2016 Regular Session

HOUSE BILL NO. 461

BY REPRESENTATIVE AMEDEE

MEDICAID: Requires copayments for Medicaid-covered physician visits and nonemergency services delivered in hospital emergency rooms

1	AN ACT
2	To enact Part XIV of Chapter 3 of Title 46 of the Louisiana Revised Statutes of 1950, to be
3	comprised of R.S. 46:460.101 through 460.104, relative to cost containment in the
4	medical assistance program of the state known commonly as Medicaid; to provide
5	for duties of the Department of Health and Hospitals in administering the Medicaid
6	program; to provide relative to noninstitutional care for Medicaid enrollees and
7	nonemergency services at hospital emergency departments for such persons; to
8	establish cost sharing requirements for such services; to provide conditions and
9	limitations relative to such cost sharing requirements; to provide for findings and
10	definitions; to require administrative rulemaking and submission of Medicaid state
11	plan amendments; and to provide for related matters.
12	Be it enacted by the Legislature of Louisiana:
13	Section 1. Part XIV of Chapter 3 of Title 46 of the Louisiana Revised Statutes of
14	1950, comprised of R.S. 46:460.101 through 460.104, is hereby enacted to read as follows:
15	PART XIV. MEDICAID COST CONTAINMENT
16	<u>§460.101. Definitions</u>
17	As used in this Part, the following terms have the meaning ascribed in this
18	Section:
19	(1) "Department" means the Department of Health and Hospitals.

1	(2) "Cost sharing" means a contribution that a Medicaid enrollee makes	
2	toward the cost of a Medicaid-covered health service which he utilizes, through	
3	mechanisms including but not limited to deductibles, copayments, and coinsurance.	
4	(3) "Emergency medical condition" means a medical condition manifesting	
5	itself by acute symptoms of sufficient severity, including but not limited to severe	
6	pain, that the absence of immediate medical attention could reasonably be expected	
7	to result in any of the following:	
8	(a) Placing the health of the patient in serious jeopardy.	
9	(b) Serious impairment to bodily functions.	
10	(c) Serious dysfunction of any bodily organ or part.	
11	(4) "Emergency room" means an emergency department operated within a	
12	hospital facility licensed pursuant to the Hospital Licensing Law, R.S. 40:2100 et	
13	<u>seq.</u>	
14	(5) "Medicaid" means the medical assistance program provided for in Title	
15	XIX of the Social Security Act.	
16	(6) "Nonemergency services" means services provided by a hospital	
17	emergency department for the treatment of any medical condition other than an	
18	emergency medical condition as defined in this Section.	
19	§460.102. Legislative findings; declaration	
20	A. The legislature hereby finds and affirms the following:	
21	(1) From state fiscal year 2007-2008 to state fiscal year 2015-2016:	
22	(a) The total annual operating budget of this state decreased by eleven and	
23	nine-tenths percent.	
24	(b) Total expenditures on the Medicaid program of this state increased by	
25	forty and nine-tenths percent.	
26	(c) State expenditures on the Medicaid program increased by ninety-four and	
27	seven-tenths percent.	
28	(d) Medicaid remained the largest single item in Louisiana's operating	
29	budget.	

1	(2) At over eight billion three hundred eighty million dollars, Medicaid
2	comprises thirty-four and two-tenths percent of Louisiana's total operating budget
3	in state fiscal year 2015-2016; whereas Medicaid comprised twenty-one and
4	five-tenths percent of the state's operating budget in state fiscal year 2007-2008.
5	(3) Requiring cost sharing for certain health services, as permitted by federal
6	Medicaid regulations, is a sensible and fiscally responsible policy as it provides a
7	prudent, federally authorized means of containing Medicaid costs.
8	(4) Cost containment measures in the Medicaid program are essential for
9	enhancing the efficiency and effectiveness of health care delivered to the population
10	served by the program.
11	B. The legislature hereby declares that cost containment in the Medicaid
12	program is an urgent fiscal and public health priority of this state.
13	§460.103. Medicaid-covered noninstitutional care and nonemergency services at
14	emergency departments; cost sharing required
15	A. The department shall establish cost sharing requirements in the Medicaid
16	program for all of the following services provided to Medicaid enrollees, subject to
17	applicable requirements of Section 1916 of the Social Security Act and 42 CFR
18	<u>447.50 et seq.:</u>
19	(1) Cost sharing for noninstitutional care, including but not limited to
20	physician visits, as authorized in 42 CFR 447.52.
21	(2) Cost sharing for nonemergency services furnished in a hospital
22	emergency room as authorized in 42 CFR 447.52.
23	B. The cost sharing functions provided for in this Section shall be imposed
24	upon all categories of recipients not excluded from cost sharing by the provisions of
25	Section 1916 of the Social Security Act.
26	C. The amount of each cost sharing function required by the provisions of
27	this Section shall be the maximum nominal amount allowed pursuant to 42 CFR

28 <u>447.50 et seq.</u>

1	§460.104. Implementation; Medicaid state plan amendments; administrative
2	rulemaking
3	The secretary of the department shall submit to the Centers for Medicare and
4	Medicaid Services all Medicaid state plan amendments, promulgate all rules and
5	regulations in accordance with the Administrative Procedure Act, and take any other
6	actions as are necessary to implement the provisions of this Part.

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 461 Original	2016 Regular Session	Amedee
-----------------	----------------------	--------

Abstract: Requires copayments for Medicaid-covered physician visits and nonemergency services delivered in hospital emergency rooms.

<u>Proposed law</u> provides findings relative to the cost of the Medicaid program, and declares that cost containment in the Medicaid program is an urgent fiscal and public health priority of this state.

<u>Proposed law</u> requires the Department of Health and Hospitals (DHH) to establish cost sharing requirements in the Medicaid program for all of the following services provided to Medicaid enrollees, subject to requirements and limitations provided in applicable federal law and regulation:

- (1) Cost sharing for noninstitutional care, including but not limited to physician visits, as authorized in 42 CFR 447.52.
- (2) Cost sharing for nonemergency services furnished in a hospital emergency room as authorized in 42 CFR 447.52.

<u>Proposed law</u> requires that the cost sharing requirements provided for in <u>proposed law</u> be imposed upon all categories of recipients not excluded from such requirements by the provisions of Section 1916 of the Social Security Act.

<u>Proposed law</u> provides that the amount of each cost sharing function required by the provisions of this Section shall be the maximum nominal amount allowed by federal regulations.

<u>Proposed law</u> requires DHH to submit any Medicaid state plan amendments, promulgate all rules and regulations in accordance with the APA, and take any other actions as necessary to implement the provisions of <u>proposed law</u>.

(Adds R.S. 46:460.101-460.104)