### **Budget update**

- HB 1 (Representative Jack McFarland)
  - Included the nursing code and SC payments
    - Nursing code will require a waiver amendment, so we are working on getting the nursing code operationalized for January 1, 2026.
    - SC payments will require some additional planning, because we need to work with OAAS to operationalize – one time payment upon certification
- Federal budget updates in process of reviewing to determine impacts in future years, as many actions do not have effective date until 2027 or 2028

## Legislative update

- HB 559 (Rep Michael Echols)
  - LGE bill requires additional metrics, activities and reporting from the board to the department and legislators
  - Will be working with collaboratively on implementation of new requirements
- HB 595/Act 294 (Rep Tammy Phelps)
  - Adds a pathway to meet hospital level of care if within the last 12 months, the child has
    presented to the emergency room more frequently than 1x per month, and use of the
    hospital is medically necessary to stabilize the sickle cell anemia.
  - Will still have to meet SSI definitions/MEDT to qualify for TEFRA.
- HR 218 (Rep Michael Echols)
  - Directs the Louisiana Department of Health to coordinate with stakeholders (including The Arc) to explore the creation of an ISNP (Institutional Special Needs Plan).
  - There is some confusion here, we've been working on a technical assistance on Dual Medicare/Medicaid Eligibility for the disability community, and had conversations about Dual Eligibility Special Needs Plan but the resolution is specific to ISNP.
- HB 624 (Rep Stephanie Berault)
  - Moves SNAP and disability determination from the Department of Children and Family Services to LDH
  - o Creates "Louisiana Works" formerly the Louisiana Workforce Commission
  - These changes will take effect 10/1/2025, and will include employees moving from DCFS to LDH effective on that date.

### American Rescue Plan Act HCBS funds update

- American Rescue Plan Act of 2021 (ARPA): Activities have been approved by CMS for spending through Section 9817 of the American Rescue Plan Act through December 2025.
   OCDD has requested an extension for spending through September of 2026; however, no response from CMS has been received yet for this request.
- Highlights for some approved activities:
  - Infrastructure standup for Technology First Initiative
    - Issues with purchasing items has delayed implementation of demonstrations with LGEs, but continuing to pursue.

- Goal is to have informational materials available to help understand use of technology by December 2025.
- Implementation of Value Based Payment (VBP) model
  - Rolling out metrics in staggered manner
  - Payment for participation in NCI Staff Stability Survey active now through 7/31/2025
  - By end of July will roll out staff retention and technology grant activities
- System modernization to support an electronic individual support plan
  - The La Plus assessment is in process of testing.

# **Rate Methodology Study Update**

- Milliman is in process of consolidating all information. Next steps are to present information to LDH Executive Management Team, followed by public presentations with opportunities for feedback.
- o Anticipate public presentations to occur in August / September.

Act 421: Children's Medicaid option update: May 2025 Update

Total applications received in May	181
Number of applications denied	59
Failure to respond	22
Did not meet Level of Care	31
Did not pass MEDT	6
Number of applications approved	47
Number of applications withdrawn	1
Number currently enrolled in TEFRA	2,473

# **SUN screening update:** Current quarter data (April, 2025 – June 2025) Total administrations completed

Total daministrations completed	
Number of administrations by SUN score	Total
Score of 4, unmet needs at the Emergent level	180
Score of 3, unmet needs at the Urgent level	185
Score of 2, unmet needs at the Critical level	97
Score of 1, unmet needs at the Planning level	97
Score of 0, no identified unmet needs	398
Total	957

The table below indicates the totals for initial screenings and re-screenings.

Reason for Screening	Total
Initials	724
Re-Screenings	233
Total	957

Waiver offers are made to all individuals with a SUN score of 3 or 4, so no individual with current unmet needs is on the registry. As of June 30, 2025, the current total number of individuals listed in the DD Request for Services Registry (Registry) is 13,841.

# **Incontinence supplies limitations**

- New process / procedure code implemented 7/1/25, with training provided for SCs and providers.
- Allows for maximum flexibilities to order what is needed; if former product / budget already in plan and want new product, will require revision to CPOC – need to know that if choose higher cost product will reach budget cap sooner
- Will have product list from each provider for the SCs to use when talking with families this week.
- If issues / concerns, please escalate to your SC

## Families as Paid Caregivers - Numbers Approved, Problems, Observations

- 1,432 waiver participants have family as paid staff, as identified in LaSRS
- No systems-level problems or observations to report

### Provider annual audits received/not received - Fines

 Penalty of "5 percent of the total monthly payment for the first month and a progressive penalty of 5 percent of the total monthly payment for each succeeding month may be levied and withheld from the providers payment for each month that the cost report is due, not extended and not received" has been initiated.