

**NOTICE OF INTENT**

**Department of Health  
Bureau of Health Services Financing  
and  
Office for Citizens with Developmental Disabilities**

**Home and Community-Based Services Waivers  
Supports Waiver  
(LAC 50:XXI.Chapters 57 and 59)**

The Department of Health, Bureau of Health Services Financing and the Office for Citizens with Developmental Disabilities propose to amend LAC 50:XXI.Chapters 57 and 59 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 and Office for Citizens with Developmental Disabilities propose to amend the provisions governing the supports waiver services to add assistive technology with remote features to specialized medical equipment, place service limits on assistive technology with remote features and incontinence supplies, include additional requirements for day habilitation and prevocational services providers and require that community life engagement providers must possess a valid adult day care license and provide day habilitation services.

Title 50  
PUBLIC HEALTH-MEDICAL ASSISTANCE  
Part XXI. Home and Community-Based Services Waivers  
Subpart 5. Supports Waiver

**Chapter 57. Covered Services**

**§5701. Supported Employment Services**

A. - C. ...

D. Transportation is a separate billable component for supported employment services, both individual and group.

Transportation may be billed on the same day as a supported employment service is delivered or if follow-along supports are on the plan of care (POC).

E. - J. ...

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, Office for Citizens with Developmental Disabilities, LR 32:1605 (September 2006), amended by the Department of Health and Hospitals, Bureau of Health Services Financing and the Office for Citizens with Developmental Disabilities, LR 40:2585 (December 2014), amended by the Department of Health, Bureau of Health Services Financing and the Office for Citizens with Developmental Disabilities, LR 43:2532 (December 2017), LR 48: LR 48:1575 (June 2022), LR 50:212 (February 2024), LR 50:

**§5725. Specialized Medical Equipment and Supplies**

A. ~~Incontinence briefs and supplies are available for a beneficiary, 21 years or older, who has a physician's order and requires the use of incontinence briefs~~ Specialized medical equipment ~~Medical Equipment and supplies~~ Supplies.

1. Incontinence briefs and supplies are available for a beneficiary, 21 years or older, who has a physician's order and requires the use of incontinence briefs and supplies.

2. Assistive technology (AT), which may include remote features, is a service intended to increase the individual's ability to perform activities more independently in their home, at their job, traveling around their community and/or communicating with others. The service may include equipment and applications that are used to support an individual remotely and increase their safety, independence and control. This service includes a consultation and, if needed, a monthly subscription fee.

B. Service Restrictions

1. ~~This service~~ Incontinence supplies are for those who are 21 years of age or older.

2. ~~This service requires a physician's order.~~ Assistive technology with remote features is for anyone 18 years or older.

3. Incontinence supplies require a physician's order.

4. An AT consultation is available if needed.

C. Service Limitations

1. ~~The~~ Incontinence supplies' cost cannot exceed \$2,500 in a single plan of care year.

2. Assistive technology with remote features services shall not exceed the number of units of service as outlined in the plan of care, and must have a prior authorization.

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, Bureau of Health Services Financing and the Office for Citizens with Developmental Disabilities, LR 50:214 (February 2024), LR 50:

**Chapter 59. Provider Participation**

**§5901. General Provisions**

A. - B. ...

C. In addition to meeting the requirements cited in §5901.A and B, providers must meet the following requirements for the provision of designated services:

1. Day Habilitation and Prevocational Services. The provider must possess a current, valid license as an adult day

care center in order to provide these services and for the community career planning service (prevocational), the provider may possess a valid certificate as a community rehabilitation provider (CRP) from an approved program or the certification and training as required per OCDD.

2. - 7. ...

8. Specialized Medical Equipment and Supplies.

Providers of this service must be enrolled to participate in the Medicaid Program as a provider of assistive technology, specialized medical equipment, and supplies.

9. Community Life Engagement Development. Providers of this service must possess a valid adult day care license and provide day habilitation services.

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, Office for Citizens with Developmental Disabilities, LR 32:1607 (September 2006), LR 34:662 (April 2008), amended by the Department of Health and Hospitals, Bureau of Health Services Financing, Office for Citizens with Developmental Disabilities, LR 40:2587 (December 2014), amended by the Department of Health, Bureau of Health Services Financing and the Office for Citizens with Developmental Disabilities, LR 43:2532 (December 2017), amended

by the Department of Health, Bureau of Health Services Financing and the Office for Citizens with Developmental Disabilities, LR 43:2532 (December 2017), LR 48:1579 (June 2022), LR 50:215 (February 2024), LR 50:

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 a positive impact on family functioning, stability and autonomy as described in R.S. 49:972 ensuring that waiver participants have access to coverage for increased services.

#### **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 a positive impact on child, individual, or family poverty in relation to individual or community asset development as described in R.S. 49:973 that could ease the financial burden

on the family by ensuring access to coverage for additional waiver services.

### **Small Business Analysis**

In compliance with the Small Business Protection Act, the economic impact of this proposed Rule on small businesses has been considered. It is anticipated that this proposed Rule may have a positive impact on small businesses since it is anticipated to provide reimbursements for additional Supports Waiver services.

### **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, that is anticipated to provided reimbursements for additional Supports Waiver Services.

### **Public Comments**

Interested persons may submit written comments to Kimberly Sullivan, JD, Bureau of Health Services Financing, P.O. Box 91030, Baton Rouge, LA 70821-9030. Ms. Sullivan is responsible

for responding to inquiries regarding this proposed Rule. The deadline for submitting written comments is at 4:30 p.m. on October 30, 2024.

### **Public Hearing**

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 October 10, 2024. If the criteria set forth in R.S. 49:961(B)(1) are satisfied, LDH will conduct a public hearing at 9:30 a.m. on October 31, 2024 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 October 10, 2024. 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.

Michael Harrington, MBA, MA

Secretary