



## LNHA State Regulatory Update: September 2018

### Notice of Intent

#### Home and Community-Based Service Waivers- Adult Day Health Care Waiver (LAC 50:XXI.Chapters 21-27)

The Louisiana Department of Health (LDH) and the Office of Aging and Adult Services (OAAS) proposes to amend the provisions governing the Adult Day Health Care (ADHC) Waiver. One of the reasons stated for the amendments is to “amend the criteria for priority offers to specify priority for individuals admitted to or residing in nursing facilities who have Medicaid as the sole payer source.”

The current regulation lists “individuals admitted to a nursing facility who are approved for a stay of more than 90 days” as the third priority group for ADHC waiver opportunities. The proposed amendment changes the priority group to “individuals admitted to, or residing in, a nursing facility who have Medicaid as the sole payer source for the nursing facility stay.”

LDH has told LNHA the amendment accomplishes two things:

- 1) It allows LDH to make waiver offers as soon as is appropriate to non-dual eligibles who are admitted to nursing facilities with Medicaid as the only payer.
- 2) It assures that LDH makes waiver offers to individuals who are likely to have a long-term need for Medicaid-funded long term supports and services. LDH will no longer make waiver offers to individuals approved for a short-term, sub-acute or rehabilitation stay since they are most likely to improve and return to previous levels of function/independence.

The full text of the proposed amendment can be found [here](#) on page 154. For reference purposes, the current regulation can be found [here](#) on page 388 of the PDF.

#### Nursing Facilities — Continued Stay Requests (LAC 50:II.503)

LDH and OAAS propose to amend the provisions governing medical certification for nursing facility admissions to align the requirements for continued stay requests with the current OAAS policies and procedures. The June [edition](#) of the *Louisiana Register* published a final rule regarding “continued stay requests.” The rule stated a continued stay request must be accompanied with “documentation to support the continued stay request, including an MDS 3.0 **conducted no more than 14 calendar days prior to the request.**”

The proposed amendment changes the requirement to now read “documentation to support the continued stay request, including **the most recent MDS 3.0.**” The change was made as a result of concerns expressed by providers in adhering to the 14-calendar day requirement. In many cases, the change to the “most recent MDS 3.0” prevents the submitter from completing a new MDS 3.0 thereby making compliance easier. The full text of the proposed amendment can be found [here](#) on page 158 of the PDF. For reference purposes, the current language can be found [here](#) on page 31 of the PDF.

### Comments and Questions

If you have a comment to the proposed rules, please submit to Jen Steele at [MedicaidPolicy@la.gov](mailto:MedicaidPolicy@la.gov) or mail to Bureau of Health Services Financing, Attn: Jen Steele, P.O. Box 91030, Baton Rouge, LA 70821. LDH will host a public hearing of the proposed rules at 9:30 a.m. on October 25, 2018, in Room 118 of the Bienville Building at 628 North Fourth St., Baton Rouge, LA.

If you have comments or concerns regarding this update, contact LNHA’s Legal and Policy Director, Wes Hataway at [whataway@lnha.org](mailto:whataway@lnha.org).