

Jeff Landry
GOVERNOR



Bruce D. Greenstein
SECRETARY

State of Louisiana

Louisiana Department of Health

Bureau of Health Services Financing

December 1, 2025

Courtney Miller, Director
CMS/Center for Medicaid and CHIP Services
Medicaid & CHIP Operations Group
601 East 12th Street, Room 355
Kansas City, Missouri 64106

RE: LA SPA TN 25-0001 Personal Care Services – Long Term

Dear Ms. Miller:

Please refer to our proposed Medicaid State Plan submitted under transmittal number (TN) 25-0001 with a proposed effective date of April 1, 2025. The purpose of this SPA is to amend the provisions governing personal care services (PCS), in order make the reimbursement rate currently paid to PCS direct service workers part of the permanent State Plan.

We are providing the following in response to your request for additional information (RAI) dated September 26, 2025:

General Comments:

The state clarified during the informal RAI process that this SPA is not proposing a transition from waiver to State Plan. Rather, the changes are limited to reimbursement rates and adding the specific language regarding wage floor and pass through requirements for LT-PCS providers.

Please note that 42 CFR Part 440: Contains the specific regulations governing personal care services under Medicaid State Plans Statewide Availability: Unlike waiver services, State Plan services must generally be available statewide.

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1. Please confirm this understanding.

LDH RESPONSE:

The State confirms this understanding, and is not making changes to the statewideness requirements.

2. Please confirm that these are covered approved services for Medicaid Fee for Services only benefits.

LDH RESPONSE:

The State confirms these are covered approved services for Medicaid fee-for-service (FFS) only beneficiaries.

3. Confirm that no managed care and/or waiver payment is included.

LDH RESPONSE:

The State confirms there is no managed care and/or waiver payments included.

4. Please confirm that these payments are solely appropriations, and no other form of funding mechanism is involved.

LDH RESPONSE:

This SPA does not involve any other form of funding mechanisms.

General comments regarding 4.19-B pages:

5. Effective Date Fee Schedule Language needs to be revised to be consistent with regulation and Medicaid.gov: *“Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers of (ex. Case management for persons with chronic mental illness). The agency’s fee schedule- rate was set as of (insert date here) and is effective for services provided on or after that date. All rates are published (ex. on the agency’s website).”*

LDH RESPONSE:

The language has been added. Please see Attachment 4.19-B, Item 26, Page 1a.

6. Please add a reference to the reimbursement state plan pages that explain that there shall be no duplication of services and payment.

LDH RESPONSE:

The language has been added. Please see Attachment 4.19-B, Item 26, Page 1a.

7. CMS acknowledges the state's desire to retain historical language on the plan page and recognizes that including historical data is permissible. It is recommended that the state ensures the historical data presented is accurate, chronological, and

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comprehensive. Currently, the sequence of dates jumps from 2023 to 2012 and then to 2016. Additionally, the language regarding effective dates and fee schedules should be consistent with 42 CFR 430.10.

LDH RESPONSE:

The State appreciates the guidance. The sequence of dates has been revised and is in ascending order. The language has been revised. Please see Attachment 4.19-B, Item 26, Pages 1-1a.

Please consider this as a formal request to begin the 90-day clock. As always, we appreciate the assistance and guidance CMS has provided in resolving these issues. We trust this RAI response will result in the approval of the pending SPA. If additional information is required, you may contact Marjorie Jenkins via email at Marjorie.Jenkins@la.gov or by phone at (225) 342-3881.

Sincerely,

Signed by:



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Seth Gold

Medicaid Executive Director

Attachments

SG:MJ:NF