John Bel Edwards GOVERNOR



Office of the Secretary

April 27, 2023

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

RE: Louisiana Title XIX State Plan Transmittal No. 23-0019

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,

Stephen R. Russo, JD

Executive Counsel

Director of Legal Audit and Regulatory Compliance

Attachments (2)

CNP:TAL:UN

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	1. TRANSMITTAL NUMBER 23-0019	2. STATE LA
	3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT	
TO: CENTER DIRECTOR CENTERS FOR MEDICAID & CHIP SERVIC DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE May 12, 2023	
5. FEDERAL STATUTE/REGULATION CITATION  Title XIX of the Social Security Act Section 9817 of the American Rescue Plan Act	6. FEDERAL BUDGET IMPACT (Amor a. FFY <u>2023</u> \$ <u>0</u> b. FFY <u>2024</u> \$ <u>0</u>	unts in WHOLE dollars)
7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT  Section 7 – General Provisions  7.4.B Page 1 Temporary Extension to the Disaster Relief  Policies for COVID-19 National Emergency	8. PAGE NUMBER OF THE SUPERS OR ATTACHMENT (If Applicable)	SEDED PLAN SECTION
9. SUBJECT OF AMENDMENT The purpose of this SPA is to extend the COVID-19 disaster relief provisions governing long-term personal care services in order to allow exceptions for the age, education and experience for the personal care services worker qualifications.		
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		
11. SIGNATURE OF STATE AGENCY OFFICIAL	15. RETURN TO	
12. TYPED NAME Pam Diez, designee for Stephen R. Russo, JD  13. TITLE Executive Counsel	Tara A. LeBlanc, Medicaid Executive Director Louisiana Department of Health	
Director of Legal Audit and Regulatory Compliance	628 North 4th Street P.O. Box 91030	
14. DATE SUBMITTED April 27, 2023	Baton Rouge, LA 70821-9	030
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 OFFICIAL	
20. TYPED NAME OF APPROVING OFFICIAL	21. TITLE OF APPROVING OFFICIAL	
22. REMARKS		

State/Territory: Louisiana Page 1

## 7.4. B Temporary Extension to the Disaster Relief Policies for COVID-19 National Emergency

Effective May 12, 2023 until November 11, 2023, the agency temporarily extends the following elections(s) of Section 7.4 approved on April 20, 2020 in disaster relief SPA LA TN 20-0004 of the State Plan:

## **Benefits**

X The agency makes the following adjustments to benefits currently covered in the State plan:

The State respectfully requests to extend the following disaster provision:

Allow exceptions for the age, education and experience for the personal care services worker qualifications.