

New law creates the Home- and Community-Based Long-Term Care Act and provides for its purpose and definitions.

New law directs the Dept. of Health and Hospitals (DHH) to promulgate rules and regulations to complete implementation of the resource allocation models for the New Opportunities Waiver, the Elderly and Disabled Adults Waiver, and the Long-Term Personal Care Services program by July 1, 2012.

New law further directs DHH to develop an objective formula to determine the staff needed to regulate and monitor home- and community-based programs to control fraud and abuse, to ensure program regulations are adhered to and services are delivered in a quality manner, and to report the department's findings.

New law provides that DHH shall change the policy on the allocation of waiver slots so that the office for citizens with developmental disabilities and the office of aging and adult services may allocate all Centers for Medicare and Medicaid Services-approved waivers based upon individual need and cost-effectiveness, as long as individual needs are met with alternative waivers.

New law provides that DHH shall develop and implement a budget neutral pilot program in selected areas of the state for an integrated, coordinated, prepaid delivery model for long-term care services.

New law provides that DHH shall submit quarterly reports beginning no later than October 1, 2010, to the House and Senate committees on health and welfare and the Joint Legislative Committee on the Budget and specifies the content of each quarterly report.

New law provides that the rules and regulations shall be promulgated no later than Oct. 1, 2010.

New law further provides that DHH shall submit to the secretary of the U.S. Dept. of Health and Human Services the necessary revisions to the Medicaid state plan for medical assistance and various approved waivers that must conform to new law.

Effective August 15, 2010.

(Adds R.S. 40:1300.321-1300.323)