

DECLARATION OF EMERGENCY

**Department of Health and Hospitals
Bureau of Health Services Financing**

**Coordinated Care Network
Recipient Participation
(LAC 50:I.3103)**

The Department of Health and Hospitals, Bureau of Health Services Financing amends LAC 50:I.3103 in the Medical Assistance Program as authorized by R.S. 36:254 and pursuant to Title XIX of the Social Security Act. This Emergency Rule is promulgated in accordance with the provisions of the Administrative Procedure Act, R.S. 49:953(B)(1) et seq., and shall be in effect for the maximum period allowed under the Act or until adoption of the final Rule, whichever occurs first.

The Department of Health and Hospitals, Bureau of Health Services Financing amended provisions governing coordinated care networks (CCNs) to permit certain individuals who receive waiver services authorized under the provisions of 1915(b) and 1915(c) of the Social Security Act, and Medicaid eligible children identified in the *Melanie Chisholm, et al vs. Kathy Kliebert* class action litigation (hereafter referred to as Chisholm class members) to have the option of voluntarily enrolling into a participating health plan under the BAYOU HEALTH Program (*Louisiana Register*, Volume 40, Number 6).

The department now proposes to amend the provisions governing the June 20, 2014 Rule to exclude Chisholm class

member participation in CCNs to allow sufficient time for CCNs to amend the current contracts to meet the requirements of the Chisholm judgment. This action is being taken to promote the health and welfare of recipients participating in the BAYOU HEALTH program. It is estimated that the implementation of this Emergency Rule will have no fiscal impact to the Medicaid Program for state fiscal year 2014-15.

Effective July 20, 2014, the Department of Health and Hospitals, Bureau of Health Services Financing amends the provisions governing CCNs to clarify recipient participation.

Title 50

PUBLIC HEALTH-MEDICAL ASSISTANCE

Part I. Administration

Subpart 3. Medicaid Coordinated Care

Chapter 31. Coordinated Care Network

§3103. Recipient Participation

A. - A.3. ...

B. Voluntary Participants

1. Participation in a CCN is voluntary for:

a. - b.iv. ...

v. enrolled in the Family Opportunity Act

Medicaid Buy-In Program; and

c. individuals who receive home and community-

based waiver services ~~and~~

~~d. children under the age of 21 who are listed on the New Opportunities Waiver Request for Services Registry. These children are identified as Chisholm class members.~~

~~i. For purposes of these provisions, Chisholm class members shall be defined as those children identified in the Melanie Chisholm, et al vs. Kathy Kliebert (or her successor) class action litigation.~~

~~2. Chisholm class members and home and community based waiver recipients shall be exempt from the auto assignment process and must proactively seek enrollment into an available health plan.~~ d - 2. Repealed.

C. ...

D. Participation Exclusion

1. The following Medicaid and/or CHIP recipients are excluded from participation in a CCN and cannot voluntarily enroll in a CCN. Individuals who:

a. - e. ...

f. are eligible through the Tuberculosis

Infected Individual Program; ~~or~~

g. are enrolled in the Louisiana Health

Insurance Premium Payment (LaHIPP) Program; or

h. are under 21 years of age and are listed on the New Opportunities Waiver Request for Services Registry (Chisholm class members).

i. For purposes of these provisions, Chisholm class members shall be defined as those children identified in the *Melanie Chisholm, et al vs. Kathy Kliebert (or her successor) class action litigation.*

E. ...

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 37:1573 (June 2011), amended LR 40:310 (February 2014), LR 40:1096 (June 2014), LR 40:

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.

Interested persons may submit written comments to J. Ruth Kennedy, Bureau of Health Services Financing, P.O. Box 91030, Baton Rouge, LA 70821-9030 or by email to MedicaidPolicy@la.gov. Ms. Kennedy is responsible for responding to inquiries regarding this Emergency Rule. A copy of this Emergency Rule is available for review by interested parties at parish Medicaid offices.

Kathy H. Kliebert

Secretary