

HOUSE SUMMARY OF SENATE AMENDMENTS

HB 717

2022 Regular Session

McMahan

MEDICAID: Provides relative to parishes eligible for the local healthcare provider participation program

Synopsis of Senate Amendments

1. Revises present law relative to authorized uses of monies in the local provider participation fund by changing the designation of certain beneficiaries from "rural institutional providers or other hospitals" to "healthcare providers".

Digest of Bill as Finally Passed by Senate

Present law creates within the state Medicaid program a local healthcare provider participation program for health services financing. Identifies parishes eligible for the program through population range references. Provides that population figures noted are those from most recent federal decennial census.

Proposed law revises present law as necessary to maintain geographic applicability of present law as originally enacted through Act No. 330 of the 2020 RS by updating population range references with figures from the 2020 U.S. Census.

Present law and proposed law apply exclusively to the following five parishes:

- (1) Any parish with a population of not less than 36,600 persons and not more than 37,500 persons according to the most recent federal decennial census (Webster Parish).
- (2) Any parish with a population of not less than 46,000 persons and not more than 48,500 persons according to the most recent federal decennial census (Lincoln Parish).
- (3) Any parish in which a rural institutional provider, as defined through population range references in present law and proposed law, is located (Evangeline, Jefferson Davis, and St. Landry parishes).

Present law defines "rural institutional provider" as a licensed hospital, other than one defined as a rural hospital by present law (R.S. 40:1189.3), that had no more than 60 hospital beds on Nov. 1, 2020, and meets the location criteria provided in present law.

Proposed law revises present law to include within the definition of "rural institutional provider" any licensed hospital, other than one defined as a rural hospital by present law (R.S. 40:1189.3), that meets the location criteria provided in present law and proposed law, existed on November 1, 2020, and has no more than 60 hospital beds.

Proposed law revises present law relative to authorized uses of monies in the local provider participation fund (R.S. 40:1248.7(C)) by changing the designation of certain beneficiaries from rural institutional providers or other hospitals to healthcare providers.

(Amends R.S. 40:1248.1(6), 1248.3(1) and (2), and 1248.7(C)(1))