



**State of Louisiana**  
Louisiana Department of Health  
Bureau of Health Services Financing

**VIA ELECTRONIC MAIL ONLY**

September 30, 2020

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

Angela Martin  
Chitimacha Tribe of Louisiana  
P. O. Box 640  
Charenton, LA 70523

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

Marshall Pierite, Chairman  
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

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 Amendments**

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 State Plan amendments (SPAs) that may have an impact on your tribe.

Attached for your review and comments is a summary of the proposed SPAs. Please provide any comments you may have by **October 30, 2020** to Karen Barnes via email at [Karen.Barnes@la.gov](mailto:Karen.Barnes@la.gov) 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,

*Karen H. Barnes* for  
Ruth Johnson  
Medicaid Executive Director

Attachment (1)

RJ/KHB/UN

c: Billy B. Farrell  
Tobias Griffin  
Nancy Grano

**State Plan Amendments for Submittal to CMS**  
**Request for Tribal Comments**  
**September 30, 2020**

**Transfer of Assets Less Than Fair Market Value**  
**Effective date: October 31, 2020**

The purpose of this SPA is to align with current practices related to transfer of assets, in the Medicaid assistance program, for less than fair market value to: 1) begin the penalty date the first day of the month following the month of transfer; 2) impose penalty when the amount of the transfer is less than the monthly cost of nursing facility care; and 3) treat income as an asset.

**Inpatient Hospital Services Reimbursement Rate Adjustment**  
**Effective date: ~~December 20, 2020~~ January 1, 2021**

The purpose of this SPA is to amend the provisions governing the reimbursement methodology for inpatient hospital services in order to adjust the reimbursement rates.

**Outpatient Hospital Services Reimbursement Rate Adjustment**  
**Effective date: ~~December 20, 2020~~ January 1, 2021**

The purpose of the SPA is to amend the provisions governing the reimbursement methodology for outpatient hospital services in order to adjust the reimbursement rates.

**Nursing Facilities Reimbursement Methodology**  
**Effective date: December 20, 2020**

The purpose of the SPA is to amend the provisions governing the reimbursement methodology for nursing facilities in order to increase the allowable square footage for calculating payments when a Medicaid participating nursing facility has at least 15 percent of its licensed beds in private rooms.

**Adult Mental Health-Peer Support Services**  
**Effective date: ~~December 20, 2020~~ February 1, 2021**

The purpose of the SPA is to amend the provisions governing adult mental health services in order to add peer support services as a covered service.

**Electronic Medicaid Application**  
**Effective date: January 1, 2021**

The purpose of this SPA is to update the electronic Medicaid application to include question(s) around the proposed Section 1115 Waiver, Act 421 Children's Medicaid Option. The Act 421 Children's Medicaid Option is a program through which children with disabilities can access Medicaid-funded services regardless of their parents' income. The program furnishes Medicaid benefits to children with disabilities whose assets cannot exceed \$2000 and who are otherwise ineligible for such benefits because the income of their household exceeds state-established limits for Medicaid eligibility.