

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 ARE INCLUDED IN THE PROGRAM UNDER THE PLAN ARE DESCRIBED AS FOLLOWS:

In these situations reimbursement for the combined segments of patient care may not exceed the rate set for that physician had he/she been the attending physician for the entire service.

C. Physician Services for Abortion

Payment will be made to the attending physician for abortions when the physician has found, and certified in writing to the Medicaid Agency, that on the basis of his professional judgment, the mother suffers from a physical disorder, physical injury, or physical illness, including a life endangering physical condition caused or arising from the pregnancy itself, placing the mother in danger of death unless an abortion is performed.

Payment will be made to the attending physician for abortions terminating pregnancies resulting from rape or incest in accordance with provisions of State law (La R.S. 40:1299.34.5 and La. R.S. 40:1299.35.7 as amended and enacted by Act 1 of the Fourth Extraordinary Session of the 1994 Legislature.)

D. Physician Services for Non-Therapeutic Sterilization

Payment is made for non-therapeutic (elective) sterilization according to state developed fee schedule rates which are published on the Louisiana Medicaid Provider website at www.lamedicaid.com. This is defined as medical procedures which are performed for the sole purpose or primary purpose of rendering an individual incapable of reproducing. The reason for which the individual (male or female) decides to take permanent and irreversible steps to prevent reproduction for the purposes of family size limitations is irrelevant. It may be for social, economic or psychological reasons or because a pregnancy would be inadvisable for medical reasons. All procedures which meet the above definition are subject to the following requirements:

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STATE <u>LOUISIANA</u>	
DATE REC'D <u>9-3-10</u>	
DATE APP'VD <u>6-1-10</u>	
DATE EFF <u>1-22-10</u>	
HCFA 179 <u>10-06</u>	

SUPERSEDES: TN- 05-39

TN# 16-06 Approval Date 6-1-10 Effective Date 1-22-10
Supersedes
TN# 05-39

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

CITATION Medical and Remedial
42 CFR Care and Services
441.200 Item 5 (cont'd)

Hyde
Amendment to
Health and
Human Services
Appropriation
Act of 1993

E. Payment for Physician Services for Abortions

Payment will be made to the attending physician for abortions when the physician has found, and certified in writing to the Medicaid Agency, that on the basis of his professional judgement, the mother suffers from a physical disorder, physical injury, or physical illness, including a life endangering physical condition caused or arising from the pregnancy itself, placing the mother in danger of death unless an abortion is performed.

Payment will be made to the attending physician for abortions terminating pregnancies resulting from rape or incest in accordance with provisions of State law La.R.S. 40:1299.34.5 and La.R.S. 40:1299.35.7 as amended and enacted by Act 1 of the Fourth Extraordinary Session of the 1994 Legislature.

SUPERSEDES: TN- 07-01

STATE <u>Louisiana</u>	A
DATE REC'D <u>3-3-10</u>	
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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:

<u>CITATION</u>	Medical and Remedial	Reimbursement for certain bilateral procedures listed in the Professional
42 CFR	Care and Services	Services Provider Manual shall be at 150% of the fee on the published
447.201	Item 5 (cont'd)	Medicaid fee schedule when performed bilaterally.

Surgical services modified with modifier 63 (procedure performed on infants less than 4kg) shall be reimbursed at 125 percent of the Medicaid fee on file.

Effective for dates of service on or after January 1, 2008, the reimbursement for selected physician services shall be 90 percent of the 2008 Louisiana Medicare Region 99 allowable or billed charges, whichever is the lesser amount, unless otherwise stipulated.

The reimbursement shall remain the same for those services that are currently being reimbursed at a rate that is between 90 percent and 120 percent of the 2008 Louisiana Medicare Region 99 allowable.

For those services that are currently reimbursed at a rate above 120 percent of the 2008 Louisiana Medicare Region 99 allowable, effective for dates of service on or after January 1, 2008, the reimbursement for these services shall be reduced to 120 percent of the 2008 Louisiana Medicare Region 99 allowable.

Effective for dates of service on or after August 4, 2009, the reimbursement for all physician services rendered to recipients 16 years of age or older shall be reduced to 80 percent of the 2009 Louisiana Medicare Region 99 allowable or billed charges, whichever is the lesser amount.

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STATE	Louisiana
DATE REC'D	3-3-10
DATE APP'VD	6-1-10
DATE EFF	1-22-10
HCFA 179	10-06

Effective for dates of services on or after August 4, 2009, those services that are currently reimbursed at a rate below 80 percent of the Louisiana Medicare Region 99 allowable, will be reimbursed at a rate of 80 percent of the Louisiana Medicare Region 99 allowable or billed charges, whichever is the lesser amount.

The following physician services are excluded from the rate adjustment:

- Preventive medicine evaluation and management;
- Immunizations;
- Family planning services;
- Select orthopedic reparative services; and
- Prenatal evaluation & management and delivery services.

Effective for the dates of service on or after January 22, 2010, the reimbursement rates for family planning services shall be reduced to 75 percent of the 2009 Louisiana Medicare Region 99 allowable or billed charges, whichever is less.

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Supersedes

TN# 09-36

SUPERSEDES: TN- 09-36