



Children and Adults Health Programs Group

JUL 12 2018

Jen Steele
Medicaid Director
Department of Health and Hospital
628 North 4th Street
Baton Rouge, LA 70802

Dear Ms. Steele,

Thank you for your Children's Health Insurance Program (CHIP) State Plan Amendment (SPA) LA-18-0008, submitted on June 27, 2018. This SPA proposes to demonstrate compliance with the Mental Health Parity and Addiction Equity Act. As you are aware, your SPA has been undergoing review by the Centers for Medicare & Medicaid Services (CMS).

Section 2103(c)(6)(B) of the Social Security Act (the Act), as implemented through regulations at 42 CFR 457.496(b), provides that if CHIP coverage includes Early, Periodic Screening, Diagnostic and Treatment (EPSDT) as defined in section 1905(r) of the Act and provided in accordance with section 1902(a)(43) of the Act, the state plan will be deemed to satisfy parity requirements. The state is seeking the deeming option for targeted low-income children covered under the state child health plan, including coverage from conception to birth for unborn children whose mothers are under 21 years of age. In order to proceed with our review, we find it necessary to seek additional information related to the application of EPSDT to these populations.

The state is also conducting a full parity analysis for unborn children whose mothers are 21 years of age and older. We find it necessary to seek additional information related to the analysis of non-quantitative treatment limitations (NQTLs) to ensure that any NQTLs applied to MH/SUD benefits are consistent with 42 CFR 457.496(d)(4) and 457.496(d)(5). Please see a detailed list of questions attached.

Under section 2106(c)(2) of the Act, CMS must approve, disapprove or request additional information on a proposed amendment to a title XXI state plan within 90 days. This letter constitutes our notification that specified additional information is needed in order to fully assess your amendment. The 90-day review period has been stopped by this request and will resume as soon as a complete and substantive response to all of the items in this letter is received.

Your title XXI project officer is Ms. Jasmine Aplin. She is available to answer questions concerning this amendment and other CHIP-related issues. Ms. Aplin's contact information is as follows:

Centers for Medicare & Medicaid Services
Center for Medicaid and CHIP Services
Mail Stop: S2-01-16

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7500 Security Boulevard
Baltimore, MD 21244-1850
Telephone: (410) 786-8102
E-mail: Jasmine.Aplin@cms.hhs.gov

Official communications regarding program matters should be sent simultaneously to Ms. Jordan and to Mr. Bill Brooks, Associate Regional Administrator (ARA) in our Denver Regional Office. Mr. Brooks' address is:

Centers for Medicare & Medicaid Services
1301 Young St. Suite 714
Dallas, TX 75202

We look forward to continuing to work with you and your staff.

Sincerely,

A handwritten signature in blue ink that reads "Meg Barry for". The signature is written in a cursive style.

Amy Lutzky
Director
Division of State Coverage Programs

cc: Mr. Bill Brooks, ARA, CMS Region VI, Dallas

Attachment

Questions for Louisiana CHIP SPA LA-18-0008

EPSDT Documentation

1. In the MCO contract EPSDT document, it is mentioned on page 1 at 6.1.4 that EPSDT services are provided except for dental and applied behavioral analysis (ABA).

- Our understanding is that there is a separate dental plan, Managed Care of North America (MCNA), providing dental EPSDT services in CHIP. Please provide the sections of the Medicaid Manual Chapter 16 that discuss dental screenings, and the MCNA provider manuals and member handbooks related to dental services.
- Based on our phone conversation on July 9, the state indicated that ABA and all other medically necessary services are provided by the state's contracted MCOs to CHIP children. Please confirm that ABA is provided, and direct us to any materials with information about how this is applied to CHIP.

2. For certain services in the CHIP state plan, it is noted that for the unborn population, service requirements and limits are identical to Medicaid. For example, at Section 6.2.10 related to inpatient mental health services, the plan states that Medicaid rules apply for the unborn. For other services where there is no specific information related to the unborn listed (for example, at section 6.2.30 for enabling services), please clarify whether the limitations applied to those services are the same limitations as other separate CHIP populations, or are there separate benefit requirements and/or limits for unborn children? If benefit requirements or limits are separate for unborn children for any benefits, please describe.

3. Please describe the process for families to obtain benefits for children beyond any limits specified in the state plan when medically necessary.

4. Please clarify if non-emergency medical transportation is provided to separate CHIP populations in the Louisiana Healthcare Connections (LHCC) plan.

5. For the LHCC plan, how are families notified that services are available for children to correct or ameliorate a condition discovered during a screening?

Full Parity Analysis

6. Please provide the results of all applicable parity analyses for the population of unborn children whose mothers are over the age of 21 and are not provided EPSDT consistent with Medicaid requirements.