



State of Louisiana
Department of Health and Hospitals
Office of the Secretary

March 7, 2014

Bill Brooks
Associate Regional Administrator
Division of Medicaid & Children's Health
DHHS/Centers for Medicare and Medicaid Services
1301 Young Street, Room #833
Dallas, Texas 75202

Dear Mr. Brooks:

RE: Louisiana Title XIX State Plan
Transmittal No. 14-05

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.

Sincerely,


Kathy H. Kliebert
Secretary

Attachments (2)

STATE OF LOUISIANA

PAYMENTS FOR MEDICAL AND REMEDIAL CARE AND SERVICES

METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES - OTHER TYPES OF CARE OR SERVICES LISTED IN SECTION 1902 (A) OF THE ACT THAT ARE INCLUDED IN THE PROGRAM, UNDER THE PLAN ARE DESCRIBED AS FOLLOWS:

- Item 7.d. Physical therapy, occupational therapy, or speech pathology and audiology services provided by a home health agency.

The Medicaid Program provides reimbursement for physical therapy, occupational therapy and speech /language therapy covered under the Home Health Program.

Effective for dates of service on or after February 13, 2014, reimbursement for physical and occupational therapy services shall be 85 percent of the 2013 Medicare published rate. There shall be no automatic enhanced rate adjustment for physical and occupational therapy services.

Speech/language therapy services shall continue to be reimbursed at the flat fee in place as of February 13, 2014 and in accordance with the Medicaid published fee schedule for speech/language therapy services provided in the Home Health Program. The fee schedules can be found on the Louisiana Medicaid provider website at www.lamedicaid.com

Effective for services on or after July 21, 2010 for physical therapy, occupational therapy or speech-language therapy services provided in conjunction with the Pediatric Day Health Program, reimbursement is made pursuant to the methodology described on page 4.19-B, Item 4b, Page 5 under EPSDT – Pediatric Day Health Program.

TN# _____ Approval Date _____ Effective Date _____
Supersedes
TN# _____

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
MEDICAL ASSISTANCE PROGRAM

ATTACHMENT 4.19-B
Item 7, Page 4a

STATE OF LOUISIANA

PAYMENTS FOR MEDICAL AND REMEDIAL CARE AND SERVICES

METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES - OTHER TYPES OF CARE OR SERVICES LISTED IN SECTION 1902 (A) OF THE ACT THAT ARE INCLUDED IN THE PROGRAM, UNDER THE PLAN ARE DESCRIBED AS FOLLOWS:

RESERVED

TN# _____ Approval Date _____ Effective Date _____
Supersedes
TN# _____

LOUISIANA TITLE XIX STATE PLAN

TRANSMITTAL #: 14-05

TITLE: Rehab. Services in Home Health—OT & PT Rate Increase

EFFECTIVE DATE: February 13, 2014

FISCAL IMPACT:

Increase

	year	% inc.	fed. match	# mos	range of mos.	dollars
1st SFY	2014		62.11%	4.5	February 13, 2014 - June 2014	\$2,535
2nd SFY	2015	3.0%	62.05%	12	July 2014 - June 2015	\$6,963
3rd SFY	2016	3.0%	62.05%	12	July 2015 - June 2016	\$7,172

*#mos-Months remaining in fiscal year

Total Decrease in Cost FFY 2014

SFY 2014 \$2,535 for 4.5 months February 13, 2014 - June 2014 \$2,535

SFY 2015 \$6,963 for 12 months July 2014 - June 2015
 \$6,963 / 12 X 3 = July 2014 - September 2014 = \$1,741
\$4,276

FFP (FFY 2014) = \$4,276 X 62.11% = \$2,656

Total Decrease in Cost FFY 2015

SFY 2015 \$6,963 for 12 months July 2014 - June 2015
 \$6,963 / 12 X 9 = October 2014 - June 2015 = \$5,222

SFY 2016 \$7,172 for 12 months July 2015 - June 2016
 \$7,172 / 12 X 3 = July 2015 - September 2015 = \$1,793
\$7,015

FFP (FFY 2015) = \$7,015 X 62.05% = \$4,353