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State/Territory Name: Louisiana

State Plan Amendment (SPA) #: 17-0010

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form
- 3) Approved Page

DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services Dallas Regional Office 1301 Young Street, Suite 833 Dallas, Texas 75202



DIVISION OF MEDICAID & CHILDREN'S HEALTH - REGION VI

September 7, 2017

Our Reference: SPA LA 17-0010

Ms. Jen Steele, State Medicaid Director Department of Health and Hospitals 628 North 4th St. Post Office Box 91030 Baton Rouge, LA 70821-9030

Attention: Karen Barnes

Dear Ms. Steele:

We have reviewed the State's proposed amendment to the Louisiana State Plan submitted under Transmittal Number 17-0010 dated June 15, 2017. This state plan amendment proposes to exclude the Louisiana Health Insurance Premium Payment (LaHIPP) enrollees from participation in managed care for physical and behavioral health.

Based on the information submitted, we have approved the amendment for incorporation into the official Louisiana State Plan with an effective date change of April 20, 2017. A copy of the CMS-179 and approved plan pages are enclosed with this letter.

If you have any questions, please contact Cheryl Rupley at (214) 767-6278 or by email at Cheryl.Rupley@cms.hhs.gov.

Sincerely,

Bill Brooks

Associate Regional Administrator

TRANSMITTAL AND NOTICE OF APPROVAL OF	1. TRANSMITTAL NUMBER:	2. STATE
STATE PLAN MATERIAL	17-0010	Louisiana
FOR: HEALTH CARE FINANCING ADMINISTRATION	3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
TO: REGIONAL ADMINISTRATOR	4. PROPOSED EFFECTIVE DATE	
HEALTH CARE FINANCING ADMINISTRATION DEPARTMENT OF HEALTH AND HUMAN SERVICES	April 20, 2017	
5. TYPE OF PLAN MATERIAL (Check One):		
\square NEW STATE PLAN \square AMENDMENT TO BE CONSIDERED AS NEW PLAN \boxtimes AMENDMENT		
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)		
6. FEDERAL STATUTE/REGULATION CITATION:	7. FEDERAL BUDGET IMPACT:	
Section 1932(a)(1)(A) of the Social Security Act	a. FFY <u>2017</u> b. FFY <u>2018</u>	<u>\$0</u> <u>\$0</u>
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:	9. PAGE NUMBER OF THE SUPERS	SEDED PLAN
	SECTION OR ATTACHMENT (If Applicable):	
Attachment 3.1-F, Page 7	Same (TN 16-0003)	
10. SUBJECT OF AMENDMENT: The SPA proposes to exclude the Louisiana Health Insurance Premium Payment		
(LaHIPP) enrollees from participation in managed care for physical and behavioral health.		
11 COVEDNODES DEVIEW (Ch. J. O)		
11. GOVERNOR'S REVIEW (Check One): ☐ GOVERNOR'S OFFICE REPORTED NO COMMENT	☑ OTHER, AS SPECIFIED:	
COMMENTS OF GOVERNOR'S OFFICE ENCLOSED	The Governor does not review state plan material.	
☐ NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL		
12. SIGNATURE OF STATE AGENCY OFFICIAL:	6. RETURN TO:	
12. SIGNATURE OF STATE PRODUCT OF TEME.	Jen Steele, Medicaid Director	
	State of Louisiana	
13. TYPED NAME:	Department of Health	
Rebekah E. Gee MD, MPH	628 North 4 th Street	
14. TITLE:	P.O. Box 91030	
Secretary 15 DATE SUPPLIFIED		20
15. DATE SUBMITTED:	Baton Rouge, LA 70821-903	00
June 16, 2017 FOR REGIONAL OFFICE USE ONLY		
The state of the s	8. DATE APPROVED:	
June 16, 2017	September 7, 2	2017
PLAN APPROVED – ONE COPY A		
	0. SIGN	L:
April 20, 2017 21. TYPED NAME: 2	2. TITLE: Associate Regional Administrato	r
	IIILL.	
Bill Brooks	Division of Medicaid & Children's Health	
23. REMARKS:		

State: Louisiana

Citation

Condition or Requirement

1932(a)(2) 42 CFR 438.50(d)

6. Describe how the state identifies the following groups who are exempt from mandatory enrollment into managed care: (Examples: usage of aid codes in the eligibility system, self-identification).

Individuals exempt from mandatory enrollment in managed care under the Section 1932(a) State Plan option can be identified by aid code, program participation and other identifiers. These exempt individuals are mandatorily enrolled in managed care under the Section 1915(b) waiver.

42 CFR 438.50

F. <u>List other eligible groups (not previously mentioned) who will be exempt</u> (excluded) from mandatory enrollment.

Individuals exempt from mandatory enrollment in managed care under the Section 1932(a) State Plan option are mandatorily enrolled in managed care under the Section 1915(b) waiver unless exempt as described in the 1915(b) waiver.

The following Medicaid and/or Children's Health Insurance Program (CHIP) recipients are excluded altogether from participation in a Healthy Louisiana Managed Care Organization (MCO):

Individuals who:

- reside in an ICF/IID (Adults);
- receive services through the Program of All-Inclusive Care for the Elderly (PACE);
- have a limited period of eligibility such as eligibility through the Spenddown Medically Needy Program or Emergency Services Only (excluding individuals in a presumptive eligibility period);
- are partially dual eligible;
- receive coverage under Louisiana's Take Charge Plus program; or
- are enrolled in the Louisiana Health Insurance Premium Payment (LaHIPP) program, with the exception of recipients who are enrolled in LaHIPP and receive their behavioral health and transportation services through MCOs.

State: Louisiana

Date Received: 6-16-17
Date Approved: 9-7-17
Date Effective: 4-20-17

Transmittal Number: 17-0010

TN __17-0010 Supersedes TN __16-0003