



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

February 20, 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. 15-003**

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

*Approved
SK*

Attachment (1)

KHK/WJR/JH

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

FOR: HEALTH CARE FINANCING ADMINISTRATION

1. TRANSMITTAL NUMBER:

15-003

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

July 1, 2015

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:

42 CFR 440.167

7. FEDERAL BUDGET IMPACT:

a. FFY 2016 **\$0**
b. FFY 2017 **\$0**

8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:

Attachment 3.1-A, Item 26, Page 2

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 PAGE NUMBER OF THE SUPERSEDED PLAN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

Same (TN 10-53)

10. SUBJECT OF AMENDMENT: **The SPA proposes to amend the provisions governing long-term personal care services to change the timeline for conducting re-assessments from annually to at least once every 18 months.**

11. GOVERNOR'S REVIEW (Check One):

GOVERNOR'S OFFICE REPORTED NO COMMENT
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

OTHER, AS SPECIFIED:
The Governor does not review state plan material.

12. SIGNATURE OF STATE AGENCY OFFICIAL:

13. TYPED NAME:

Kathy H. Kliebert

14. TITLE:

Secretary

15. DATE SUBMITTED:

February 20, 2015

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:

18. DATE APPROVED:

PLAN APPROVED – ONE COPY ATTACHED

19. EFFECTIVE DATE OF APPROVED MATERIAL:

20. SIGNATURE OF REGIONAL OFFICIAL:

21. TYPED NAME:

22. TITLE:

23. REMARKS:

AMOUNT, DURATION AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED
LIMITATIONS OF THE AMOUNT, DURATION, AND SCOPE OF CERTAIN ITEMS OF PROVIDED
MEDICAL AND REMEDIAL CARE AND SERVICES ARE DESCRIBED AS FOLLOWS:

Assessment

An initial assessment shall be performed for each recipient requesting personal care services. The assessment shall be utilized to identify the recipient's long term care needs, preferences, the availability of family and community supports and to develop the plan of care. Each recipient shall be re-assessed at least once every 18 months.

Prior Authorization

Personal care services must be prior authorized. Requests for prior authorization must be submitted to the Bureau of Health Services Financing (BHSF) or its designee and include a copy of the assessment form and the plan of care.

Covered Services

Personal care services provide assistance with the activities of daily living (ADL) and the instrumental activities of daily living (IADL). Assistance may be either the actual performance of the personal care task for the individual or supervision and prompting so the individual performs the task by him/herself.

ADLs are those personal, functional activities required by an individual for continued well-being, health and safety. ADLs include such tasks as: eating, bathing, dressing, grooming, transferring, reminding the recipient to take medication, ambulation, and toileting.

IADLs are those activities that are considered essential for sustaining the individual's health and safety, but may not require performance on a daily basis. IADLs include such tasks as light housekeeping, food preparation and storage, grocery shopping, laundry, assisting with scheduling medical appointments when necessary, accompanying recipient to medical appointments when necessary due to recipient's frail condition, and assisting the recipient to access transportation. IADLs cannot be performed in the recipient's home when he/she is absent from the home.

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

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LA SPA 15-003

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NOTE: Some notices are extracted from PDF files and may be difficult to read.

County: Lafayette
Printed In: The Advertiser
Printed On: 2015/01/28

Public Notice:

1939506 PUBLIC NOTICE Department of Health and Hospitals Bureau of Health Services Financing and Office of Aging and Adult Services Bayou Choices Program The Department of Health and Hospitals is seeking to implement Medicaid Managed Care for populations at risk of and/or receiving long-term supports and services, including eligible older adults and persons with adult onset disabilities. This system, to be referred to as the Bayou Choices program, will operate under the authority of Sections 1915(b), 1915(c), and 1915(i) of Title XIX of the Social Security Act. The department hereby gives public notice of its intent to submit a new waiver, amendments to the State's existing waivers, and Title XIX Medicaid State Plan amendments to the U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services (CMS) to seek approval for implementation effective October 1, 2015 to: 1) establish the Bayou Choices Medicaid Managed Care Program under a 1915(b)waiver; 2) amend the Community Choices Waiver (CCW) and the Adult Day Health Care (ADHC) Waiver to operate under a managed care model concurrent with the 1915(b) waiver; 3) revise the current 1915(b) Behavioral Health Services Waiver to exclude populations covered under the Bayou Choices program; 4) allow the operation of 1915(i)community behavioral health services through multiple Managed Care Entities (MCEs) rather than a single prepaid inpatient health plan (PIHP); 5) allow self-direction to be implemented statewide with the Long-Term Personal Care Services (LT-PCS) Program; 6) allow LT-PCS participants to purchase goods and services; and 7) **revise the timeline for conducting LT-PCS re-assessments from annually to at least once every 18 months.** Implementation of these provisions may be contingent upon the approval of the U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services (CMS), if it is determined that submission to CMS for review and approval is required. Interested persons may 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 deadline for receipt of all written comments is March 1, 2015 by 4:30 p.m. Kathy H. Kliebert Secretary

Public Notice ID: 22121218.HTM



State of Louisiana
Department of Health and Hospitals
Bureau of Health Services Financing

VIA ELECTRONIC MAIL ONLY

January 21, 2015

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

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

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

Angela Martin
Chitimacha Tribe of Louisiana 3231
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

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

Dear Louisiana Tribal Member:

RE: Notification of Waiver and State Plan Amendments

In compliance with the provisions of the American Recovery and Reinvestment Act of 2009 (ARRA), the Department of Health and Hospitals (DHH) is taking this opportunity to notify all of the federally recognized tribes in Louisiana of the proposed amendments to the Medicaid State Plan and Home and Community-Based Services (HCBS) waivers.

Over the past few years, Louisiana has taken steps to improve coordination of care and improve health outcomes by moving the majority of the Medicaid population into a managed care system.

Bayou Health and the Louisiana Behavioral Health Partnership (LBHP), Louisiana Medicaid's managed care systems, follow an integrated care model with a strong focus

on coordination of care. However, the populations needing and receiving long-term supports and services have been excluded from these coordinated care initiatives. National trends and a growing body of evidence suggest that the complex needs of this vulnerable population can be better met under managed care system that effectively coordinates Medicaid acute care, behavioral health care, and long-term supports and services (LTSS). For this reason, the DHH Bureau of Health Services Financing (BHSF) and Office of Aging and Adult Services (OAAS) are proposing to create the Bayou Choices program effective October 1, 2015.

The Medicaid-enrolled individuals participating in the Bayou Choices program will receive an all-inclusive package of Medicaid services through a managed health care delivery system. Covered Medicaid benefits and services will include physical healthcare services, pharmacy, behavioral healthcare services, and long-term supports and services including nursing facility and home and community-based services coordinated through managed care organizations (MCOs).

The Bayou Choices program will achieve the following outcomes:

- Improved coordination of care;
- Better health outcomes;
- Increased quality of care as measured by nationally recognized performance measures;
- Greater emphasis on disease prevention and management of chronic conditions;
- More effective treatment and management of acute and chronic illness;
- Improved access to essential specialty services;
- Outreach and education to promote healthy behaviors;
- Increased personal responsibility and self-management;
- Continued rebalancing of long-term supports and services towards appropriate use of home and community-based services;
- A reduction in the rate of avoidable hospital stays and readmissions;
- A reduction in fraud, abuse, and wasteful spending;
- Greater accountability for the dollars spent;
- A more financially sustainable system;
- Cost savings to the state in acute care; and
- A slower rate of growth and/or more predictability in long-term supports and services spending.

Eligibility for mandatory enrollment in the Bayou Choices program is limited to individuals who:

- Are age 21 or over;
- Are determined eligible for Louisiana Medicaid; and
- Meet at least one of the following three criteria:

- Are dually eligible for both Medicare and Medicaid; or
- Are determined eligible for Medicaid payment for nursing facility services and have resided in a nursing facility for longer than 90 days, inclusive of any paid hospital or home leave days; or
- Are determined eligible for any of the following Medicaid HCBS Long-Term Supports and Services programs:
 - Long Term-Personal Care Services (LT-PCS)
 - Community Choices Waiver (CCW)
 - Adult Day Health Care (ADHC) Waiver

To ensure current HCBS waiver participants receive the most appropriate services and care management under managed care, any individual with an intellectual and/or developmental disability(ies) who is receiving CCW or ADHC Waiver services will be transitioned to the Residential Options Waiver (ROW) through the Office for Citizens with Developmental Disabilities (OCDD). The target date for this transition is July 2015, prior to managed care implementation.

DHH will:

- Submit an amendment to the U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services (CMS) for the current Louisiana Behavioral Health Partnership (LBHP) 1915(b) waiver to exclude populations covered under the Bayou Choices program.
- Submit a State Plan Amendment to CMS for the current LBHP 1915(i) to allow the operation of community behavioral health services through multiple Managed Care Entities (MCEs) rather than solely through a single Prepaid Inpatient Health Plan (PIHP).
- Submit amendments to CMS for the two (2) current OAAS 1915(c) waivers - Community Choices Waiver and Adult Day Health Care Waiver:
 - To operate under a managed care model with a concurrent 1915(b) waiver.
- Submit a new 1915(b) waiver to CMS to establish Bayou Choices, allowing older adults and persons with adult onset disabilities to operate under a managed care model with concurrent 1915(c) waivers.
- Submit a State Plan Amendment to CMS for the existing 1915(j) self-directed personal care services, which makes the following changes to the Long Term-Personal Care Services (LT-PCS) program:

- Allows self-direction to be implemented statewide and not just as a regional pilot program.
- Allows participants to purchase goods and services.
- Changes the timeline for conducting re-assessments from annually to at least once every 18 months.

Please provide any comments or questions you may have regarding these proposed waiver amendments by February 20, 2015 to the attention of Darlene A. Budgewater at:

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

If you or any tribal Chief wishes to have an in-person meeting regarding these proposed waiver and State Plan amendments, please contact Darlene Budgewater via email at Darlene.Budgewater@la.gov or by telephone at 225-342-3881.

We look forward to working with you on the implementation of these changes to the Louisiana Medicaid program.

Sincerely,

Darlene A. Budgewater

for J. Ruth Kennedy
Medicaid Director

JRK/KC/DAB

c: Tara Leblanc
Jeanne Levelle
Lou Ann Owen
Mark H. Thomas
Robin Wagner