HLS 22RS-808 REENGROSSED

2022 Regular Session

HOUSE BILL NO. 286

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BY REPRESENTATIVE TURNER

MEDICAID MANAGED CARE: Provides relative to healthcare provider credentialing in the Medicaid managed care program

AN ACT

2	To enact R.S. 46:460.61(F) through (H), relative to the Medicaid managed care program of
3	this state; to provide with respect to healthcare provider credentialing requirements
4	in Medicaid managed care; to establish requirements relative to credentialing of
5	certain providers who are affiliated with certain healthcare facilities; to provide for
6	indemnification of the Louisiana Department of Health in certain instances; and to
7	provide for related matters.
8	Be it enacted by the Legislature of Louisiana:
9	Section 1. R.S. 46:460.61(F) through (H) are hereby enacted to read as follows:
10	§460.61. Provider credentialing
11	* * *
12	F. All of the following providers shall be considered to have satisfied, and
13	shall otherwise be exempt from having to satisfy, any credentialing requirements of
14	a managed care organization:
15	(1) Any provider who maintains hospital privileges or is a member of a
16	hospital medical staff with a hospital licensed in accordance with the Hospital
17	Licensing Law, R.S. 40:2100 et seq.
18	(2) Any provider who is a member of the medical staff of a rural health clinic
19	licensed in accordance with R.S. 40:2197 et seq.

CODING: Words in struck through type are deletions from existing law; words <u>underscored</u> are additions.

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(3) Any provider who is a member of the medical staff of a federally qualified health center as defined in R.S. 40:1185.3.

G. If the Centers for Medicare and Medicaid Services withholds or defers payment of, or disallows a claim for, federal financial participation, in whole or in part, based upon a determination that a provider exempted by Subsection F of this Section has not been credentialed or recredentialed as required by 42 CFR 438.214, the state may recoup or initiate other actions to recover from the provider or the hospital an amount equal to the federal financial participation withheld, deferred, or disallowed, in order that the state is indemnified from all losses and made whole.

H. The department may promulgate rules in accordance with the Administrative Procedure Act to provide for further credential-deeming authority applicable to other provider types with appropriate safeguards.

DIGEST

The digest printed below was prepared by House Legislative Services. It constitutes no part of the legislative instrument. The keyword, one-liner, abstract, and digest do not constitute part of the law or proof or indicia of legislative intent. [R.S. 1:13(B) and 24:177(E)]

HB 286 Reengrossed

2022 Regular Session

Turner

Abstract: Deems certain healthcare providers to meet credentialing requirements of the Medicaid managed care program by reason of their formal affiliation with certain types of health facilities.

<u>Present law</u> establishes requirements and standards for credentialing by Medicaid managed care organizations of healthcare providers who furnish health services to persons enrolled in the Medicaid managed care program of this state. Proposed law retains present law.

<u>Proposed law</u> stipulates that all of the following healthcare providers shall be considered to have satisfied, and shall otherwise be exempt from having to satisfy, any credentialing requirements of a Medicaid managed care organization:

- (1) Any healthcare provider who maintains hospital privileges or is a member of a hospital medical staff with a hospital licensed in accordance with <u>present law</u>.
- (2) Any healthcare provider who is a member of the medical staff of a rural health clinic licensed in accordance with <u>present law</u>.
- (3) Any healthcare provider who is a member of the medical staff of a federally qualified health center as defined in <u>present law</u>.

<u>Proposed law</u> provides that if the federal Medicaid agency withholds or defers payment of, or disallows a claim for, federal financial participation, in whole or in part, based upon a determination that a provider exempted by <u>proposed law</u> has not been credentialed or recredentialed as required by federal regulations, the state may recoup from the provider or

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the hospital an amount equal to the federal monies withheld, deferred, or disallowed, in order that the state is indemnified from all losses and made whole.

<u>Proposed law</u> authorizes the La. Department of Health to promulgate administrative rules to provide for further credential-deeming authority applicable to other provider types with appropriate safeguards.

(Adds R.S. 46:460.61(F)-(H))

Summary of Amendments Adopted by House

The Committee Amendments Proposed by <u>House Committee on Health and Welfare</u> to the original bill:

- 1. Expand the exemption provided in <u>proposed law</u> to include the following healthcare providers:
 - a. Any provider who is a member of the medical staff of a rural health clinic licensed in accordance with present law.
 - b. Any provider who is a member of the medical staff of a federally qualified health center as defined in present law.
- 2. Provide that if the federal Medicaid agency withholds or defers payment of, or disallows a claim for, federal financial participation, in whole or in part, based upon a determination that a provider exempted by <u>proposed law</u> has not been credentialed or recredentialed as required by federal regulations, the state may recoup from the provider or the hospital an amount equal to the federal monies withheld, deferred, or disallowed, in order that the state is indemnified from all losses and made whole.
- 3. Authorize the La. Department of Health to promulgate administrative rules to provide for further credential-deeming applicable to other provider types with appropriate safeguards.

The House Floor Amendments to the engrossed bill:

1. Add the term "authority" such that the La. Department of Health will have credential-deeming authority applicable to certain provider types.