

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 AND REMEDIAL CARE AND SERVICES ARE DESCRIBED BELOW:

CITATION
42 CFR
447.304
440.130

Medical and Remedial Care and Services
Item 9
Clinic Services (Other than Hospitals)

State: Louisiana
Date Received: 7/27/12
Date Approved: 10/17/13
Date Effective: 7/1/12
Transmittal Number: LA 12-39

A. **End Stage Renal Disease Facilities, Radiation Therapy Centers, Prenatal Health Care Clinics and Family Planning Clinics**

Clinic services are defined as diagnostic, preventive, therapeutic, rehabilitative or palliative items or services furnished to an outpatient, by or under the direction of a physician, in a facility which is not part of a hospital but is organized to provide medical care to outpatients.

The Bureau of Health Services Financing (BHSF) will make payment to private and public end stage renal disease facilities for outpatient dialysis services, radiation therapy centers for outpatient radiation therapy services, prenatal health care clinics for outpatient prenatal services and to family planning clinics for family planning services.

End Stage Renal Disease (ESRD) Facilities

The covered services provided in ESRD facilities include: hemodialysis, continuous ambulatory peritoneal dialysis (CAPD), continuous cycling peritoneal dialysis (CCPD), routine and non-routine laboratory and radiology services, medically necessary injectable drugs, Epoetin Alfa (EPO), and physician supervision of dialysis.

There are no limitations on amount, duration, or scope of these services for covered services that meet medical necessity for ESRD Facilities.

Radiation Therapy Centers

Covered services provided in Radiation Therapy Centers include therapeutic radiation treatment of varying complexities, radiation treatment management, radiation treatment delivery, radiation therapy consultations and physician services for the treatment of disease. Diagnostic imaging services include radiology, CT scans, MRIs, and ultrasounds.

There are no limitations on amount, duration, or scope of these services for covered services that meet medical necessity for Radiation Therapy Centers.

Prenatal Health Care Clinics

Prenatal care provided in a prenatal health care clinic is subject to limitations on these services described in Attachment 3.1-A, Item 20.a.

EPSDT RECIPIENTS MAY BE EXCLUDED FROM SERVICE LIMITATIONS BASED ON MEDICAL NECESSITY

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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:

- (3) Payment to freestanding End Stage Renal Disease (ESRD) facilities and radiation therapy centers.
- (a) ESRD Facilities.
- (i) For non-Medicare claims, end stage renal disease (ESRD) facilities are reimbursed a hemodialysis composite rate. The composite rate is a comprehensive payment for the complete hemodialysis treatment in which the facility assumes responsibility for providing all medically necessary routine dialysis services.
- Covered non-routine dialysis services, continuous ambulatory peritoneal dialysis (CAPD), continuous cycling peritoneal dialysis (CCPD), epogen (EPO) and injectable drugs are reimbursed separately from the composite rate.
- Effective for dates of service on or after February 26, 2009, the reimbursement to ESRD facilities shall be reduced by 3.5 percent of the rates in effect on February 25, 2009.
- Effective for dates of service on or after January 22, 2010, the reimbursement to ESRD facilities shall be reduced by 5 percent of the rates in effect on January 21, 2010.
- Effective for dates of service on or after August 1, 2010, the reimbursement to ESRD facilities shall be reduced by 4.6 percent of the rates in effect on July 31, 2010.
- Effective for dates of service on or after January 1, 2011, the reimbursement to ESRD facilities shall be reduced by 2 percent of the rates in effect on December 31, 2010.
- Effective for dates of service on or after July 1, 2012, the reimbursement to ESRD facilities shall be reduced by 3.7 percent of the rates in effect on June 30, 2012.
- (ii) For Medicare Part B claims, ESRD facilities are reimbursed for full co-insurance and deductibles.

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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:

The Medicare payment plus the amount of the Medicaid payment (if any) shall be considered to be payment in full for the service. The recipient does not have any legal liability to make payment for the service.

Effective for dates of service on or after February 26, 2009, the reimbursement to ERSD facilities for Medicare Part B claims shall be reduced by 3.5 percent of the rates in effect on February 25, 2009.

Effective for dates of service on or after January 22, 2010, the reimbursement to ERSD facilities for Medicare Part B claims shall be reduced by 5 percent of the rates in effect on January 21, 2010.

Effective for dates of service on or after August 1, 2010, the reimbursement to ESRD facilities for Medicare Part B claims shall be reduced by 4.6 percent of the rates in effect on July 31, 2010.

Effective for dates of service on or after January 1, 2011, the reimbursement to ESRD facilities for Medicare Part B claims shall be reduced by 2 percent of the rates in effect on December 31, 2010.

Effective for dates of service on or after July 1, 2012, the reimbursement to ESRD facilities for Medicare Part B claims shall be reduced by 3.7 percent of the rates in effect on June 30, 2012.

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