John Bel Edwards GOVERNOR



State of Louisiana

Louisiana Department of Health Bureau of Health Services Financing

VIA ELECTRONIC MAIL ONLY

February 4, 2019

Karen Matthews Health and Human Services Director Chitimacha Health Clinic P.O. Box 640 Charenton, LA 70523

Mildred Darden, Clinic Office Supervisor Chitimacha Tribe of Louisiana P. O. Box 640 Charenton, LA 70523

David Sickey, Chairman Paula Manuel, Health Director Coushatta Tribe of Louisiana P. O. Box 818 Elton, LA 70532 Angela Martin Chitimacha Tribe of Louisiana P. O. Box 640 Charenton, LA 70523

Joey Barbry, Chairman Carl Chapman, Health Director Tunica-Biloxi Tribe of Louisiana P. O. Box 1589 Marksville, LA 71351-1589

Chief Beverly Cheryl Smith Kellye Smith, Health Director The Jena Band of Choctaw Indians P. O. Box 14 Jena, LA 71342

Dear Louisiana Tribal Contact:

RE: Notification of Louisiana Medicaid State Plan Amendment

In compliance with the provisions of the American Recovery and Reinvestment Act (ARRA) of 2009, the Louisiana Department of Health, Bureau of Health Services Financing is taking the opportunity to notify you of a State Plan amendment (SPA) that may have an impact on your tribe.

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Attached for your review and comments is a summary of the proposed SPA. Please provide any comments you may have by **February 11, 2019**, to Karen Barnes via email at <u>Karen.Barnes@la.gov</u> or by postal mail to:

Louisiana Department of Health Bureau of Health Services Financing Medicaid Policy and Compliance P.O. Box 91030 Baton Rouge, LA 70821-9030

Should you have additional questions about Medicaid policy, Mrs. Barnes will be glad to assist you. You may contact her via email at the email address above or via telephone at (225) 342-3881.

Thank you for your continued support of the tribal consultation process.

Sincerely,

Kain U. Binnes

Jen Steele Medicaid Director

Attachment (1)

JS/KHB/MJ

c: Cheryl Rupley Stacey Shuman

State Plan Amendment for Submittal to CMS Request for Tribal Comments February 4, 2019

<u>Pharmacy Benefits Management Program – Supplemental Rebate Agreement</u> Effective date: <u>May 1, 2019</u> July 1, 2019

The purpose of this SPA is to establish a state-specific supplemental rebate agreement (SRA) with manufacturer(s) for Hepatitis C direct acting agents.