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HOUSE FLOOR AMENDMENTS

2020 Regular Session

Amendments proposed by Representative Dustin Miller to Engrossed House Bill No. 817
by Representative Dustin Miller

1 AMENDMENT NO. 1

2 On page 1, line 2, after "to enact" delete the remainder of the line and at the beginning of
3 line 3 delete "46:460.91(C)(5) and (F)," and insert in lieu thereof "R.S. 46:460.54(G) and
4 460.91(C)(5) and (F),"

5 AMENDMENT NO. 2

6 On page 1, line 6, after "provide for" delete the remainder of the line and insert in lieu
7 thereof "review of contracts, policies, and procedures for Medicaid nonemergency, non-
8 ambulance transportation brokers;"

9 AMENDMENT NO. 3

10 On page 1, delete line 7 in its entirety and at the beginning of line 8 delete "issued by the
11 Louisiana Department of Health;"

12 AMENDMENT NO. 4

13 On page 1, after line 14, delete the remainder of the page and on page 2, delete lines 1
14 through 19 in their entirety and insert in lieu thereof the following:

15 "Section 1. R.S. 46:460.51(7) is hereby amended and reenacted and R.S.
16 46:460.54(G) and 460.91(C)(5) and (F) are hereby enacted to read as follows:"

17 AMENDMENT NO. 5

18 On page 3, between lines 3 and 4, insert the following:

19 "§460.54. Medicaid policies and procedures; procedure for adoption

20 * * *

21 G. On an annual basis, the department shall review the contracts, policies,
22 and procedures of all nonemergency, non-ambulance medical transportation brokers
23 operating within this state and ensure that those brokers are not providing
24 preferences to non-Louisiana-based, nonemergency, non-ambulance medical
25 transportation operators.

26 * * *"

27 AMENDMENT NO. 6

28 On page 3, line 16, after "organization" and before "its" delete the comma "," and insert in
29 lieu thereof "and" and after "brokers" delete the remainder of the line and insert in lieu
30 thereof a period " . "

1 AMENDMENT NO. 7

2 On page 3, delete lines 17 through 25 in their entirety and insert in lieu thereof the following:

3 "If a claim for payment is denied by a managed care organization, or a fiscal agent
4 or intermediary of the managed care organization, and the provider resubmits the
5 identical claim information and the claim is paid, then the days-to-payment metric
6 for that claim shall be based upon the date of submission of the original claim."

7 AMENDMENT NO. 8

8 On page 3, at the beginning of line 28, change "providers, collectively, versus" to "providers
9 versus"

10 AMENDMENT NO. 9

11 On page 3, after line 29, insert the following:

12 "(3) The department shall take a random sampling from paid and denied
13 claims for nonemergency, non-ambulance medical transportation providers that are
14 adjudicated beyond the thirty-day timeliness requirement for additional analysis.
15 The department shall include in the report common trends in underlying causes for
16 the timeliness outlier sampling and outreach efforts by the department or Medicaid
17 managed care organizations to providers and transportation brokers for resolution."