

## **Table of Contents**

**State/Territory Name: Louisiana**

**State Plan Amendment (SPA) #: 24-0001**

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS Form 179
- 3) Approved SPA Page

**DEPARTMENT OF HEALTH & HUMAN SERVICES**

Centers for Medicare & Medicaid Services  
601 E. 12th St., Room 355  
Kansas City, Missouri 64106



Medicaid and CHIP Operations Group

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September 17, 2024

Kimberly Sullivan, J.D.  
Medicaid Executive Director  
Louisiana Department of Health  
628 N 4<sup>th</sup> Street  
P.O. Box 91030  
Baton Rouge, LA 70821-9030

Re: Louisiana State Plan Amendment (SPA) – 24-0001

Dear Medicaid Executive Director Sullivan:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) 24-0001. This amendment proposes to adopt provisions governing incurred medical and remedial care expenses in the determination of financial eligibility for the Medical Assistance Program in order to deduct expenses incurred for necessary medical and remedial care, subject to the reasonable limits, from the individual's income when calculating patient liability to an institution and to limit the time institutions have to report these expenses.

We conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act and implementing regulations 42 CFR 435 Subparts H and I. This letter informs you that Louisiana's Medicaid SPA TN 24-0001 was approved on September 17, 2024, with an effective date of January 20, 2024.

Enclosed are copies of Form CMS-179 and approved SPA pages to be incorporated into the Louisiana State Plan.

If you have any questions, please contact Tobias Griffin at (214) 767-4425 or via email at [Tobias.Griffin@cms.hhs.gov](mailto:Tobias.Griffin@cms.hhs.gov).

Sincerely,

A handwritten signature in blue ink, appearing to read "James G. Scott", is positioned to the left of the digital signature information.

Digitally signed by James G.  
Scott -S  
Date: 2024.09.17 16:30:16  
-05'00'

James G. Scott, Director  
Division of Program Operations

Enclosures

cc: Marjorie Jenkins, LA Department of Health

**TRANSMITTAL AND NOTICE OF APPROVAL OF  
STATE PLAN MATERIAL  
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES**

1. TRANSMITTAL NUMBER  
**24-0001**

2. STATE  
**LA**

3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT

TO: CENTER DIRECTOR  
CENTERS FOR MEDICAID & CHIP SERVICES  
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE  
**January 20, 2024**

5. FEDERAL STATUTE/REGULATION CITATION

**42 CFR 435 Subparts H and I**

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)

a. FFY **2024** **\$0**

b. FFY **2025** **\$0**

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT

**\*Supplement 3 to Attachment 2.6-A , Page 1 (New Page)**

8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)

9. SUBJECT OF AMENDMENT

**The purpose of this SPA is to adopt provisions governing incurred medical and remedial care expenses in the determination of financial eligibility for the Medical Assistance Program in order to deduct expenses incurred for necessary medical and remedial care, subject to the reasonable limits, from the individual's income when calculating patient liability to an institution and to limit the time institutions have to report these expenses.**

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



12. TYPED NAME

**Michael Harrington, MBA, MA designee for  
Ralph L. Abraham, M.D.**

13. TITLE

**Secretary**

14. DATE SUBMITTED

**March 26, 2024**

15. RETURN TO

**Kimberly Sullivan, J.D.  
Medicaid Executive Director  
Louisiana Department of Health  
628 North 4<sup>th</sup> Street  
P.O. Box 91030  
Baton Rouge, LA 70821-9030**

**FOR CMS USE ONLY**

16. DATE RECEIVED

**March 26, 2024**

17. DATE APPROVED

**September 17, 2024**

**PLAN APPROVED - ONE COPY ATTACHED**

18. EFFECTIVE DATE OF APPROVED MATERIAL

**January 20, 2024**

19. SIGNATURE OF APPROVING OFFICIAL



Digitally signed by James G. Scott -S  
Date: 2024.09.17 16:30:44 -05'00'

20. TYPED NAME OF APPROVING OFFICIAL

**James G. Scott**

21. TITLE OF APPROVING OFFICIAL

**Director, Division of Program Operations**

22. REMARKS

**\* Box #7: The State authorized Pen and Ink change on 9/17/24\***

State: LOUISIANA

Reasonable Limits on Amounts for Necessary Medical or Remedial Care  
Recognized Under State Law but Not Covered Under the State Plan

Citation

42 CFR 435 Subparts H and I

Reasonable Limits

1. For medically necessary care, services, and items not paid under the Medicaid State Plan or, if covered under the Medicaid State Plan, denied due to service limitations. The medical or remedial care must be:
  - a. recognized under state law;
  - b. medically necessary as verified by an independent licensed physician or medical director; and
  - c. incurred no earlier than three months preceding the month in which it is reported to the state.
2. The medical or remedial care cannot be:
  - a. for cosmetic or elective purposes, except when medically necessary as verified by an independent licensed physician or medical director; and/or
  - b. for payment of a medical or dental service plan that has not been approved by the Louisiana Department of Insurance in accordance with the Louisiana Insurance Code or is sold by an entity not licensed by the Louisiana Department of Insurance to engage in the business of making contracts of insurance in the state of Louisiana.
3. The deduction for medical and remedial care expenses that were incurred as a result of imposition of transfer of assets penalty period is limited to \$0.
4. The deduction for medical and remedial care expenses that were incurred as a result of the individual's equity interest in the home, exceeding the limit established under 42 U.S.C. §1396p(f), is limited to \$0.