

2022 Regular Session

HOUSE BILL NO. 278

BY REPRESENTATIVE ECHOLS

INSURANCE/HEALTH: Provides requirements for the Psychiatric Collaborative Care Model

1 AN ACT

2 To enact R.S. 22:1066.2, relative to reimbursement for mental health and substance abuse
3 benefits provided through the Psychiatric Collaborative Care Model service delivery
4 method; to provide relative to health coverage plans issued for delivery in this state
5 and Medicaid state plans; to provide for definitions; and to provide for related
6 matters.

7 Be it enacted by the Legislature of Louisiana:

8 Section 1. R.S. 22:1066.2 is hereby enacted to read as follows:

9 §1066.2. Psychiatric Collaborative Care Model; service delivery method
10 requirements

11 A. A health coverage plan which is delivered or issued for delivery in this
12 state and any Medicaid state plan that provides mental health and substance abuse
13 benefits shall provide reimbursement for such benefits that are delivered through the
14 Psychiatric Collaborative Care Model, which includes the following current
15 procedural terminology (CPT) billing codes established by the American Medical
16 Association.

17 B. Any medical necessity determination made by a health coverage plan or
18 Medicaid state plan shall be in compliance with the Paul Wellstone and Pete
19 Domenici Mental Health Parity and Addiction Equity Act of 2008 and its related

1 regulations, and that such determinations are made in accordance with the Internal
2 Claims and Appeals Process and External Review Act, R.S. 22:2391 et seq.

3 C. As used in this Section:

4 (1) "Health coverage plan" means any hospital, health, or medical expense
5 insurance policy, hospital or medical service contract, employee welfare benefit plan,
6 contract or agreement with a health maintenance organization or a preferred provider
7 organization, health and accident insurance policy, or any other insurance contract
8 of this type, including a group insurance plan and the Office of Group Benefits
9 programs.

10 (2) "Mental health or substance abuse benefits" means benefits for the
11 treatment of any condition or disorder that involves a mental health condition or
12 substance use disorder that falls under any of the diagnostic categories listed in the
13 mental disorders section of the current edition of the International Classification of
14 Diseases or that is listed in the mental disorders section of the most recent version
15 of the Diagnostic and Statistical Manual of Mental Disorders.

16 (3) "Psychiatric Collaborative Care Model" means the evidence-based,
17 integrated behavioral health service delivery method described in 81 FR 80230.

DIGEST

The digest printed below was prepared by House Legislative Services. It constitutes no part of the legislative instrument. The keyword, one-liner, abstract, and digest do not constitute part of the law or proof or indicia of legislative intent. [R.S. 1:13(B) and 24:177(E)]

HB 278 Engrossed

2022 Regular Session

Echols

Abstract: Provides requirements for the Psychiatric Collaborative Care Model and requires mental health or substance abuse benefits for services delivered through the model.

Proposed law requires a health coverage plan delivered or issued for delivery in this state and any Medicaid state plan that provides mental health and substance abuse benefits to reimburse for services delivered through the Psychiatric Collaborative Care Model.

Proposed law requires any medical necessity determinations made by a health coverage plan or Medicaid state plan to be in compliance with certain federal and state law.

Proposed law defines "health coverage plan", "mental health or substance abuse benefits", and "Psychiatric Collaborative Care Model"

(Adds R.S. 22:1066.2)

Summary of Amendments Adopted by House

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

1. Add Medicaid state plans for applicability within proposed law.
2. Delete certain CPT billing codes from specific application in proposed law.
3. Delete language relative to the commissioner of insurance updating CPT billing codes and denial of reimbursement of CPT billing codes.
4. Make technical changes.