



LEGISLATIVE FISCAL OFFICE
Fiscal Note

Fiscal Note On: **SB 564** SLS 18RS 2660
 Bill Text Version: **ENGROSSED**
 Opp. Chamb. Action:
 Proposed Amd.:
 Sub. Bill For.:

Date: May 2, 2018	9:12 AM	Author: LUNEAU
Dept./Agy.: LA Dept. of Health		Analyst: Zachary Rau
Subject: Requirements for Certain Behavioral Health Providers		

HEALTH CARE EG INCREASE GF EX See Note Page 1 of 1
 Provides relative to behavioral health services providers. (gov sig)

Proposed law provides for specialized behavioral health rehabilitation services that provide community psychiatric supportive treatment (CPST) and psychosocial rehabilitation (PSR) and further provides for additional requirements for provider agencies providing such services in order to be reimbursed by Medicaid. Proposed law requires licensure, accreditation, holding a National Provider Identification (NPI) number, implementation of a member choice form, and credentialing as requirements for a provider to be reimbursed for providing CPST and PSR services. Proposed law gives the LA Dept. of Health rulemaking authority associated with CPST and PSR services. Proposed law requires individuals and providing CPST and PSR to meet certain minimum qualifications to receive Medicaid reimbursements, including obtaining an NPI number, and holding a bachelor's degree to provide PSR or hold a master's degree to provide CPST. Proposed law establishes a facility need review process to assess the need in a geographical area for a new facility providing CPST or PSR before licensure. Proposed law requires mental health rehabilitation providers to employ a full-time mental health supervisor that will assist in the design and evaluation of CPST and PSR services. Proposed law requires LDH to implement a centralized credentialing verification organization (CVO). Proposed law provides for clawback of funds for providers not in compliance with proposed law. Proposed law provides for referral of cases to the Medicaid Fraud Control Unit of the Attorney General's office for further action. Proposed law provides for rulemaking and audits by the LA Legislative Auditor relative to requirements of proposed law.

EXPENDITURES	2018-19	2019-20	2020-21	2021-22	2022-23	5 -YEAR TOTAL
State Gen. Fd.	INCREASE	INCREASE	INCREASE	INCREASE	INCREASE	
Agy. Self-Gen.	\$0	\$0	\$0	\$0	\$0	\$0
Ded./Other	\$0	\$0	\$0	\$0	\$0	\$0
Federal Funds	INCREASE	INCREASE	INCREASE	INCREASE	INCREASE	
Local Funds	\$0	\$0	\$0	\$0	\$0	\$0
Annual Total						
REVENUES	2018-19	2019-20	2020-21	2021-22	2022-23	5 -YEAR TOTAL
State Gen. Fd.	\$0	\$0	\$0	\$0	\$0	\$0
Agy. Self-Gen.	\$0	\$0	\$0	\$0	\$0	\$0
Ded./Other	\$0	\$0	\$0	\$0	\$0	\$0
Federal Funds	\$0	\$0	\$0	\$0	\$0	\$0
Local Funds	\$0	\$0	\$0	\$0	\$0	\$0
Annual Total	\$0	\$0	\$0	\$0	\$0	\$0

EXPENDITURE EXPLANATION

The LA Dept. of Health (LDH) reports that proposed law has an indeterminable effect on expenditures for Medical Vendor Payments. Proposed law provides that persons providing community psychiatric supportive treatment (CPST) services must hold a master's degree at a minimum, which differs from current practice that allows persons holding a bachelor's degree to provide these services. LDH reports that it reimburses providers for CPST services based upon their employees' levels of qualification, and that services provided by persons holding master's degrees are reimbursed at a higher rate. However, any effect on reimbursements is presently indeterminable, as it is unknown if and how providers will alter their current staffing as a result of the proposed legislation. To the extent providers hire more persons holding master's degrees to provide CPST services rather than having persons holding bachelor's degrees, LDH reports that reimbursements would increase significantly as a result.

The Legislative Fiscal Office is currently seeking further information regarding the effects of the proposed legislation as it pertains to minimum credential requirements for persons providing psychosocial rehabilitation services (PSR), facility need review, clawback of Medicaid funds from non-compliant providers, and establishing a centralized credential verification organization (CVO) within LDH for the Medicaid specialized behavioral health program.

REVENUE EXPLANATION

There is no anticipated direct material effect on governmental revenues as a result of this measure.

Senate Dual Referral Rules
 13.5.1 >= \$100,000 Annual Fiscal Cost {S&H}
 13.5.2 >= \$500,000 Annual Tax or Fee Change {S&H}

House
 6.8(F)(1) >= \$100,000 SGF Fiscal Cost {H & S}
 6.8(G) >= \$500,000 Tax or Fee Increase or a Net Fee Decrease {S}

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