



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

December 21, 2015

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. 15-0017**

I have reviewed and approved the enclosed Louisiana Title XIX State Plan material.

I recommend this material for removal from the body of the State Plan.

Sincerely,

A handwritten signature in blue ink, appearing to read "Kathy H. Kliebert".

Kathy H. Kliebert
Secretary

Attachment (2)

KHK:WJR:JH

Transition Plan for §1915(i) Behavioral Health Services State Plan Recipients Moving to Traditional Medicaid State Plan Services

Reference: LA SPA TN 15-0017 §1915(i) Behavioral Health Services Termination

Proposed Program Changes

The Louisiana Department of Health and Hospitals provides specialized behavioral health services under the authority of a §1915(b) waiver, §1915(c) waiver, and a §1915(i) State Plan amendment (SPA). However, effective December 1, 2015 the Department proposes to change its behavioral health services implementation model in order to transition from a single prepaid inpatient health plan (PIHP) to an integrated behavioral and physical health model which will be administered by five Bayou Health managed care organizations.

The State recently submitted waiver amendments to the U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services (CMS) for the §1915(b) and §1915(c) waivers and the §1932(a) State Plan governing managed care provisions to implement the integration of behavioral health and physical health. The State will also submit a SPA to CMS requesting the termination of behavioral health services covered under the §1915(i) State Plan authority, and to include these same services as covered services under the “traditional” Medicaid State Plan services option.

Services provided by licensed mental health practitioners (LMHPs) and mental health rehabilitation services would be expanded to meet the needs of a larger population of adults and increase the use of community-based treatment.

The eligibility criteria for the currently approved §1915(i) behavioral health services requires Medicaid eligible adults over 21 years of age to meet more stringent criteria to access these services. The proposed amendments will reduce the functional criteria as measured by the Level of Care Utilization System (LOCUS) for the mental health rehabilitation services, and will allow Medicaid recipients to access therapeutic services, including individual, family and group therapy delivered by a licensed mental health practitioner without the need to meet any functional criteria. Therapeutic services will be based on each recipient’s medical need for the services. The primary goal for terminating the §1915(i) State Plan authority is to increase access to community-based treatment which would result in a reduction in inpatient hospitalization.

Benefits of Transition

- Medically necessary LMHP services will now be available to all Medicaid eligible adults for whom such services are medically necessary.
- Rehabilitation services will be made available to a larger number of adults because the eligibility criteria is being reduced to a minimum LOCUS 2 score for entry.
- Independent assessment/conflict of interest requirements will be discontinued. This will increase service access by reducing the barriers that prohibit access to services.

Service Comparison

All services currently available under the §1915(i) SPA will be transferred to the traditional Medicaid State Plan and will be made available to qualifying adults. None of the services that are currently available to recipients in the §1915(i) SPA will be eliminated.

§1915(i) State Plan	Traditional State Plan
<ul style="list-style-type: none"> • Therapeutic services, including individual, family and group therapy delivered by a licensed mental health practitioner 	<ul style="list-style-type: none"> • Therapeutic services, including individual, family and group therapy delivered by a licensed mental health practitioner
<ul style="list-style-type: none"> • Community Psychiatric Support and Treatment 	<ul style="list-style-type: none"> • Community Psychiatric Support and Treatment
<ul style="list-style-type: none"> • Psychosocial Rehabilitation Services 	<ul style="list-style-type: none"> • Psychological Rehabilitation Services
<ul style="list-style-type: none"> • Crisis Intervention 	<ul style="list-style-type: none"> • Crisis Intervention

Transition Plan Details and Timetable

The Department has developed the following plan with the single PIHP currently managing services for the §1915(i) population:

1. Prior to December 1, 2015, the PIHP will begin sending 1915(i) eligibility information to the Department, which will contain recipient level data including their services and authorization information.
2. Prior to December 1, 2015, the data will be forwarded to each Bayou Health Plan weekly. This will allow the Bayou Health Plans to prepare their systems for the transition from the PIHP to their health plan and to ensure each recipient will have an authorization in place effective December 1, 2015 and beyond.
3. Medicaid’s fiscal intermediary sends a daily file of Medicaid eligible recipients to each health plan, so authorizing services and determining medical necessity will be possible based on real time data.

4. Each Bayou Health Plan will be required to offer provider contracts to all providers currently providing services to §1915(i) recipients, and will be required to accept each recipient's current service authorization from the Department during the transition for up to 90 days.
5. The Department is hosting weekly provider calls to describe this process. Providers will assist the Department with assuring recipients' services will not be interrupted during this transition.
6. The Department will be hosting 10 provider meetings around the state in October and early November to answer questions and to provide additional technical support regarding this transition.

Summation

The State is confident in this action as part of its overall plan to improve the identified individuals' access to behavioral health services, and create greater efficiencies within the State's new integrated healthcare delivery system.

The transition plan being proposed for the corresponding SPA [LA TN 15-0017] will be published on the Department's Medicaid Policy and Compliance website for public review and comments prior to submission to CMS. The comment period will commence on October 23, 2015 and end on November 23, 2015. Public notice will also be published on or before October 23, 2015 in the eight major daily newspapers of the State as a legal advertisement, including the website address where the transition plan can be accessed in its entirety, and where written comments may be sent.

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PUBLIC NOTICE

Department of Health and Hospitals
Bureau of Health Services Financing and
Office of Behavioral Health

Louisiana Transition of 1915(i) Recipients to
Medicaid State Plan Behavioral Health Services

The Department of Health and Hospitals, Bureau of Health Services Financing and the office of Behavioral Health collaboratively provide specialized behavioral health services under the authority of a §1915(b) waiver, §1915(c) waiver, and a §1915(i) State Plan amendment (SPA). However, effective December 1, 2015 the Department proposes to change its behavioral health services implementation model in order to transition from a single prepaid inpatient health plan (PIHP) to an integrated behavioral and physical health model which will be administered by five Bayou Health managed care organizations.

The State recently submitted waiver amendments to the U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services (CMS) for the §1915(b) and §1915(c) waivers and the §1932(a) SPA governing managed care provisions to implement the integration of behavioral health and physical health. The State will also submit a State Plan amendment to CMS requesting the termination of behavioral health services covered under the §1915(i) State Plan authority, and to include these same services as covered services under the "traditional" Medicaid State Plan services option.

Services provided by licensed mental health practitioners (LMHPs) and mental health rehabilitation services would be expanded to meet the needs of a larger population of adults and increase the use of community-based treatment.

The eligibility criteria for the currently approved §1915(i) behavioral health services requires Medicaid eligible adults over 21 years of age to meet more stringent criteria to access these services. The proposed amendments will reduce the functional criteria as measured by the Level of Care Utilization System for the mental health rehabilitation services, and will allow

Medicaid recipients to access therapeutic services, including individual, family and group therapy delivered by a licensed mental health practitioner without the need to meet any functional criteria. Therapeutic services will be based on each recipient's medical need for the services. The primary goal for terminating the §1915(i) State Plan authority is to increase access to community-based treatment which would result in a reduction in inpatient hospitalization.

Implementation of these provisions shall be contingent upon the approval of CMS, as submission to CMS for review and approval is required.

The Department hereby gives public notice of its intent to submit a transition plan to CMS for review and approval of the Department's actions that will be taken to transition Medicaid recipients currently receiving behavioral health services under the §1915(i) State Plan authority to behavioral health services covered under the "traditional" Medicaid State Plan through a new State Plan amendment when the §1915(i) State Plan services are terminated.

Interested persons may review the transition plan and submit written comments to J. Ruth Kennedy, Bureau of Health Services Financing, P.O. Box 91030, Baton Rouge, LA 70821—9030 or by email to MedicaidPolicy@la.gov. Ms. Kennedy is responsible for responding to inquiries regarding this public notice. The transition plan will be available for online viewing at <http://new.dhh.louisiana.gov/index.cfm/page/2110>. The deadline for receipt of all written comments is November 23, 2015 by 4:30 p.m.

Kathy H. Kliebert
Secretary

Oct 23 11
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State of Louisiana
Department of Health and Hospitals
Bureau of Health Services Financing

VIA ELECTRONIC MAIL ONLY

October 22, 2015

Karen Matthews, Health Director
Chitimacha Health Clinic
3231 Chitimacha Trail
Jeanerette, LA 70544

Angela Martin
Chitimacha Tribe of Louisiana
P. O. Box 640
Jeanerette, LA 70544

Anita Molo
Chitimacha Tribe of Louisiana
P. O. Box 640
Jeanerette, LA 70544

Marshall Pierite, Chairman
Misty Hutchby, Health Director
Tunica-Biloxi Tribe of Louisiana
P. O. Box 1589
Marksville, LA 71351-1589

Lovelin Poncho, Chairman
Paula Manuel, Health Director
Coushatta Tribe of Louisiana
P. O. Box 818
Elton, LA 70532

Chief Beverly Cheryl Smith
Holly Vanhoozen, Health Director
The Jena Band of Choctaw Indians
P. O. Box 14
Jena, LA 71342

Dear Louisiana Tribal Contact:

RE: Notification of Louisiana Medicaid State Plan Amendments

In compliance with the provisions of the American Recovery and Reinvestment Act (ARRA) of 2009, the Department of Health and Hospitals, Bureau of Health Services Financing is taking the opportunity to notify you of a State Plan amendment (SPA) that may have an impact on your tribe.

Attached for your review and comments is a summary of the proposed State Plan amendment. Please provide any comments you may have by November 21, 2015 to Mrs. Darlene Budgewater via email to Darlene.Budgewater@la.gov or by postal mail to:

Department of Health and Hospitals
Bureau of Health Services Financing
Medicaid Policy and Compliance
P.O. Box 91030
Baton Rouge, LA 70821-9030

Should you have additional questions about Medicaid policy, Mrs. Budgewater will be glad to assist you. You may reach her by email or telephone at (225) 342-3881. Thanks for your continued support of the tribal consultation process.

Sincerely,



for J. Ruth Kennedy
Medicaid Director

Attachment (1)

JRK/DB/KS

c: Ford J. Blunt, III
Stacey Shuman

State Plan Amendment for submittal to CMS

Request for Tribal Comments

October 22, 2015

Louisiana Transition of 1915(i) Recipients to Medicaid State Plan Behavioral Health Services (effective December 1, 2015)

The Department proposes to change its behavioral health services implementation model in order to transition from a single prepaid inpatient health plan (PIHP) to an integrated behavioral and physical health model which will be administered by five Bayou Health managed care organizations.