

PAYMENT OF MEDICAL AND REMEDIAL CARE AND SERVICES

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

CITATION Medical and Remedial I.
P.L. 101-239 Care and Services
Sect. 6404 Item 2.c.

Federally Qualified Health Center Services (FQHC)

Effective for services on or after April 1, 1990, and subject to the specifications, conditions, limitations, and requirements established by Medicaid of Louisiana, FQHC services are available to eligible Medicaid beneficiaries. Covered Services are limited to:

A. FQHC Core Services

1. Services furnished by a physician, within the scope of practice of his profession under Louisiana law;
2. Services furnished by a
 - a. Physician assistant;
 - b. Nurse practitioner;
 - c. Nurse midwife;
 - d. Clinical social worker;
 - e. Clinical psychologist; or
 - f. Dentist
3. Services and supplies that are furnished as an incident to professional services by all eligible professionals;
4. Other ambulatory services; and

SUPERSEDES: TN- 09-17

STATE <u>Louisiana</u>	A
DATE REC'D <u>3-17-11</u>	
DATE APPV'D <u>6-13-11</u>	
DATE EFF <u>2-21-11</u>	
HCFA 179 <u>11-04</u>	

TN# 11-04 Approval Date 6-13-11 Effective 2-21-11

Supersedes
TN# 09-17

STATE OF LOUISIANA

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:

5. Diabetes Self-management Training Services

- A. Effective for dates of service on or after February 21, 2011, the Department shall provide coverage of diabetes self-management training (DSMT) services rendered to Medicaid recipients diagnosed with diabetes. The services shall be comprised of one hour of individual instruction and nine hours of group instruction on diabetes self-management.
- (1) Recipients of DSMT services shall receive up to 10 hours of services during the first 12-month period, beginning with the initial training date.
 - (2) After the first 12-month period has ended, recipients shall only be eligible for two hours of individual instruction on diabetes self-management per calendar year.
 - (3) Service limitations may be exceeded based on medical necessity.
- B. Provider Participation Standards
- (1) In order to receive Medicaid reimbursement, a qualified FQHC must have a DSMT program that meets the quality standards of one of the following accreditation organizations:
 - a. the American Diabetes Association;
 - b. the American Association of Diabetes Educators; or
 - c. the Indian Health Service.
 - (2) All DSMT programs must adhere to the national standards for diabetes self-management education.
 - a. Each member of the instructional team must:
 - (i) be a certified diabetes educator (CDE), certified by the National Certification Board of Diabetes Educators; or
 - (ii) have recent didactic and experiential preparation in education and diabetes management.
 - b. At a minimum, the instructional team must consist of one of the following professionals who is a CDE:
 - (i) a registered dietician;
 - (ii) a registered nurse; or
 - (iii) a pharmacist.
 - c. All members of the instructional team must obtain the nationally recommended annual continuing education hours for diabetes management.

State: Louisiana
Date Received: 5-31-18
Date Approved: 6-25-18
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Transmittal Number: 18-0006

AMOUNT, DURATION AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED
LIMITATIONS ON THE AMOUNT, DURATION AND SCOPE OF CERTAIN ITEMS OF PROVIDED MEDICAL
SERVICES ARE DESCRIBED AS FOLLOWS:

6. Fluoride Varnish Applications

Effective for dates of service on or after September 20, 2016, the Department shall provide coverage for fluoride varnish applications to recipients under the age of 21 based on medical necessity when performed in the FQHC.

1. Fluoride varnish applications shall be reimbursed when performed in the FQHC by:
 - a. the appropriate dental providers;
 - b. physicians;
 - c. physician assistants;
 - d. nurse practitioners;
 - e. registered nurses;
 - f. licensed practical nurses; or
 - g. certified medical assistants.
2. All participating staff must review the Smiles for Life training module for fluoride varnish and successfully pass the post assessment. All staff involved in the varnish application must be deemed as competent to perform the service by the FQHC.

State: Louisiana
Date Received: 13 September, 2016
Date Approved: 1 December, 2016
Date Effective: 20 September, 2016
Transmittal Number: 16-0015

AMOUNT, DURATION AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED
LIMITATION ON THE AMOUNT, DURATION AND SCOPE OF CERTAIN ITEMS OF PROVIDED
MEDICAL AND REMEDIAL CARE AND SERVICES ARE DESCRIBED AS FOLLOWS:

CITATION
P.L. 101-239
Sect. 6404

Medical and Remedial
Care and Services
Item 2.c.

B. Other Ambulatory Services

Services other than Core Services which are covered by

Louisiana's Title XIX State Plan, and provided by an FQHC which meets the same standards as other enrolled providers.

- C. Effective January 1, 2016, there shall be no limits placed on the number of federally qualified health center visits (encounters) payable by the Medicaid program for eligible recipients.

II. Standards for Participation

A. The Federally Qualified Health Centers must meet the following requirements:

1. Receive Public Health Service grant funds under authority of Section 330 of the Public Health Services Act or be designated by the Secretary of the Department of Health and Human Services as meeting the requirements to receive such a grant;
2. Comply with all federal, state, and local laws and regulations applicable to the services provided;
3. Enroll and be approved for participation in Louisiana's Title XIX program;
4. Sign a written provider agreement with the Bureau of Health Services Financing.

State: Louisiana
Date Approved: 12/14/15
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Date Effective: 1/1/16
Transmittal Number: LA 15-0034

LIMITATION ON THE AMOUNT, DURATION AND SCOPE OF CERTAIN ITEMS OF PROVIDED MEDICAL AND REMEDIAL CARE AND SERVICES ARE DESCRIBED AS FOLLOWS:

<u>CITATION</u>	Medical and Remedial
P.L.101-239	Care and Services
Section 6404	Item 2.c. (Contd.)

5. Comply with the terms of the provider agreement and all requirements of the Bureau of Health Services Financing including regulations, rules, handbooks, standards, and guidelines published; and
6. Bill for covered services in the manner and format prescribed by the Bureau of Health Services Financing.

STATE <u>Louisiana</u>	A
DATE RECD <u>OCT 05 1995</u>	
DATE APPL <u>DEC 06 1995</u>	
DATE EFF <u>JUL 13 1995</u>	
HCFA 179 <u>95-37</u>	

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