STATE OF LOUISIANA

PAYMENTS FOR MEDICAL AND REMEDIAL CARE AND SERVICES

METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES - OTHER TYPES OF CARE OR SERVICES LISTED IN SECTION 1902 (A) OF THE ACT THAT ARE INCLUDED IN THE PROGRAM, UNDER THE PLAN ARE DESCRIBED AS FOLLOWS:

- eighty percent (80%) of the Manufacturer's Suggested Retail Price (MSRP).
- D. Tracheostomy tubes and care kits are reimbursed at ninety percent (90%) of the 2000 Medicare fee schedule for the procedure codes that were listed on the 2000 Medicare fee schedule and at the same amount for the HIPAA compliant codes which replaced them or 80 % of the Medicare fee schedule under which the procedure code first appeared.
- E. Enteral formulas are reimbursed at the lesser of: billed charges; or
 - eighty percent (80%) of 2000 Medicare fee schedule for the procedure codes that
 were listed on the 2000 Medicare fee schedule and at the same amount for the HIPAA
 compliant codes which replaced them or 80 % of the Medicare fee schedule under
 which the procedure code first appeared.
- Enteral Formulas

Effective for dates of service on or after October 1, 2022, eEnteral formulas are reimbursed a flat fee amount. ninety percent of the fees on the January-March 2021 Medicare fee schedule for rural areas. Enteral formulas not listed on th Medicare fee schedule reimbursed at the lowest fee at which the item has been determined to be widely available based on a review of similar formulas, usual and customary fees charged in the community, and other Medicaid states. Except as otherwise noted in the Plan, state-developed fee schedule rates are the same for both governmental and private providers of enteral formulas. The agency's fee schedule rates wereas set as of July 1, 2012, and is effective for services provided on or after that date. All rates are published on the agency's website at www.lamedicaid.com.

F. Enteral infusion pumps, standard type wheelchairs, hospital beds, commode chairs, and stationary suction machines are reimbursed at the Medicaid established flat fee amount.

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Supersedes	
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