The original instrument was prepared by Christopher D. Adams. The following digest, which does not constitute a part of the legislative instrument, was prepared by Michelle Broussard-Johnson.

### DIGEST

SB 109 Reengrossed

## 2015 Regular Session

Johns

<u>Present law</u> requires on an annual basis the Department of Health and Hospitals to submit an annual report concerning the Louisiana Medicaid Bayou Health program and the Louisiana Behavioral Health Partnership and Coordinated System of Care programs to the Senate and House committees on health and welfare.

<u>Proposed law</u> amends <u>present law</u> to require both reports be based on the fiscal year except for the report measures specifically measured on calendar year.

<u>Proposed law</u> amends <u>present law</u> by replacing the term "coordinated care network" with "managed care organization".

<u>Proposed law</u> amends <u>present law</u> by removing reported outcomes and comparisons to Legacy Medicaid.

<u>Proposed law</u> adds that the report shall include information concerning Medicaid drug rebates and manufacturer discounts delineated by each managed care organization and the prescription benefit manager contracted or owned by the managed care organization.

<u>Proposed law</u> adds to the report a monthly total dollar amount of Medicaid drug rebates and discounts collected and used; also adds a monthly total dollar amount of Medicaid drug rebates and discounts collected and remitted back to the DHH.

<u>Proposed law</u> clarifies the reporting metrics for evaluation purposes.

Proposed law replaces the term "geographical service area" with "parish".

Proposed law replaces the term "human service district or local government entity" with "parish".

<u>Proposed law</u> amends <u>present law</u> by consolidating reporting metrics on referral calls to the Louisiana Behavioral Health Partnership into a single metric for all referrals.

<u>Proposed law</u> amends <u>present law</u> by replacing the requirement to report specified reasons for a claim denial with the requirement to report the top five reasons for claim denials.

<u>Proposed law</u> requires a final report on the Louisiana Behavioral Health Partnership's integration into Medicaid managed care to be issued no later than six months after integration.

<u>Proposed law</u> provides prior to August 1, 2015, every managed care organization contracted with the state to provide Medicaid services to Medicaid enrollees shall report to DHH the uniform resource locator of a webpage which contains a publicly accessible copy of all practice guidelines utilized by each managed care organization which are required to be made available to healthcare providers pursuant to 42 CFR 438.236(c). DHH shall place and maintain publicly accessible web links to each of these respective webpages upon the website operated by DHH.

Effective upon signature of the governor or lapse of time for gubernatorial action.

(Amends R.S. 40:1300.361(A)(2), 1300.362,1300.363, and 1300.364)

### Summary of Amendments Adopted by Senate

# Committee Amendments Proposed by Senate Committee on Health and Welfare to the original bill

- 1. Provides for information to be reported by the Department of Health and Hospitals from Medicaid managed care organizations that will be placed and maintained on the department's publicly accessible website.
- 2. Technical changes.

### Summary of Amendments Adopted by Senate

#### Senate Floor Amendments to engrossed bill

- 1. Makes Legislative Bureau technical changes.
- 2. Adds to the report the monthly total dollar amounts of Medicaid drug rebates and discounts collected and used, and those returned to DHH.