

NOTICE OF INTENT

Department of Health Bureau of Health Services Financing

Professional Services Program (LAC 50:IX.Chapter 3 - Chapter 9)

The Department of Health, Bureau of Health Services Financing proposes to repeal LAC 50:IX.Chapter 3 and Chapter 5 and to amend LAC 50:IX.Chapter 6 through Chapter 9 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 the Professional Services Program in order to remove specific clinical information and procedural language from the administrative Rule to reflect current practices and ensure that the provisions are promulgated clearly and accurately in the *Louisiana Administrative Code*.

Title 50

PUBLIC HEALTH-MEDICAL ASSISTANCE Part IX. Professional Services Program Subpart 1. General Provisions

Chapter 3. Concurrent Care

§305. Inpatient Concurrent Care

~~A. For hospitalized recipients receiving concurrent care services, the Medicaid Program shall reimburse up to three medically necessary inpatient evaluation and management services by providers of different specialties per recipient, per day, for recipients age 21 and over.~~ Repealed.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of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing, LR 33:463 (March 2007), repealed by the Department of Health, Bureau of Health Services Financing, LR 47:

Chapter 5. Inpatient Physician Services

§501. Inpatient Physician Services

~~A. Reimbursement for inpatient physician services rendered in all hospitals is subject to hospital pre-admission certification and length of stay assignment.~~

~~B. InterQual® Guidelines for Surgery and Procedures will be utilized for pre-admission certification, length of stay assignment and concurrent care review.~~ Repealed.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 36:68

(January 2010), repealed by the Department of Health, Bureau of Health Services Financing, LR 47:

Chapter 6. Outpatient Physician Services

§601. General Provisions

A. The Medicaid ~~program~~Program provides coverage and reimbursement for outpatient physician visits~~-in the Professional Services Program~~. There shall be no limits placed on the number of physician visits payable by the Medicaid ~~program~~Program for eligible ~~recipients~~beneficiaries.

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 41:2652 (December 2015), amended by the Department of Health, Bureau of Health Services Financing, LR 47:

Chapter 7. Diabetes Education Services

§701. General Provisions

A. Effective for dates of service on or after February 20, 2011, the ~~department shall~~Medicaid Program provides coverage of diabetes self-management training (DSMT) services rendered to Medicaid ~~recipients~~beneficiaries diagnosed with diabetes mellitus.

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 39:2509 (September 2013), amended by the Department of Health, Bureau of Health Services Financing, LR 47:

§703. Scope of Services

A. DSMT shall ~~be comprised of one hour~~consist of individual and group instruction ~~and nine hours of group instruction~~ on diabetes self-management.

B. ~~Service Limits. Recipients shall receive up to 10 hours of services during the first 12-month period beginning with the initial training date. After the first 12-month period has ended, recipients shall only be eligible for two hours of individual instruction on diabetes self-management per calendar year~~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 39:2509 (September 2013), amended by the Department of Health, Bureau of Health Services Financing, LR 47:

§705. Provider Participation

A. ~~In order to~~ To receive ~~Medicaid~~ reimbursement, ~~professional services providers must have a~~ members of the DSMT ~~program~~ instructional team must be either employed by or have a

contract with, a Medicaid-enrolled professional services provider that will submit ~~meets the quality standards of one of the following accreditation organizations:~~ claims for reimbursement of DSMT services rendered by the team.

- ~~1. the American Diabetes Association;~~
- ~~2. the American Association of Diabetes Educators;~~
- ~~or~~
- ~~3. the Indian Health Service.~~

~~B. All DSMT programs must adhere to the national standards for diabetes self-management education.~~

- ~~1. Each member of the instructional team must:~~
 - ~~a. be a certified diabetes educator (CDE) certified by the National Certification Board for Diabetes Educators; or~~
 - ~~b. have recent didactic and experiential preparation in education and diabetes management.~~
- ~~2. At a minimum, the instructional team must consist of one the following professionals who are also a CDE:~~
 - ~~a. a registered dietitian;~~
 - ~~b. a registered nurse; or~~
 - ~~c. a pharmacist.~~
- ~~3. All members of the instructional team must obtain the nationally recommended annual continuing education hours for diabetes management.~~

~~C. Members of the instructional team must be either employed by or have a contract with a Medicaid enrolled professional services provider that will submit the claims for reimbursement of DSMT services rendered by the team~~A.1. - C.
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 39:2510 (September 2013), amended by the Department of Health, Bureau of Health Services Financing, LR 47:

Chapter 9. Fluoride Varnish Application Services

§901. General Provisions

A. Effective for dates of service on or after December 1, 2011, the ~~department shall provide~~ Medicaid Program provides coverage of fluoride varnish application services to ~~recipients from six months through five years of~~ beneficiaries under the age of 21.

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 40:315 (February 2014), amended by the Department of Health, Bureau of Health Services Financing, LR 47:

§903. Scope of Services

A. ...

B. ~~Fluoride varnish applications may be covered once every six months per Medicaid recipient~~[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 40:315 (February 2014), amended by the Department of Health, Bureau of Health Services Financing, LR 47:

§905. Provider Participation

A. The entity seeking reimbursement for fluoride varnish application services must be an enrolled Medicaid provider ~~in the Professional Services Program. The following Medicaid enrolled providers may receive reimbursement for fluoride varnish applications:~~

~~1. physicians;~~

~~2. nurse practitioners; and~~

~~3. physician assistants.~~

~~B. The following providers who have been deemed as competent to perform the service by the certified physician may perform fluoride varnish application services in a physician office setting:~~

~~1. the appropriate dental providers;~~

~~_____ 2. _____ physicians;~~

~~_____ 3. _____ physician assistants;~~

~~_____ 4. _____ nurse practitioners;~~

~~_____ 5. _____ registered nurses;~~

~~_____ 6. _____ licensed practical nurses; or~~

~~_____ 7. _____ certified medical assistants.~~

~~_____ C. _____ Professional service providers must review the Smiles for Life training module for fluoride varnish and successfully pass the post assessment.~~

~~_____ 1. _____ Physicians shall maintain a copy of the successfully completed post assessment certificate in their files for review, and shall provide the certificate to the department, or its fiscal intermediary, upon request.~~

~~_____ 2. _____ Approved delegated appliers of fluoride varnish must also complete the training module and their certificates shall be retained on file locally as evidence of training~~[A.1. - C.2. 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 40:315 (February 2014), amended by the Department of Health, Bureau of Health Services Financing, LR 42:1524 (September 2016), LR 47:

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, 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 November 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 November 9, 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 November 24, 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 November 9, 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