The original instrument was prepared by Angela Lockett-De Jean. The following digest, which does not constitute a part of the legislative instrument, was prepared by Brandi Cannon.

## DIGEST 2022 Regular Session

Barrow

<u>Proposed law</u> defines "pharmacist clinical services" as patient care provided by and within the scope of practice of a licensed pharmacist with the intent of achieving outcomes related to the cure, prevention, or management of a disease or medical condition.

<u>Proposed law</u> provides that reimbursement for pharmacist clinical services in the Medicaid program shall comply with the requirements of <u>proposed law</u>, subject to any required CMS approval.

<u>Proposed law</u> provides that in order to be eligible to receive Medicaid reimbursement, a pharmacist providing pharmacist clinical services to Medicaid recipients shall meet certain requirements including any requirements promulgated through rulemaking by the La. Dept. of Health (LDH) to ensure the quality and effectiveness of services and all requirements set forth in Medicaid rules, regulations, provider manuals, and policies.

<u>Proposed law</u> provides that LDH may refer noncompliant pharmacists to the attorney general's office for further fraud investigation.

<u>Proposed law</u> provides that LDH shall promulgate any rules and shall publish any Medicaid manuals or Medicaid policy necessary to implement and enforce the provisions of <u>proposed law</u>.

<u>Proposed law</u> provides that the legislative auditor may conduct performance audits of LDH to ensure compliance with the provisions of proposed law.

<u>Proposed law</u> provides that LDH shall not take any final action that will result in the elimination of pharmacist clinical services unless the action is affirmatively approved by the House and Senate committees on health and welfare.

<u>Proposed law</u> provides for Medicaid managed care organizations to provide coverage of pharmacist clinical services to the same extent as those same services are covered when performed by another Medicaid provider.

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

(Amends R.S. 40:1183.3(3), 1185.3(2) and (3), and 2197(D); adds R.S. 46:460.37)

Summary of Amendments Adopted by Senate

SB 296 Engrossed

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

- 1. Delays the implementation date of certain provisions of proposed law.
- 2. Deletes provisions relative to credentialing.
- 3. Provides for coverage of pharmacy clinical services by Medicaid MCOs.
- 4. Makes technical changes.