



State of Louisiana
Louisiana Department of Health
Office of the Secretary

June 12, 2024

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. 24-0013

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,

 for *Designee*
Ralph L. Abraham, M.D.
Secretary

Attachments (3)

RLA:KS:KC

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES		1. TRANSMITTAL NUMBER 24-0013	2. STATE LA
		3. PROGRAM IDENTIFICATION: TITLE <u>XIX</u> 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 , 2024	
5. FEDERAL STATUTE/REGULATION CITATION 42 CFR 447, Subpart F		6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars) a. FFY 2024 \$2,532,217 b. FFY 2025 \$7,640,432	
7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Attachment 4.19-D, Page 26		8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable) Same (TN 23-0021)	
9. SUBJECT OF AMENDMENT The purpose of this SPA is to amend the provisions governing the reimbursement methodology for Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID), by continuing the \$12 add-on to private (non-state) owned ICF/IID for increased costs related to retaining and hiring direct care staff, through June 30, 2025.			
10. GOVERNOR'S REVIEW (Check One) <div><input type="checkbox"/> GOVERNOR'S OFFICE REPORTED NO COMMENT <input type="checkbox"/> COMMENTS OF GOVERNOR'S OFFICE ENCLOSED <input type="checkbox"/> NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL</div> <div><input checked="" type="checkbox"/> OTHER, AS SPECIFIED: The Governor does not review State Plan material.</div>			
11. SIGNATURE OF STATE AGENCY OFFICIAL 		15. RETURN TO Kimberly Sullivan, J.D. Medicaid Executive Director Louisiana Department of Health 628 North 4th Street P.O. Box 91030 Baton Rouge, LA 70821-9030	
12. TYPED NAME Michael Harrington, MBA, MA designee for Ralph L. Abraham, M.D.			
13. TITLE Secretary			
14. DATE SUBMITTED June 12, 2024			
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 OF LOUISIANA

PAYMENTS FOR MEDICAL AND REMEDIAL CARE AND SERVICES

METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES – INTERMEDIATE CARE
FACILITY SERVICES FOR INDIVIDUALS WITH INTELLECTUAL DISABILITIES

Temporary Add-on Payment to Retain and Hire Direct Care Staff

The Department will pay a \$12 direct care add-on to private (non-state) owned intermediate care facilities for individuals with intellectual disabilities (ICF/IID) for increased costs related to retaining and hiring direct care staff.

Methodology

1. The base year used in the June 2022 UPL demonstration includes costs reports for the year which ended June 30, 2020. The June 30, 2020 cost reports are the most current audited/desk reviewed available. The payments for the June 2022 UPL demonstration will be made from May 12, 2023 through June 30, 2024, at an estimated total cost of \$19,762,710.
2. The base year used in the June 2023 UPL demonstration includes costs reports for the year which ended June 30, 2021. The June 30, 2021 cost reports are the most current audited/desk reviewed available. The payments for the June 2023 UPL demonstration will be made from July 1, 2024 through June 30, 2025, at an estimated total cost of \$14,968,032.

Each add-on payment requires documentation that effective April 1, 2022, the minimum hourly wage paid to directly employ (non-contracted) non-nursing/physician direct care staff was \$9 per hour.