Department of Health and Hospitals Office of the Secretary

December 27, 2013

Bill Brooks
Associate Regional Administrator
Division of Medicaid & Children's Health
DHHS/Centers for Medicare and Medicaid Services
1301 Young Street, Room #833
Dallas, Texas 75202

Dear Mr. Brooks:

RE: Louisiana Title XIX State Plan

Transmittal No. 13-57

I have reviewed and approved the enclosed Louisiana Title XIX State Plan material.

I recommend this material for adoption and inclusion in the body of the State Plan.

Sincerely,

Kathy M. Kliebert

Secretary

Attachments (1)

TRANSMITTAL AND NOTICE OF APPROVAL OF	1. TRANSMITTAL NUMBER:	2. STATE			
STATE PLAN MATERIAL	13-57	Louisiana			
FOR: HEALTH CARE FINANCING ADMINISTRATION	3. PROGRAM IDENTIFICATION: TITLE XIX OF THE				
	SOCIAL SECURITY ACT (MEDI				
TO: REGIONAL ADMINISTRATOR	4. PROPOSED EFFECTIVE DATE				
HEALTH CARE FINANCING ADMINISTRATION DEPARTMENT OF HEALTH AND HUMAN SERVICES	December 31, 2013				
5. TYPE OF PLAN MATERIAL (Check One):					
□ NEW STATE PLAN □ AMENDMENT TO BE CONSIDERED AS NEW PLAN △ 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:	00.0			
Section 1902(r)(2)	FFY <u>2014</u> FFY <u>2015</u>	\$0.0 \$0.0			
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable):				
Supplement 8a to Attachment 2.6-A, Page 1	Same (TN 08-04)				
Supplement 8a to Attachment 2.6-A, Page 2	None (New page)				
•					
10. SUBJECT OF AMENDMENT: The SPA proposes to disrega	ard the income of children age 6-1	8 up to 142 percent			
of the Federal Poverty Level.					
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	w state plan material.			
☐ NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL	,				
12. SIGNATURE OF STATE AGENCY OFFICIAL:	16. RETURN TO:				
lans Bhelor	J. Ruth Kennedy, Medicaid	Director			
13. TYPED NAME:	State of Louisiana				
Kathy H. Kliebert	Department of Health and H	ospitals			
4. TITLE: 628 N. 4 th Street		_			
Secretary 15. DATE SUBMITTED:	PO Box 91030				
December 27, 2013	Baton Rouge, LA 70821-903	30			
FOR REGIONAL OFFICE USE ONLY					
	18. DATE APPROVED:				
DIAM ADDROVED ON	CODY ATTACHED				
PLAN APPROVED – ONE 19. EFFECTIVE DATE OF APPROVED MATERIAL:	20. SIGNATURE OF REGIONAL OFFI	CIAI			
19. EFFECTIVE DATE OF AFFROVED MATERIAL.	20. SIGNATURE OF REGIONAL OFF	CITE.			
21. TYPED NAME:	22. TITLE:				
23. REMARKS:					

Revision: HCFA-PM-91-4

TN#_

AUGUST 1991

(BPD)

SUPPLEMENT 8a to ATTACHMENT 2.6-A

Page 1 OMB No.: 0938-

	5)	For children age 6-18 eligible und A block income disregard betwee gross income standard of 142% F	en the current net i)(VII) of the act. ncome standard of 100% FPL and a		
		income.	ll be applied to total	sregards will be applied to the family I gross (earned and unearned) family e disregarded.		
	4)	For Family Opportunity Act [196	02(a)(10)(A)ii(XIX)] -		
	3)	The Bureau of Health Services Financing disregards In-Kind Support and Maintenance as defined by the federal SSI program in the determination of Medicaid eligibility for the following groups: Medically Needy Program [1902(a)(10)(c)], Qualified Medicare Beneficiaries [1902(a)(10)(E)(i)], Specified Low Income Beneficiaries [1902(a)(10)(E)(iii)], Qualified Individuals-I [1902(a)(10)(E)(iv)(I)], TB Infected Individuals [1902(a)(10)(A)(ii)(XII)], and Disability Medicaid [Optional Group of Aged and Disabled under the FPL covered under 1902(a)(10)(A)(ii)(X)].				
		Disregards In-Kind Support	ort and Maintenance	as defined by the federal SSI program.		
		There will be no deeming of spousal income.				
 Only the income and needs of the individual with the disability who is ap or receiving coverage will be considered in determining eligibility. 						
2) For Working Individuals – TWWIIA Basic Coverage Group-						
	1)		level standards who	the first 15 percent of monthly gross en determining Medicaid eligibility		
	Se	ection 1902 (f) State	\boxtimes	Non-Section 1902 (f) State		
		MORE LIBERAL ME UNDER SECTIO	THODS OF TREA ON 1902 (r) (2) OF T			
		State:	LOUISIANA			
		STATE PLAN UNDER TITL	E XIX OF THE SO	CIAL SECURITY ACT		

SUPPLEMENT 8a to ATTACHMENT 2.6-A Revision: HCFA-PM-91-4 (BPD) AUGUST 1991 Page 2 OMB No.: 0938-6) All income is disregarded for the reasonable classification under 42 CFR 435.222 of pregnant women under the age of 19, as defined on supplement 1 to Attachment 2.2-A page 1. *More liberal methods may not result in exceeding gross income limitations under section 1903 (f).

Approval Date

Effective Date

TN# _____ Supersedes

TN#_