

## NOTICE OF INTENT

### Department of Health Bureau of Health Services Financing

#### Medicaid Purchase Plan Recipient Eligibility (LAC 50:III.2309)

The Department of Health, Bureau of Health Services Financing proposes to amend LAC 50:III.2309 in the Medical Assistance Program as authorized by R.S. 36:254 and pursuant to Title XIX of the Social Security Act and SCR 17 of the 2024 Regular Session. This proposed Rule is promulgated in accordance with the provisions of the Administrative Procedure Act, R.S. 49:950 et seq.

The Medicaid Purchase Plan allows persons who meet the Social Security disability criteria to seek the employment services, vocational rehabilitation services, and other support services needed to obtain, regain or maintain employment, and reduce their independence on cash benefit programs. Senate Concurrent Resolution 17 of the 2024 Regular Session of the Louisiana Legislature requests that the Department of Health increase eligibility requirements for the Medicaid Purchase Plan. This rulemaking action proposes to increase the income limit for this program from 100 percent to 200 percent of the federal poverty level (FPL), requires premiums for workers with

income above 150 percent of FPL and increases the countable resources the worker can own from \$10,000 to \$25,000.

**Title 50**  
**PUBLIC HEALTH—MEDICAL ASSISTANCE**  
**Part III. Eligibility**  
**Subpart 3. Eligibility Groups and Factors**  
**Chapter 23. Eligibility Groups and Medicaid Programs**  
**§2309. Medicaid Purchase Plan [Formerly LAC 50:III.763-765]**

A. ~~Effective January 1, 2004, the Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing implemented the Medicaid Purchase Plan Program for workers with disabilities under title XIX of the Social Security Act. The Medicaid Purchase Plan allows persons who meet the Social Security disability criteria to seek the employment services, vocational rehabilitation services, and other support services needed to obtain, regain or maintain employment, and reduce their independence on cash benefit programs.~~ The Medicaid Purchase Plan provides Medicaid coverage to individuals who meet the following criteria:

1. have earned income;
2. are at least 16, but not yet 65 years of age;
3. meet the Supplemental Security Income's definition of disability, except for earnings;
4. have countable income less than or equal to 200 percent of the federal poverty level (FPL);

5. have countable resources less than or equal to \$25,000; and

6. pay a monthly premium, if applicable.

B. ~~Recipient Eligibility. Effective January 1, 2014, the Medicaid purchase plan shall cover workers with disabilities who meet the following criteria:~~Premium Payment. Eligible individuals with countable income less than or equal to 150 percent~~percent~~ of the FPL are not required to pay a premium. Eligible individuals with countable income greater than 150 percent of the FPL are required to pay a premium of \$131 per month.

~~1. are employed;~~

~~2. are age 16 through age 64;~~

~~3. meet the Social Security Administration criteria for disability;~~

~~4. have net income less than 100 percent of the federal poverty level;~~

~~5. have countable resources (assets) less than \$10,000;~~

~~a. all life insurance policies, medical savings accounts, and retirement accounts shall be counted towards the resource limit; and~~

~~6. are enrolled in no-cost health insurance.~~

~~C. Spousal income and resources shall be counted towards the income and resource limits.~~

~~D. Effective January 1, 2014, buy-in premiums shall be eliminated from the Medicaid Purchase Plan Program. B.1.- D.~~

Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and Title XIX of the Social Security Act.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Bureau of Health Services Financing, LR 39:3299 (December 2013), amended by the Department of Health, Bureau of Health Services Financing, LR 51:

Implementation of the provisions of this Rule may be contingent upon the approval of the U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services (CMS), if it is determined that submission to CMS for review and approval is required.

#### **Family Impact Statement**

In compliance with Act 1183 of the 1999 Regular Session of the Louisiana Legislature, the impact of this proposed Rule on the family has been considered. It is anticipated that this proposed Rule will have a positive impact on family functioning, stability and autonomy as described in R.S. 49:972, as it provides access to the Medicaid Purchase Plan for persons who may have been previously denied due to income exclusions.

### **Poverty Impact Statement**

In compliance with Act 854 of the 2012 Regular Session of the Louisiana Legislature, the poverty impact of this proposed Rule has been considered. It is anticipated that this proposed Rule will have a positive impact on child, individual, or family poverty in relation to individual or community asset development as described in R.S. 49:973, as it provides access to the Medicaid Purchase Plan for persons who may have been previously denied due to income exclusions.

### **Small Business Analysis**

In compliance with the Small Business Protection Act, the economic impact of this proposed Rule on small businesses has been considered. It is anticipated that this proposed Rule will have no impact on small businesses.

### **Provider Impact Statement**

In compliance with House Concurrent Resolution (HCR) 170 of the 2014 Regular Session of the Louisiana Legislature, the provider impact of this proposed Rule has 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, no direct or indirect cost to the provider to provide the same level of service, and will have positive 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 to Kimberly Sullivan, JD, Bureau of Health Services Financing, P.O. Box 91030, Baton Rouge, LA 70821-9030. Ms. Sullivan is responsible for responding to inquiries regarding this proposed Rule. The deadline for submitting written comments is March 24, 2025.

### **Public Hearing**

Interested persons may submit a written request to conduct a public hearing by U.S. mail to the Office of the Secretary ATTN: LDH Rulemaking Coordinator, Post Office Box 629, Baton Rouge, LA 70821-0629; however, such request must be received no later than 4:30 p.m. on March 12, 2025. If the criteria set forth in R.S. 49:961(B)(1) are satisfied, LDH will conduct a public hearing at 9:30 a.m. on March 27, 2025 in Room 118 of the Bienville Building, which is located at 628 North Fourth Street, Baton Rouge, LA. To confirm whether or not a public hearing will be held, interested persons should first call Allen Enger at (225) 342-1342 after March 12, 2025. If a public hearing is to be held, all interested persons are invited to attend and present data, views, comments, or arguments, orally or in writing.

Michael Harrington, MBA, MA

Secretary