PAYMENTS FOR 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:

Medical Education Payments (State-Owned Hospitals)

A. Outpatient Surgery

Effective for dates of service on or after February 10, 2012, medical education payments for outpatient surgery services which are reimbursed by a prepaid risk-bearing managed care organization (MCO) shall be reimbursed by Medicaid annually through the cost report settlement process.

- For purposes of these provisions, qualifying medical education programs are defined as graduate medical education, paramedical education, and nursing schools.
- Final payment shall be determined based on the actual MCO covered outpatient surgery services and Medicaid medical education costs for the cost reporting period per the Medicaid cost report.

B. <u>Clinic Services</u>

Effective for dates of service on or after February 10, 2012, medical education payments for outpatient clinic services which are reimbursed by a prepaid risk-bearing managed care organization (MCO) shall be reimbursed by Medicaid annually through the cost report settlement process.

- 1. For purposes of these provisions, qualifying medical education programs are defined as graduate medical education, paramedical education, and nursing schools.
- 2. Final payment shall be determined based on the actual MCO covered outpatient clinic services and Medicaid medical education costs for the cost reporting period per the Medicaid cost report.

Rehabilitation Services

Effective for dates of service on or after February 10, 2012, medical education payments for outpatient rehabilitation services which are reimbursed by a prepaid risk-bearing managed care organization (MCO) shall be reimbursed by Medicaid annually through the cost report settlement process

- 1. For purposes of these provisions, qualifying medical education programs are defined as graduate medical education, paramedical education, and nursing schools.
- 2. Final payment shall be determined based on the actual MCO covered outpatient rehabilitation services and Medicaid medical education costs for the cost reporting period per the Medicaid cost report.

	⋖				•
	119	1/3	773	07	C.
	04151ANA	5-3	9-70	-67	
1	UATE REC'S	CATE APPVB	DATE EFF	7 X X 170	
	3	CA	A		

TN#_	12-07	Approval Date	5-3-12	Effective Date	2-10-12
Supers	edes				
TN# _	10-52			SUPERSEDES:	TN- 10-52

ATTACHMENT 4.19-B Item 2.a., Page 2b

PAYMENTS FOR 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:

D. Other Outpatient Hospital Services

Effective for dates of service on or after February 10, 2012, medical education payments which are reimbursed by a prepaid risk-bearing managed care organization (MCO) shall be reimbursed by Medicaid annually through the cost report settlement process to state-owned hospitals for outpatient hospital services other than outpatient surgery services, clinic services, laboratory services, and rehabilitation services.

- 1. For purposes of these provisions, qualifying medical education programs are defined as graduate medical education, paramedical education, and nursing schools.
- 2. Final payment shall be determined based on the actual MCO covered outpatient services and Medicaid medical education costs for the cost reporting period per the Medicaid cost report.

Marie Commission of the Commis	7
STATE LOUISIANA	
UATE REC'S 2-16-12	
DATE APPV'D 5 3-12	Α
DATE EFF 2-10-12	
N FA 179 12-09	

TN# 12-07	_Approval Date _	5-3-12	Effective Date	2-10-12	
Supersedes SUPERSEDES TN#					
TN#	: NONE - NEW	PAGE			

ATTACHMENT 4.19-B Item 2.a., Page 3

PAYMENTS FOR 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:

Enhancement Pool For Public Hospitals

- a. Reserved
- b. Reserved
- c. Reserved
- d. Reserved
- e. Reserved

SUPERSEDES: TN- 09-13

The state of the s	
STATE houisiana	
GATE REC'D_ 2 - 16 - 12	
CATE APPV'D 5-3-12	Α
DATE EFF 2 -10-12	, ,
HOFA 179 12-07	
AND DESCRIPTION OF THE PERSON	

TN#	12-07	Approval Date	5-3-12	Effective Date	2-10-12
Supers	edes				
TN#	09-13				