7. Targeted Case Management**

**Chapter 107. Reimbursement**

**§10701. Reimbursement**

A. - K.2. ...

L. Effective for dates of service on or after April 1, 2018, case management services provided to participants in the Early and Periodic Screening, Diagnosis and Treatment (EPSDT) Program shall be reimbursed at a flat rate for each approved unit of service. The standard unit of service is equivalent to one month.

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, Office of the Secretary, Bureau of Health Services Financing, LR 30:1040 (May 2004), amended LR 31:2032 (August 2005), LR 35:73 (January 2009), amended by the Department of Health and Hospitals, Bureau of Health Services Financing, LR 35:1903 (September 2009), LR 36:1783 (August 2010), amended by the Department of Health and Hospitals, Bureau of Health Services Financing and the Office of Public Health, LR 39:97 (January 2013), amended by the Department of Health and Hospitals, Bureau of Health Services Financing, LR 39:3302 (December 2013), LR 40:1700, 1701 (September 2014), LR 41:1490,

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 a no impact on family functioning, stability and 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 a 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, 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. Ms. Steele is responsible for responding to inquiries regarding this proposed Rule. A public hearing on this proposed Rule is scheduled for Wednesday, November 29, 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

FISCAL AND ECONOMIC IMPACT STATEMENT  
FOR ADMINISTRATIVE RULES

Person

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Rule Title:

Targeted Case Management  
Reimbursement Methodology  
Early and Periodic Screening,  
Diagnosis and Treatment

Date Rule Takes Effect: January 20, 2018

SUMMARY

In accordance with Section 953 of Title 49 of the Louisiana Revised Statutes, there is hereby submitted a fiscal and economic impact statement on the rule proposed for adoption, repeal or amendment. The following summary statements, based on the attached worksheets, will be published in the Louisiana Register with the proposed agency rule.

I. ESTIMATED IMPLEMENTATION COSTS (SAVINGS) TO STATE OR LOCAL GOVERNMENTAL UNITS (SUMMARY)

*It is anticipated that the implementation of this proposed rule will result in net estimated state general fund costs of approximately \$1,085 for FY 17-18, \$5,079 for FY 18-19, and \$5,065 for FY 19-20. It is anticipated that \$432 (\$216 SGF and \$216 FED) will be expended in FY 17-18 for the state's administrative expense for promulgation of this proposed rule and the final rule. The numbers reflected above are based on a blended Federal Medical Assistance Percentage (FMAP) rate of 63.34 percent in FY 17-18 and 64.23 percent in FY 18-19 and FY 19-20.*

II. ESTIMATED EFFECT ON REVENUE COLLECTIONS OF STATE OR LOCAL GOVERNMENTAL UNITS (Summary)

*It is anticipated that the implementation of this proposed rule will increase federal revenue collections by approximately \$1,618 for FY 17-18 \$8,547 for FY 18-19 and \$8,561 for FY 19-20. It is anticipated that \$216 will be expended in FY 17-18 for the federal administrative expenses for promulgation of this proposed rule and the final rule. The numbers reflected above are based on a blended Federal Medical Assistance Percentage (FMAP) rate of 63.34 percent in FY 17-18 and 64.23 percent in FY 18-19 and 19-20.*

III. ESTIMATED COSTS AND/OR ECONOMIC BENEFITS TO DIRECTLY AFFECTED PERSONS OR NON-GOVERNMENTAL GROUPS (Summary)

*This proposed Rule amends the provisions governing reimbursement for targeted case management (TCM) services provided to participants in the Early and Periodic Screening, Diagnosis and Treatment (EPSDT) Program in order to adopt a payment methodology based on a flat monthly rate rather than 15-minute increments. This proposed Rule has no anticipated impact to recipients. However, the change in payment methodology may be beneficial to providers of EPSDT TCM services since the monthly reimbursement amount per recipient will be higher than the current aggregate per unit reimbursement amount. It is anticipated that implementation of this proposed rule will increase programmatic expenditures for TCM services by approximately \$2,271 for FY 17-18, \$13,626 for FY 18-19 and \$13,626 for FY 19-20.*

IV. ESTIMATED EFFECT ON COMPETITION AND EMPLOYMENT (Summary)

*This rule has no known effect on competition and employment.*



\_\_\_\_\_  
Signature of Agency Head  
or Designee

Jen Steele, Medicaid Director  
\_\_\_\_\_  
Typed name and Title of  
Agency Head or Designee



\_\_\_\_\_  
LDH/BHSF Budget Head



\_\_\_\_\_  
Legislative Fiscal Officer  
or Designee

10/9/2017

\_\_\_\_\_  
Date of Signature

10/09/17

\_\_\_\_\_  
Date of Signature

FISCAL AND ECONOMIC IMPACT STATEMENT  
FOR ADMINISTRATIVE RULES

The following information is required in order to assist the Legislative Fiscal Office in its review of the fiscal and economic impact statement and to assist the appropriate legislative oversight subcommittee in its deliberations on the proposed rule.

- A. Provide a brief summary of the content of the rule (if proposed for adoption or repeal) or a brief summary of the change in the rule (if proposed for amendment). Attach a copy of the notice of intent and a copy of the rule proposed for initial adoption or repeal (or, in the case of a rule change, copies of both the current and proposed rules with amended portions indicated).

*This proposed Rule amends the provisions governing reimbursement for targeted case management (TCM) services provided to participants in the Early and Periodic Screening, Diagnosis and Treatment Program in order to adopt a payment methodology based on a flat monthly rate rather than 15-minute increments.*

- B. Summarize the circumstances that require this action. If the action is required by federal regulations, attach a copy of the applicable regulation.

*The Department of Health, Bureau of Health Services Financing amended the provisions governing the reimbursement methodology for targeted case management (TCM) services provided to New Opportunities Waiver recipients in order to adopt a payment methodology based on a flat monthly rate rather than 15-minute increments (Louisiana Register, Volume 40, Number 9).*

*The department has now determined that it is necessary to amend the provisions governing reimbursement for TCM services provided to participants in the Early and Periodic Screening, Diagnosis and Treatment Program in order to adopt a payment methodology based on a flat monthly rate rather than 15-minute increments.*

- C. Compliance with Act 11 of the 1986 First Extraordinary Session.

- (1) Will the proposed rule change result in any increase in the expenditure of funds? If so, specify amount and source of funding.

*Yes, this proposed rule will result in an increase in programmatic expenditures by approximately \$2,703 for FY 17-18, \$13,626 for FY 18-19, \$13,626 for FY 19-20. In FY 17-18, \$432 is included for the state's administrative expense for promulgation of this proposed rule and the final rule.*

- (2) If the answer to (1) above is yes, has the Legislature specifically appropriated the funds necessary for the associated expenditure increase?

- (a)   X   If yes, attach documentation.  
(b)        If no, provide justification as to why this rule change should be published at this time.

*HCR 8 of the 2017 Regular Session of the Louisiana Legislature directs the department to implement this increase.*

FISCAL AND ECONOMIC IMPACT STATEMENT  
WORKSHEET

I. A. COST OR SAVINGS TO STATE AGENCIES RESULTING FROM THE ACTION PROPOSED

1. What is the anticipated increase or (decrease) in cost to implement the proposed action?

<b>COST</b>	<b>FY 17-18</b>	<b>FY 18-19</b>	<b>FY 19-20</b>
PERSONAL SERVICES			
OPERATING EXPENSES	\$432	\$0	\$0
PROFESSIONAL SERVICES			
OTHER CHARGES	\$2,271	\$13,626	\$13,626
REPAIR & CONSTR.			
POSITIONS (#)			
<b>TOTAL</b>	<b>\$2,703</b>	<b>\$13,626</b>	<b>\$13,626</b>

2. Provide a narrative explanation of the costs or savings shown in "A.1.", including the increase or reduction in workload or additional paperwork (number of new forms, additional documentation, etc.) anticipated as a result of the implementation of the proposed action. Describe all data, assumptions, and methods used in calculating these costs.

*The expenses reflected above are the estimated increases in programmatic expenditures in the Medicaid program. In FY 17-18, \$432 is included for the state's administrative expense for promulgation of this proposed rule and the final rule.*

3. Sources of funding for implementing the proposed rule or rule change.

<b>Source</b>	<b>FY 17-18</b>	<b>FY 18-19</b>	<b>FY 19-20</b>
STATE GENERAL FUND	\$1,085	\$5,079	\$5,065
SELF-GENERATED			
FEDERAL FUND	\$1,618	\$8,547	\$8,561
OTHER (Specify)			
<b>Total</b>	<b>\$2,703</b>	<b>\$13,626</b>	<b>\$13,626</b>

4. Does your agency currently have sufficient funds to implement the proposed action? If not, how and when do you anticipate obtaining such funds?

*Yes, sufficient funds are available to implement this rule.*

B. COST OR SAVINGS TO LOCAL GOVERNMENTAL UNITS RESULTING FROM THIS PROPOSED ACTION.

1. Provide an estimate of the anticipated impact of the proposed action on local governmental units, including adjustment in workload and paperwork requirements. Describe all data, assumptions and methods used in calculating this impact.

*This proposed rule has no known impact on local governmental units.*

FISCAL AND ECONOMIC IMPACT STATEMENT  
WORKSHEET

2. Indicate the sources of funding of the local governmental unit that will be affected by these costs or savings.

*There is no known impact on the sources of local governmental unit funding.*

II. EFFECT ON REVENUE COLLECTIONS OF STATE AND LOCAL GOVERNMENTAL UNITS

- A. What increase or (decrease) in revenues can be expected from the proposed action?

REVENUE INCREASE/DECREASE	FY 17-18	FY 18-19	FY 19-20
STATE GENERAL FUND			
AGENCY SELF-GENERATED			
RESTRICTED FUNDS*			
FEDERAL FUNDS	\$1,618	\$8,547	\$8,561
LOCAL FUNDS			
<b>Total</b>	<b>\$1,618</b>	<b>\$8,547</b>	<b>\$8,561</b>

**\*Specify the particular fund being impacted**

- B. Provide a narrative explanation of each increase or decrease in revenue shown in "A". Describe all data, assumptions, and methods used in calculating these increases or decreases.

*The amounts reflected above are the estimated increases in the federal share of programmatic expenditures for the Medicaid program. In FY 17-18, \$216 is included for the federal expense for promulgation of this proposed rule and the final rule.*

III. COSTS AND/OR ECONOMIC BENEFITS TO DIRECTLY AFFECTED PERSONS OR NON-GOVERNMENTAL GROUPS

- A. What persons or non-governmental groups would be directly affected by the proposed action? For each, provide an estimate and a narrative description of any effects on costs, including workload adjustments and additional paperwork (number of new forms, additional documentation, etc.)

*This proposed Rule amends the provisions governing reimbursement for targeted case management (TCM) services provided to participants in the Early and Periodic Screening, Diagnosis and Treatment (EPSDT) Program in order to adopt a payment methodology based on a flat monthly rate rather than 15-minute increments.*

- B. Also, provide an estimate of any revenue impact resulting from this rule or rule change to these groups.

*This proposed Rule has no anticipated impact to recipients. However, the change in payment methodology may be beneficial to providers of EPSDT TCM services since the monthly reimbursement amount per recipient will be higher than the current aggregate per unit reimbursement amount. It is anticipated that implementation of this proposed rule will increase programmatic expenditures for TCM services by approximately \$2,271 for FY 17-18, \$13,626 for FY 18-19 and \$13,626 for FY 19-20.*

IV. EFFECTS ON COMPETITION AND EMPLOYMENT

Identify and provide estimates of the impact of the proposed action on competition and employment in the public and private sectors. Include a summary of any data, assumptions and methods used in making these estimates.

*This rule has no known effect on competition and employment.*