

a. A provider that communicates with patients by electronic communications other than facsimile shall provide patients with written notification of the provider's privacy practices before evaluation or treatment.

b. The notice of privacy practices shall include language that is consistent with federal standards under 45 CFR Parts 160 and 164 relating to privacy of individually identifiable health information.

c. A provider shall make a good faith effort to obtain the patient's written acknowledgment of the notice.

3. Limitations of Optometric Telemedicine. A provider who uses optometric telemedicine services, before providing services, shall give each patient notice regarding optometric telemedicine services, including the risks and benefits of being treated via optometric telemedicine, and how to receive follow-up care or assistance in the event of an adverse reaction to the treatment or in the event of an inability to communicate as a result of a technological or equipment failure. A signed and dated notice, including an electronic acknowledgement by the patient, establishes a presumption of notice.

4. Necessity of In-Person Evaluation. When, for whatever reason, the optometric telemedicine modality in use for a particular patient encounter is unable to provide all pertinent clinical information that a healthcare provider exercising ordinary skill and care would deem reasonably necessary for the practice of optometry at an acceptable level of safety and quality in the context of that particular encounter, then the distant site provider shall make this known to the patient and advise and counsel the patient regarding the need for the patient to obtain an additional in-person evaluation reasonably able to meet the patient's needs.

G. Maintenance of Records

1. Patient records shall be maintained for all optometric telemedicine services. The provider or distance site provider shall maintain the records created at any site where treatment or evaluation is provided.

2. Distance site providers shall obtain an adequate and complete medical history for the patient before providing treatment and shall document the medical history in the patient record.

3. Patient records shall include copies of all relevant patient-related electronic communications, including relevant provider-patient emails, prescriptions, laboratory and test results, evaluations and consultations, records of past care, and instructions. If possible, optometric telemedicine encounters that are recorded electronically shall also be included in the patient record.

H. Exceptions

1. A licensed optometrist, who is not licensed in Louisiana, who utilizes optometric telemedicine across state lines in an emergency, as defined by the board, is not subject to the requirements of this article.

2. A provider that is contacted in an emergency is not subject to the notice and security provisions of this rule, but is subject to those provisions should any nonemergency care continue with the patient.

I. Limitation on Application of Chapter. This Section shall not be construed as authorizing any optician or other person selling eyeglasses or contact lenses on prescription as authorized above to use any instrumentation or determine

any data by performing any type of examination or corneal evaluation necessary for the fitting of contact lenses or to use any drugs in relation thereto.

J. Penalties. Any person who violates this chapter is subject to criminal prosecution for the unlicensed practice of optometry, or other action authorized in this state to prohibit or penalize continued practice without a license.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1041-1068.

HISTORICAL NOTE: Promulgated by the Department of Health, Board of Optometry, LR 48:299 (February 2022).

Dr. James D. Sandefur, O.D.  
Executive Director

2202#041

**RULE**

**Department of Health  
Bureau of Health Services Financing**

Crisis Receiving Centers  
Licensing Standards  
(LAC 48:I.Chapter 53 and 5415)

The Department of Health, Bureau of Health Services Financing has amended LAC 48:I.Chapter 53 and adopted §5415 as authorized by R.S. 36:254 and R.S. 40:2180.11 et seq. This Rule is promulgated in accordance with the provisions of the Administrative Procedure Act, R.S. 49.950 et seq. This Rule is hereby adopted on the day of promulgation.

**Title 48**

**PUBLIC HEALTH—GENERAL**

**Part I. General Administration**

**Subpart 3. Licensing and Certification**

**Chapter 53. Level III Crisis Receiving Centers**

**Subchapter A. General Provisions**

**§5303. Definitions**

\* \* \*

*Community Mental Health Center*—a Medicare certified program as defined in 42 CFR §410.2. An entity that:

1. provides outpatient services, including specialized outpatient services for children, the elderly, individuals who are chronically mentally ill, and clients of its mental health service area who have been discharged from inpatient treatment at a mental health facility;

2. provides 24-hour-a-day emergency care services;

3. provides day treatment or other partial hospitalization services, or psychosocial rehabilitation services;

4. provides screening for patients being considered for admission to state mental health facilities to determine the appropriateness of this admission;

5. meets applicable licensing or certification requirements for CMHCs in the state in which it is located; and

6. provides at least 40 percent of its services to individuals who are not eligible for benefits under title XVIII of the Social Security Act.

\* \* \*

*Department*—the Louisiana Department of Health (LDH).

\* \* \*

*Level III Crisis Receiving Center (or Center or CRC)*—an agency, business, institution, society, corporation, person or persons, or any other group, licensed by the LDH to provide crisis identification, intervention and stabilization services for people in behavioral crisis. CRCs receive, examine, triage, refer, or treat people in behavioral health crisis. A CRC shall have no more than:

1. 36 chairs for crisis stabilization/observation; and
2. 24 beds for short term stay (three to seven days).

a. - b. Repealed.

NOTE: Refer to physical environment Section of this Chapter for physical space requirements.

\* \* \*

*Mental Health Emergency Room Extension (MHERE)*—a mental health emergency room extension operating as a unit of a currently licensed hospital.

\* \* \*

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and R.S. 40:2180.14.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Bureau of Health Services Financing, LR 41:102 (January 2015), amended by the Department of Health, Bureau of Health Services Financing, LR 47:472 (April 2021), LR 48:301 (February 2022).

### **Subchapter B. Licensing**

#### **§5309. General Licensing Provisions**

A. All entities providing crisis receiving services shall be licensed by LDH. It shall be unlawful to operate as a CRC without a license issued by the department. LDH is the only licensing authority for CRCs in Louisiana.

B. ...

C. The following entities are exempt from CRC licensure under this Chapter, so long as they are providing CRC services to existing clients:

1. community mental health centers (CMHCs);
2. - 3. ...
4. psychiatric residential treatment facilities;
5. - 6. ...
7. home and community based services (HCBS) waiver agencies limited to center-based respite;
8. substance use/addictive disorder facilities;
9. mental health clinics as defined in §5603;
10. ...
11. MHEREs; and
12. federally qualified health care centers (FQHCs).
13. Repealed.

D. - L. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and R.S. 40:2180.14.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Bureau of Health Services Financing, LR 41:103 (January 2015), amended LR 48:301 (February 2022).

### **Subchapter I. Physical Environment**

#### **§5397. Interior Space**

A. The CRC shall:

1. - 5. ...
6. maintain heating, ventilation and cooling systems in good order and safe condition to ensure a comfortable environment;
7. ensure that electric receptacles in client care areas are tamper-resistant or equipped with ground fault circuit interrupters; and
8. maintain separate wings or units for voluntary and involuntary individuals to include areas for admissions,

sleeping, shower and toilet areas, and sally ports or other entry areas. Further, the CRC shall provide separate areas (which may be accomplished by providing areas to voluntary individuals at different times than to involuntary individuals) for dining, recreational, educational, vocational, health care, and passageways, for voluntary and involuntary individuals.

B. - P.1. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and R.S. 40:2180.14.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Bureau of Health Services Financing, LR 41:121 (January 2015), amended by the Department of Health, Bureau of Health Services Financing, LR 47:475 (April 2021), LR 48:302 (February 2022).

### **Chapter 54. Crisis Receiving Centers**

#### **Subchapter B. Voluntary-Only Crisis Receiving Center**

##### **§5415 Voluntary-Only Crisis Receiving Center**

A. Any entity, organization, or person applying to be licensed as a CRC has the option to be licensed as a voluntary-only crisis receiving center (VO-CRC), wherein the licensed entity shall only admit or receive individuals who present voluntarily to the facility.

B. Individuals presenting to a VO-CRC shall have the ability to come and go to the facility for services as the individual deems appropriate; individuals shall not be required to sign a formal voluntary admission form under R.S. 28:52 or successor statute.

C. A VO-CRC shall adhere to all the licensing requirements for CRCs, including Chapter 53 and Chapter 54 of this licensing Rule, with the following substitutions:

1. for §5367.C, a VO-CRC shall only receive individuals who present voluntarily to the unit/facility;
2. for §5367.F.1.b, a VO-CRC does not need to establish legal authority for the individual;
3. for §5397.A.8, the VO-CRC does not need to maintain separate spaces for involuntary and voluntary admissions or individuals, since the VO-CRC will only serve voluntary admissions or individuals; and
4. for §5397.G, a VO-CRC shall not have a seclusion room.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and R.S. 40:2180.14.

HISTORICAL NOTE: Promulgated by the Department of Health, Bureau of Health Services Financing, LR 48:302 (February 2022).

Dr. Courtney N. Phillips  
Secretary

2202#050

### **RULE**

#### **Department of Health Bureau of Health Services Financing**

Facility Need Review  
Relocation of Nursing Facility Beds  
(LAC 48:I.12529)

The Department of Health, Bureau of Health Services Financing has amend LAC 48:I.12529 as authorized by R.S. 36:254 and 40:2116. This Rule is promulgated in accordance with the provisions of the Administrative Procedure Act,