



**State of Louisiana**  
Louisiana Department of Health  
Bureau of Health Services Financing

## MEMORANDUM

**DATE:** June 16, 2025

**TO:** Home and Community Based Waiver Providers

**FROM:** Louisiana Medicaid

**SUBJECT:** Waiver Spend-Down Patient Liability Income (PLI) Update

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Beginning July 1, 2025, Louisiana Medicaid will implement changes to how patient liability income (PLI) is applied to provider claims for long-term care healthcare services delivered by home and community based services (HCBS) waiver providers.

### **Louisiana Medicaid coverage for long-term care services**

Louisiana Medicaid provides coverage for long-term care (LTC) services for eligible beneficiaries in nursing facilities and home and community-based settings. However, Louisiana Medicaid does not always cover the full cost of LTC. In some cases, Medicaid beneficiaries are required to cover a portion of the cost of the services that Medicaid does not pay. This amount is the **patient liability income (PLI)** and it is owed by the beneficiary to the provider who delivers the care.

For more information, including an explanation of how PLI is determined, go to:  
[https://www.ldh.la.gov/assets/medicaid/ltc/PLI\\_Provider\\_Memo\\_06182024\\_FINAL.pdf](https://www.ldh.la.gov/assets/medicaid/ltc/PLI_Provider_Memo_06182024_FINAL.pdf).

### **What is changing for HCBS providers?**

Beginning July 1, 2025, Medicaid's fiscal intermediary, Gainwell, will now apply the PLI through claims processing. The provider's claims payment will be reduced until the beneficiary's monthly PLI amount is met. Only claims involving beneficiaries who owe PLI will be affected.

- When Gainwell adjusts a provider claim to account for the PLI amount, the explanation of benefits/remittance advice will be denoted with the 919 code (Medicaid allowable amount reduced by beneficiary spenddown).

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- The provider must collect the amount equal to the amount the claim is reduced from the beneficiary.

An example is provided on the following page of a remittance advice (RA) showing how PLI is applied to a claim.

If you have any questions regarding claims or billing, contact Gainwell Technologies Provider Relations department by phone at 1-800-473-2783 Monday through Friday from 8a.m. to 5 p.m. For other inquiries, Louisiana Medicaid LTC providers can submit questions through an online form at <https://ldh.la.gov/form/200>.

PROFESSIONAL REMITTANCE ADVICE  
LOUISIANA MEDICAL ASSISTANCE PROGRAM  
FISCAL AGENT - GWT  
PO BOX 3396  
BATON ROUGE LOUISIANA 70821

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**\*\*Please note the "PLI" column will be identified as deductions on your RA\*\***

APPROVED ORIGINAL CLAIMS

For these claims the PLI is \$599.00. You will see that the first 5 claims were reduced by the PLI resulting in a zero payment.

						billed	alwd	pli	paymt
	D	100124	100124	24 S5125 U1	ATTENDANT CARE	9425	9425	9425	00
				919					
		PA#							
	D	100124	100124	1 W7319	FINANCIAL MANAGEME	10588	10588	10588	00
				919					
		PA#							
	D	100524	100524	24 S5125 U1	ATTENDANT CARE	9393	9393	9393	00
				919					
		PA#							
	D	100624	100624	24 S5125 U1	ATTENDANT CARE	9425	9425	9425	00
				919					
		PA#							
	D	100724	100724	48 S5125 U1	ATTENDANT CARE	18849	18849	18849	00
				919					
		PA#							

This claim shows that \$22.20 was left after the first 5 claims processed which resulted in a payment of \$71.73

	D	100824	100824	24 S5125 U1	ATTENDANT CARE	9393	9393	2220	7173
				919					
		PA#							

These claims show a full payment since the pli has been exhausted

	D	101224	101224	24 S5125 U1	ATTENDANT CARE	9457	9457	00	9457
		PA#							
	D	101324	101324	24 S5125 U1	ATTENDANT CARE	9393	9393	00	9393
		PA#							
	D	101424	101424	48 S5125 U1	ATTENDANT CARE	18849	18849	00	18849
		PA#							
	D	101524	101524	24 S5125 U1	ATTENDANT CARE	9456	9456	00	9456
		PA#							
	D	101924	101924	24 S5125 U1	ATTENDANT CARE	9347	9347	00	9347
		PA#							
	D	102024	102024	24 S5125 U1	ATTENDANT CARE	9393	9393	00	9393