

a. Such equipment and supplies shall be determined by the ambulance service/provider medical director and governing body who have developed policies and procedures to maintain, update or delete certain advanced life support equipment and medical supplies as medically indicated or contraindicated for their service area and have documentation available to support the determination; and

b. Such equipment and supplies shall be consistent with the Louisiana scope of practice for emergency medical practitioners established in R.S. 40:1133.14, including of all basic life support equipment and medical supplies and the equipment and medical supplies consistent with the Joint policy Statement for “equipment for ground ambulance”. The additional equipment and medical supplies includes, but is not limited to the following:

- i. vascular access;
- ii. medications;
- iii. cardiac monitor/defibrillator with transcutaneous pacing capabilities;
- iv. any other equipment required by law that shall be maintained on the ambulance.

c. All ground transportation ambulances shall have functional temperature control in the patient compartment. Such temperature control equipment shall function within the vehicle manufacturer’s recommended guidelines or specifications.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254, R.S. 40:1135.2 and R.S. 40:1135.2.

HISTORICAL NOTE: Promulgated by the Department of Health, Office of Public Health, Bureau of Emergency Medical Services, LR 49:897 (May 2023).

Subchapter D. Emergency Vehicles—Aircraft Transportation

§6071. General Provisions

A. All ambulance services/providers whose aircraft are utilized as air ambulances shall provide the department with copies of the air ambulances’ FAA certificate of registrations and certificate of air worthiness. Upon request, the ambulance service/provider shall make their maintenance logs available to the department.

B. Certifications of all air ambulance personnel shall meet FAA requirements and local pilot and medical personnel staffing protocols.

C. All air ambulances shall be equipped with the safety equipment required by the FAA and shall be maintained and remain operable.

D. In accordance with R.S. 40:1135.8 et seq., all air ambulances shall be equipped with the medical and safety equipment established under rules promulgated by the Department of Health and based upon the recommendations of an advisory committee. The medical and safety equipment shall conform to local protocol as established by the medical director of the air ambulance service/ provider.

E. Air ambulances shall carry the medical equipment that is mandated to them in the protocol by the ambulance service/provider medical director and approved by the ambulance service/provider governing body and, at a minimum, the medical equipment and supplies equivalent to such required by ground ambulance transportation.

F. All air ambulance services shall carry advanced life support equipment and medical supplies dependent on the level of licensure of personnel (paramedic level) and as determined by the ambulance service/provider medical

director and governing body who have developed policies and procedures to maintain, update, or delete certain advanced life support equipment and medical supplies as medically indicated or contraindicated for their service area and have documentation available to support the determination.

G. All air ambulances shall be staffed to the advanced life support (paramedic) level. The paramedic(s) and each member of the flight team are each responsible to ensure that equipment and supplies are readily available and operable, as appropriate, for each flight service run to meet the needs of the patients served.

H. All air ambulances shall have a thermometer mounted inside the cabin. Cabin temperatures must be in the range of 50-95 degrees Fahrenheit.

I. Mitigation measures must be documented for when the cabin temperatures are outside this range and the outcomes of these mitigation measures must be documented when the temperature falls outside this range.

I. If a service provides inter-hospital air transport, air transport from hospital to another facility, air transport from hospital to home, or similar air transport, the service must certify that a medical director is employed to advise the service on the appropriate staffing, equipment, and supplies to be used for the transport of patients aboard an air ambulance.

J. Provisions in this section shall not be construed to prohibit, limit, or regulate random mercy flights made by a person or corporation in privately or publically owned aircraft who may on occasion transport individuals who may need medical attention during transport, or human organs intended for transplantation including, but not limited to the heart, lungs, kidneys, liver and other soft tissue and bones, on either a not-for-profit basis or gratuitously.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and R.S. 40:1135.1 and R.S. 40:1135.2.

HISTORICAL NOTE: Promulgated by the Department of Health, Office of Public Health, Bureau of Emergency Medical Services, LR 49:898 (May 2023).

§6073. Emergency Aircraft—Rotary-Winged (Reserved)

§6075. Emergency Aircraft—Fixed (Reserved)

Dr. Courtney N. Phillips
Secretary

2305#041

RULE

Department of Insurance Office of the Commissioner

Regulation 103—Utilization Review Organizations and Independent Review Organizations (LAC 37:XIII.Chapter 62)

The Department of Insurance, pursuant to the authority of the Louisiana Insurance Code, R.S. 22:1 et seq., and in accordance with the Administrative Procedure Act, R.S. 49:950 et seq., has amended Regulation 103—Utilization Review Organizations and Independent Review Organizations. The purpose of the amendment to Regulation 103 is to provide the requirements for incomplete requests

for external review as provided in Act 81 of the 2022 Regular Session of the Louisiana Legislature and to make technical changes. This Rule is hereby adopted on the day of promulgation.

**Title 37
INSURANCE**

Part XIII. Regulations

**Chapter 62. Regulation Number 103—Utilization
Review Organizations and Independent
Review Organizations**

§6209. Requesting an External Review

A. All requests for external review must be made by the health insurance issuer through the IRO review request module, which can be accessed via the industry access link on the LDI's website: www.ldi.la.gov. When a covered person or his authorized representative requests an external review, the health insurance issuer shall notify the LDI by entering this request via the link. The request must be entered even if the health insurance issuer determines the request is ineligible for review.

B. If the covered person or his authorized representative requests an external review, but the health insurance issuer determines that the request is not complete, the health insurance issuer shall notify the LDI through the IRO review request module described in §6209.A by completing the field indicating that the covered person's or his authorized representative's request is incomplete and stating with specificity the information or materials needed to make the request complete. Such notice shall be provided to the LDI within five business days following the date of receipt of the external review request from the covered person or his authorized representative pursuant to R.S. 22:2436.

C. If the covered person or his authorized representative requests an external review, but the health insurance issuer denies the request as being ineligible pursuant to R.S. 22:2436(B), the covered person or his authorized representative may appeal in writing to the commissioner. The health insurance issuer and the covered person or his authorized representative both may submit additional documentation, such as the policy to verify coverage limitations as well as dates of coverage, documentation of service dates, etc., to help establish why the denial should be upheld or reversed. However, no medical or protected health information should be submitted to the commissioner for this review, unless such information is determinative of the issue in the appeal.

D. Upon receipt of an appeal of a health insurance issuer's eligibility determination, the LDI may contact the health insurance issuer's designated contact to request additional information, if necessary. Therefore, all health insurance issuers should ensure that the designated contact's information is regularly updated in the industry access portal, as all electronic communications, including assignment of a case to an IRO, reporting of an IRO's external review results, reporting of the commissioner's decision on eligibility for an external review, etc., will be sent automatically to the designated contact of record that is on file with the LDI.

E. To facilitate notice of the right to appeal a determination of ineligibility to the commissioner, the health insurance issuer shall include the reason for ineligibility, as

well as the following language (or language that is substantially similar), in its notice to the covered person.

"[Name of health insurance issuer] has determined that your request for an independent external review of your adverse determination does not meet the eligibility requirements for independent external reviews because [reason]. However, [name of health insurance issuer]'s determination that you are ineligible for an external review may be appealed to the Commissioner of Insurance, who has the authority to reverse [name of health insurance issuer]'s decision and order an independent external review of your adverse determination. If you wish to appeal this decision, you should go to the following website: <https://ldi.la.gov/OnlineServices/IROConsumerAppeals>.

Once you access the website, enter your last name and case number where instructed. Following verification of your name and case number, you will be able to enter the reasons you believe your adverse determination should be eligible for an independent external review. If you have questions or if you or your authorized representative is unable to access the website, you may contact the Louisiana Department of Insurance by email at ConsumerAppeals@ldi.la.gov or by telephone at (225) 342-1355. Your case number is _____."

1. Health insurance issuers must also upload a copy of the adverse determination letter when reporting external review requests that have been deemed ineligible.

F. If the covered person or his authorized representative requests an external review and the health insurance issuer does not deny the request as being ineligible or if the commissioner reverses a request that the health insurance issuer had deemed ineligible for external review, the health insurance issuer must submit the request to the LDI for assignment of an external review by using the IRO review request form which can be located on the LDI website, www.ldi.la.gov via the industry access portal.

G. When completing the IRO review request form, the health insurance issuer must enter the following information:

1. covered person's name;
2. covered person's contact information (address, telephone, email address, fax);
3. name of covered person's authorized representative (if applicable);
4. authorized representative's contact information (if applicable);
5. policy/contract number;
6. name of primary care doctor or specialist;
7. type of specialty;
8. type of appeal requested: medical, rescission or experimental;
9. type of appeal requested: standard or expedited;
10. result of request: eligible or ineligible.

H. Once the case has been assigned, neither the covered person nor the health insurance issuer may request the case be reassigned to another IRO, as all IRO assignments are final, unless reassignment is necessary pursuant to §6211.E.

AUTHORITY NOTE: Promulgated in accordance with R.S. 22:2436 and R.S. 22:2452.

HISTORICAL NOTE: Promulgated by the Department of Insurance, Commissioner of Insurance, LR 41:2174 (October 2015), amended LR 49:899 (May 2023).

James J. Donelon
Commissioner

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