
SENATE COMMITTEE AMENDMENTS

Amendments proposed by Senate Committee on Health and Welfare to Original Senate Bill No. 207 by Senator Mount

1 AMENDMENT NO. 1

2 On page 1, line 3 after "through" and before "," delete "1300.22" and insert "1300.23"

3 AMENDMENT NO. 2

4 On page 1, line 5 after "initiative;" and before "and" insert "to provide for a sunset date;"

5 AMENDMENT NO. 3

6 On page 1, line 9 after "through" and before "," delete "1300.22" and insert "1300.23"

7 AMENDMENT NO. 4

8 On page 2, line 14 before "**Beginning**" add "A." and after "**Beginning**" and before "**1**" delete
9 "**October**" and insert "**January**"

10 AMENDMENT NO. 5

11 On page 2, line 19, after "**name**" and before "**of**" insert "**and geographic service area**"

12 AMENDMENT NO. 6

13 On page 2, line 21, after "**care**" and before "**in**" delete "**professionals**" and insert
14 "**providers**"

15 AMENDMENT NO. 7

16 On page 2, line 22, after "**specialty**" and before ":" insert "**and by each geographic service**
17 **area**"

18 AMENDMENT NO. 8

19 On page 3, between lines 5 and 6 insert the following:

20 " **(7) The number of claims denied by each coordinated care network for**
21 **each the following reasons:**
22 **(a) Lack of documentation to support medical necessity.**
23 **(b) Prior authorization was not on file.**
24 **(c) Member has other insurance that must be billed first.**
25 **(d) Claim was submitted after the filing deadline.**
26 **(e) Service was not covered by the coordinated care network.**
27 **(8) The number and dollar value of all claims paid to non-network**
28 **providers by claim type categorized by emergency services and non-emergency**
29 **services for each coordinated care network by geographic service area.**"

30 AMENDMENT NO. 9

31 On page 3, line 6 change "**(7)**" to "**(9)**"

32 AMENDMENT NO. 10

33 On page 3, line 9 change "**(8)**" to "**(10)**"

1 AMENDMENT NO. 11

2 On page 3, line 11 change "(9)" to "(11)"

3 AMENDMENT NO. 12

4 On page 3, line 14 change "(10)" to "(12)" and after "of" and before "the" insert ", which
5 includes but is not limited to,"

6 AMENDMENT NO. 13

7 On page 3, line 23 change "(11)" to "(13)"

8 AMENDMENT NO. 14

9 On page 3, line 25 change "(12)" to "(14)"

10 AMENDMENT NO. 15

11 On page 3, line 27 change "(13)" to "(15)"

12 AMENDMENT NO. 16

13 On page 3, line 29 change "(14)" to "(16)"

14 AMENDMENT NO. 17

15 On page 4, line 2 change "(15)" to "(17)"

16 AMENDMENT NO. 18

17 On page 4, between lines 6 and 7 insert the following:

18 " (18) The number of members who receive unduplicated medicaid
19 services from each coordinated care network broken down by provider type,
20 specialty, and place of service.

21 (19) The number of members who received unduplicated outpatient
22 emergency services broken down by coordinated care network and aggregated
23 by the following hospital classifications:

- 24 (a) State.
- 25 (b) Non-state non-rural.
- 26 (c) Rural.
- 27 (d) Private.

28 (20) The number of total inpatient medicaid days broken down by
29 Coordinated Care Network and aggregated by the following hospital
30 classifications:

- 31 (a) State.
- 32 (b) Public non-state non-rural.
- 33 (c) Rural.
- 34 (d) Private.

35 (21) Any other metric or measure in which the Department of Health
36 and Hospitals Coordinated Care Network Quality Committee deems
37 appropriate for inclusion into the report.

38 B. The department of health and hospitals shall submit all quarterly
39 reports required to be submitted by coordinated care networks to the Senate
40 Committee on Health and Welfare, the House Committee on Health and
41 Welfare, and the Senate Committee on Finance and House Committee on
42 Appropriations.

43 §1300.23. Sunset

1 **All portions of the Louisiana Medical Assistance Program which are**
2 **administered by a managed care organization or meet the definition of managed**
3 **care pursuant to federal law or regulation shall sunset on December 31, 2014."**