

2018 Regular Session

SENATE BILL NO. 564 (Substitute of Senate Bill No. 519 by Senator LUNEAU)

BY SENATOR LUNEAU

HEALTH CARE. Provides relative to behavioral health services providers. (gov sig)

1 AN ACT

2 To enact R.S. 40:2162, relative to behavioral health services providers; to provide relative
3 to psychosocial rehabilitation and community psychiatric supportive treatment and
4 reimbursement for behavioral health services; to provide conditions that shall be met
5 by provider agencies; to provide for audits and facility need review; to provide for
6 a certification review process; to require recoupment of Medicaid funds under certain
7 circumstances; to provide for the promulgation of rules and regulations; and to
8 provide for related matters.

9 Be it enacted by the Legislature of Louisiana:

10 Section 1. R.S. 40:2162 is hereby enacted to read as follows:

11 **§2162. Specialized behavioral health rehabilitation services in the Louisiana**
12 **medical assistance program**

13 **A. For purposes of this Section, the following definitions shall apply:**

14 **(1) "Behavioral health service provider" means a health care provider**
15 **as defined in R.S. 40:2153(2).**

16 **(2) "CMS" means the Centers for Medicare and Medicaid Services.**

17 **(3) "Community psychiatric support and treatment services",**

1 hereinafter referred to as "CPST" services, means CMS-approved Medicaid
2 mental or behavioral health rehabilitation services defined as services
3 associated with assisting individuals with skill-building to restore stability,
4 support functional gains, and adapt to community living, designed to focus on
5 reducing the disability from mental illness, restoring functional skills of daily
6 living, and building natural supports and solution-oriented interventions, or
7 such other successor services or requirements subsequently approved by CMS
8 or the department for CPST services for the Louisiana medical assistance
9 program.

10 (4) "Department" means the Louisiana Department of Health.

11 (5) "Louisiana medical assistance program" means the Louisiana
12 Medicaid program.

13 (6) "Psychosocial rehabilitation services", hereinafter referred to as
14 "PSR" services, means CMS-approved Medicaid mental or behavioral health
15 rehabilitation services defined as psycho-educational services provided to
16 individuals with mental illness in order to assist with skill-building, restoration
17 and rehabilitation, designed to assist the individual with compensating for or
18 eliminating functional deficits and interpersonal or environmental barriers
19 associated with mental illness, or such other successor services or requirements
20 subsequently approved by CMS or the department for PSR services for the
21 Louisiana medical assistance program.

22 B. Medicaid reimbursement to behavioral health service providers that
23 provide PSR and CPST services in the Medicaid specialized behavioral health
24 rehabilitation services program shall comply with the requirements of this
25 Section.

26 C. In order to be eligible to receive Medicaid reimbursement, all
27 behavioral health service providers providing PSR or CPST services to
28 Medicaid recipients shall meet all of the following requirements:

29 (1) Be licensed as a behavioral health service provider agency.

1 **(2) Be accredited by a department-approved accrediting organization**
2 **and meet the following conditions:**

3 **(a) The behavioral health service provider shall show proof of full**
4 **accreditation or obtain preliminary accreditation prior to being contracted with**
5 **a Medicaid managed care organization.**

6 **(b) The behavioral health service provider shall maintain proof of full**
7 **accreditation or proof of preliminary accreditation.**

8 **(c) If not fully accredited on or before July 1, 2018, the behavioral health**
9 **service provider shall attain full accreditation within twelve months of its initial**
10 **accreditation application date and shall provide proof of full accreditation to**
11 **each managed care organization with which it is contracted.**

12 **(d) The behavioral health service provider shall maintain continuous full**
13 **or preliminary accreditation.**

14 **(e) The cost of attaining and maintaining accreditation is the**
15 **responsibility of the behavioral health service provider.**

16 **(f) The behavioral health service provider shall report any loss of**
17 **accreditation, suspension of accreditation, reduction to a preliminary**
18 **accreditation status, or any other action that could result in the loss of**
19 **accreditation, to each managed care organization with which it is contracted,**
20 **within twenty-four hours of receipt of notification from the accreditation body.**

21 **(3) Effective January 1, 2019, have a National Provider Identification**
22 **number, hereinafter referred to as "NPI". The behavioral health service**
23 **provider agency shall include its NPI number and the NPI number of the**
24 **individual rendering the PSR or CPST services on its behalf on all claims for**
25 **Medicaid reimbursement submitted for PSR or CPST services, for dates of**
26 **service on or after January 1, 2019.**

27 **(4) Implement a member choice form to be signed by each recipient, or**
28 **the legal guardian or representative of the recipient, receiving PSR or CPST in**
29 **order to prevent or reduce duplication of services.**

1 **(5) Be credentialed and in the provider network of the managed care**
2 **organization that the provider intends to submit claims for Medicaid services,**
3 **unless the managed care organization has a single case agreement with a**
4 **provider agency not in its network.**

5 **(6) Meet any other requirements promulgated through rulemaking by**
6 **the department to ensure the quality and effectiveness of services.**

7 **D. In order to be eligible to receive Medicaid reimbursement, all**
8 **behavioral health service providers shall ensure that any individual rendering**
9 **PSR or CPST services for the licensed and accredited provider agency meets all**
10 **of the following requirements:**

11 **(1) Effective for services rendered on or after January 1, 2019, the**
12 **individual rendering the PSR or CPST services for the licensed and accredited**
13 **provider agency shall have an individual NPI number and that NPI number**
14 **shall be included on any claim by that provider agency for reimbursement**
15 **related to such services.**

16 **(2)(a) On and after July 1, 2018, any individual rendering PSR services**
17 **for a licensed and accredited provider agency shall hold a minimum of a**
18 **bachelor's degree from an accredited university or college in the field of**
19 **counseling, social work, psychology, or sociology. Any individual rendering PSR**
20 **services who does not possess the minimum bachelor's degree required in this**
21 **Paragraph, but who met all provider qualifications in effect prior to July 1,**
22 **2018, and was providing PSR services on a full-time basis for that licensed and**
23 **accredited provider agency on or before June 30, 2016, may continue to provide**
24 **PSR services for the same licensed and accredited provider agency. Prior to the**
25 **individual rendering PSR services at a different provider agency, he must**
26 **comply with the provisions of this Section.**

27 **(b) On and after July 1, 2018, any individual rendering any CPST**
28 **services for a licensed and accredited provider agency shall hold a minimum of**
29 **a master's degree from an accredited university or college in the field of**

1 counseling, social work, psychology, or sociology.

2 (3)(a) The individual rendering PSR or CPST services for the licensed
3 and accredited provider agency shall meet all other requirements set forth in
4 Medicaid rules, regulations, provider manuals, and policies.

5 (b) Within thirty days of the effective date of this Section, the
6 department shall commence any actions that are required to amend any existing
7 department rule or regulation that is in conflict with the requirements of this
8 Section.

9 E. The department shall maintain a facility need review program for
10 behavioral health service providers that provide PSR or CPST services. No
11 license to provide PSR or CPST services shall be granted to any applicant unless
12 the department determines that the evidence and data submitted by the
13 applicant establishes the probability of serious, adverse consequences to
14 recipients' ability to access services if seeking a license is not permissible.

15 F.(1) In order to be eligible to receive Medicaid reimbursement, each
16 behavioral health service provider that provides PSR or CPST services shall
17 employ at least one full-time physician, or full-time licensed mental health
18 professional as defined in R.S. 40:2153(7)(a), (b), (c), (d), or (e), to serve as a
19 full-time mental health supervisor to assist in the design and evaluation of
20 treatment plans for PSR and CPST services. For the purposes of this Section the
21 term "full-time" shall mean employment by the behavioral health service
22 provider for at least thirty-five hours per week.

23 (2) Each unlicensed individual rendering PSR or CPST services for the
24 licensed and accredited behavioral health service provider agency shall be
25 required to receive at least one hour per calendar month of personal supervision
26 and training by the provider agency's mental health supervisor.

27 G. The department shall implement a centralized credentialing
28 verification organization, hereinafter referred to as "CVO", for the Medicaid
29 specialized behavioral health rehabilitation services program. The CVO shall

1 be certified as a CVO by the National Committee for Quality Assurance
2 hereinafter referred to as "NCQA". The CVO shall perform agency provider
3 credentialing that meets the following criteria:

4 (1) NCQA standards.

5 (2) Verification of agency license.

6 (3) Verification of agency accreditation.

7 (4) Any additional requirements imposed by the department for
8 becoming a Medicaid provider reimbursed under the Medicaid specialized
9 behavioral health rehabilitation services program.

10 H.(1) Effective July 1, 2018, the Medicaid managed care organizations
11 shall take appropriate actions to recoup Medicaid payments or funds from any
12 behavioral health service provider that renders Medicaid services in violation
13 of the provision of this Section.

14 (2) The department may refer noncompliant behavioral health service
15 providers to the Louisiana Medicaid Fraud Control Unit within the Louisiana
16 attorney general's office for further fraud investigation.

17 I. The department may promulgate any rules pursuant to the
18 Administrative Procedure Act and may publish any Medicaid manuals or
19 Medicaid policy to implement and enforce the provisions of this Section.

20 J. The Louisiana Legislative Auditor may conduct performance audits
21 of the department to ensure compliance with the provisions of this Section.

22 Section 2. This Act shall become effective upon signature by the governor or, if not
23 signed by the governor, upon expiration of the time for bills to become law without signature
24 by the governor, as provided by Article III, Section 18 of the Constitution of Louisiana. If
25 vetoed by the governor and subsequently approved by the legislature, this Act shall become
26 effective on the day following such approval.

