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November 6, 2023

Paige Hargrove, Executive Director
Louisiana Emergency Response Network
7979 Independence Blvd, Suite 207
Baton Rouge, LA 70806

RE: Notice of Intent - LAC 48:1, Chapter 187, §18703. Stroke Center Criteria; §18705. Attestation for Stroke Center Recognition; and §18708. Failure to Submit Stroke Data to LERN

Dear Paige:

Enclosed is the Notice of Intent as published in the State Register on October 20, 2023.

Public comments and requests for hearing on the proposed rule changes are due by November 10, 2023 at 4:30 p.m. Please let me know when and if you received any comments or requests for hearings.

This document should be placed in a Board file for promulgation of this rules and kept even after the rule is published. This is part of the permanent record on the rule. The Board must have a copy of the proposed rule available for inspection.

In conformity with La. R.S. 49:957, copy enclosed, particularly §957B(1) - (2), all of this shall be published on the Board website as outlined there. Let me know if you need help with website posting.

If you have any questions, please let me know.

Very truly yours,



CELIA R. CANGELOSI

CRC/tsc
Enclosure

Title 48
PUBLIC HEALTH—GENERAL
Part I. General Administration
Subpart 15. Emergency Response Network
Chapter 187. Requirements for Louisiana Stroke
Center Recognition

§18703. Stroke Center Criteria

A. - A. 2. ...

3. PSC-E: a primary stroke center (PSC-E) shall meet the requirements specified by the joint commission, healthcare facilities accreditation program (HFAP), or other LERN approved accrediting/certification body for Primary Stroke Center verification. Attestation as a PSC-E is only allowed after verification by the joint commission, HFAP, or other LERN approved accrediting/certification body that the facility meets all requirements set forth in the PSC standards. In addition to PSC requirements, a PSC-E must have physician(s) credentialed to perform mechanical thrombectomy and must update resource management portal of endovascular availability at all times. If a physician credentialed to perform endovascular capability is not available, the PSC-E must notify all EMS providers in the region when endovascular resources are not available. The PSC-E must collect and submit quarterly to LERN the same data the joint commission requires the Thrombectomy Stroke Capable centers to collect and any other data as required by LERN.

4. - 6.a....

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:2846(A) and 48:2845(A)(7).

HISTORICAL NOTE: Promulgated by the Department of Health, Emergency Response Network, LR 40:2590 (December 2014), amended by the Department of Health, Emergency Response Network LR 46:1088 (August 2020); amended by the Department of Health, Emergency Response Network LR 50:

§18705. Attestation for Stroke Center Recognition

A. - A.4....

5 A center or hospital seeking ASRH recognition must submit data which, at a minimum, meets door to needle metric for ASRH recognition for the two consecutive quarters immediately preceding the submission date. Although a center or hospital seeking ASRH stroke center recognition is not required to obtain certification by an external certifying body, a hospital which submits a copy of ASRH certification by a LERN-recognized organization, such as the joint commission, HFAP or other LERN approved accrediting/certification body, shall be assumed to meet the requirements for recognition. Hospitals must all meet LERN ASRH requirements and approved data submission requirements.

6. Each center or hospital shall submit proof of continued compliance every two years by submission of an affidavit by its CEO. The CEO may submit a revised attestation at any point during the two year period, as appropriate, when a change in resources or certification occurs.

B. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:2846(A) and 48:2845(A)(7).

HISTORICAL NOTE: Promulgated by the Department of Health, Emergency Response Network, LR 40:2590 (December 2014), amended by the Department of Health, Emergency Response Network LR 46:1089 (August 2020); amended by the Department of Health, Emergency Response Network, LR 50:

§18708. Failure to Submit Stroke Data to LERN

A. - C. ...

D. If an ASRH fails to meet the performance metrics after two quarters of participation in data review, the board appointed stroke committee may temporarily demote the facility to a stroke bypass hospital until the next board meeting, when the board appointed stroke subcommittee will present the blinded data to the board for a vote on demotion to stroke bypass hospital versus continued remediation.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:2846(A) and 48:2845(A)(7).

HISTORICAL NOTE: Promulgated by the Department of Health, Emergency Response Network, LR 46:1089 (August 2020); amended by the Department of Health, Emergency Response Network, LR 50:

Family Impact Statement

1. What effect will this rule have on the stability of the family? The proposed rules will not affect the stability of the family.

2. What effect will this have on the authority and rights of persons regarding the education and supervision of their children? The proposed rules will not affect the authority and rights of persons regarding the education and supervision of their children.

3. What effect will this have on the functioning of the family? The rules will not affect the functioning of the family.

4. What effect will this have on family earnings and family budget? These rules will not affect the family earnings or family budget.

5. What effect will this have on the behavior and personal responsibility of children? These rules will not affect the behavior or personal responsibility of children.

6. Is the family or local government able to perform the function as contained in this proposed Rule? No, the proposed rules will have no impact.

Poverty Impact Statement

The proposed rulemaking will have no impact on poverty as described in R.S. 49:973.

Small Business Analysis

The impact of the proposed Rule on small business has been considered and it is estimated that the proposed action is not expected to have a significant adverse impact on small business as defined in the Regulatory Flexibility Act. The agency, consistent with health, safety, environmental and economic welfare factors has considered and, where possible, utilized regulatory methods in the drafting of the proposed Rule that will accomplish the objectives of applicable statutes while minimizing the adverse impact of the proposed Rule on small business.

Provider Impact Statement

In compliance with House Concurrent Resolution (HCR) 170 of the 2014 Regular Session of the Louisiana Legislature, the provider impact of these proposed Rules have been considered. It is anticipated that this proposed Rule will have no impact on the staffing level requirements or qualifications required to provide the same level of service, and no increase on direct or indirect cost. The proposed Rule will have no impact on the provider's ability to provide the same level of service as described in HCR 170.

Public Comments

Interested persons may submit written comments relative to the proposed Rule until 4:30 p.m., Friday, November 10, 2023 to Paige Hargrove, Louisiana Emergency Response Network, 7979 Independence Blvd, Suite 207, Baton Rouge, LA 70806, or via email to paige.hargrove@la.gov.

Paige Hargrove
Executive Director

FISCAL AND ECONOMIC IMPACT STATEMENT FOR ADMINISTRATIVE RULES RULE TITLE: Louisiana Stroke Center Recognition

I. ESTIMATED IMPLEMENTATION COSTS (SAVINGS) TO STATE OR LOCAL GOVERNMENT UNITS (Summary)

Other than the rule publication costs, which are estimated to be \$250 in FY 24, it is not anticipated that the proposed rule will result in any material costs or savings to any state or local governmental unit.

As approved by the Louisiana Emergency Response Network (LERN) Board on August 17, 2023, the proposed rule clarifies when a primary stroke center is required to submit quarterly data to LERN, clarifies the data needed for acute stroke center hospital recognition by LERN, and provides that board appointed stroke committee may temporarily demote a facility to a stroke bypass hospital if the facility fails to meet certain performance metrics.

II. ESTIMATED EFFECT ON REVENUE COLLECTIONS OF STATE OR LOCAL GOVERNMENTAL UNITS (Summary)

There is no anticipated effect on revenue collections of state or local governmental units.

III. ESTIMATED COSTS AND/OR ECONOMIC BENEFITS TO DIRECTLY AFFECTED PERSONS, SMALL BUSINESSES, OR NONGOVERNMENTAL GROUPS (Summary)

Patients experiencing a stroke are directly affected by this proposed rule, which protocol is authorized by La. R.S. 9:2798.5 and "developed to facilitate the timely and appropriate delivery of patients to the most appropriate care site for the definitive treatment of injuries." Hospitals seeking Acute Stroke Ready Hospital (ASRH) status and seeking to maintain ASRH are also impacted.

IV. ESTIMATED EFFECT ON COMPETITION AND EMPLOYMENT (Summary)

There will be no effect on employment or competition. Acute stroke ready hospital recognition is a voluntary process.

Paige Hargrove
Executive Director
2310#032

Patrice Thomas
Deputy Fiscal Officer
Legislative Fiscal Office

NOTICE OF INTENT

Department of Health Health Standards Section

Facility Need Review
(LAC 48:I.Chapter 125)

The Department of Health, Health Standards Section proposes to repeal and replace LAC 48:I.Chapter 125 in its entirety as authorized by R.S. 36:254 and R.S. 40:2116 et seq. This proposed Rule is promulgated in accordance with the provisions of the Administrative Procedure Act, R.S. 49:950 et seq.

Act 531 of the 2022 Regular Session of the Louisiana Legislature directed the Department of Health to revise the requirements governing the facility need review (FNR) process to identify healthcare providers subject to FNR, establish an FNR committee, and establish an FNR moratorium, exceptions, and cost effective measures for nursing facilities.

The Department of Health, Health Standards Section proposes to repeal and replace the provisions of LAC 48:I.Chapter 125 governing facility need review in its entirety in order to re-promulgate these provisions in compliance with Act 531 and to include requirements for Opioid Treatment Program need and application reviews.

Title 48

PUBLIC HEALTH—GENERAL

Part I. General Administration

Subpart 5. Health Planning

Chapter 125. Facility Need Review

Subchapter A. General Provisions

§12501. Definitions

A. Definitions. When used in this Chapter the following terms and phrases shall have the following meanings unless the context requires otherwise.

Abeysance of Nursing Facility Beds—a situation in which a nursing facility, if it meets certain requirements, may have all (but not only a portion) of its approved beds disenrolled from the Medicaid Program without causing the approval for the beds to be revoked after 120 days.

Adult Residential Care Provider (ARCP)—a facility, agency, institution, society, corporation, partnership, company, entity, residence, person or persons, or any other group, that provides adult residential care services for compensation to two or more adults who are unrelated to the licensee or operator. Adult residential care includes, but is not limited to the following services: lodging, meals, medication administration, intermittent nursing services, and assistance with personal hygiene, assistance with transfers and ambulation, assistance with dressing, housekeeping and laundry. For the purposes of this Facility Need Review (FNR) Rule, ARCP refers to an entity that is or will be licensed as an ARCP level 4-adult residential care provider. All ARCPs that have received FNR approval prior to August 1, 2022 shall retain FNR approval unless such FNR approval has expired. Facility need review approval is not required for any ARCP that is initially licensed August 1, 2022 or thereafter.

Agonist—a drug that activates certain receptors in the brain.

Antagonist—a drug that blocks opioids by attaching to the opioid receptors without activating them. Antagonists cause no opioid effect and block full agonist opioids. Examples of antagonists include, but are not limited to naltrexone and naloxone.

Applicant—the person who is developing the proposal for purposes of receipt of FNR approval for the healthcare facility or provider beds to proceed to apply for licensure, and/or certification by the Louisiana Department of Health (LDH).

Applicant Representative(s)—the person(s) specified by the applicant on the FNR application form to whom written notifications are provided relative to the status of the application during the review process.

West's Louisiana Statutes Annotated
Louisiana Revised Statutes
Title 49. State Administration (Refs & Annos)
Chapter 13. Administrative Procedure (Refs & Annos)
Part I. General Provisions (Refs & Annos)

LSA-R.S. 49:957

Formerly cited as LA R.S. 49:974

§ 957. Internet publication of certain information concerning proposed rules and fees; information required to be published; manner of publication; deadlines

Effective: August 1, 2022

Currentness

A. (1) Each agency shall include on its Internet website the information required by Subsection B of this Section.

(2)(a) If an agency does not have an Internet website, the department of which the agency is a part shall include the information required by Subsection B of this Section for the agency on the website of the department.

(b) If an agency in the office of the governor does not have an Internet website, the division of administration shall include the information required by Subsection B of this Section for the agency on the Internet website of the division of administration.

B. All of the following information shall be included on the website:

(1) A brief description of each rule or fee that the agency is in the process of adopting, amending, or repealing. For each rule or fee, links to the following shall be included:

(a) The full text of the current rule or fee.

(b) A link to the Louisiana Register website showing the proposed rule or statement of the proposed fee.

(c) The name and contact information of the agency representative responsible for responding to inquiries about the intended action as required by R.S. 49:961(A)(2)(d).

(d) The time when, the place where, and the manner in which interested persons may present public comment concerning the intended action as required by R.S. 49:961(A)(2)(e).

(e) The anticipated effective date for the proposed rule or fee.

(f) A copy of the notice of intent submitted to the Louisiana Register pursuant to R.S. 49:961(A)(3) and the date the notice of intent will be published in the Louisiana Register.

(g) A copy of the report submitted to the legislative oversight subcommittees pursuant to R.S. 49:966(D)(1)(b) and a copy of the public notice required by R.S. 49:966(D)(1)(c).

(h) A copy of any announcement of a hearing and report made pursuant to R.S. 49:966(H)(2).

(i) A copy of any report received by the agency from a legislative oversight subcommittee pursuant to R.S. 49:966(F) or from the governor pursuant to R.S. 49:966(I).

(2) A copy of the annual report submitted to the legislative oversight subcommittees by the agency pursuant to R.S. 49:966(K).

C. (1)(a) The information required to be published pursuant to Subparagraphs (B)(1)(a) through (g) of this Section shall be published in the manner required by this Section no later than five days after the date on which the agency submits the report for the proposed rule or fee to the legislative oversight subcommittees pursuant to R.S. 49:966(B).

(b) The copy of the announcement required to be published pursuant to Subparagraph (B)(1)(h) of this Section shall be published in the manner required by this Section no later than five days after the announcement is submitted to the Louisiana Register in accordance with R.S. 49:966(H)(2).

(c) The copy of the report required to be published pursuant to Subparagraph (B)(1)(i) of this Section shall be published in the manner required by this Section no later than five days after the report is received by the agency.

(d) The copy of the annual report required to be published pursuant to Paragraph (B)(2) of this Section shall be published in the manner required by this Section no later than five days after the report is submitted to the legislative oversight subcommittees by the agency pursuant to R.S. 49:966(K).

(2) If an agency does not have an internet website, the agency shall submit the information required by this Section to be published to the department or to the division of administration, as the case may be, in a manner which allows enough time for the information to be published as required by this Section prior to the applicable deadline provided in Paragraph (1) of this Subsection.

D. (1) All of the information required to be published pursuant to this Section shall be archived for a minimum of one year following the date of publication.

(2) Each agency, department, or the division of administration, as the case may be, shall include on its Internet home page a link to the information required to be published pursuant to this Section.

E. The provisions of this Section shall not be construed to require the publication of information concerning the adoption, amendment, or repeal of any rule or fee unless and until the agency gives notice of its intended action pursuant to R.S. 49:961(A).

Credits

Redesignated from R.S. 49:974 by Acts 2022, No. 663, § 1. Added by Acts 2014, No. 401, § 1, eff. Jan. 1, 2015.

LSA-R.S. 49:957, LA R.S. 49:957

Current through the 2023 First Extraordinary, Regular, and Veto Sessions.

End of Document

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