

Louisiana Department of Health
2026 Annual Report
Act 351 and Act 419 of 2025

State Services and Benefits
Legal Status and Accountability

2026 LDH Report for Act 351 and Act 419

Prepared by:

LDH Bureau of Legal Services

Nicholas Gachassin, III – LDH Executive Counsel

Kimberly Humbles – LDH Deputy Executive Counsel

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Preface / Introduction / Executive Summary

Pursuant to Act 351 and Act 419 of the 2025 Regular Session, the Louisiana Department of Health (LDH) submits this Annual Report, addressing (1) transparency and accountability in the provision of state services and benefits, and (2) processes for verification of citizenship and immigration status for state services and benefits provided through the Louisiana Department of Health (LDH).

Act 351 of the 2025 Regular Session was effective August 1, 2025; Act 419 of the 2025 Regular Session was effective June 20, 2025.

This Annual Report covers the state fiscal year of July 1, 2024 through June 30, 2025, and addresses various programs administered by LDH.

Act 351 requires LDH to verify that every applicant who applies for state services and benefits is a citizen or has a satisfactory immigration status as a qualified alien, except as prohibited by federal law. As shown throughout this report, LDH's standardized processes comply with Act 351 to the extent allowed by federal law.

Act 419 requires each state agency to determine the eligibility of individuals receiving state services and benefits. The Act requires each agency to establish and implement a standardized process for verifying the legal status of individuals applying for such state services/benefits. As explained in the report below, LDH currently has a standardized process or is developing a process for verifying the legal status of individuals seeking state services/benefits in accordance with existing federal law.

Section 1 – The Louisiana Medicaid Program

Medicaid is a joint federal and state program that provides health coverage to low income individuals and families including children, parents, pregnant women, seniors and people with disabilities. Currently there are approximately 1.5 million individuals enrolled in the Louisiana Medicaid program.

Subsection 1.1 – The Louisiana Medicaid Program (“Medicaid”) and Louisiana Children’s Health Insurance Program (CHIP)

Prior to Act 351 and Act 419, the Louisiana Department of Health (LDH) had implemented a standardized process for verifying the legal status of those seeking Medicaid and CHIP coverage, in accordance with existing federal law.

Act 351: La. R.S. 46:233.4 requires LDH to verify that every applicant who applies for Medicaid or CHIP is a citizen or has a satisfactory immigration status as a qualified alien, except as prohibited by federal law. As shown below, LDH’s standardized processes comply with Act 351 to the extent allowed by federal law.

Act 419: La R.S. 49:1511, et seq., requires each state agency to determine the eligibility of individuals receiving state services and benefits. La. R.S. 49:1516 requires each agency to establish and implement a standardized process for verifying the legal status of individuals applying for such state services/benefits. The Louisiana Department of Health (LDH) currently has a standardized process for verifying the legal status of individuals seeking Medicaid or Louisiana Children’s Health Insurance Program (CHIP) coverage in accordance with existing federal law.

A. Satisfactory Immigration Status Required for Medicaid and CHIP

In addition to meeting other eligibility requirements, lawfully present immigrants must have a qualified non-citizen status to be eligible for Medicaid or CHIP. Many, including most lawful permanent residents or green card holders, must wait five years after obtaining qualified status before they may enroll in Medicaid or CHIP. See [Medicaid Eligibility Manual \(MEM\) I-313](#). Some immigrants with qualified status, such as asylees and refugees, do not have to wait five years to enroll in Medicaid and CHIP. Some immigrants, such as adults with temporary protected status, are lawfully present but do not have a qualified status and thus, are not eligible for Medicaid and CHIP coverage even after a five-year wait. Some immigrant children, on the other hand, such as those under 19 with a temporary protected status, are lawfully present and eligible for Medicaid and CHIP through Louisiana’s “CHIPRA 214 option.”

The allowable immigration statuses are discussed in [MEM I-313](#).

Note that under the new federal law ([H.R.1](#)), effective October 1, 2026, eligibility for Medicaid and CHIP for non-citizens will be limited to lawful permanent residents (LPRs or “green card” holders), Cuban or Haitian entrants, and citizens of Compact of Free Association (COFA) residing in the U.S. LDH is currently preparing to comply with the new federal law as of October 1, 2026.

B. LDH’s Verification Process

LDH has a standardized process in place for verifying the legal status of individuals seeking Medicaid or CHIP coverage in order to comply with current federal laws. This process includes reasonable efforts through the Louisiana Medicaid Eligibility Determination System (**LaMEDS**), both at application and when a change in circumstances is discovered or reported, to ensure that medical assistance benefits are provided only to individuals who meet the legal criteria for eligibility in accordance with federal and state laws. Additionally, all beneficiaries who are non-citizens have their immigration statuses re-checked at renewal using federal data sources. Therefore, LDH complies with the verification requirements of the newly enacted La. R.S. 49:1516 and La. R.S. 46:233.4.

LDH, as the State Medicaid Agency, verifies citizenship and immigration status with the Social Security Administration (**SSA**) and the Department of Homeland Security (**DHS**) to determine eligibility for Medicaid or CHIP coverage at the initial application. This is required by federal law. See 42 C.F.R. § 435.956(a) and 42 C.F.R. § 457.380(b).

LDH submits to the U.S. Department of Health and Human Services (**HHS**) Secretary a verification plan describing the verification policies and procedures adopted by LDH, as the State Medicaid Agency, to implement the provisions set forth in federal regulations. 42 C.F.R. § 435.945(j).

LDH has two verification plans – one for those whose eligibility is determined based on their Modified Adjusted Gross Income (MAGI) and one for those whose eligibility is not determined using the MAGI method. The chart below explains LDH’s policies for verifying an applicant’s social security number, citizenship, and immigration status, as provided in the LDH verification plans. The [MEM at I-300](#) also details these verification processes.

C. Legal Status of Individuals Receiving Medicaid or CHIP as of June 30, 2025

The “State Services and Benefits Legal Status and Accountability Act,” La. R.S. § 49:1511 - § 1518, require LDH to determine the legal status of individuals receiving “state services and benefits,” like Medicaid and CHIP.

Table 2 below reflects the current legal status listed in LaMEDS for individuals receiving Medicaid as of June 30, 2025, which is the last day of the 2024-2025 State Fiscal Year (SFY). Pulling Medicaid data as of the last day of the SFY aims to ensure uniformity in subsequent annual reports required by La. R.S. § 49:1515.

Table 2	
‘Citizen’, ‘ U.S. National’ and ‘Unanswered’ Individuals	Count
Count of Citizens	1,589,948
Count of US Nationals	466
Count of unanswered with no immigration	7
Total	1,590,421

Non-Citizens broken down by Immigration Status	Count
Alien	11

Afghani/Iraqi Special Immigrant	10
Amerasian Immigrant	67
American Indian's born in Canada (50%+)	2
Asylee	934
Battered spouse, child, or parent	1
Compact of Free Association (COFA) migrant	8
Conditional Entrant	52
Cuban/Haitian Entrant	1402
Deferred Action Status	544
Deferred Enforced Departure	2
Granted withholding of deportation or removal	30
Individual with Non-Immigrant Status	1534
Lawful Permanent Resident	9426
Other	84
Parolee	162
Pending Application for Asylum	296
Pending Special Immigrant Juvenile Status	166
Qualified Alien	342
Refugee	991
SDX None/Unknown	6
Temporary Protected Status	33
Temporary Worker/Temporary Resident Status and his/her children	718
Ukrainian Humanitarian Parolee	83
Unanswered	728
Undocumented Aliens	3002
Unknown	184
Victim of trafficking or his/her spouse, child, sibling, or parent	87
TOTAL	20,905

GRAND TOTAL	1,611,326
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The legal status of an individual in LaMEDS reflects either:

- (1) the information provided at application, renewal, or change of circumstances;
- (2) information gathered by LDH from data sources; and/or
- (3) the status selected by the LaMEDS case worker (*e.g.*, the LaMEDS drop down list did not include the individual’s specific type of allowable immigration status, which led the case worker to list the immigration status as “Other”).

It is important to note a Medicaid beneficiary’s legal status may change in a reporting year, as new information is discovered or reported or a change in circumstances occurs. The data pull includes those individuals who were open ongoing in Medicaid or CHIP as of 6/30/2025; however, the legal status reflected for each individual in this report is their *legal status as of the date of LDH’s data pull in February*

2026. Therefore, it is possible that the individuals in this data pull had a different citizenship or immigration status listed in LaMEDS on 6/30/2025, when compared to February 2026.

D. Count of Non-Citizens Receiving Medicaid/CHIP as of June 30, 2025, Who May Qualify as “Illegal Aliens” or “Unaccompanied Alien Children”

La. R.S. § 49:1512(B)(2) directs LDH to “calculate and report the total dollar value of services and benefits provided to individuals identified as ‘illegal aliens’ or ‘unaccompanied alien children’ as defined by federal law.”

La. R.S. § 49:1515(A)(2) directs LDH to report annually “the total dollar amount of state services or benefits provided to all individuals identified as ‘illegal aliens’ and ‘unaccompanied alien children.’” La. R.S. § 49:1513 further provides the following definitions:

(3) **“Illegal alien”** means an “alien” described in 8 U.S.C. 1101,¹ who is present in the United States without lawful immigration status and therefore subject to removal pursuant to federal law. An alien granted parole under 8 U.S.C. 1182(d)(5),² temporary protected status, deferred action, deferred enforced departure, or similar exercise of administrative grace or prosecutorial discretion shall not be deemed to have lawful immigration status.

(5) **“Unaccompanied alien child”** has the meaning set forth in 6 U.S.C. 279(g).³

(Emphasis added.)

(1) CHIPRA GROUP: Some children under 19 who may qualify as “illegal aliens” under state law may be eligible for Medicaid or CHIP as “lawfully residing children” under the CHIPRA 214 option.

Notably, the state law definition of “illegal alien” includes those immigrants who are lawfully present, like those who are in a temporary work status, temporary protected status, deferred action status, or deferred enforced departure status. See La. R.S. § 49:1513(3). These are

¹ 8 U.S.C. § 1101(a)(3): As used in this chapter--...[t]he term “alien” means any person not a citizen or national of the United States.

² In some circumstances, the U.S. Attorney General can waive certain federal laws to allow temporary admission of otherwise inadmissible nonimmigrants, like for labor purposes, as explained in 8 U.S.C. § 1182(d)(5).

³ 6 U.S.C. § 279(g)(2): As used in this section--...the term “unaccompanied alien child” means a child who--

(A) has no lawful immigration status in the United States;

(B) has not attained 18 years of age; and

(C) with respect to whom--

(i) there is no parent or legal guardian in the United States; or

(ii) no parent or legal guardian in the United States is available to provide care and physical custody.

allowable immigration statuses for the purposes of Medicaid and CHIP programs for individuals under 19.

Beginning February 1, 2019, Louisiana elected to cover lawfully residing children up to age 19 under both Medicaid and LaCHIP. [MEM I-316](#); [CHIP State Plan Approval \(SPA\) LA 19-0010](#). Section 214 of Children's Health Insurance Program Reauthorization Act (CHIPRA) amends section 2107 of the Social Security Act to grant states the option to provide coverage to children who are lawfully residing in the United States and who are otherwise eligible for such assistance, as described in section 1903 of the Act. This includes children with “temporary resident status,” “temporary protected status,” “deferred enforced departure,” or “deferred action status.” See [MEM I-316](#) which provides:

A child shall be considered lawfully present if he or she is:...

- A non-citizen who belongs to one of the following classes:
 - Non-citizens currently in temporary resident status pursuant to section 210 or 245A of the INA (8 U.S.C. §§1160 or 1255a, respectively);
 - Non-citizens currently under Temporary Protected Status (TPS) pursuant to section 244 of the INA (8 U.S.C. §1254a), and pending applicants for TPS who have been granted employment authorization;...
 - Non-citizens currently under Deferred Enforced Departure (DED) pursuant to a decision made by the President;
 - Non-citizens currently in deferred action status; ...

The CHIPRA option allows more immigrant children to *be eligible for Medicaid and CHIP programs*. Certain statuses in LaMEDS (*i.e.*, Deferred Action Status, Deferred Enforced Department, Temporary Protected Status, or Temporary Worker/Temporary Resident Status) are programmed as “allowable immigration statuses” for individuals under 19 because of the CHIPRA 214 option.

LDH’s **Table 3A-1** reflects the number of individuals (**1297**) receiving Medicaid/CHIP as of June 30, 2025 with a legal status currently in LaMEDS that may qualify as an “illegal alien” based upon state law definition in La. R.S. § 49:1513(3) that includes those lawfully present pursuant to an exercise of administrative grace or prosecutorial discretion.

Table 3A-1	
IMMIGRATION/CITIZENSHIP STATUS	Count
Deferred Action Status	544
Deferred Enforced Departure	2
Temporary Protected Status	33
Temporary Worker/Temporary Resident Status and his/her children	718
Total	1297

LDH’s **Table 3A-2** reflects those same individuals’ (1297) respective Medicaid or CHIP programs as of June 30, 2025.

Table 3A-2				
Type of Assistance	Deferred Action Status	Deferred Enforced Departure	Temporary Protected Status	Temporary Worker/Temporary Resident Status and his/her children
ACA Adult Expansion	3	0	3	19
Act 421 Children’s Medicaid Option (TEFRA)	0	0	2	1
CHAMP Child	372	1	8	388
CHAMP Pregnant Woman	2	0	2	1
Express Lane Eligibility	28	1	1	31
Emergency Medical Services (EMS)	12	0	3	25
LaCHIP	72	0	5	69
LaCHIP Phase 2 and 3	19	0	5	52
LaCHIP Phase IV - Prenatal Care	36	0	4	129
Parent/Caretaker Relative	0	0	0	1
Provisional Medicaid	0	0	0	1
Transitional Medicaid	0	0	0	1
Total	544	2	33	718

Clarifications for **Table 3A-2**:

- **27** of the **28** individuals in **Table 3A-2** who enrolled in non-child groups (i.e., Adult Group, Parent/Caretaker Relative, Provisional Medicaid, and Transitional Medicaid) have since been closed. The 1 individual enrolled in Adult Group with a “Temporary Worker/Temporary Resident Status and his/her children” status is pending verification for citizenship or satisfactory immigration status; that individual has until 4/27/2026 to prove citizenship/satisfactory immigration status or else his Medicaid case will close.
- **2** of the **3** children in **Table 3A-2** enrolled in TEFRA have closed. At the time of this report, the 1 child remaining in TEFRA **Table 3A-2** with a “Temporary Worker/Temporary Resident Status and his/her children” status remains enrolled in TEFRA due to the state’s CHIPRA 214 option to cover lawfully residing children in Medicaid/CHIP programs.

Table 3A-3 shows that **687** of the **1297** individuals reflected in **Table 3A-1** and **Table 3A-2** have since been closed from Medicaid or CHIP between June 30, 2025 and February of 2026.

Table 3A-3 Closures	
IMMIGRATION STATUS	Count
Deferred Action Status	243
Deferred Enforced Departure	0
Temporary Protected Status	23
Temporary Worker/Temporary Resident Status and his/her children	421
TOTAL	687

(2) UNVERIFIABLE GROUP: Those individuals who failed to prove citizenship or satisfactory immigration status for purpose of Medicaid or CHIP eligibility may qualify as “illegal aliens” or “unaccompanied minor children.”

If an individual fails to satisfy or prove the citizenship or satisfactory immigration status requirement for purposes of Medicaid or CHIP eligibility, LDH denies or closes the Medicaid case for failure to satisfy an eligibility factor. LDH does not make a final determination as to the individual’s immigration status, unless LDH receives verification from the proper authorities, such as a finding of unlawful presence determined by U.S. Citizenship and Immigration Services (USCIS) or the Executive Office of Immigration Review (EOIR) under the U.S. Department of Justice. Therefore, while persons in these three legal statuses in LaMEDS—**Undocumented Aliens, Unanswered, Unknown**—may potentially qualify as “illegal aliens” or “unaccompanied minor children,” as defined by La. R.S. § 49:1513, LDH cannot confirm with certainty their immigration or citizenship status due to the lack of verification available.

LDH’s **Table 3B-1** reflects the number of individuals (**3,914**) receiving Medicaid/CHIP as of June 30, 2025 with a legal status currently in LaMEDS of “Unanswered,” “Undocumented Alien,” or “Unknown,” who may qualify as “illegal alien” or “unaccompanied minor child.”

Table 3B-1	
Immigration Status	Count
Unanswered	728
Undocumented Aliens	3,002
Citizenship Status	
Unknown	184
TOTAL	3,914

LDH’s **Table 3B-2** reflects those same individuals’ (**3914**) respective Medicaid or CHIP programs as of June 30, 2025.

Table 3B-2			
Type of Assistance	Unanswered	Undocumented Alien	Unknown
Category O Medicaid	0	30	1
Long Term Care	0	1	0
Emergency Medical Services (EMS)	3	152	0
LaCHIP Affordable Plan	5	2	0
Parent/Caretaker Relative	7	10	2
Category I Medicaid	0	11	0
Qualified Individuals	0	1	1
CHAMP Pregnant Women	84	72	1
Deemed Eligible Child	0	4	10
LaCHIP Phase IV - Prenatal Care	8	2168	1
Medicaid Purchase Plan	1	0	0
LaCHIP	5	40	0
LaCHIP Phase 2 and 3	23	24	0
Express Lane Eligibility (ELE)	18	93	140
Supplemental Security Income	1	0	2
Transitional Medicaid	1	2	0
Former Foster Care Children	0	1	0
Provisional Medicaid	5	7	1
Qualified Medicare Beneficiary	0	2	1
Category F Medicaid	2	8	0
ACA Adult Expansion	335	119	14
CHAMP Child	224	244	7
Category C Medicaid	0	1	0
Take Charge Plus	6	10	3
Total	728	3002	184

Table 3B-3 shows that 3,443 of the 3,914 individuals reflected in Table 3B-1 and Table 3B-2 have since been closed from Medicaid or CHIP between June 30, 2025 and February of 2026.

Table 3B-3 Closures

IMMIGRATION/CITIZENSHIP STATUS	Count
Unanswered	565
Undocumented Aliens	2,762
Citizenship Status	
Unknown	116
TOTAL	3,443

467 of the **3,914** individuals reflected in **Table 3B-1** and **Table 3B-2** remain open as of February 2026:

- **159** of **467** are in LaCHIP Phase IV or Emergency Medical Services (EMS).
- **100** of **467** were determined eligible for Medicaid through Express Lane Eligibility and their receipt of Supplemental Nutrition Assistance Program (SNAP) benefits.
- **55** of **467** were determined eligible for Medicaid’s Adult Group by the Federally Facilitated Marketplace (FFM).
- **26** of **467** were determined eligible for Medicaid by the Department of Children & Family Services (DCFS) and remain in either Office of Juvenile Justice (OJJ) or DCFS custody.
- **1** of **467** were determined eligible for Medicaid by SSA due to their receipt of Supplemental Security Income (SSI).
- The other **126** of **467** are either pending closure in appeal status or pending verification of citizenship or immigration status through a 2025 oversight initiative with CMS. See “CMS Launches Nationwide Push to Remove Ineligible Medicaid Enrollees, Uphold Citizenship Requirements,” dated August 19, 2025, and available online at: <https://www.cms.gov/newsroom/press-releases/cms-launches-nationwide-push-remove-ineligible-medicaid-enrollees-uphold-citizenship-requirements>.

(3) Additional Clarifications for Section I(D):

(a) The Reasonable Opportunity Period.

The Reasonable Opportunity Period (ROP) is a temporary eligibility window that allows certain applicants to receive Medicaid or CHIP while they are given time to resolve or provide documentation for immigration or citizenship status. The Louisiana Medicaid State Plan at [S89 - Non-Financial Eligibility Citizenship and Non-citizen Eligibility](#) explains that Louisiana “provides Medicaid to citizens and nationals of the United States and certain non-citizens who meet all other Medicaid eligibility requirements under the state plan, consistent with requirements of 42 CFR 435.406, including during a reasonable opportunity period pending verification of their citizenship, national status or satisfactory immigration status.” See also [CHIP State Plan Approval \(SPA\) LA 19-0010](#). If, at the end of the ROP, which lasts 90 days, they are determined to be a non-citizen in a non-satisfactory status, the state must terminate coverage prospectively.

(b) Emergency Medical Services (EMS) and LaChip Phase IV

Some individuals who may qualify as “illegal aliens” or “unaccompanied minor children” are still eligible for limited Medicaid programs, such as EMS or LaChip Phase IV, as permitted by federal and state law.

Under federal law, beneficiaries who receive limited Medicaid coverage through the *Emergency Medical Services* Program (often called “Emergency Medicaid”) do *not* have to be U.S. citizens or qualified non-citizens to get that emergency-only coverage. Some non-qualified citizens are certified for EMS, but only during the emergency, if the individual has, after sudden onset, a medical condition manifesting itself by acute symptoms of sufficient severity (including severe pain) such that the absence of immediate medical attention could reasonably be expected to result in:

- Placing the patient's health in serious jeopardy;
- Serious impairment to bodily functions; or
- Serious dysfunction of any bodily organ or part.

EMS limited coverage applies only to the treatment for emergency medical conditions. Once the emergency is over, coverage ends. See [MEM I-315](#).

Additionally, LaCHIP Phase IV is part of Louisiana’s State CHIP under federal law (Title XXI of the Social Security Act). It is an optional program that the State elects to operate. Most states, including Louisiana, use this “unborn child” option, which means:

- The fetus is treated as the Medicaid beneficiary;
- Immigration status of the pregnant person is irrelevant; and
- Prenatal care, labor, and delivery are covered.

LaCHIP Phase IV provides coverage to **both citizens and non-citizens** pregnant women under 19 who are not otherwise qualified for other Medicaid programs. Reference 50 LAC Pt III, § 2327(E)(4); [MEM H-3050 LaCHIP Phase IV](#). Citizenship, non-citizen status, and Social Security number enumeration are not eligibility requirements for LaCHIP Phase IV prenatal coverage. *Id.*

(c) DCFS, not LDH, determines Medicaid and CHIP eligibility for certain populations, such as foster care children.

(d) Express lane eligibility (ELE) uses data other state agencies have already collected to make eligibility decisions for Medicaid or CHIP.

(e) Effective October 1, 2025, Louisiana no longer accepts eligibility determinations from the Federally-Facilitated Marketplace (FFM).

E. Total Dollar Amount of Benefits Provided to Non-Citizens Who May Qualify as “Illegal Aliens” or “Unaccompanied Alien Children” for State Fiscal year 2024-2025 (July 1, 2024 through June 30, 2025)

Table 4 reflects the aggregate dollar amounts reported by Gainwell, LDH’s fiscal intermediary, and verified by LDH’s Business Analytics, of Medicaid/CHIP benefits provided to individuals with current legal statuses in LaMEDS that may qualify as “illegal alien” or “unaccompanied minor child.” This table only reflects those individuals who had claims or PMPM payments for the 2024-2025 SFY. The data reflects the amount LDH paid in SFY 24-25 for:

1. claims for fee-for-service (FFS) beneficiaries with these legal statuses; and
2. per member per month (PMPM) payments for beneficiaries in the MCO population with these legal statuses.

As clarified above, some individuals may fall under the state definition of “illegal alien” or “unaccompanied minor child” and remain eligible for coverage because they are in a reasonable opportunity period, are enrolled in a limited program (e.g., EMS or LaCHIP Phase IV), or receive Medicaid/CHIP coverage because of the CHIPRA 214 option. Additionally, for those with legal statuses of “unanswered,” “undocumented alien,” or “unknown,” LDH cannot confirm with certainty that those individuals are in fact “illegal aliens” or “unaccompanied minor children.” Out of an abundance of caution, LDH reports the dollar amounts for those individuals in **Table 4**. As clarified above in Section 1, the data pull includes those individuals who were open ongoing in Medicaid or CHIP as of 6/30/2025; however, the legal status reflected for each individual in this report is their *legal status as of the date of LDH’s data pull in February 2026*. Therefore, it is possible that the individuals in this data pull had a different citizenship or immigration status listed in LaMEDS on 6/30/2025 when compared to February 2026.

TABLE 4 - LDH BA DATA	Sum of PMPM Spend \$	Sum of FFS Spend \$	Grand Total
GROUP 1 (Item B) TOTAL	\$ 4,464,751.12	\$ 4,042,813.61	\$ 8,507,564.73
Unanswered	\$ 1,252,030.85	\$ 3,898.50	\$ 1,255,929.35
Undocumented Alien	\$ 2,884,853.95	\$ 4,037,588.81	\$ 6,922,442.76
Unknown	\$ 327,866.32	\$ 1,326.30	\$ 329,192.62
GROUP 2 (Item D) TOTAL	\$ 1,570,720.40	\$ 137,805.83	\$ 1,708,526.23
Deferred Action Status	\$ 675,102.17	\$ 23,754.15	\$ 698,856.32
Deferred Enforced Departure	\$ 3,307.53	\$ -	\$ 3,307.53
Temporary Protected Status	\$ 41,903.27	\$ 36,330.25	\$ 78,233.52
Temporary Worker/Temporary Resident Status and	\$ 850,407.43	\$ 77,721.43	\$ 928,128.86
Grand Total	\$ 6,035,471.52	\$ 4,180,619.44	\$ 10,216,090.96

F. Annual Report required by La. R.S. 46:233.4

La. R.S. § 46:233.4(C) requires:

Upon the termination of any reasonable opportunity period to verify citizenship status or receipt of a final verification that indicates that the applicant is not a United States citizen or lacks satisfactory immigration status and has entered the United States without inspection or admission or remained beyond the expiration of his authorized period of stay, the state agency or political subdivision shall:

- (1) Refer the applicant's information, including unsatisfactory immigration status, to United States Immigration and Customs Enforcement.
- (2) Provide a monthly report compiling the information pursuant to Paragraph (1) of this Subsection to the secretary of state for voter list maintenance purposes.
- (3) Terminate any recurring federal, state, or local public benefits as defined in Subsection E of this Section.

La. R.S. § 46:233.4(D) then requires LDH to submit a corresponding report on the results of these efforts:

A state agency or political subdivision that administers federal or state public benefits shall report at the end of each fiscal year to the president of the Senate, speaker of the House of Representatives, governor, and David R. Poynter Legislative Research Library on the results of the citizenship verification requirements of this Section. The report shall include but not be limited to the number of individuals reported to United States Immigration and Customs Enforcement and the number of individuals who had public assistance terminated in accordance with this Section.

(1) LDH REPORTING UPON THE TERMINATION OF THE REASONABLE OPPORTUNITY PERIOD:

Upon the termination of any reasonable opportunity period to verify citizenship status, LDH does not refer the applicant's information, including a *potential* unsatisfactory immigration status, to United States Immigration and Customs Enforcement (ICE) or the Secretary of State because this is prohibited by federal law. LDH, as the State Medicaid Agency, is subject to compliance with federal law, including HIPAA and the Medicaid Act, which limits when disclosures of applicant or beneficiary information is permitted to third parties. Under federal law, LDH may only disclose an applicant or beneficiary's information, without their consent, in limited circumstances. For example:

- HIPAA allows limited disclosures for federal investigations or law enforcement purposes. 45 C.F.R. § 164.512(f) lists permitted disclosures. Notably, immigration related matters or voter registration purposes are not listed as permitted disclosures under HIPAA.
- Federal Medicaid law generally restricts the use and disclosure of information collected for eligibility purposes to the administration of the Medicaid and CHIP programs themselves. Specifically, the Medicaid Act provides that States must have safeguards restricting the use or disclosure of information "except for purposes directly connected with the administration of the plan." 42 U.S.C. § 1396a(a)(7); 42 CFR § 431.300 to § 431.307. Purposes directly related to plan administration include "conducting or assisting an investigation, prosecution, or civil or criminal proceeding related to the administration of the plan." 42 C.F.R. § 431.302(d). **NOTE:** If there was a formal proceeding or investigation, LDH could disclose the Medicaid or CHIP applicant's or beneficiary's information once requested by the appropriate authorities.

Additionally, LDH is prohibited under state law from releasing identifying applicant/beneficiary information without proper authorization per [La. R.S. 46:56](#). As previously discussed, Medicaid can only disclose this information to ICE in limited circumstances permitted

by law, such as when Medicaid has verification from USCIS that a Medicaid applicant/beneficiary is not lawfully present. Notably, [La. R.S. 49:1515\(C\)](#) further recognizes the supremacy of federal law and LDH’s authority to comply with “all other laws applicable to confidentiality and privacy of the information gathered” in producing reports to legislature related to public assistance programs and immigration.

In sum, if after a reasonable opportunity period, the citizenship or satisfactory immigration status still cannot be verified, the applicant’s eligibility for full Medicaid/CHIP ends or reverts to limited coverage, but that does not automatically allow LDH to report the applicant to immigration authorities or the Secretary of State. Medicaid cannot disclose applicants or beneficiaries to third parties, like ICE or the Secretary of State, due to the applicable HIPAA and Medicaid Act disclosure laws discussed above, unless an exception under the law permits the disclosure.

It is also important to acknowledge that the federal SAVE system (i.e., a federal data source that LDH checks to verify immigration status) does not alert the Medicaid case worker if someone is “an undocumented alien.” Instead, a SAVE search may result in SAVE having no record of the individual. LDH has not interpreted the SAVE system response showing no record on a person, or an immigration status making the person ineligible for Medicaid/CHIP benefits as a finding of fact or conclusion of law that the person is not lawfully present.

(2) LDH REPORTING UPON RECEIPT OF FINAL VERIFICATION THAT APPLICANT IS NOT LAWFULLY PRESENT:

If LDH receives final verification from USCIS that indicates that a Medicaid or CHIP individual is not a United States citizen or lacks satisfactory immigration status and has entered the United States without inspection or admission or remained beyond the expiration of his authorized period of stay, LDH will refer the applicant to ICE.

As explained above, LDH does not currently report immigration information received during the Medicaid or CHIP eligibility process to the Secretary of State (SOS) so as not to violate HIPAA laws regarding permitted disclosures or Medicaid’s confidentiality laws. Additionally such a report by LDH pertaining to individuals who the State was unable to verify as lawfully present for purposes of Medicaid or CHIP eligibility may violate Section 8 of the National Voter Registration Act of 1993 (NVRA), 52 U.S.C. § 20507. If LDH received federal guidance from CMS permitting such disclosures of Medicaid/CHIP information, LDH would follow CMS guidance.

(3) TERMINATION OF MEDICAID/CHIP COVERAGE

LDH is actively taking action on the Medicaid or CHIP cases where an individual has failed to prove citizenship or a satisfactory immigration status. Reference **Table 3A-3** and **Table 3B-3** for Medicaid/CHIP closures for certain non-citizens who had coverage June 30, 2025 but were closed as of February 2026:

- **Table 3A-3** shows **687** of the **1297** individuals who had Medicaid or CHIP on June 30, 2025 and who are currently listed in LaMEDS with a status of “temporary resident status,”

“temporary protected status,” “deferred enforced departure,” or “deferred action status,” have since been closed as of February 2026.

- **Table 3B-3** shows that **3,443** of the **3,914** individuals who had Medicaid or CHIP on June 30, 2025 and who are currently listed in LaMEDS with a status of “unknown,” “undocumented alien,” or “unanswered,” have since been closed from Medicaid or CHIP as of February 2026.

(4) NUMBER OF INDIVIDUALS REPORTED OR CLOSED

La. R.S. § 46:233.4(D) requires LDH’s annual report to include the number of individuals reported to ICE and the number of individuals who had public assistance terminated in accordance with this Section, effective August 1, 2025.

It is important to note that because this Annual Report covers 2024-2025 SFY, **La. R.S. § 46:233.4(D) was not yet effective.** However, for transparency purposes, upon information and belief, LDH did not receive any final verification regarding a Medicaid/CHIP applicant’s unlawful presence in the United States during 2024-2025 SFY. Therefore, LDH did not report any Medicaid/CHIP applicants to ICE during the 2024-2025 SFY. For the number of certain non-citizens terminated from Medicaid/CHIP between June 30, 2025 and February 2026, please refer to **Table 3A-3** and **Table 3B-3**.

Section 2 – LDH - HEALTH STANDARDS SECTION

Pursuant to Act 419 (which enacted [LA. R.S. 49:1511](#) et. seq.), LDH is now required to determine the legal status of individuals receiving state services and benefits from the agency, and to ascertain the extent to which state services and benefits are provided to aliens categorized as "illegal aliens" or "unaccompanied alien children." In accordance with [LA. R.S. 49:1513](#), "state services and benefits" means all services and benefits provided by the LDHincluding healthcare, ... (and) licenses.

LDH’s Health Standards Section (HSS) is responsible for licensing all Louisiana healthcare facilities that are subject to licensing statutes, as well as the issuance of Certified Nurse Aide (CNA) certifications. Louisiana healthcare facilities are largely owned by juridical entities, and not individual persons. As such, Act 419 would apply only to LDH’s Health Standards Section’s processing of CNA certifications.

While this Annual Report covers July 1, 2024 through June 30, 2025 (and Act 419 was not yet effective), in accordance with [La. R.S. 40: 2120.52](#) LDH Health Standards Section is the Louisiana state authorized agency responsible for issuing certification and registry to Certified Nurse Aide’s (CNA) in order for CNAs to provide nursing assistant services. An individual is not authorized to have the federal benefit of working as a CNA without being certified through the LDH. The CNA certification issued by the LDH is a licensing services and benefit requiring verification of CNA legal status pursuant to [LA. R.S. 49:1511 et. seq.](#) effective June 20, 2025.

Subject to [La. R.S. 49:1516](#) LDH-Health Standards has taken steps to implement a standardized process for verifying the legal status of individuals seeking state services. LDH-Health Standards Section will utilize

the SAVE system as its process for verifying legal status of individuals applicants for CNA certification and registry.

Section 401 of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 - PRWORA (8 U.S.C. § 1611(a)) restricts non-qualified aliens from receiving federal public benefits. PRWORA defines "federal public benefit" broadly to include any ...professional license [such as a CNA certification]... provided by an agency of the United States or by appropriated funds of the United States. Under 8 U.S.C. 1611(a), individuals who are **not** "qualified aliens" (those with authorized, legal, or temporary lawful presence) are ineligible for these benefits. While PRWORA states that only citizens and qualified aliens are eligible to receive federal public benefits, and requires reporting to immigration authorities when agencies know an individual is in the U.S. unlawfully (Section 404), it does not expressly issue a directive to revoke existing professional licenses, such as the CNA certification.

If SAVE does not confirm legal status/presence of the CNA, the LDH Health Standards Section will request additional documentation from the CNA (i.e. birth cert, passport, visa) to confirm legal presence. If this is not provided, then the CNA certification will expire on the expiration date. If legal documentation is provided within 2 years of previous work history as a CNA, then the certification may be able to continue within the 2-year certification period so long as there also continues to be CNA work history. However, if more than 2 years lapses since the CNA last worked, the CNA will need to also retrain or re-test for CNA certification in addition to providing the appropriate legal documentation proving current legal presence. If a CNA has a temporary work visa, then HSS will flag those for follow-up to ensure documentation confirming continued legal status near the expiration of those temporary documents.

For any new applicants applying for CNA certification, LDH Health Standards Section is initiating rule revision to add a requirement that CNAs submit the satisfactory documentation showing legal status prior to issuance of CNA certification. Therefore, LDH Health Standards Section would place that obligation on the CNAs upon seeking certification.

Upon information and belief, Act 351 would not apply to the LDH Health Standards Section.

Section 3 – LDH – OFFICE OF SURGEON GENERAL

The responsibilities and duties of the Office of Surgeon General generally do not include processing applications for state services or benefits. The LDH Office of Surgeon General does supervise emergency preparation and operations; such emergency operations may include services provided at emergency transportation stations, emergency triage stations, and emergency shelters in the case of a hurricane, winter storm, or other declared emergency. Requiring proof of citizenship and/or legal status is not practical or reasonable considering the gravity of the assistance being provided and is counter to the underlying goals of LDH to provide emergency assistance in declared disasters. It is the opinion of LDH that Act 351 and Act 419 do not apply, and were never intended to apply, to the services provided by the LDH Office of Surgeon General.

Section 4 – LDH – OFFICE OF BEHAVIORAL HEALTH

The responsibilities and duties for the Office of Behavioral Health (OBH) generally do not include processing applications for state services or benefits or providing direct benefits. Rather, OBH relies on the Louisiana Medicaid Program to process Medicaid applications for recipients' Medicaid eligibility determinations for programs supervised or funded by OBH. Please see Section 1 above.

The Office of Behavioral Health does, however, fund certain programs such as the 988 Suicide Hotline and certain mobile crisis services. Because of the nature of the hotline and the crisis services, there is no application process for such services. Requiring proof of citizenship and/or legal status is not practical or reasonable considering the gravity of the assistance being provided and is counter to the underlying goals of LDH/OBH to provide such services. It is the opinion of LDH that Act 351 and Act 419 do not apply, and were never intended to apply, to these services provided by the Office of Behavioral Health.

OBH did not provide any state services or benefits to “illegal aliens” or “unaccompanied minors”, as defined in Act 341 and Act 419, for the reporting period of July 1, 2024 through June 30, 2025.

Section 5 – LDH – OFFICE FOR CITIZENS WITH DEVELOPMENTAL DISABILITIES

Most public benefits administered by the Office for Citizens with Developmental Disabilities (OCDD) require verification of citizenship or satisfactory immigration status through the Louisiana Medicaid Program. This is because eligibility for these benefits requires eligibility for Medicaid. Therefore, those programs do not collect any information related to citizenship or satisfactory immigration status outside of what Medicaid has already collected; thus, the same Medicaid confidentiality requirements, and applicable federal and state privacy laws, including HIPAA to the extent the information is maintained or disclosed by Medicaid, apply.

One program administered by OCDD is EarlySteps, a federally mandated early intervention program, under Part C of the Individuals with Disabilities Education Act (IDEA), 20 USC § 1431–1444, and implemented through 34 CFR Part 303. This program provides services to families with infants and toddlers from birth through age 2 (35 months) who have a medical condition likely to result in a developmental delay, or who have developmental delays. Medicaid eligibility is not a requirement of this program, so verification of citizenship or satisfactory legal status is not being collected independently by the program, though many EarlySteps recipients are also Medicaid recipients. Federal law requires the state to identify, evaluate, and provide early intervention services to all eligible infants and toddlers with disabilities residing in Louisiana, regardless of citizenship or immigration status (34 CFR § 303.111, 303.201). Neither IDEA nor its implementing regulations condition eligibility on citizenship or satisfactory immigration status. Therefore, LDH does not collect or verify citizenship or immigration status for EarlySteps eligibility.

Although EarlySteps is a state service or benefit under Louisiana's Act 419, it is not a federal public benefit under PRWORA. The federal statutory definition of “federal public benefit” (8 USC § 1611(c)(1)(A) – (B)) covers welfare-type benefits such as SNAP and Medicaid, not IDEA Part C early intervention services.

Disclosure of citizenship or immigration status is prohibited under 34 CFR § 303.414 without prior parental consent. IDEA confidentiality rules incorporate the Family Educational Rights and Privacy Act (FERPA) exceptions (34 CFR § 99.31), which may allow limited disclosures for audits, evaluations, or research using aggregate or de-identified data, but do not authorize reporting of identifiable information for immigration enforcement or state reporting requirements required by Act 351, which would be preempted by federal law. However, it does not appear that EarlySteps is prohibited per se, from collecting de-identified, aggregate citizenship or immigration status for state reporting purposes under the new laws.

Section 6 – LDH – OFFICE OF PUBLIC HEALTH

The LDH Office of Public Health (“OPH”) operates certain programs that fall within the mandates and reporting requirements of both Act 419 (2025 Regular Session) and Act 351 (2025 Regular Session; R.S. 46:233.4). Such programs include the Special Supplemental Nutrition Program for Women, Infants and Children (WIC), the Ryan White HIV/AIDS Program, and the Maternal, Infant, and Early Childhood Home Visiting Programs. Because the citizenship verification requirements of those Acts only became effective on 6/20/2025 (Act 419) and 8/01/2025 (Act 351), and because federal guidance from the U.S. Department of Health and Human Services regarding the application of the *Personal Responsibility and Work Opportunity Reconciliation Act of 1996* (“PRWORA”; 8 U.S.C. 1611, et seq.) to certain affected OPH programs only recently changed (see 90 FR 31232; July 14, 2025), OPH has no data to report for the reporting period of July 1, 2024 through June 30, 2025.

After extensive legal research concerning possible federal law impediments to compliance with certain provisions of Acts 419 and 351, LDH has determined that full compliance therewith is legally permissible (i.e. there are no federal law conflicts) for affected OPH programs except for the Ryan White HIV/AIDS Program, *eligibility* for which cannot be conditioned upon citizenship/immigration status pursuant to PRWORA’s §1611(b)(1)(C), which exempts federal public benefits for the treatment of communicable diseases from PRWORA’s citizenship or qualified alien requirement. OPH is in the process of implementing compliance procedures across all OPH programs affected by Acts 419 and 351, including “implement[ing] a standardized process for verifying the legal status of individuals seeking state services” as required by R.S. 49:1516(A).

Section 7 – LDH 24-HOUR STATE FACILITIES

The Louisiana Department of Health has six 24-hour state facilities that it operates, as noted below. Prior to Act 351 and Act 419 being enacted, none of the six facilities had a formal policy or procedure on verifying a client’s citizenship or legal immigration status. Instead, the facilities had an informal process to collect information and relied on the Louisiana Medicaid Program to process Medicaid applications for recipients’ Medicaid eligibility determinations for admission to the facilities, as follows:

A. Pinecrest Supports and Services Center (PSSC) and Central Louisiana Supports and Services Center (CLSSC):

These two state facilities are licensed and certified as Intermediate Care Facilities for people with developmental disabilities (ICF/DD). In order to be admitted to the ICF/DD, each client must have a Statement of Approval issued through the Office for Citizens with Developmental Disability. Services are covered by the Louisiana Medicaid Program; as such, these two ICF/DD facilities rely on the Louisiana Medicaid Program to process eligibility applications, including any required citizenship or immigration status verifications. Upon information and belief, neither PSSC nor CLSSC provided any state services or benefits to “illegal aliens” or “unaccompanied minors”, as defined in Act 341 and Act 419, for the reporting period of July 1, 2024 through June 30, 2025.

B. Villa Feliciano Medical Complex (Villa):

Villa is a licensed hospital with a large certified skilling nursing unit (certified for Medicare and Medicaid). Upon admission, if citizenship or payment source is unknown, Villa submits a Medicaid application for the resident; Villa relies on the Louisiana Medicaid Program to process eligibility applications, including any required citizenship or immigration status verification.

Upon information and belief, for the reporting period of July 1, 2024 through June 30, 2025, Villa provided services to four (4) residents that met the definition of “illegal alien” under Act 351 and At 419. These services included room and board, meals, medical, and direct care staff. The cost of these four (4) residents for this time period totaled \$307,745.00. Of these four residents, one was court-ordered to Villa for services.

C. State Psychiatric Hospitals

LDH operates Central Louisiana State Hospital (CLSH), as well as the Eastern Louisiana Mental Health Systems (ELMHS) which includes East Louisiana State Hospital and the Feliciano Forensic Facility.

All clients at CLSH are admitted either by Physician’s Emergency Certificate or Coroner’s Emergency Certificate (PEC/CEC) or civil commitment, or infrequently by formal voluntary admission (FVA). If a client admits to CLSH with no known Social Security number, CLSH will submit a request through Social Security. Additionally, CLSH relies on the Louisiana Medicaid Program to process Medicaid eligibility applications for eligible recipients. Upon information and belief, for the reporting period of July 1, 2024 through June 30, 2025, CLSH did not provide any services to clients that met the definition of “illegal alien” under Act 351 and At 419.

All clients at ELMHS are court ordered there. When a client is admitted to ELMHS, regardless of legal status, ELMHS sends a notification letter to the Social Security Administration (SSA) advising them of the admission. Additionally, during completion of the psychosocial assessment, a client may report that they currently have or previously had a green card. This information is documented in the assessment, and if the client is to be discharged to the community, ELMHS attempts to locate the documentation for discharge planning purposes. Occasionally, a client admits with citizenship documentation already in hand; however, this is the exception rather than the norm.

For clients that will be discharged to the community, social workers apply for a Social Security card if one is not already on file. This is necessary to obtain a birth certificate and state ID, both of which are required prior to discharge. This process is not completed for clients ordered to

ELMHS for competency restoration, as they typically do not remain hospitalized long enough and do not require Social Security cards to return to jail.

Citizenship issues most often arise during discharge planning, particularly when attempting to place a client in the community. Aftercare appointments cannot be secured without valid identification and/or a Social Security card.

During the reporting period of July 1, 2024 through June 30, 2025, ELMHS had 13 clients whose social security numbers could not be verified. This is the only verification that ELMHS conducted for citizenship purposes. Out of an abundance of caution, they are including them in this report. The cost to ELMHS to provide services to these clients was \$1,007,760.95. The services included room and board, meals, medical, and direct care staff.

Pursuant to the requirements of Act 351 and Act 419, the LDH 24-hour state facilities are instituting a new formal policy regarding verification of citizenship and legal immigration status.

Section 8 – LDH – OFFICE OF ADULT AND AGING SERVICES

Most public benefits administered by the Office of Aging and Adult Services (OAAS) require verification of citizenship or satisfactory immigration status through the Louisiana Medicaid Program. This is because eligibility for these benefits requires eligibility for Medicaid. Therefore, those programs do not collect any information related to citizenship or satisfactory immigration status outside of what Medicaid has already collected; thus, the same Medicaid confidentiality requirements, and applicable federal and state privacy laws, including HIPAA to the extent the information is maintained or disclosed by Medicaid, apply.

However, there are some programs within OAAS that do not require this verification. For instance, the State Personal Assistance Services (SPAS) Program (established under La. R.S. 46:2116 et seq.) and the Traumatic Brain and Spinal Cord Injury (TBSCI) Program (created under La. R.S. 2631 et seq.), do not require eligibility for Medicaid. These programs are operated by OAAS, and the enabling statutes and rules promulgated to administer these programs do not require that the recipient be a citizen or have a satisfactory immigration status. Compliance with these Acts would require further amendment of the enabling statute or rule to require citizenship or satisfactory immigration status as an eligibility criterion for these programs, given the confidentiality provisions of La. R.S. 46:56(A), which reads as follows:

Applications for assistance and information contained in case records of clients of the Louisiana Department of Health, the Department of Children and Family Services, or the office of elderly affairs, for the purpose of adult protective services, shall be confidential and, except as otherwise provided, it shall be unlawful for any person to solicit, disclose, receive, make use of, or to authorize, knowingly permit, participate in, or acquiesce in the use of applications or client case records or the information contained therein for any purpose not directly connected with the administration of the programs of the department.

Section 9 – LDH – ECONOMIC STABILITY / SNAP SERVICES

On October 1, 2025, several programs that were previously administered by the Department of Children and Family Services (DCFS) were transferred to the Louisiana Department of Health (LDH). This transition, known as the One Door initiative, transferred the Supplemental Nutritional Assistance Program (SNAP) and several other programs that are federally funded under the Temporary Assistance to Needy Families (TANF) block grant. These programs include the Family Independence Temporary Assistance Program (FITAP) and Kinship Care Subsidy Program (KCSP). These programs are broadly referred to as the Economic Stability (ES) programs. Below is a summary of the public benefits that are administered under these programs as it relates to the citizenship and satisfactory immigration status of applicants and recipients for these programs.

Verification of citizenship or satisfactory immigration status for the SNAP, FITAP, and KCSP programs is conducted using the Systematic Alien Verification of Entitlements (SAVE) service administered by the United States Citizenship and Immigration Customs Enforcement (USICE).

Summary of Recipients and Legal Status (SFY 24-25)

Program	Total recipients	Verified U.S. citizens/nationals	Satisfactory immigration status (non-citizens)	“Illegal alien” (as defined)	“Unaccompanied alien children”
SNAP	1,076,222	1,068,219	8,003	0	0
FITAP	16,725	16,650	75	0	0
KCSP	4,298	4,296	2	0	0

Total Dollar Value of Services by Legal Status (SFY 24-25)

Legal status category	Total annual benefit cost (\$)
Verified U.S. citizens / nationals	\$ 1,845,172,544.19
Satisfactory immigration status	\$ 63,444,675.52
“Illegal aliens”	\$0
“Unaccompanied alien children”	\$0

Total Dollar Value of Services by Legal Status (SFY 24-25)

Program	Citizens/ nationals (\$)	Satisfactory immigration status (\$)	“Illegal aliens” (\$)	“Unaccompanied alien children” (\$)
SNAP	\$ 1,812,360,121.88	\$ 63,197,694.52	\$0	\$0
FITAP	\$ 16,194,497.31	\$ 203,871.00	\$0	\$0
KCSP	\$ 16,617,925.00	\$ 43,110.00	\$0	\$0

Total Applicants Citizenship or Legal Status Verified (August 2025-November 2025)

Program	Unable to Verify
SNAP	1,135
FITAP	0
KCSP	0

Section 10 – LDH – DISABILITY DETERMINATIONS SECTION

In October 2025, the Disability Determinations Program was transferred to LDH as part of the One Door transition. This program does not collect or verify citizenship or immigration status, as this information is confirmed at the federal level by the Social Security Administration. Additionally, Disability Determinations Program only assesses whether an applicant meets the Social Security Administration’s definition of disability under federal law; the Social Security Administration handles the remainder of any application processing.

Louisiana Department of Health

628 N. 4th St., Baton Rouge, LA 70802

225-342-9500

ldh.la.gov

@ldepthealth

