



State of Louisiana

Louisiana Department of Health
Bureau of Health Services Financing

VIA ELECTRONIC MAIL ONLY

June 29, 2018

Karen Matthews
Health and Human Services Director
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P. O. Box 1589
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Lovelin Poncho, Chairman
Paula Manuel, Health Director
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P. O. Box 818
Elton, LA 70532

Chief Beverly Cheryl Smith
Kellye Smith, 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 Amendment

In compliance with the provisions of the American Recovery and Reinvestment Act (ARRA) of 2009, the Louisiana Department of Health, 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 SPA. Please provide any comments you may have by **July 29, 2018**, to Karen Barnes via email at Karen.Barnes@la.gov or by postal mail to:

Louisiana Department of Health
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. Barnes will be glad to assist you. You may contact her via email at the email address above or via telephone at (225) 342-3881.

Thank you for your continued support of the tribal consultation process.

Sincerely,

for Karen A. Barnes

Jen Steele
Medicaid Director

Attachment (1)

JS/KB/MJ

c: Cheryl Rupley
Stacey Shuman

State Plan Amendment for Submittal to CMS
Request for Tribal Comments
June 29, 2018

Intermediate Care Facilities for Individuals with Intellectual Disabilities – Cost Reports and Complex Care Reimbursement
Effective date: August 20, 2018

The purpose of this SPA is to amend the provisions governing the reimbursement methodology for intermediate care facilities for individuals with intellectual disabilities (ICFs/IID) in order to: 1) clarify the provisions governing cost reports to align the direct care floor requirements for pervasive plus supplemental payments and complex care add-on payments with current practices; 2) require the annual renewal of the complex care add-on rate and submission of the associated documentation; and 3) eliminate the qualifying loss review requirement.