

June 2023

Economic Impact Statements for Proposed Rules

The corresponding proposed rule to each of the statements below may be viewed in its entirety in the June 20, 2023 *Louisiana Register*. Each *Louisiana Register* edition is published on the 20th of each month.

Promulgating Agency	Proposed Rule Title	Estimated Costs and/or Economic Benefits to Directly Affected Persons, Small Businesses or Nongovernmental Groups
Department of Agriculture and Forestry	Licensing Procedures	The proposed rule change will help streamline the application process and decrease the time it takes applicants to be issued a license in the state of Louisiana.
Office of Student Financial Assistance	START Saving Program	The proposed rule changes adopt actual interest rates for deposits and earnings enhancements for the year ending December 31, 2022. As determined by the State Treasurer, the interest rate earned for the 2022 calendar year by the Louisiana Education Tuition and Savings Fund was 0.97%, and by the Savings Enhancements Fund was 1.84%. These interest rates are less than the actual rates realized in the previous year and are the property of the account owners. Additional individuals may qualify to participate in the ABLE Program and account owners will gain additional flexibility in managing their funds by allowing rollovers of ESA funds to a Roth IRA.
Department of Environmental Quality	Voluntary Environmental Self-Audit	Participation in the environmental self-audit program is voluntary. The applicant must complete a request and pay a minimum fee of \$1,500. The total fee will be based on the actual costs necessary to review the self-audit, which will be highly dependent on the size and complexity of the audit. The environmental self-audit program allows the regulated community to identify and correct compliance issues. This type of program offers incentives such as mitigated penalties for eligible participants.
Board of Cosmetology	Cosmetology	The proposed rule change will have no anticipated costs to directly affected persons, small businesses, or non-governmental groups. The estimated economic benefits to directly affected persons, small businesses, or non-governmental groups is anticipated to be positive by: <ol style="list-style-type: none"> 1. not requiring estheticians to obtain a separate permit to perform microdermabrasion; 2. allowing cosmetology students to apply for and take the cosmetology practical examination prior to completion of the 1,500 hour course to begin work sooner; 3. clarifying the process for licensure by reciprocity so licensed cosmetologists, estheticians, manicurists, and instructors may more easily provide services in the state; and 4. prohibiting the disqualification of persons from licensure solely based upon prior criminal conviction, except in cases authorized by R.S. 37:2950, so such persons may become employed.
Office of Homeland Security and Emergency Preparedness	Disbursement of Public Resources	This proposed rule sets forth the process governing the distribution of public resources by GOHSEP to local jurisdictions in the event of an emergency or disaster. It is anticipated that implementation of this proposed rule will not have economic cost or benefits to directly affected persons or non-governmental groups for FY 23-24, FY 24-25, and FY 25-26.
Department of Health	Direct Service Worker Registry	This proposed rule amends the provisions governing the Direct Service Worker (DSW) Registry to ensure that prior to hiring a DSW or trainee, the licensed and/or certified provider ensures that the individuals are at least 18 years of age or that the individuals are at least 16 years of age and have received an Age Restriction Exception from the Office for Citizens with Developmental Disabilities or the Office of Aging and Adult Services. It is anticipated that implementation of this proposed rule will not result in costs to DSWs or small businesses in FY 22-23, FY 23-24, and FY 24-25, but may increase recruitment opportunities.

Promulgating Agency	Proposed Rule Title	Estimated Costs and/or Economic Benefits to Directly Affected Persons, Small Businesses or Nongovernmental Groups
<p align="center">Department of Health</p>	<p align="center">Healthcare Services Provider Fees Emergency Ground Ambulance Service Providers</p>	<p>This proposed rule continues the provisions of the July 1, 2023 Emergency Rule, which amended the provisions governing provider fees for emergency ground ambulance services in order to ensure that the administrative rule reflects the U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services requirement that reimbursement for these services transition from the Full Medicaid Pricing program to an approved federal supplemental payment program. This proposed rule also revises the language in the Louisiana Administrative Code to be more generic so that an amendment is not required each year to match legislation. It is anticipated that implementation of this proposed rule will result in an increase in statutory dedicated revenue collections of approximately \$6,596,856 for FY 23-24 and \$6,596,856 for FY 24-25.</p>
<p align="center">Department of Health</p>	<p align="center">Home and Community-Based Services Waivers Fiscal Employer Agent Standards for Participation</p>	<p>This proposed rule adopts provisions establishing the standards for participation for fiscal employer agents (F/EAs) in home and community-based services waiver programs. F/EAs currently provide financial management services (FMS) for self-directed home and community-based waiver services administered by the Office of Aging and Adult Services and the Office for Citizens with Developmental Disabilities through an administrative contract with the department. Under the current arrangement, providers may change every three years due to the state's contracting requirements; however, Medicaid enrolled providers may continue providing services as long as they meet program requirements, resulting in more stability and familiarity with families that participate in self-direction. This proposed rule eliminates the administrative contracting process, establishes FMS as a waiver service, and allows F/EAs to enroll in Medicaid to ensure greater stability among providers that support the self-direction program. Implementation of this proposed rule is anticipated to increase expenditures in the Medicaid program by approximately \$3,240 for FY 22-23, \$2,313,144 for FY 23-24, and \$3,405,334 for FY 24-25.</p>
<p align="center">Department of Health</p>	<p align="center">Inpatient Hospital Services Out-of-State Hospitals</p>	<p>This proposed rule adopts provisions governing medically necessary inpatient services furnished to Louisiana Medicaid beneficiaries by out-of-state hospitals in order to align the reimbursement rates for those services with current in-state inpatient per diem rates for like hospitals/services. The proposed rule complies with 42 CFR §431.52, which requires the state to pay for services furnished in another state to the same extent that it would pay for in-state services for Medicaid beneficiaries that reside in Louisiana. This will allow the beneficiaries to maintain access to medically necessary out-of-state inpatient hospital services. Implementation of this proposed rule is anticipated to decrease expenditures for inpatient out-of-state hospital services by approximately \$30,888,760 for FY 23-24 and \$44,509,000 for FY 24-25, which may negatively impact providers if the reimbursement rate change results in decreased payments.</p>
<p align="center">Department of Health</p>	<p align="center">Managed Care for Physical and Behavioral Health Hospital Directed Payments</p>	<p>This proposed rule continues the provisions of the May 15, 2023 Emergency Rule, which amended the provisions governing directed payments to qualifying hospitals that participate in the Healthy Louisiana program and contract with the Medicaid managed care organizations in order to reserve the right to discontinue interim directed payments to any hospital whose projected recoupment is greater than 50 percent or which discontinues operations during or prior to the directed payment contract period. It is anticipated that implementation of this proposed rule will not result in costs to hospitals in FY 22-23, FY 23-24, and FY 24-25, because the hospitals are receiving payments. However, the proposed rule ensures that payments are not made to hospitals that are no longer operating and that others are not overpaid based on actual utilization.</p>

Promulgating Agency	Proposed Rule Title	Estimated Costs and/or Economic Benefits to Directly Affected Persons, Small Businesses or Nongovernmental Groups
Department of Health	Medical Transportation Program Emergency Medical Transportation	This proposed rule continues the provisions of the July 1, 2023 Emergency Rule, which amended the provisions governing reimbursement in the Medical Transportation Program in order to align the reimbursement rates established for emergency ambulance services and providers with current practice for Medicaid managed care and fee-for-service. This complies with the U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services (CMS) requirement that reimbursement for these services transition from the Full Medicaid Pricing program to an approved federal supplemental payment program. Implementation of this proposed rule is not anticipated to result in costs or benefits to emergency medical transportation providers or small businesses and will not result in a fiscal impact in FY 22-23, FY 23-24, and FY 24-25.
Department of Health	Professional Services Program Physician Directed Treatment-in-Place Ambulance Services	The proposed rule continues the provisions of the May 12, 2023 Emergency Rule, which adopted provisions in the Professional Services Program to continue to provide reimbursement for physician directed treatment-in-place ambulance services after the Coronavirus Disease 2019 (COVID-19) public health emergency (PHE) ended on May 11, 2023. Reimbursement to qualified ambulance providers was allowed throughout the duration of the COVID-19 PHE for initiation and facilitation of physician directed treatment-in-place services via telehealth. The services are provided on site without transport, within established treatment protocols, and under the direct supervision of a qualified provider. The U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services (CMS) has now waived requirements to expand the types of healthcare professionals eligible to bill for telehealth services from a distant site. As a result of the CMS waiver, the department is adding this provision to the administrative rule. This proposed rule will allow Medicaid beneficiaries that require ambulance services to continue to receive treatment on site. It is anticipated that implementation of this proposed rule will not result in costs to ambulance service providers or small businesses in FY 22-23, FY 23-24, and FY 24-25.
Department of the State	Department Non-Statutory Fees	The estimated costs to persons, small businesses or non-governmental groups may increase to the extent they are subject to the fee increases.
Professional Engineering and Land Surveying Board	Property Boundary Survey Plats, Maps and Legal Descriptions	There is no estimated effect on revenue collections of state or local governmental units as a result of this proposed rule change.