

NOTICE OF INTENT

**Department of Health and Hospitals
Bureau of Health Services Financing
and
Office of Aging and Adult Services**

**Home and Community-Based Services Waivers
Community Choices Waiver
Unit of Reimbursement
(LAC 50:XXI.9501)**

The Department of Health and Hospitals, Bureau of Health Services Financing and the Office of Aging and Adult Services propose to amend LAC 50:XXI.9501 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, Bureau of Health Services Financing and the Office of Aging and Adult Services amended the provisions governing the Community Choices Waiver in order to clarify the provisions governing monitored in-home caregiving services, and to revise the provisions governing the organized health care delivery system (*Louisiana Register*, Volume 41, Number 12).

Act 299 of the 2011 Regular Session of the Louisiana Legislature directed the department to implement certain policy and licensing provisions governing home and community-based services (HCBS) and mandated cost reporting for HCBS providers. In compliance with Act 299, the department has determined that it is necessary to amend the provisions governing the Community

Choices Waiver in order to further clarify the reimbursement methodology, remove language that provides historical information pertaining to the rate reimbursement and revise the terminology associated with Community Choices Waiver reimbursements.

Title 50
PUBLIC HEALTH-MEDICAL ASSISTANCE
Part XXI. Home and Community Based Services Waivers
Subpart 7. Community Choices Waiver

Chapter 95. Reimbursement

§9501. Unit of Reimbursement ~~Methodology~~

A. Reimbursement for the following services shall be a prospective flat rate for each approved unit of service provided to the participant. One quarter hour (15 minutes) is the standard unit of service, which covers both the service provision and administrative costs for the following services, and reimbursement shall not be made for less than one quarter hour (15 minutes) of service:

1. personal assistance services (except for the "a.m. and p.m." service delivery model);

a. ~~personal assistance services furnished to one participant shall be reimbursed at 100 percent of the full rate for the participant;~~ up to three participants may share personal assistance services if they live together and share a common provider of these services; and

b. ~~for dates of service on or after November 1, 2012, personal assistance services furnished to two participants shall be reimbursed at 82.79 percent of the full rate for each~~

~~participant;~~ there is a separate reimbursement rate for shared personal care services.

c. ~~for dates of service on or after November 1, 2012, personal assistance services furnished to three participants shall be reimbursed at 72.4 percent of the full rate for each participant;~~ Repealed.

A.2.-B.3. ...

4. transition expenses ~~(not up to~~ exceed the maximum ~~a~~ lifetime limit set by OAS) ~~maximum of \$1500;~~ and

B.5. - E. ...

F. ~~Certain nursing and skilled maintenance therapy procedures as well as personal assistance~~ The following services furnished via ~~"a.m. and p.m." delivery method will~~ shall be reimbursed on a per-visit basis:

1. certain nursing and skilled maintenance therapy procedures; and

2. personal assistance services furnished via "a.m. and p.m." delivery method.

G. ~~Certain environmental accessibility adaptation, nursing, and skilled maintenance therapy procedures will~~ The following services shall be reimbursed on a per-~~service~~ visit basis:

1. certain environmental accessibility adaptations; and

2. certain nursing, and skilled maintenance therapy procedures.

H. ...

~~I. Effective for dates of service on or after July 1, 2012, the reimbursement rates for community choices waiver personal assistance services furnished to one participant shall be reduced by 1.5 percent of the rates in effect on June 30, 2012.~~

~~J. Effective for dates of service on or after October 1, 2012, the reimbursement rates for in-home caregiver temporary support services provided by personal care attendants or a home health agency shall be reduced by 1.5 percent of the rates in effect on September 30, 2012.~~

~~K. Effective for dates of service on or after October 1, 2012, the reimbursement rates for caregiver temporary support services provided by an adult day health care center shall be reduced by 1.5 percent of the rates in effect on September 30, 2012.~~

~~L. Effective for dates of service on or after October 1, 2012, the reimbursement rates for adult day health care services shall be reduced by 1.5 percent of the rates in effect on September 30, 2012.~~

~~1. The provider-specific transportation component shall be excluded from this rate reduction.~~ I. - L.1. Repealed.

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 and the Office

of Aging and Adult Services, LR 37:3525 (December 2011), amended LR 39:322 (February 2013), LR 39:508 (March 2013), repromulgated LR 39:1048 (April 2013), amended LR 39:1779 (July 2013), LR 40:793 (April 2014), LR 42:

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.

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 no impact on family functioning, stability or autonomy as described in R.S. 49:972.

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 no impact on child, individual, or family poverty in relation to individual or community asset development as described in R.S. 49:973.

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, no direct or indirect cost to the

provider to provide the same level of service, and will have no impact on the provider's ability to provide the same level of service as described in HCR 170.

Interested persons may submit written comments to Jen Steele, Bureau of Health Services Financing, P.O. Box 91030, Baton Rouge, LA 70821-9030 or by email to MedicaidPolicy@la.gov. Ms. Steele is responsible for responding to inquiries regarding this proposed Rule. A public hearing on this proposed Rule is scheduled for Thursday, April 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.

Rebekah E. Gee MD, MPH

Secretary