

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**

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March 23, 2018

Our Reference: SPA LA 18-0001

Ms. Jen Steele, State Medicaid Director  
Department of Health  
628 North 4<sup>th</sup> St.  
Post Office Box 91030  
Baton Rouge, LA 70821-9030

Attention: Karen Barnes

Dear Ms. Steele:

We have reviewed the State's proposed amendment to the Louisiana State Plan submitted under Transmittal Number 18-0001 dated February 20, 2018. This state plan amendment proposes to amend the provisions governing family planning services to remove the limitation on office visits for physical examinations for family planning and family planning-related services.

Based on the information submitted, we have approved the amendment for incorporation into the official Louisiana State Plan with an effective date change of March 20, 2018. A copy of the CMS-179 and approved plan pages are enclosed with this letter.

If you have any questions, please contact Cheryl Rupley at (214) 767-6278 or by email at [Cheryl.Rupley@cms.hhs.gov](mailto:Cheryl.Rupley@cms.hhs.gov).

Sincerely,

A handwritten signature in black ink that reads "Bill Brooks". The signature is written in a cursive, slightly slanted style.

Bill Brooks  
Associate Regional Administrator

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

**FOR: HEALTH CARE FINANCING ADMINISTRATION**

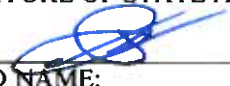
1. TRANSMITTAL NUMBER: <b>18-0001</b>	2. STATE <b>Louisiana</b>
3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
4. PROPOSED EFFECTIVE DATE <b>March 20, 2018</b>	

TO: REGIONAL ADMINISTRATOR HEALTH CARE FINANCING ADMINISTRATION DEPARTMENT OF HEALTH AND HUMAN SERVICES
5. TYPE OF PLAN MATERIAL ( <i>Check One</i> ): <input type="checkbox"/> NEW STATE PLAN <input type="checkbox"/> AMENDMENT TO BE CONSIDERED AS NEW PLAN <input checked="" type="checkbox"/> AMENDMENT COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT ( <i>Separate Transmittal for each amendment</i> )

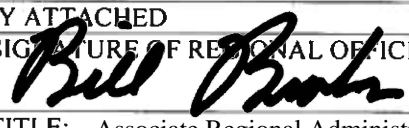
6. FEDERAL STATUTE/REGULATION CITATION: <b>42 CFR 435.214</b>	7. FEDERAL BUDGET IMPACT: a. FFY <b>2018</b> <b>\$ 0</b> b. FFY <b>2019</b> <b>\$ 0</b>
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: <b>Attachment 3.1-A, Item 4c, Page 1</b>	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT ( <i>If Applicable</i> ): <b>Same (TN 14-13)</b>

10. SUBJECT OF AMENDMENT: **The SPA proposes to amend the provisions governing family planning services to remove the limitation on office visits for physical examinations for family planning and family planning-related services.**

11. GOVERNOR'S REVIEW ( <i>Check One</i> ): <input type="checkbox"/> GOVERNOR'S OFFICE REPORTED NO COMMENT <input type="checkbox"/> COMMENTS OF GOVERNOR'S OFFICE ENCLOSED <input type="checkbox"/> NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL	<input checked="" type="checkbox"/> OTHER, AS SPECIFIED: <b>The Governor does not review State Plan material.</b>
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12. SIGNATURE OF STATE AGENCY OFFICIAL: 	16. RETURN TO: <b>Jen Steele, Medicaid Director State of Louisiana Department of Health 628 North 4<sup>th</sup> Street P.O. Box 91030 Baton Rouge, LA 70821-9030</b>
13. TYPED NAME: <b>Rebekah E. Gee MD, MPH</b>	
14. TITLE: <b>Secretary</b>	
15. DATE SUBMITTED: <b>February 20, 2018</b>	

**FOR REGIONAL OFFICE USE ONLY**

17. DATE RECEIVED:    2-20-2018	18. DATE APPROVED:    3-23-2018
PLAN APPROVED – ONE COPY ATTACHED	
19. EFFECTIVE DATE OF APPROVED MATERIAL: 3-20-2018	20. SIGNATURE OF REGIONAL OFFICIAL: 
21. TYPED NAME: Bill Brooks	22. TITLE: Associate Regional Administrator Division of Medicaid & Children's Health

23. REMARKS:

STATE OF LOUISIANAAMOUNT, DURATION AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED  
LIMITATIONS ON THE AMOUNT, DURATION, AND SCOPE OF CERTAIN ITEMS OF PROVIDED  
MEDICAL AND REMEDIAL CARE AND SERVICES ARE DESCRIBED AS FOLLOWS:**1905(a)(4)(C)****Family Planning Services****Covered Services**

The primary goals of family planning services are to increase access to services which will allow improved reproductive and physical health, improved perinatal outcomes, and reduction in the number of unintended pregnancies. Medicaid covered family planning services include:

1. Physical examinations or medically necessary re-visits as it relates to family planning or family planning-related services for both males and females of child bearing age;
  - a. a comprehensive patient history;
  - b. physical, including breast exam;
  - c. laboratory tests; and
  - d. contraceptive counseling.
2. Contraceptive counseling (including natural family planning), education, follow-ups and referrals;
3. Laboratory examinations and tests for the purposes of family planning and management of sexual health;
4. Pharmaceutical supplies and devices to prevent conception, including all methods of contraception approved by the Federal Food and Drug Administration; and
5. Male and female sterilization procedures and follow up tests provided in accordance with 42 CFR 441, Subpart F.

**Family Planning Related Services Provided Under State Eligibility Option**

Family planning-related services include the diagnosis and treatment of sexually transmitted diseases or infections, regardless of the purpose of the visit at which the disease or infection was discovered.

Medicaid covered family planning-related services include:

1. Diagnostic procedures, drugs and follow-up visits to treat a sexually transmitted disease, infection or disorder identified or diagnosed at a family planning visit (other than HIV/AIDS or hepatitis);
2. Vaccine to prevent cervical cancer;
3. Treatment of major complications from certain family planning procedures; and
4. Transportation services.

**Service Delivery**

Family Planning services may be delivered through any enrolled Medicaid provider whose scope of practice includes family planning services.

State: Louisiana  
Date Received: 2-20-18  
Date Approved: 3-23-18  
Date Effective: 3-20-18  
Transmittal Number: 18-0001