DIGEST

HB 594 Engrossed   2021 Regular Session   Dustin Miller

Abstract: Prohibits insurers, managed care companies, or other payors from setting caps on reimbursement for properly ordered non-invasive ventilation treatments.

Proposed law prohibits an insurer, managed care company, or other payor from setting a maximum dollar amount of reimbursement for non-invasive ventilators or ventilation treatments properly ordered and taking place in an appropriate care setting.

Proposed law provides that reimbursement to cover the actual cost of a non-invasive ventilator may be based on the reasonable and customary allowable amount for a standard ventilator. Further provides that if the actual cost of a non-invasive ventilator has been paid, such reimbursement for the ventilator may be terminated.

Proposed law provides that subsequent to termination of payment, reasonable reimbursement is required for medically necessary servicing of non-invasive ventilators and ventilation treatments provided by a respiratory therapist.

(Adds R.S. 22:1821(G))

Summary of Amendments Adopted by House

    The Committee Amendments Proposed by House Committee on Insurance to the original bill:

1.   Add non-invasive ventilators for required reimbursement.

2.   Provide that reimbursement to cover the actual cost of a non-invasive ventilator may be based on the reasonable and customary allowable amount for a standard ventilator. Provide that if the actual cost of a non-invasive ventilator has been paid, such reimbursement for the ventilator may be terminated.

3.   Require reasonable reimbursement for medically necessary servicing of non-invasive ventilators and ventilation treatments provided by a respiratory therapist.