AN ACT

To enact Part V of Chapter 5-E of Title 40 of the Louisiana Revised Statutes of 1950, to be comprised of R.S. 40:1255.1 and 1255.2, and R.S. 46:460.51(17) and 460.54(G), relative to the medical assistance program of this state known commonly as Medicaid; to provide for duties of the Louisiana Department of Health in administering the state Medicaid program; to provide relative to Medicaid coverage of telehealth services; to provide for the establishment and periodic review of Medicaid policies concerning telehealth services; to provide for policies and procedures in the Medicaid managed care program addressing telehealth services; to provide for definitions; and to provide for related matters.

Be it enacted by the Legislature of Louisiana:

Section 1. Part V of Chapter 5-E of Title 40 of the Louisiana Revised Statutes of 1950, comprised of R.S. 40:1255.1 and 1255.2, is hereby enacted to read as follows:

PART V. TELEHEALTH SERVICES IN MEDICAID

§1255.1. Definitions

As used in this Part, the following terms have the meaning ascribed to them in this Section:

(1) "Department" means the Louisiana Department of Health.

(2) "Medicaid" means the medical assistance program provided for in Title XIX of the Social Security Act.

(3) "Medicare" means the federal health insurance program provided for in Title XVIII of the Social Security Act.

CODING: Words in struck through type are deletions from existing law; words underscored are additions.
§1255.2. Telehealth services; alignment of reimbursement with Medicare policy

A. The department shall periodically review policies regarding Medicaid reimbursement for telehealth services to identify variations between permissible reimbursement under that program and reimbursement available to healthcare providers under the Medicare program.

B. To the extent practicable, notwithstanding any other law to the contrary, after conducting a review provided for in Subsection A of this Section, the department may modify its administrative rules, policies, and procedures applicable to Medicaid reimbursement for telehealth services as necessary to provide for a reimbursement system that is comparable to that of the Medicare program for those services.

Section 2. R.S. 46:460.51(17) and 460.54(G) are hereby enacted to read as follows:

§460.51. Definitions

As used in this Part, the following terms have the meaning ascribed in this Section unless the context clearly indicates otherwise:

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(17) "Telehealth" has the meaning ascribed in R.S. 40:1223.3.

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§460.54. Medicaid policies and procedures; procedure for adoption; required content

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G. The department shall include in its Medicaid policies and procedures all of the following information relating to telehealth:

(1) An exhaustive listing of the covered healthcare services which may be furnished through telehealth.

(2) Processes by which providers may submit claims for reimbursement for healthcare services furnished through telehealth.
(3) The conditions under which a managed care organization may reimburse a provider or facility that is not physically located in this state for healthcare services furnished to an enrollee through telehealth.