

GREEN SHEET REDIGEST

HB 307

2015 Regular Session

Jackson

(KEYWORD, SUMMARY, AND DIGEST as amended by Senate committee amendments)

MENTAL HEALTH. Provides relative to coverage and payment for services rendered to a person admitted under an emergency certificate.

DIGEST

Abstract: Prohibits the denial of a claim for payment of services provided to a person admitted under an emergency certificate on the basis of medical necessity.

Present law provides that a person who is mentally ill or a person who is suffering from substance abuse may be admitted and detained at a treatment facility for observation, diagnosis, and treatment for a period not to exceed 15 days under an emergency certificate. Further provides that a person suffering from substance abuse may be detained at a treatment facility for one additional period, not to exceed 15 days, provided that a second emergency certificate is executed.

Proposed law prohibits an insurer, including an entity contracted with the state for the provision of Medicaid services and the Office of Group Benefits programs, from denying payment for inpatient behavioral health services provided to a person while admitted and detained in a facility that provides mental health services under an emergency certificate on the basis of medical necessity, if all of the following conditions are met:

- (1) Claims for payment of services are limited to behavioral health expenditures and exclude payment for non-behavioral health services or other medical expenses not directly related to the provision of behavioral health care, treatment, or services with the exception of usual and customary laboratory services necessary to monitor patient progress.
- (2) The admitting physician and the evaluating psychiatrist or medical psychologist offer the subject of the emergency certificate the opportunity for voluntary admission.
- (3) Any patient committed under an emergency certificate to inpatient treatment by a facility that provides mental health services is evaluated by a psychiatrist or medical psychologist in the admitting facility within 24 hours of arrival at the admitting facility.

Proposed law provides that after the psychiatric evaluation, payment of claims shall be determined by medical necessity.

Proposed law defines "admitting facility" as a crisis receiving center, acute treatment hospital or facility, distinct part psychiatric unit, or free-standing psychiatric hospital or facility.

Nothing in proposed law shall be construed or interpreted to require payment of claims in a manner other than in accordance with the terms and conditions of the health insurance contract.

Proposed law provides that in the event that funding is necessary pursuant to these provisions, the utilization of available Community Development Block Grant (CDBG) funds shall be authorized only upon the approval of the Centers for Medicare and Medicaid Services (CMS).

(Adds R.S. 28:53(P))

Summary of Amendments Adopted by House

The Committee Amendments Proposed by House Committee on Health and Welfare to the original bill:

1. Make technical changes.
2. Clarify that the provisions of proposed law apply to inpatient behavioral health services.
3. Require the opportunity for voluntary admission.
4. Require a psychiatric evaluation within 24 hours of arrival at the admitting facility.
5. Provide for payment of claims after the psychiatric evaluation based on medical necessity.
6. Define admitting facility.
7. Provide for the payment of claims in the manner specified in the health insurance contract.

Summary of Amendments Adopted by Senate

Committee Amendments Proposed by Senate Committee on Finance to the engrossed bill

1. Provides that in the event that funding is necessary pursuant to these provisions, the utilization of available Community Development Block Grant (CDBG) funds shall be authorized only upon the approval of the Centers for Medicare and Medicaid Services (CMS).