

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
Dallas Regional Office
1301 Young Street, Suite 833
Dallas, Texas 75202



DIVISION OF MEDICAID & CHILDREN'S HEALTH - REGION VI

February 12, 2014

Our Reference: SPA LA 13-56

Ms. Ruth Kennedy, State Medicaid Director
Department of Health and Hospitals
Bienville Building
628 North 4th Street
Post Office Box 91030
Baton Rouge, LA 70821-9030

Attn: Darlene Adams
Jodie Hebert

Dear Ms. Kennedy:

We have reviewed the proposed amendment to your Medicaid State Plan submitted under Transmittal Number 13-56. This SPA excludes all income when determining eligibility for pregnant minors.

Transmittal Number 13-56 is approved with an effective date of December 31, 2013 as requested. A copy of the HCFA-179, Transmittal No. 13-56 dated December 27, 2013 is enclosed along with the approved plan pages.

If you have any questions, please contact Ford Blunt III at: ford.blunt@cms.hhs.gov or by phone at (214) 767-6381.

Sincerely,

A handwritten signature in black ink that reads "Bill Brooks" followed by a small flourish.

Bill Brooks
Associate Regional Administrator

Enclosures

**TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL**

FOR: HEALTH CARE FINANCING ADMINISTRATION

1. TRANSMITTAL NUMBER:
13-56

2. STATE
Louisiana

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

TO: REGIONAL ADMINISTRATOR
HEALTH CARE FINANCING ADMINISTRATION
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE
December 31, 2013

5. TYPE OF PLAN MATERIAL (Check One):

- NEW STATE PLAN
 AMENDMENT TO BE CONSIDERED AS NEW PLAN
 AMENDMENT
 COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)

6. FEDERAL STATUTE/REGULATION CITATION:
Section 1902(r)(2) 42 CFR 435.222

7. FEDERAL BUDGET IMPACT:
FFY 2014 **\$0.0**
FFY 2015 **\$0.0**

8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:

Attachment 2.2-A, Page 13a
Supplement 1 to Attachment 2.2-A, Page 1
Supplement 8a to Attachment 2.6-A, Page 2

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 PAGE NUMBER OF THE SUPERSEDED PLAN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

Same (TN 91-23)
Same (TN 91-23)
None (New Page)

10. SUBJECT OF AMENDMENT: **The SPA proposes to exclude the income of parents or siblings of pregnant unmarried minor's (PUM) or pregnant minor unmarried mothers (MUM) when determining Medicaid eligibility for a pregnant PUM or MUM minors.**

11. GOVERNOR'S REVIEW (Check One):

- GOVERNOR'S OFFICE REPORTED NO COMMENT
 OTHER, AS SPECIFIED:
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED
The Governor does not review state plan material.
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

12. SIGNATURE OF STATE AGENCY OFFICIAL:

13. TYPED NAME:
Kathy H. Kliebert

14. TITLE:
Secretary

15. DATE SUBMITTED:
December 27, 2013

16. RETURN TO:

J. Ruth Kennedy, Medicaid Director
State of Louisiana
Department of Health and Hospitals
628 N. 4th Street
PO Box 91030
Baton Rouge, LA 70821-9030

FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED: **27 December, 2013**

18. DATE APPROVED: **12 February, 2014**

PLAN APPROVED - ONE COPY ATTACHED

19. EFFECTIVE DATE OF APPROVED MATERIAL:
31 December, 2013

20. SIGNATURE OF REGIONAL OFFICIAL:
Bill Bol Farrell for

21. TYPED NAME:
Bill Brooks

22. TITLE: **Associate Regional Administrator**
Division of Medicaid & Children's Health

23. REMARKS: **The State requests pen and ink changes to Blocks 6, 8, 9, and 10 as noted above.**

State: LOUISIANA

Agency* Citations Groups Covered

B. Optional Groups Others Than the Medically Needy

(Continued)

- X (5) Individuals receiving active treatment as inpatients in psychiatric facilities or programs (who are under the age of 18). Inpatient psychiatric services for individuals under age 18 are provided under this plan.
- X (6) Other defined groups (and ages), as specified in Supplement 1 of ATTACHMENT 2.2-A.

State: Louisiana
Date Received: 12/27/13
Date Approved: 2/12/14
Date Effective: 12/31/13
Transmittal Number: LA 13-56

TN# 13-56 Approval Date 2/12/14 Effective Date 12/31/13
Supersedes
TN# 91-23

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: LOUISIANA

REASONABLE CLASSIFICATION OF INDIVIDUALS UNDER THE AGE
OF 21, 20, 19 AND 18

42 CFR 435.222

Pregnant women under age 19.

State: Louisiana
Date Received: 12/27/13
Date Approved: 2/12/14
Date Effective: 12/31/13
Transmittal Number: LA 13-56

TN# 13-56 Approval Date 2/12/14 Effective Date 12/31/13
Supersedes
TN# 91-23

Revision: HCFA-PM-91-4 (BPD)
AUGUST 1991

SUPPLEMENT 8a to ATTACHMENT 2.6-A
Page 2
OMB No.: 0938-

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: LOUISIANA

MORE LIBERAL METHODS OF TREATING INCOME
UNDER SECTION 1902 (r) (2) OF THE ACT*

Section 1902 (f) State

Non-Section 1902 (f) State

All income is disregarded for the reasonable classification under 42 CFR 435.222 of pregnant women under the age of 19, as defined on Supplement 1 to Attachment 2.2-A Page 1.

State: Louisiana
Date Received: 12/27/13
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Transmittal Number: LA 13-56

TN# 13-56
Supersedes
TN# New Page

Approval Date 2/12/14

Effective Date 12/31/13