DIGEST

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HB 566 Original

2016 Regular Session

Richard

Abstract: Requires DHH, to the extent allowed by federal regulations, to institute Medicaid cost containment measures including cost sharing and a limitation on coverage of nonemergency services delivered in hospital emergency rooms.

<u>Proposed law</u> defines key terms used in <u>proposed law</u> including "cost sharing", "emergency room", "Medicaid", and "medical assistance program".

<u>Proposed law</u> requires DHH to develop and implement each cost sharing function applicable to the Medicaid program of this state as authorized by federal regulations to Medicaid enrollees who are not specifically exempted from such cost sharing functions, such as children, pregnant women, and institutionalized individuals.

<u>Proposed law</u> requires DHH to set the amount of each cost assigned to nonexempt Medicaid enrollees at a level allowed by federal Medicaid regulations which maximizes the net savings to the state resulting from the respective cost sharing function. <u>Proposed law</u> prohibits DHH from instituting a cost sharing function for which the administrative costs of implementing the function would exceed the savings estimated to result from the function.

<u>Proposed law</u> requires DHH, whenever a cost sharing function is added, deleted, expanded, limited, or otherwise revised by the Centers for Medicare and Medicaid Services, to revise and reinstate pertinent Medicaid policies correspondingly to provide for the cost sharing functions and their respective levels.

<u>Proposed law</u> establishes a limit for coverage for nonemergency use of a hospital emergency room for any healthcare service delivered in an emergency room to a Medicaid enrollee when all of the following conditions apply:

- (1) The service is to treat any health condition classified by Medicaid program policy as nonemergent.
- (2) The enrollee has been treated in an emergency room for any health condition classified by Medicaid program policy as nonemergent on three separate occasions within the past year, and the Medicaid program provided reimbursement on each occasion for such treatment.

<u>Proposed law</u> requires DHH to promulgate all rules and regulations, submit any Medicaid state plan amendments, and take all other actions as are necessary to institute the Medicaid cost sharing

functions required by proposed law.

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

(Adds R.S. 46:460.101-460.122)