

Dr. Courtney N. Phillips SECRETARY

State of Louisiana

Louisiana Department of Health Bureau of Health Services Financing

VIA ELECTRONIC MAIL ONLY

June 3, 2020

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

Mr. Earl Evans, Tribal Administrator 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 Angela Martin Chitimacha Tribe of Louisiana P. O. Box 640 Charenton, LA 70523

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

David Sickey, Chairman Paula Manuel, Health Director Coushatta Tribe of Louisiana P. O. Box 818 Elton, LA 70532

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.

Louisiana Tribal Notice May 29, 2020 Page 2

Attached for your review and comments is a summary of the proposed SPA. Please provide any comments you may have by **July 3**, **2020** 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) 421-6652.

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

Sincerely,

Karen H. Barnes for

Ruth Johnson Medicaid Executive Director

Attachment (1)

RJ/KHB/SSJ

c: Billy B. Farrell Tobias Griffin Nancy Grano

State Plan Amendment for Submittal to CMS Request for Tribal Comments May 29, 2020

Inpatient Hospital Services Coverage of Donor Breast Milk Effective date: August 20, 2020

The purpose of this SPA is to adopt provisions governing reimbursement outside of the inpatient hospital per diem for donor human breast milk provided to hospitalized premature newborns in order to ensure access to an effective treatment to reduce the incidence of severe complications.