

Bobby Jindal
GOVERNOR



Kathy H. Kliebert
SECRETARY

State of Louisiana
Department of Health and Hospitals
Office of the Secretary

April 15, 2015

Bill Brooks
Associate Regional Administrator
Division of Medicaid & Children's Health
DHHS/Centers for Medicare and Medicaid Services
1301 Young Street, Room #833
Dallas, Texas 75202

Dear Mr. Brooks:

**RE: Louisiana Title XIX State Plan
Transmittal No. 15-0015**

I have reviewed and approved the enclosed Louisiana Title XIX State Plan material.

I recommend this material for adoption and inclusion in the body of the State Plan.

Sincerely,

A handwritten signature in blue ink, appearing to read "Kathy H. Kliebert", with the words "Approved for" written in blue ink below it.

Kathy H. Kliebert
Secretary

Attachments (2)

KHK/WJR/JH

**TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL**

FOR: HEALTH CARE FINANCING ADMINISTRATION

1. TRANSMITTAL NUMBER:

15-0015

2. STATE

Louisiana

3. PROGRAM IDENTIFICATION: TITLE XIX OF THE
SOCIAL SECURITY ACT (MEDICAID)

TO: REGIONAL ADMINISTRATOR
HEALTH CARE FINANCING ADMINISTRATION
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE

June 20, 2015

5. TYPE OF PLAN MATERIAL (*Check One*):

NEW STATE PLAN AMENDMENT TO BE CONSIDERED AS NEW PLAN AMENDMENT

COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (*Separate Transmittal for each amendment*)

6. FEDERAL STATUTE/REGULATION CITATION:

42 CFR 447, Subpart F

7. FEDERAL BUDGET IMPACT:

a. FFY 2015 **(\$117.87)**

b. FFY 2016 **(\$476.23)**

8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:

Attachment 4.19-b, Item 5, Page 7

9. PAGE NUMBER OF THE SUPERSEDED PLAN
SECTION OR ATTACHMENT (*If Applicable*):

SAME (TN 13-17)

10. SUBJECT OF AMENDMENT: **The purpose of this SPA is to amend the provisions governing the reimbursement methodology for physician services in order to increase the reimbursement rate paid to physicians for the administration of the drug, 17 Hydroxyprogesterone (17P).**

11. GOVERNOR'S REVIEW (*Check One*):

- GOVERNOR'S OFFICE REPORTED NO COMMENT
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

OTHER, AS SPECIFIED:

The Governor does not review state plan material.

12. SIGNATURE OF STATE AGENCY OFFICIAL:

13. TYPED NAME:

Kathy H. Kliebert

14. TITLE:

Secretary

15. DATE SUBMITTED:

April 15, 2015

16. RETURN TO:

**J. Ruth Kennedy, Medicaid Director
State of Louisiana
Department of Health and Hospitals
628 N. 4th Street
P.O. Box 91030
Baton Rouge, LA 70821-9030**

FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED:

18. DATE APPROVED:

PLAN APPROVED – ONE COPY ATTACHED

19. EFFECTIVE DATE OF APPROVED MATERIAL:

20. SIGNATURE OF REGIONAL OFFICIAL:

21. TYPED NAME:

22. TITLE:

23. REMARKS:

LOUISIANA TITLE XIX STATE PLAN

TRANSMITTAL #: 15-0015

TITLE: Professional Services - Physician Services - Reimbursement Rate Increase - 17 Hydroxyprogesterone (17P)

EFFECTIVE DATE: June 20, 2015

FISCAL IMPACT

Decrease

	year	% inc.		*# mos	range of mos.	dollars
1st SFY	2015	N/A		0.33	June 20, 2015 - June 30, 2015	(\$20,895)
2nd SFY	2016			12	July 2015 - June 2016	(\$782,613)
3rd SFY	2017			12	July 2016 - June 2017	(\$806,091)

*#mos-Months remaining in fiscal year

Total Decrease in Cost FFY		2015					
SFY	2015	(\$20,895) for	0.33 months	June 20, 2015 - June 30, 2015			
		(\$20,895) /	0.33 X 3 months	July 2015 - September 2015	=		(\$189,955)
							<u>(\$189,955)</u>
		FFP (FFY 2015)=		(\$189,955)	X 62.05%	=	<u>(\$117,867)</u>

Total Decrease in Cost FFY		2016					
SFY	2016	(\$20,895) for	0.33 months	June 20, 2015 - June 30, 2015			
		(\$20,895) /	0.33 X 9	October 2015 - June 2016	=		(\$569,864)
SFY	2017	(\$782,613) for	12 months	July 2015 - June 2016			
		(\$782,613) /	12 X 3	July 2016 - September 2017	=		(\$195,653)
							<u>(\$765,517)</u>
		FFP (FFY 2016)=		(\$765,517)	X 62.21%	=	<u>(\$476,228)</u>

PAYMENTS FOR MEDICAL AND REMEDIAL CARE AND SERVICES

METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES -- OTHER TYPES OF CARE OR SERVICES LISTED IN SECTION 1905(A) OF THE ACT THAT IS INCLUDED IN THE PROGRAM UNDER THE PLAN ARE DESCRIBED AS FOLLOWS:

Physician-Administered 17 Hydroxyprogesterone (17P)

Effective for dates of service on or after June 20, 2015, the reimbursement for the physician-administered drug, 17 Hydroxyprogesterone (17P), shall increase to \$69 per dose.

TN 15-0015
Supersedes
TN 13-17

Approval Date _____

Effective Date _____

NOTICE OF INTENT**Department of Health and Hospitals
Bureau of Health Services Financing**

Professional Services Program
Physician Services
Reimbursement Rate Adjustment
(LAC 50:IX.15113)

The Department of Health and Hospitals, Bureau of Health Services Financing proposes to amend LAC 50:IX.15113 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 provides Medicaid reimbursement to physicians and nurse midwives for the delivery of infants. The department promulgated a Rule which amended the provisions governing the reimbursement methodology for physician services in order to reduce the reimbursement rates and revise the formatting of these provisions (*Louisiana Register*, Volume 39, Number 12).

The department now proposes to amend the provisions governing the reimbursement methodology for physician services in order to increase the reimbursement rate paid to physicians for the administration of the drug, 17 Hydroxyprogesterone (17P). The drug, 17P, is a primary tool utilized to reduce the occurrences of premature births in pregnant women with a history of pre-term delivery. With its increased use, the department anticipates a dramatic reduction in pre-term births which directly correlates to an expected reduction in the high costs to the Medicaid Program associated with the treatment of pre-term babies.

Title 50**PUBLIC HEALTH—MEDICAL ASSISTANCE****Part IX. Professional Services Program****Subpart 15. Reimbursement****Chapter 151. Reimbursement Methodology****Subchapter B. Physician Services****§15113. Reimbursement**

A. - L.3. ...

M. Effective for dates of service on or after June 20, 2015, the reimbursement for the physician-administered drug, 17 Hydroxyprogesterone (17P), shall increase to \$69 per dose.

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 36:1252 (June 2010), amended LR 36:2282 (October 2010), LR 37:904 (March 2011), LR 39:3300, 3301 (December 2013), 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.

Family Impact Statement

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 may have a positive impact on family functioning, stability or autonomy as described in R.S. 49:972 by reducing the risk of premature births.

Poverty Impact Statement

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 may 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 reducing the financial burden on families that incur costs associated with children born prematurely.

Provider Impact Statement

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, and may reduce the total direct or indirect cost to the provider to provide the same level of service, and enhance the provider's ability to provide the same level of service since this proposed Rule increases the payment to providers for the same services they already render.

Public Comments

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. The deadline for receipt of all written comments is 4:30 p.m. on the next business day following the public hearing.

Public Hearing

A public hearing on this proposed Rule is scheduled for Wednesday April 29, 2015, 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

Kathy H. Kliebert
Secretary

**FISCAL AND ECONOMIC IMPACT STATEMENT
FOR ADMINISTRATIVE RULES****RULE TITLE: Professional Services Program
Physician Services—Reimbursement Rate Adjustment****I. ESTIMATED IMPLEMENTATION COSTS (SAVINGS) TO
STATE OR LOCAL GOVERNMENT UNITS (Summary)**

It is anticipated that implementation of this proposed rule will result in estimated net state general fund programmatic savings of \$7,698 for FY 14-15, \$97,532 for FY 15-16 and \$100,458 for FY 16-17. Costs associated with increasing the rate for physician-administered 17 Hydroxyprogesterone (17P)

will be directly offset by a larger savings realized from a reduction in expenditures for the treatment of premature babies in the Hospital and Professional Services Programs. It is anticipated that \$432 (\$216 SGF and \$216 FED) will be expended in FY 14-15 for the state's administrative expense for promulgation of this proposed rule and the final rule. The numbers reflected above are based on a blended Federal Medical Assistance Percentage (FMAP) rate of 62.17 percent in FY 15-16. The enhanced rate of 62.11 percent for the first three months of FY 15 is the federal rate for disaster-recovery FMAP adjustment states.

II. ESTIMATED EFFECT ON REVENUE COLLECTIONS OF STATE OR LOCAL GOVERNMENTAL UNITS (Summary)

It is anticipated that the implementation of this proposed rule will reduce federal revenue collections by approximately \$12,729 for FY 14-15, \$160,285 for FY 15-16 and \$165,094 for FY 16-17. It is anticipated that \$216 will be collected in FY 14-15 for the federal share of the administrative expenses for promulgation of this proposed rule and the final rule. The numbers reflected above are based on a blended Federal Medical Assistance Percentage (FMAP) rate of 62.17 percent in FY 15-16. The enhanced rate of 62.11 percent for the first three months of FY 15 is the federal rate for disaster-recovery FMAP adjustment states.

III. ESTIMATED COSTS AND/OR ECONOMIC BENEFITS TO DIRECTLY AFFECTED PERSONS OR NONGOVERNMENTAL GROUPS (Summary)

This proposed Rule amends the provisions governing the reimbursement methodology for physician services in order to increase the reimbursement rate for the administration of the drug, 17P, which is utilized as a treatment to reduce premature births in pregnant women with a history of pre-term delivery. It is anticipated that implementation of this proposed rule will reduce programmatic expenditures in the Medicaid Program by approximately \$20,859 for FY 14-15, \$257,817 for FY 15-16 and \$265,552 for FY 16-17. The expected net savings in the Professional Services Program is due to a corresponding reduction in costs in the Hospital and Professional Services Programs as a result of reducing the number of pre-term births and the treatment of premature babies.

IV. ESTIMATED EFFECT ON COMPETITION AND EMPLOYMENT (Summary)

It is anticipated that the implementation of this proposed rule will not have an effect on competition. However, it is anticipated that the implementation of this proposed rule may have a positive effect on employment as it will increase payments for the physician-administered 17P drug. The increase in payments may improve the financial standing of physicians and could possibly cause an increase in employment opportunities.

J. Ruth Kennedy
Medicaid Director
1503#045

Evan Brasseaux
Staff Director
Legislative Fiscal Office

NOTICE OF INTENT

**Department of Transportation and Development
Professional Engineering and Land Surveying Board**

**Experience Credit for Graduate-Level Engineering Degree
(LAC 46:LXI.1503)**

Under the authority of the Louisiana professional engineering and land surveying licensure law, R.S. 37:681 et seq., and in accordance with the Louisiana Administrative Procedure Act, R.S. 49:950 et seq., notice is hereby given

that the Louisiana Professional Engineering and Land Surveying Board has initiated procedures to amend its rules contained in LAC 46:LXI.1503.

This is a technical revision of existing rules under which LAPELS operates. The revision makes it clear that an applicant for professional engineer licensure who has obtained a graduate-level engineering degree following a bachelor's degree from an EAC/ABET accredited engineering curriculum will be allowed a greater amount of experience credit than other applicants.

Title 46

**PROFESSIONAL AND OCCUPATIONAL
STANDARDS**

Part LXI. Professional Engineers and Land Surveyors

Chapter 15. Experience

§1503. Graduate-Level Engineering Degree

A. An applicant who has obtained a master's degree in engineering which has followed a baccalaureate degree in engineering from an EAC/ABET accredited engineering curriculum may use the master's degree for credit for one year's experience. An applicant who has obtained an earned doctoral degree in engineering which has followed a baccalaureate degree in engineering from an EAC/ABET accredited engineering curriculum may use the doctoral degree for credit for two years' experience. The two-year's credit for the doctoral degree includes the one year for a master's degree.

B. An applicant who has obtained an earned doctoral degree in engineering which has followed either a baccalaureate degree in engineering from a non-accredited engineering curriculum or a baccalaureate degree in a related science or engineering technology curriculum may use the doctoral degree for credit for one year's experience.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:688.

HISTORICAL NOTE: Promulgated by the Department of Transportation and Development, Board of Registration for Professional Engineers and Land Surveyors, LR 3:502 (December 1977), amended LR 5:112 (May 1979), LR 6:735 (December 1980), LR 7:647 (December 1981), amended by the Department of Transportation and Development, Professional Engineering and Land Surveying Board, LR 27:1031 (July 2001), LR 30:1715 (August 2004), LR 41:

Family Impact Statement

In accordance with R.S. 49:953(A)(1)(a)(viii) and 972, the following Family Impact Statement is submitted with the Notice of Intent for publication in the *Louisiana Register*. The proposed Rule has no known impact on family formation, stability or autonomy.

Poverty Impact Statement

In accordance with R.S. 49:953(A)(1)(a)(ix) and 973, the following Poverty Impact Statement is submitted with the Notice of Intent for publication in the *Louisiana Register*. The proposed Rule has no known impact on child, individual or family poverty in relation to individual or community asset development.

Provider Impact Statement

In accordance with HCR No. 170 of the 2014 Regular Session, the following Provider Impact Statement is submitted with the Notice of Intent for publication in the *Louisiana Register*. The proposed Rule has no known effect on: (a) the staffing level requirements or qualifications



State of Louisiana
Department of Health and Hospitals
Bureau of Health Services Financing

VIA ELECTRONIC MAIL ONLY

March 10, 2015

Karen Matthews, Health Director
Chitimacha Health Clinic
3231 Chitimacha Trail
Jeanerette, LA 70544

Angela Martin
Chitimacha Tribe of Louisiana
P. O. Box 640
Jeanerette, LA 70544

Anita Molo
Chitimacha Tribe of Louisiana
P. O. Box 640
Jeanerette, LA 70544

Marshall Pierite, Chairman
Misty Hutchby, Health Director
Tunica-Biloxi Tribe of Louisiana
P. O. Box 1589
Marksville, LA 71351-1589

Lovelin Poncho, Chairman
Paula Manuel, Health Director
Coushatta Tribe of Louisiana
P. O. Box 818
Elton, LA 70532

Chief Beverly Cheryl Smith
Holly Vanhoozen, Health Director
The Jena Band of Choctaw Indians
P. O. Box 14
Jena, LA 71342

Dear Louisiana Tribal Contact:

RE: Notification of Louisiana Medicaid State Plan Amendments

In compliance with the provisions of the American Recovery and Reinvestment Act (ARRA) of 2009, the Department of Health and Hospitals, Bureau of Health Services Financing is taking the opportunity to notify you of State Plan amendments (SPAs) that may have an impact on your tribe.

Attached for your review and comments is a summary of the proposed State Plan amendments. Please provide any comments you may have by April 9, 2015 to Mrs. Darlene Budgewater via email to Darlene.Budgewater@la.gov or by postal mail to:

Department of Health and Hospitals
Bureau of Health Services Financing
Medicaid Policy and Compliance
P.O. Box 91030
Baton Rouge, LA 70821-9030

Louisiana Tribal Notice
March 10, 2015
Page 2

Should you have additional questions about Medicaid policy, Mrs. Budgewater will be glad to assist you. You may reach her by email or telephone at (225) 342-3881. Thanks for your continued support of the tribal consultation process.

Sincerely,

Sarlene A. Budgewater

J. Ruth Kennedy *for*
Medicaid Director

Attachment (1)

JRK/DB/RJ

c: Ford J. Blunt, III
Stacey Shuman

State Plan Amendment for submittal to CMS

Request for Tribal Comments

March 10, 2015

15-0015 Professional Service Program-Physician Services-Reimbursement Rate Adjustment (17P)

Effective: March (NOI)

This SPA proposes to amend the provisions governing the reimbursement methodology for physician services in order to increase the reimbursement rate paid to physicians for the administration of the drug, 17 Hydroxyprogesterone (17P).