SENATE SUMMARY OF HOUSE AMENDMENTS

SB 108

2021 Regular Session

Luneau

KEYWORD AND SUMMARY AS RETURNED TO THE SENATE

HEALTH SERVICES. Provides for mental health rehabilitation services contracts with Medicaid managed care organizations (1/1/22)

SUMMARY OF HOUSE AMENDMENTS TO THE SENATE BILL

- 1. Deletes <u>proposed law</u> providing requirements for Medicaid contracts and subcontracts for mental health rehabilitation services which would have been enacted within <u>present law</u> relative to state procurement (R.S. 39:1551 et seq.).
- 2. Deletes <u>proposed law</u> providing that mental health rehabilitation services providers shall have the right to an independent review of an adverse action taken by Medicaid managed care organizations (MCOs) in accordance with <u>present law</u>. Add in lieu thereof revisions to the definition of "adverse determination" in <u>present law</u> stipulating that the term shall not include a decision by an MCO that results in a recoupment of the payment of a claim based upon an audit finding of fraud or abuse.
- 3. Revises <u>present law</u> relative to specialized behavioral health rehabilitation services in the state Medicaid program to provide that any individual rendering psychosocial rehabilitation services who does not possess the minimum bachelor's degree required in <u>present law</u>, but who met all provider qualifications in effect prior to July 1, 2018, may continue to provide those services for any licensed and accredited provider agency.
- 4. Adds provision regarding healthcare provider receiving payment according to the Medicaid fee schedule.
- 5 Clarifies when a mental health rehabilitation services provider has a right to independent review of an adverse claim taken by an MCO.
- 6. Makes technical changes.

DIGEST OF THE SENATE BILL AS RETURNED TO THE SENATE

Luneau

<u>Present law</u> provides for the credentialing of healthcare providers by managed care organizations (MCOs) in the Medicaid managed care program of this state. <u>Proposed law</u> decreases the maximum length of time for an MCO to complete a credentialing process once it receives all the information needed for credentialing <u>from 90 days to 60 days</u>. <u>Proposed law</u> also decreases from 60 days to 45 days the time limit after an MCO makes a request for any needed verification or verification supporting statement for the MCO to inform an applicant that the requested documentation has not been received.

<u>Proposed law</u> provides that a healthcare provider shall be considered credentialed, recredentialed, or approved and will receive payment according to the Medicaid fee schedule if an MCO fails to act within 60 days of receipt of all information needed for credentialing.

<u>Proposed law</u> requires that employees, contractors, and subcontractors of MCOs performing work or services related to the performance or supervision of audits, prior authorization determinations, and clinical reviews of mental health rehabilitation services providers shall receive annual training on all of the following:

- (1) The state's Medicaid Behavioral Health Provider Manual.
- (2) The relevant state laws, policies, and regulations related to the state's mental health rehabilitation program.

<u>Proposed law</u> requires that employees, contractors, and subcontractors of MCOs shall take all necessary steps to ensure mental health rehabilitation services providers are rostered, credentialed, or otherwise eligible to provide and be reimbursed for mental health rehabilitation services in accordance with <u>present law</u>.

<u>Present law</u> provides that any individual rendering psychosocial rehabilitation (PSR) services who does not possess the minimum bachelor's degree required in <u>present law</u>, but who met all provider qualifications in effect prior to July 1, 2018, may continue to provide PSR services for the same provider agency. Requires that prior to the individual rendering PSR services at a different agency, he must comply with the provisions of <u>present law</u> relative to eligibility for receiving Medicaid reimbursement effective on and after July 1, 2018.

<u>Proposed law</u> revises <u>present law</u> to provide that any individual rendering PSR services who does not possess the minimum bachelor's degree required in <u>present law</u>, but who met all provider qualifications in effect prior to July 1, 2018, may continue to provide those services for any licensed and accredited provider agency.

<u>Proposed law</u> requires that a mental health rehabilitation services provider has a right to an independent review of an adverse determination taken by a managed care organization that results in a recoupment of the payment of a claim based on a finding of waste or fraud.

<u>Proposed law</u> requires LDH to promulgate all administrative rules as are necessary to implement the provisions of proposed law.

Effective January 1, 2022.

(Amends R.S. 40:2162(D)(2)(a) and R.S. 46:460.61; Adds R.S. 46:460.77.3 and 460.81(D))

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