DECLARATION OF EMERGENCY

Department of Health and Hospitals Bureau of Health Services Financing

Intermediate Care Facilities for Persons with Intellectual Disabilities Supplemental Payments (LAC 50:VII.32917)

The Department of Health and Hospitals, Bureau of Health
Services Financing adopts LAC 50:VII.32917 in the Medical Assistance
Program as authorized by R.S. 36:254 and pursuant to Title XIX of the
Social Security Act. This Emergency Rule is promulgated in
accordance with the provisions of the Administrative Procedure Act,
R.S. 49:953(B)(1) et seq., and shall be in effect for the maximum
period allowed under the Act or until adoption of the final Rule,
whichever occurs first.

The Department of Health and Hospitals (DHH), Bureau of Health Services Financing provides Medicaid reimbursement to non-state intermediate care facilities for persons with intellectual disabilities (ICFs/ID) for services rendered to Medicaid recipients.

The department now proposes to amend the provisions governing the reimbursement methodology for ICFs/ID in order to adopt provisions to establish supplemental Medicaid payments for services provided to Medicaid recipients residing in privately-owned facilities that enter into a cooperative endeavor agreement with the department. This action is being taken to secure new federal funding, and to promote the health and welfare of Medicaid recipients by

ensuring sufficient provider participation. It is estimated that implementation of this Emergency Rule will increase expenditures in the Medicaid Program by approximately \$8,371,460 for state fiscal year 2015-2016.

Effective August 1, 2015, the Department of Health and Hospitals, Bureau of Health Services Financing amends the provisions governing the reimbursement methodology for non-state ICFs/ID to establish supplemental Medicaid payments.

Title 50

PUBLIC HEALTH-MEDICAL ASSISTANCE

Part VII. Long Term Care

Subpart 3. Intermediate Care Facilities for Persons with Intellectual Disabilities

Chapter 329. Reimbursement Methodology

Subchapter A. Non-State Facilities

§32917. Supplemental Payments

- A. Effective for dates of service on or after August 1, 2015, monthly supplemental payments shall be made to qualifying privately-owned intermediate care facilities for persons with intellectual disabilities.
- B. In order to qualify for the supplemental payment, the private entity must enter into a cooperative endeavor agreement with the department to lease state-owned ICF/ID beds.
- C. Supplemental payments for services rendered to Medicaid recipients shall not exceed the facility's upper payment limit (UPL)

pursuant to 42 CFR 447.272. The UPL will be based on the Centers for Medicare and Medicaid Services' approved ICF transitional rate of \$329.26 including provider fee.

D. The supplemental payment will be the difference between the actual Medicaid payment and what would have been paid if the ICF/ID was paid up to the UPL amount.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and Title XIX of the Social Security Act.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Bureau of Health Services Financing, LR 41:

Implementation of the provisions of this Rule may be contingent upon the approval of the U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services (CMS), if it is determined that submission to CMS for review and approval is required.

Interested persons may submit written comments to J. Ruth
Kennedy, Bureau of Health Services Financing, P.O. Box 91030, Baton
Rouge, LA 70821-9030 or by email to MedicaidPolicy@la.gov. Ms.
Kennedy is responsible for responding to inquiries regarding this
Emergency Rule. A copy of this Emergency Rule is available for
review by interested parties at parish Medicaid offices.

Kathy H. Kliebert

Secretary