DIGEST

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HB 461 Original

2018 Regular Session

Talbot

Abstract: Provides requirements and limitations relative to Medicaid financing of nursing home care.

<u>Proposed law</u> requires the La. Department of Health (LDH) to provide Medicaid funding to nursing homes according to a rate methodology established in rule for a prospective payment system in accordance with <u>proposed law</u>. Stipulates that the rate methodology shall be subject to the following requirements:

- (1) The methodology shall take into account costs to the provider type as reflected in audited cost reports.
- (2) The methodology shall ensure that the primary component in the rate is direct care and that such component is adequate to support quality care.
- (3) The methodology shall contain at least one component that is linked to achievement of quality outcomes.

<u>Proposed law</u> provides that with respect to any acuity level component of the Medicaid reimbursement rate calculation for nursing homes, LDH shall consider only the acuity level of nursing home residents who are Medicaid recipients, and shall exclude the acuity levels of residents whose care is financed by Medicare or other means.

<u>Proposed law</u> provides that with respect to any capital component of the Medicaid reimbursement rate calculation for nursing homes, LDH shall incorporate a minimum rental factor of no greater than 9%.

<u>Proposed law</u> requires LDH, on or before July 1, 2019, to revise the Medicaid reimbursement methodology for nursing homes in <u>present rule</u> in accordance with the provisions of proposed law.

<u>Proposed law</u> repeals <u>present law</u> providing for rebasing of Medicaid reimbursement rates for nursing facilities.

<u>Proposed law</u> repeals <u>present law</u> providing for resource allocation models among long-term care providers other than nursing homes.

(Adds R.S. 40:1249.11-1249.13; Repeals R.S. 40:1249.1-1249.3 and R.S. 46:2741-2744)