

State of Louisiana

Louisiana Department of Health Office of the Secretary

August 5, 2022

James G. Scott, Director Division of Program Operations Medicaid & CHIP Operations Group 601 East 12th Street, Room 0300 Kansas City, Missouri 64106-2898

RE: Louisiana Title XIX State Plan Transmittal No. 22-0014

Dear Mr. Scott:

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. Should you have any questions or concerns regarding this matter, please contact Karen Barnes at (225) 342-3881 or via email at Karen.Barnes@la.gov.

Sincerely,

Luth Johnson

Dr. Courtney N. Phillips

Secretary

Attachments (2)

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SERVICE OF OR MEDIO, WE A MEDIO, WE SERVICE			
TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL	1. TRANSMITTAL NUMBER 22-0014	2. STATE LA	
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	3. PROGRAM IDENTIFICATION: TITLE \underline{XIX} OF THE SOCIAL SECURITY ACT		
TO: CENTER DIRECTOR CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE July 1, 2022		
5. FEDERAL STATUTE/REGULATION CITATION 42 CFR 440.167	6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars) a. FFY $\underline{2022}$ \$ $\underline{0}$ b. FFY $\underline{2023}$ \$ $\underline{0}$		
7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT	8. PAGE NUMBER OF THE SUPERS OR ATTACHMENT (If Applicable)		
Attachment 3.1A, Item 26, Pages 1 and 2	Same (TN 16-0013)		
9. SUBJECT OF AMENDMENT The purpose of this SPA is to amend the provisions governing personal care services worker qualifications in order to remove minimum education and experience qualifications language.			
10. GOVERNOR'S REVIEW (Check One)			
GOVERNOR'S OFFICE REPORTED NO COMMENT COMMENTS OF GOVERNOR'S OFFICE ENCLOSED NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL	OTHER, AS SPECIFIED: The Governor does not review State Plan material.		
11. SIGNATURE OF STATE AGENCY OFFICIAL	15. RETURN TO		
Kust Johnson	Tara A. LeBlanc, Medicaid Executive Director Louisiana Department of Health		
12. TYPED NAME	628 North 4th Street		
Ruth Johnson, designee for Dr. Courtney N. Phillips 13. TITLE	P.O. Box 91030 Baton Rouge, LA 70821-9030		
Secretary	Daton Rouge, LA 70821-9030	,	
14. DATE SUBMITTED			
August 5, 2022 FOR CMS USE ONLY			
16. DATE RECEIVED	17. DATE APPROVED		
PLAN APPROVED - ONE COPY ATTACHED			
18. EFFECTIVE DATE OF APPROVED MATERIAL	19. SIGNATURE OF APPROVING OFFIC	CIAL	
20. TYPED NAME OF APPROVING OFFICIAL	21. TITLE OF APPROVING OFFICIAL		
22. REMARKS			

STATE OF LOUISIANA

AMOUNT, DURATION AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED

LIMITATIONS OF THE AMOUNT, DURATION, AND SCOPE OF CERTAIN ITEMS OF PROVIDED MEDICAL AND REMEDIAL CARE AND SERVICES ARE DESCRIBED AS FOLLOWS:

Medical and Remedial Care and Services 42 CFR 440.167

Personal Care Services

Definition

Personal care services are defined as services furnished to an individual who is not an inpatient, or resident of a hospital, nursing facility, intermediate care facility for persons with intellectual disabilities, or an institution for mental disease that are authorized for the individual by a physician in accordance with a plan of treatment or otherwise authorized for the individual in accordance with a service plan approved by the State; provided by an individual who is qualified to provide such services and who is not a member of the individual's family; and furnished in a home, and at the state's option, in another location.

Personal care services enable an individual whose needs would otherwise require placement in an acute or long term care facility to remain safely in that individual's home. Services must be provided in accordance with an approved plan of care and supporting documentation. These services must be coordinated with other Medicaid services being provided to the beneficiary and will be considered in conjunction with those other services.

Personal Care Services Worker Qualifications:

The worker must be at least 18 years of age at the time the offer of employment is made and have the ability to read and write in English as well as to carry out directions promptly and accurately.

The following persons are prohibited from serving as the direct service worker for the beneficiary:

- 1. Beneficiary's spouse,
- 2. Beneficiary's curator,
- 3. Beneficiary's tutor,
- 4. Beneficiary's Legal guardian,
- 5. Beneficiary's responsible representative, or
- 6. Person to whom the beneficiary has given Representative and Mandate authority (Power of Attorney).

The Bureau has in place mechanisms to monitor the quality of the services provided. These include, but are not limited to, review of critical incident reports and quarterly meetings to review and address any quality assurance issues that have been identified.

STATE OF LOUISIANA

AMOUNT, DURATION AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED

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Assessment

An initial assessment shall be performed for each beneficiary requesting personal care services. The assessment shall be utilized to identify the beneficiary's long-term care needs, preferences, the availability of family and community supports and to develop the plan of care. Each beneficiary shall be re-assessed at least once every 18 months.

Prior Authorization

Personal care services must be prior authorized. Requests for prior authorization must be submitted to the Bureau of Health Services Financing (BHSF) or its designee and include a copy of the assessment form and the plan of care.

Covered Services

Personal care services are defined as those services that provide assistance with the distinct tasks associated with the performance of the activities of daily living (ADLs) and the instrumental activities of daily living (IADLs). Assistance may be either the actual performance of the personal care task for the individual or prompting and reminding so the individual performs the task by him/herself.

ADLs are those personal, functional activities required by the beneficiary. ADLs include tasks such as: eating, bathing, dressing, grooming, transferring (the manner in which an individual moves from one surface to another - excludes getting on and off the toilet and getting in and out of the tub/shower), reminding the beneficiary to take medication, ambulation, toileting and bed mobility.

IADLs are those activities that are considered essential for sustaining the individual's health and safety, but may not require performance on a daily basis. IADLs include tasks such as: light housekeeping, food preparation and storage, grocery shopping, laundry, assisting with scheduling medical appointments when necessary, accompanying beneficiary to medical appointments when necessary due to beneficiary's frail condition and assisting the beneficiary to access transportation.