
DIGEST

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HB 485 Original

2021 Regular Session

Zeringue

Abstract: Creates the Medicaid Managed Care Authority and provides for its powers and duties with respect to the Medicaid managed care program of this state.

Proposed law provides legislative findings regarding the Medicaid managed care program of this state. Establishes that the purpose of proposed law is to provide for the necessary degree, and an appropriate form, of public oversight of the program.

Proposed law creates within the Louisiana Department of Health (LDH) the Medicaid Managed Care Authority, referred to hereafter as the "authority". Provides that the authority shall be composed of the following 20 members:

- (1) The secretary of LDH or his designee.
- (2) One member, appointed by the governor, who is currently or formerly a Medicaid enrollee or is a parent of a current or former Medicaid enrollee.
- (3) One licensed member of a healthcare profession, appointed by the governor, who is enrolled as a Medicaid provider in this state.
- (4) One member, appointed by the governor, who represents a licensed healthcare facility that is enrolled as a Medicaid provider in this state.
- (5) One member, appointed by the speaker of the House of Representatives, who shall not be an elected member of the legislature.
- (6) One member, appointed by the president of the Senate, who shall not be an elected member of the legislature.
- (7) A faculty member of a public or private university in this state who specializes in healthcare economics appointed by the chairman of the Medicaid Estimating Conference.
- (8) The commissioner of administration or his designee.
- (9) The executive director of the Louisiana Medicaid Managed Care Organization Association or any successor association which represents Medicaid managed care organizations that contract with the state.

- (10) The president of the Louisiana Hospital Association or his designee.
- (11) The executive director of the Rural Hospital Coalition or his designee.
- (12) The chancellor of the Louisiana State University Health Sciences Center at New Orleans or his designee.
- (13) The chancellor of the Louisiana State University Health Sciences Center at Shreveport or his designee.
- (14) The executive director of the Louisiana Primary Care Association or his designee.
- (15) The executive director of the Louisiana Developmental Disabilities Council or his designee.
- (16) The chairman of the board of directors of the Louisiana Independent Pharmacies Association or his designee.
- (17) One member representing the National Association of Chain Drug Stores who is domiciled in Louisiana and appointed by the president of the association.
- (18) The director of the Mental Health Advocacy Service or his designee.
- (19) The chairperson of the Human Services Interagency Council or his designee.
- (20) The chief executive officer of the Louisiana Ambulance Alliance or his designee.

Proposed law provides for officers and rules of procedure of the authority and for terms of authority members. Stipulates that while no member of the authority shall receive a salary for his service on the authority, members of the authority shall be reimbursed in accordance with regulations of the division of administration for actual travel and other expenses incurred in the performance of their duties with the authority.

Proposed law requires the authority to appoint an executive director who shall be in the unclassified civil service. Authorizes the authority to employ other personnel as necessary to carry out the provisions of proposed law.

Proposed law provides that the authority shall have all of the following duties:

- (1) To oversee the Medicaid managed care program in such a manner as to safeguard the fiscal sustainability of the program while ensuring that program enrollees have access to high-quality health services.
- (2) To ensure that the Medicaid managed care program fully complies with all state and federal laws and regulations applicable to the program.

- (3) To determine the number of managed care organizations that may contract with the state.
- (4) To consult with and make recommendations to the undersecretary of LDH concerning Medicaid reimbursement rates that the department pays to healthcare providers through managed care organizations.
- (5) To oversee the development of, and to approve, all of the following:
 - (a) Any request for proposals to be issued by LDH for the provision of health services to Medicaid enrollees by managed care organizations.
 - (b) Types and amounts of all compensation to be paid to managed care organizations exclusive of amounts that the organizations expend on provider claims for health services.
- (6) To oversee the administration and management by LDH of each contract between the state and a managed care organization.
- (7) To approve any amendment proposed by LDH to a contract between a managed care organization and the state.
- (8) To serve as an advisory body to the governor and the legislature on the Medicaid managed care program of this state.

Proposed law requires the authority to hold regularly scheduled meetings on at least a quarterly basis and authorizes it to hold other public meetings as it deems necessary to ensure an appropriate degree of public oversight of the Medicaid managed care program.

Proposed law authorizes the authority to promulgate administrative rules as necessary to carry out its duties as provided in proposed law.

Proposed law prohibits LDH from taking any action for which approval by the authority is required by proposed law unless the authority has expressly granted such approval.

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

(Adds R.S. 36:259(B)(38) and 802.4 and R.S. 46:460.55-460.58)