SENATE SUMMARY OF HOUSE AMENDMENTS

SB 59 2022 Regular Session Fred Mills

KEYWORD AND SUMMARY AS RETURNED TO THE SENATE

MEDICAID. Provides relative to prepayment reviews conducted by Medicaid managed care organizations. (8/1/22)

SUMMARY OF HOUSE AMENDMENTS TO THE SENATE BILL

- 1. Provides that nothing in proposed law prohibits a MCO from notifying the department of suspected fraud and abuse.
- 2. Provides that nothing in proposed law prohibits the department from requiring all MCOs to coordinate efforts to combat and prevent fraud and abuse.
- 3. Exempts Medicaid dental coordinated care networks from proposed law.
- 4. Makes technical changes.

DIGEST OF THE SENATE BILL AS RETURNED TO THE SENATE

SB 59 Engrossed

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<u>Present law</u> provides for the Medicaid managed care program and the payment of healthcare provider claims by Medicaid managed care organizations (MCOs).

<u>Proposed law</u> retains <u>present law</u> and prohibits MCOs, their contractors, assignees, and agents from subjecting any Medicaid-enrolled healthcare provider to prepayment review unless the prepayment review requirement is implemented directly by the La. Dept. of Health in accordance with <u>present law</u> known as the Medical Assistance Programs Integrity Law.

<u>Proposed law</u> provides that, for purposes of <u>proposed law</u>, "prepayment review" means any action by an MCO or its contractor, assignee, agent, or entity acting on behalf of the MCO which requires a healthcare provider to provide medical record documentation in conjunction with, or after submission of, a claim for payment for medical services rendered, but before the claim has been adjudicated by the MCO.

<u>Proposed law</u> provides that nothing therein shall prohibit an MCO from notifying the La. Dept. of Health of healthcare providers suspected of committing fraud and abuse.

<u>Proposed law</u> provides that nothing therein shall prohibit the La. Dept. of Health from requiring all MCOs to coordinate efforts to combat and prevent fraud and abuse pursuant to any requirements ordered by the department in accordance with <u>present law</u>.

<u>Proposed law</u> stipulates that <u>proposed law</u> shall not apply to any dental coordinated care network as defined in <u>present law</u>.

(Adds R.S. 46:460.76)

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