#### NOTICE OF INTENT

# Department of Health and Hospitals Bureau of Health Services Financing

# Inpatient Hospital Services - Non-Rural, Non-State Hospitals Reinstatement of Additional Payments for Hemophilia Blood Products (LAC 50:V.965)

The Department of Health and Hospitals, Bureau of Health Services Financing proposes to amend LAC 50:V.965 in the Medical Assistance Program as authorized by R.S. 36:254 and pursuant to Title XIX of the Social Security Act. This proposed Rule is promulgated in accordance with the provisions of the Administrative Procedure Act, R.S. 49:950 et seq.

The Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing adopted provisions governing the reimbursement methodology for inpatient hospital services rendered by non-rural, non-state acute care hospitals to provide additional reimbursements to certain hospitals for the extraordinary costs incurred in the purchase of blood products for Medicaid recipients who have been diagnosed with hemophilia (Louisiana Register, Volume 34, Number 10) and other rare bleeding disorders (Louisiana Register, Volume 35, Number 4).

As a result of a budget shortfall in state fiscal year 2015, the Department of Health and Hospitals, Bureau of Health Services Financing promulgated an Emergency Rule which amended the provisions governing the reimbursement methodology for inpatient

hospital services rendered by non-rural, non-state hospitals to eliminate the additional reimbursements for hemophilia blood products purchased by hospitals (*Louisiana Register*, Volume 41, Number 3).

Act 16 of the 2015 Regular Session of the Louisiana

Legislature allocated funding to the department to reinstate the additional reimbursements for hemophilia related blood products.

The department promulgated an Emergency Rule which amended the provisions governing the reimbursement methodology for inpatient hospital services rendered by non-rural, non-state hospitals to reinstate reimbursements for costs incurred in the purchase of blood products for certain Medicaid recipients diagnosed with, and receiving inpatient treatment for, hemophilia (Louisiana Register, Volume 41, Number 7). This proposed Rule is being promulgated to continue the provisions of the July 1, 2015 Emergency Rule.

## Title 50

PUBLIC HEALTH-MEDICAL ASSISTANCE Part V. Hospital Services Subpart 1. Inpatient Hospitals

Chapter 9. Non-Rural, Non-State Hospitals
Subchapter B. Reimbursement Methodology

### §965. Hemophilia Blood Products

A. Effective for dates of service on or after May 20, 2008 July 1, 2015, the Department of Health and Hospitals shall provide additional reimbursements to certain non-rural, non-state

acute care hospitals for the extraordinary costs incurred in purchasing blood products for certain Medicaid recipients diagnosed with, and receiving inpatient treatment for hemophilia.

B. - B.1. ...

- 2. have provided clotting factors to a Medicaid recipient who has been diagnosed with hemophilia or other rare bleeding disorders for which the use of one or more clotting factors is FDA approved and has been hospitalized at the qualifying hospital for a period exceeding six days; and:
- a. has been diagnosed with hemophilia or other rare bleeding disorders for which the use of one or more clotting factors is Food and Drug Administration (FDA) approved; and
- b. has been hospitalized at the qualifying hospital for a period exceeding six days; and

3. - 3.a. ...

- C. Reimbursement. Hospitals who meet the afore-mentioned qualifications in §965.B may receive reimbursement for their actual costs that exceed \$50,000 if the hospital submits a request for reimbursement to the Medicaid Program within 180 days of the patient's discharge from the hospital.
  - 1. ...

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, Office of the Secretary, Bureau of Health Services Financing, LR 34:2176 (October 2008), amended by the Department of Health and Hospitals, Bureau of Health Services Financing, LR 35:674 (April 2009), LR 42:

In compliance with Act 1183 of the 1999 Regular Session of the Louisiana Legislature, the impact of this proposed Rule on the family has been considered. It is anticipated that this proposed Rule will have a positive impact on family functioning, stability or autonomy as described in R.S. 49:972 by ensuring that Medicaid recipients have access to medically necessary hospital services and medications.

In compliance with Act 854 of the 2012 Regular Session of the Louisiana Legislature, the poverty impact of this proposed Rule has been considered. It is anticipated that this proposed Rule will have a positive impact on child, individual, or family poverty in relation to individual or community asset development as described in R.S. 49:973 by ensuring that Medicaid recipients have access to medically necessary hospital services and medications.

In compliance with House Concurrent Resolution (HCR) 170 of the 2014 Regular Session of the Louisiana Legislature, the provider impact of this proposed Rule has been considered. It is anticipated that this proposed Rule will have no impact on the

staffing level requirements or qualifications required to provide the same level of service, but may reduce the total direct and indirect cost to the provider to provide the same level of service, and may enhance the provider's ability to provide the same level of service as described in HCR 170 since this proposed Rule increases payments to providers for the same services they already render.

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 proposed Rule. A public hearing on this proposed Rule is scheduled for Thursday, January 28, 2016 at 9:30 a.m. in Room 118, Bienville Building, 628 North Fourth Street, Baton Rouge, LA. At that time all interested persons will be afforded an opportunity to submit data, views or arguments either orally or in writing. The deadline for receipt of all written comments is 4:30 p.m. on the next business day following the public hearing.

Kathy H. Kliebert

Secretary