

Table of Contents

State/Territory Name: Louisiana

State Plan Amendment (SPA) #: 23-0017

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form/Summary Form (with 179-like data)
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop S2-26-12
Baltimore, Maryland 21244-1850



June 2, 2023

Mrs. Tara LeBlanc
Medicaid Executive Director
State of Louisiana
Department of Health
628 N 4th Street
P.O. Box 91030
Baton Rouge, LA 70821-9030

Re: Louisiana State Plan Amendment (SPA) TN 23-0017

Dear Mrs. LeBlanc:

The Centers for Medicare & Medicaid Services (CMS) reviewed the proposed Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) 23-0017. This amendment proposes to temporarily extend Targeted Case Management originally approved in Disaster Relief SPA TN 20-0006 with the following modifications to extend the suspension of face-to-face requirements.

CMS conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act and implementing regulations. This letter is to inform you that Louisiana Medicaid SPA Transmittal Number 23-0017 is approved effective May 12, 2023.

If you have any questions, please contact Tobias Griffin at 214-767-4425 or via email at Tobias.Griffin@cms.hhs.gov.

Sincerely,

Alissa M.
Deboy -S

Digitally signed by Alissa
M. Deboy -S
Date: 2023.06.02
07:33:10 -04'00'

Alissa Mooney DeBoy
On Behalf of Anne Marie Costello, Deputy Director
Center for Medicaid and CHIP Services

Enclosures

**TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL**

FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES

1. TRANSMITTAL NUMBER 23-0017	2. STATE LA
3. PROGRAM IDENTIFICATION: TITLE <u>XIX</u> OF THE SOCIAL SECURITY ACT	
4. PROPOSED EFFECTIVE DATE May 12, 2023	
6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars) a. FFY <u>2023</u> \$ 0 b. FFY <u>2024</u> \$ 0	
8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)	

TO: CENTER DIRECTOR
CENTERS FOR MEDICAID & CHIP SERVICE
DEPARTMENT OF HEALTH AND HUMAN SERVICES

5. FEDERAL STATUTE/REGULATION CITATION
Title XIX of the Social Security Act

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT
**Section 7 – General Provisions
7.4.C Page 1 Temporary Policies in Effect Following the
COVID-19 National Emergency**

9. SUBJECT OF AMENDMENT
The purpose of this SPA is to amend the provisions governing Targeted Case Management in order to extend the suspension of face-to-face requirements as approved in disaster relief SPA 20-0006, through November 11, 2023.

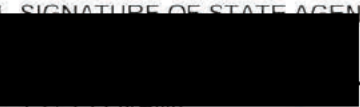
10. GOVERNOR'S REVIEW (Check One)

GOVERNOR'S OFFICE REPORTED NO COMMENT

COMMENTS OF GOVERNOR'S OFFICE ENCLOSED

NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

OTHER, AS SPECIFIED:
The Governor does not review State Plan material.

11. SIGNATURE OF STATE AGENCY OFFICIAL


12. TYPED NAME
Pam Diez, designee for Stephen R. Russo, JD

13. TITLE
**Executive Counsel
Director of Legal Audit and Regulatory Compliance**

14. DATE SUBMITTED
May 10, 2023

15. RETURN TO
**Tara A. LeBlanc, Medicaid Executive Director
Louisiana Department of Health
628 North 4th Street
P.O. Box 91030
Baton Rouge, LA 70821-9030**

FOR CMS USE ONLY

16. DATE RECEIVED
May 10, 2023

17. DATE APPROVED
June 2, 2023

PLAN APPROVED - ONE COPY ATTACHED

18. EFFECTIVE DATE OF APPROVED MATERIAL
May 12, 2023

19. SIGNATURE OF APPROVING OFFICIAL
Alissa M. Deboy -S
Digitally signed by Alissa M. Deboy -S
Date: 2023.06.02 07:33 28 -04'00'

20. TYPED NAME OF APPROVING OFFICIAL
Alissa Mooney DeBoy

21. TITLE OF APPROVING OFFICIAL
**On Behalf of Anne Marie Costello, Deputy Director
Center for Medicaid and CHIP Services**

22. REMARKS

7.4. C Temporary Policies in Effect Following the COVID-19 National Emergency

Effective May 12, 2023 until November 11, 2023, the agency temporarily extends the following elections(s) of Section 7.4 approved on June 26, 2020 in disaster relief SPA LA TN 20-0006 of the State Plan with modifications:

Benefits

X The agency makes the following adjustments to benefits currently covered in the State plan:

Effective May 12, 2023, until November 11, 2023, the agency temporarily implements the following change to the State Plan:

Allow suspension of face-to-face requirements for support coordinators in the Targeted Case Management program.