2019 Regular Session

ACT No. 370

HOUSE BILL NO. 211

BY REPRESENTATIVE HORTON

| 1 | AN ACT |
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| 2 | To enact Subpart C-1 of Part XIII of Chapter 3 of Title 46 of the Louisiana Revised Statutes |
| 3 | of 1950, to be comprised of R.S. 46:460.77.1 and 460.77.2, relative to the medical |
| 4 | assistance program of this state known commonly as Medicaid; to provide relative |
| 5 | to Medicaid coverage of certain behavioral health services; to limit the number of |
| 6 | reimbursable service hours per day for providers of certain behavioral health |
| 7 | services; to require inclusion of certain information on claims for payment for |
| 8 | behavioral health services; and to provide for related matters. |
| 9 | Be it enacted by the Legislature of Louisiana: |
| 10 | Section 1. Subpart C-1 of Part XIII of Chapter 3 of Title 46 of the Louisiana Revised |
| 11 | Statutes of 1950, comprised of R.S. 46:460.77.1 and 460.77.2, is hereby enacted to read as |
| 12 | follows: |
| 13 | SUBPART C-1. BEHAVIORAL HEALTH SERVICES CLAIMS |
| 14 | §460.77.1. Behavioral health services claims; limitation on service hours; |
| 15 | information required for payment |
| 16 | A.(1) For purposes of this Section, "CPST services" means community |
| 17 | psychiatric support and treatment services and "PSR services" means psychosocial |
| 18 | rehabilitation services. |
| 19 | (2) An individual behavioral health services provider rendering CPST |
| 20 | services, PSR services, or both shall be limited to a maximum combined total of |
| 21 | twelve reimbursable hours of CPST services and PSR services per rendering |
| 22 | provider, per calendar day, regardless of the number of patients seen by the rendering |
| 23 | provider unless any of the following conditions are met: |

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| 1 | (a) The medical necessity of the services is documented for a Medicaid |
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| 2 | recipient receiving more than twelve hours of CPST and PSR services per day per |
| 3 | rendering provider. |
| 4 | (b) The services are billed for a group setting. However, the total hours |
| 5 | worked by an individual rendering provider shall not exceed twelve reimbursable |
| 6 | hours per calendar day. |
| 7 | (c) The services are billed for crisis intervention. |
| 8 | (3)(a) Services subject to the twelve-hour limitation provided in Paragraph |
| 9 | (2) of this Subsection include only CPST and PSR services rendered per individual |
| 10 | National Provider Identifier at one or more outpatient behavioral health services |
| 11 | provider facilities or agencies within a calendar day. |
| 12 | (b) The twelve-hour limitation provided in Paragraph (2) of this Subsection |
| 13 | shall not apply per individual behavioral health services provider agency. |
| 14 | (4)(a) Except as provided in Subparagraph (b) of this Paragraph, the |
| 15 | provisions of this Subsection shall apply exclusively to CPST services and PSR |
| 16 | services. |
| 17 | (b) The provisions of this Subsection shall not apply to evidence-based |
| 18 | practices including, without limitation, the practices known as assertive community |
| 19 | treatment, multisystemic therapy, functional therapy, and homebuilders. |
| 20 | B. No managed care organization shall accept for payment a claim from a |
| 21 | provider of behavioral health services unless that claim includes all claim |
| 22 | information required by R.S. 40:2162. |
| 23 | C. The department shall include the limitation on reimbursable hours of |
| 24 | CPST and PSR services provided in Subsection A of this Section in each contract |
| 25 | with a managed care organization that covers behavioral health services. |
| 26 | D. Implementation of any provision of this Section shall be subject to |
| 27 | approval by the Centers for Medicare and Medicaid Services. |

§460.77.2. Behavioral health services claim information; access by legislative auditor and Medicaid Fraud Control Unit
Upon request of the legislative auditor or the Medicaid Fraud Control Unit of the office of the attorney general, the department shall furnish to the requestor behavioral health data that meets the applicable standard for completeness set forth by the Centers for Medicare and Medicaid Services.
SPEAKER OF THE HOUSE OF REPRESENTATIVES
PRESIDENT OF THE SENATE
GOVERNOR OF THE STATE OF LOUISIANA

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APPROVED: _____