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**SENATE FLOOR AMENDMENTS**

2020 Regular Session

Amendments proposed by Senator Fred Mills to Reengrossed House Bill No. 835 by Representative McMahan

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1 AMENDMENT NO. 1

2 Delete Senate Committee Amendment set SCAHB835 CANNONB 1744 proposed by the  
3 Senate Committee on Health and Welfare and adopted by the Senate on May 20, 2020.

4 AMENDMENT NO. 2

5 Delete Senate Committee Amendment set SCAHB835 HESSM 1909 proposed by the Senate  
6 Committee on Finance and adopted by the Senate on May 26, 2020.

7 AMENDMENT NO. 3

8 On page 1, line 3, change "1248.11" to "1248.12"

9 AMENDMENT NO. 4

10 On page 1, line 11, change "a rural institutional provider payment methodology" to "rural  
11 institutional provider and governmental institutional provider payment methodologies"

12 AMENDMENT NO. 5

13 On page 1, line 16, change "1248.11" to "1248.12"

14 AMENDMENT NO. 6

15 On page 2, between lines 6 and 7, insert:

16 "(2) "Governmental institutional provider" means either of the  
17 following:

18 (a) A nonstate governmental hospital, licensed in accordance with  
19 the Hospital Licensing Law, R.S. 40:2100 et seq., other than a rural hospital  
20 as defined in R.S. 40:1189.3.

21 (b) A hospital included in the definition of public, nonrural  
22 community hospital as defined in the Louisiana Medicaid State Plan."

23 AMENDMENT NO. 7

24 On page 2, at the beginning of line 7, change "(2)" to "(3)"

25 AMENDMENT NO. 8

26 On page 2, at the beginning of line 9, change "(3)" to "(4)"

27 AMENDMENT NO. 9

28 On page 2, at the beginning of line 11, change "(4)" to "(5)"

29 AMENDMENT NO. 10

30 On page 2, at the beginning of line 13, change "(5)" to "(6)"

31 AMENDMENT NO. 11

32 On page 5, line 20, change "supplemental payment program" to "base rate"

1 AMENDMENT NO. 12

2 On page 7, line 9, change "supplemental payment program" to "base rate payment"

3 AMENDMENT NO. 13

4 On page 8, line 24, change "a supplemental payment" to "Medicaid base rate payments"

5 AMENDMENT NO. 14

6 On page 9, line 2, change "as soon" to "on January 1, 2021, or as soon thereafter"

7 AMENDMENT NO. 15

8 On page 9, between lines 3 and 4, insert the following:

9 "§1248.12. Governmental institutional providers; enhanced reimbursement

10 A. Upon request from a parish in which a governmental institutional  
11 provider is located, the department shall attempt in good faith to execute a  
12 cooperative endeavor agreement acceptable to the department.  
13 Notwithstanding any law to the contrary, by September 1, 2020, or as soon  
14 thereafter as such a cooperative endeavor agreement is effective, the  
15 department shall file a Medicaid state plan amendment with the Centers for  
16 Medicare and Medicaid Services, referred to hereafter in this Section as  
17 "CMS", amending the Medicaid state plan provisions governing hospital  
18 reimbursement to provide that a governmental institutional provider, as  
19 defined in R.S. 40:1248.1, shall be reimbursed at a rate which equals or  
20 approximates one hundred ten percent, or, if a reduction is required by CMS,  
21 the maximum amount acceptable to CMS, but in no case less than one  
22 hundred percent, of the appropriate reasonable cost of providing hospital  
23 inpatient and outpatient services, including but not limited to services  
24 provided in a rural health clinic licensed as part of a governmental  
25 institutional provider. The new governmental institutional provider payment  
26 methodology shall utilize prospective rates approximating costs at the time  
27 of service for inpatient acute care and psychiatric services. To ensure that  
28 governmental institutional provider outpatient services, including those  
29 reimbursed on a cost basis and those reimbursed on a fee schedule, are  
30 reimbursed in the aggregate at one hundred ten percent of the reasonable  
31 costs or such lesser amounts as approved by CMS, but in no case less than  
32 one hundred percent of their reasonable costs, the department shall pay an  
33 interim rate for cost-based outpatient services at one hundred ten percent of  
34 reasonable cost during the year and for fee-based services paid on a  
35 claim-by-claim basis, and the department shall make quarterly estimates of  
36 Medicaid base rate payments required to bring reimbursement to the  
37 governmental institutional provider for such services up to one hundred  
38 percent of reasonable costs and immediately remit such payments to the  
39 governmental institutional provider, and at final settlement pay such amounts  
40 as are necessary to ensure that all outpatient services in the aggregate, both  
41 cost-based and fee schedule, are paid at one hundred ten percent of  
42 reasonable costs.

43 B. The governmental institutional provider payment methodology  
44 provided for in this Subpart shall be implemented on January 1, 2021, or as  
45 soon thereafter as is practicable after the methodology is authorized by  
46 federal law."

47 AMENDMENT NO. 16

48 On page 9, line 6, change "amendment provided for in R.S. 40:1248.11," to "amendments  
49 provided for in R.S. 40:1248.11 and R.S. 40:1248.12,"