NOTICE OF INTENT

Department of Health

Bureau of Health Services Financing

Eligibility

Retroactive Coverage Eligibility

(LAC 50:III.939, 2305, 2315, 2327, 20103, and LAC 50:XXI.16333)

The Department of Health, Bureau of Health Services Financing proposes to amend LAC 50:III.939, 2305, 2315, 2327, 20103, and LAC 50:XXI.16333 in the Medical Assistance Program as authorized by R.S. 36:254 and pursuant to Title XIX of the Social Security Act. This proposed Rule is promulgated in accordance with the provisions of the Administrative Procedure Act, R.S. 49:950 et seq.

This proposed Rule updates retroactive Medicaid coverage. For all Medicaid applicants who are not in the adult expansion group, retroactive coverage would be limited to two months before the month they apply.

The Rule also updates the Residential Options Waiver to reduce the time allowed for transition payment support coordination. The maximum period for these retroactive payments would drop from 90 days to 60 days before someone’s certification date. The LaCHIP eligibility requirements were also changed to fit current practices.

The proposed Rule text below has been drafted utilizing plain language principles to ensure clarity and accessibility for all users. It has also been reviewed and tested for compliance with web accessibility standards.

Title 50

PUBLIC HEALTH—MEDICAL ASSISTANCE

Part III. Eligibility

Subpart 1. General Administration

Chapter 9. Financial Eligibility

Subchapter D. Incurred Medical

§939. Medically Needy

A. The following criteria apply to all incurred medical expenses for medically needy.

1. Bills for necessary medical and remedial services furnished more than two months before the Medicaid application is filed will be excluded as an incurred expense. Current payments on excluded expenses will be allowed as an incurred expense.

2. The first budget period for the Medically Needy will begin the first month in the two-month period prior to the date of application in which the applicant received covered services.

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, Office of the Secretary, Bureau of Health Services Financing, LR 30:1702 (August 2004), amended by the Department of Health, Bureau of Health Services Financing, LR 52:

Subpart 3. Eligibility Groups and Factors

Chapter 23. Eligibility Groups and Medicaid Programs

§2305. Provisional Medicaid Program

A. – C. ...

D. Retroactive coverage up to two months prior to the receipt of the Medicaid application shall be available to recipients in the Provisional Medicaid Program.

1. ...

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 41:1118 (June 2015), amended by the Department of Health, Bureau of Health Services Financing, LR 52:

§2315. LaMOMS Program

A. ...

B. Eligibility Requirements. Eligibility for LaMOMS coverage may begin at any time during a pregnancy, and as early as two months prior to the month of application. Eligibility cannot begin before the first month of pregnancy. The pregnant

woman must be pregnant for each month of eligibility, except for the 12-month postpartum period.

C. – D.4. ...

E. Certification Period

1. Eligibility for the pregnant women group may begin:

a. ...

b. as early as two months prior to the month of application.

2. ...

3. An applicant/enrollee whose pregnancy terminated in the month of application or in one of the two months prior without a surviving child shall be considered a pregnant woman for the purpose of determining eligibility in the pregnant women group.

4. Certification shall be from the earliest possible month of eligibility (up to two months prior to application) through the month in which the 12-month postpartum period ends.

5. Retroactive eligibility shall be explored regardless of current eligibility status.

a. If the applicant/enrollee is eligible for any of the two prior months, she remains eligible throughout the pregnancy and 12-month postpartum period. When determining retroactive eligibility, actual income received in the month of determination shall be used.

b. If application is made after the month her pregnancy ends, the period of eligibility will be retroactive but shall not start more than two months prior to the month of application. The start date of retroactive eligibility is determined by counting back two months prior to the date of application. The start date will be the first day of that month.

6. – 8. ...

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 48:499 (March 2022), amended LR 52:

§2327. Modified Adjusted Gross Income (MAGI) Groups

A. – C.3. ...

D. Pregnant Women Group

1. Eligibility for the pregnant women group may begin:

a. ...

b. as early as two months prior to the month of application.

2. ...

3. An applicant/enrollee whose pregnancy terminated in the month of application or in one of the two months prior

without a surviving child shall be considered a pregnant woman for the purpose of determining eligibility in the pregnant women group.

4. Certification shall be from the earliest possible month of eligibility (up to two months prior to application) through the month in which the 12-month postpartum period ends.

5. Retroactive eligibility shall be explored regardless of current eligibility status.

a. If the applicant/enrollee is eligible for any of the two prior months, she remains eligible throughout the pregnancy and 12-month postpartum period. When determining retroactive eligibility actual income received in the month of determination shall be used.

b. If application is made after the month her pregnancy ends, the period of eligibility will be retroactive but shall not start more than two months prior to the month of application. The start date of retroactive eligibility is determined by counting back two months prior to the date of application. The start date will be the first day of that month.

6. - 8. ...

E. Child Related Groups

1. – 3.d. ...

e. have been determined eligible for child health assistance under the State Child Health Insurance Plan.

f. – f.x. Repealed.

4. ...

F. – G.2.d. ....

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 41:945 (May 2015), amended by the Department of Health, Bureau of Health Services Financing, LR 48:499 (March 2022), amended LR 52:

Subpart 11. State Children's Health Insurance Program

Chapter 201. Louisiana Children's Health Insurance Program (LaCHIP)—Phases 1-3

20103. Eligibility Criteria

A. – a.3. ...

B. The following children are excluded from coverage under the LaCHIP Medicaid expansion:

1. ...

2. those currently covered by other types of health insurance.

3.- 4. Repealed. C. – C.1. ...

D. – D.1.f. Repealed.

E. ...

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

HISTORICAL NOTE: Repromulgated by the Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing, LR 34:659 (April 2008), amended by the Department of Health and Hospitals, Bureau of Health Services Financing, LR 41:1292 (July 2015), amended by the Department of Health, Bureau of Health Services Financing, LR 52:

Part XXI. Home and Community-Based Services Waivers

Subpart 13. Residential Options Waiver

16333. Support Coordination

A. – B. ...

C. Service Limits

1. ...

2. ROW will utilize support coordination for assisting with the moving of individuals from the institutions. Up to 90 consecutive days or per LDH policy, but not to exceed 180 days will be allowed for transition purposes.

a. Payment will be made upon certification and may be retroactive no more than 60 days per LDH policy.

3. ...

D. ...

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, Office for Citizens with Developmental Disabilities, LR 33:2453 (November 2007), amended by the

Department of Health and Hospitals, Bureau of Health Services Financing and the Office for Citizens with Developmental Disabilities, LR 41:2165 (October 2015), by the Department of Health, Bureau of Health Services Financing and the Office for Citizens with Developmental Disabilities, amended LR 47:1521 (October 2021), LR 48:1568 (June 2022), LR 50:1834 (December 2024), amended by the Department of Health, Bureau of Health Services Financing, LR 52:

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 negative impact on family functioning, stability and autonomy as described in R.S. 49:972 as it reduces the amount of retroactive coverage enrollees will receive for medical costs.

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 negative impact on child, individual, or family poverty in relation to individual or community asset development as described in R.S. 49:973 as it reduces the amount of retroactive coverage enrollees will receive for medical costs.

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 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 to Tangela Womack, Bureau of Health Services Financing, P.O. Box 91030, Baton Rouge, LA 70821-9030. Ms. Womack is responsible for responding to inquiries regarding this proposed Rule. The deadline for submitting written comments is August 19, 2026.

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 August 10, 2026. 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 August 27, 2026, in Room 118 of the Bienville Building, which is located at 628 North Fourth Street, Baton Rouge, LA. To confirm whether a public hearing will be held, interested persons should first call Allen Enger at (225) 342-1342 after August 10, 2026. 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.

Bruce D. Greenstein

Secretary

FISCAL AND ECONOMIC IMPACT STATEMENT FOR ADMINISTRATIVE RULES

RULE TITLE: Eligibility

Retroactive Coverage Eligibility

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

It is anticipated that implementation of this proposed rule will result in decreased state costs of approximately ($596,610) for FY 26-27 (includes $675 for the administrative expense of

promulgation of the proposed rule and final rule), ($2,005,740) for FY 27-28, and ($2,097,204) for FY 28-29.

This proposed rule amends the provisions governing retroactive Medicaid coverage. For all Medicaid applicants who are not in the adult expansion group, retroactive coverage will be reduced from three months to two months before the month they apply.

The rule also updates the Residential Options Waiver to reduce the time allowed for transition payment support coordination. The maximum period for these retroactive payments would drop from 90 days to 60 days before someone’s certification date. The LaCHIP eligibility requirements were also changed to fit current practices.

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

It is anticipated that the implementation of this proposed rule will decrease federal revenue collections by approximately ($3,888,426) for FY 26-27 (includes $674 for the administrative expense of promulgation of the proposed rule and final rule), ($13,243,891) for FY 27-28, and ($13,932,446) for FY 28-29.

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

It is anticipated that this proposed rule will reduce retroactive Medicaid payments by ($4,485,036) for FY 26-27, ($15,249,631) for FY 27-28, and ($16,029,650) for FY 28-29. This will have a negative impact on enrollees as it reduces the amount of retroactive coverage enrollees will receive for medical costs. It may also result in a decrease in revenue for small businesses and providers.

I. ESTIMATED EFFECT ON COMPETITION AND EMPLOYMENT (Summary)

This proposed rule has no known effect on competition and employment.