Jeff Landry
GOVERNOR

Bruce D. Greenstein
SECRETARY

# State of Louisiana

## Louisiana Department of Health

### Office of the Secretary

October 31, 2025

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

RE: Louisiana Title XIX State Plan
Transmittal No. 25-0021

Dear Ms. Miller:

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. Should you have any questions or concerns regarding this matter, please contact Marjorie Jenkins at (225) 342-3881 or via email at Marjorie.Jenkins@la.gov.

Sincerely,

DocuSigned by:
Drew Maranto
F2B21E16F2284B1...

Drew Maranto, designee for Bruce D. Greenstein
Undersecretary / Interim Medicaid Executive Director

Attachments (2)

DM:NF

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

FORM APPROVED
OMB No. 0938-0193

# TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL

**FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES**

1. TRANSMITTAL NUMBER: **25-0021**

2. STATE: **LA**

3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT

TO: CENTER DIRECTOR
CENTERS FOR MEDICAID & CHIP SERVICES
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE
**October 1, 2025**

5. FEDERAL STATUTE/REGULATION CITATION

**42 CFR 431.12**
**42 CFR 431.10**

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)
a. FFY **2026** **$0**
b. FFY **2027** **$0**

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT

**A1 – A3 Medicaid Administration, Pages 1 - 7**

8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT *(If Applicable)*
**Same (16-0010)**

9. SUBJECT OF AMENDMENT

**The purpose of this SPA is to amend the provisions governing eligibility determinations, to transition from a Federally-Facilitated Marketplace (FFM) Determination state whereas the state delegated authority to the FFM to make final eligibility decisions, to an FFM Assessment state whereas the FFM makes a preliminary assessment of eligibility and the State makes the final decision.**

10. 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.

11. SIGNATURE OF STATE AGENCY OFFICIAL

DocuSigned by:
Drew Maranto
F2B21E16F2284B1...

12. TYPED NAME
**Drew Maranto, designee for Bruce D. Greenstein**

13. TITLE
**Undersecretary/Interim Medicaid Executive Director**

14. DATE SUBMITTED
October 31, 2025

15. RETURN TO

**Drew Maranto**
**Undersecretary/Interim Medicaid Executive Director**
**Louisiana Department of Health**
**628 North 4th Street**
**P.O. Box 91030**
**Baton Rouge, LA 70821-9030**

***FOR CMS USE ONLY***

16. DATE RECEIVED

17. DATE APPROVED

***PLAN APPROVED - ONE COPY ATTACHED***

18. EFFECTIVE DATE OF APPROVED MATERIAL

19. SIGNATURE OF APPROVING OFFICIAL

20. TYPED NAME OF APPROVING OFFICIAL

21. TITLE OF APPROVING OFFICIAL

22. REMARKS



***Instructions on Back***

# Medicaid Administration

State Name: Louisiana

OMB Control Number: 0938-1148

Transmittal Number: LA - 25 - 0021

| State Plan Administration<br>Designation and Authority | A1 |
|---|---|

42 CFR 431.10

**Designation and Authority**

State Name: Louisiana

As a condition for receipt of Federal funds under title XIX of the Social Security Act, the single state agency named below submits the following state plan for the medical assistance program, and hereby agrees to administer the program in accordance with the provisions of this state plan, the requirements of titles XI and XIX of the Act, and all applicable Federal regulations and other official issuances of the Department.

Name of single state agency: Louisiana Department of Health (LDH)

Type of Agency:

- ○ Title IV-A Agency
- ◉ Health
- ○ Human Resources
- ○ Other

The above named agency is the single state agency designated to administer or supervise the administration of the Medicaid program under title XIX of the Social Security Act. (All references in this plan to "the Medicaid agency" mean the agency named as the single state agency.)

The state statutory citation for the legal authority under which the single state agency administers the state plan is:

LA R.S. 36:254D

The single state agency supervises the administration of the state plan by local political subdivisions.

○ Yes ◉ No

☑ The certification signed by the state Attorney General identifying the single state agency and citing the legal authority under which it administers or supervises administration of the program has been provided.

**An attachment is submitted.**

The state plan may be administered solely by the single state agency, or some portions may be administered by other agencies.

The single state agency administers the entire state plan under title XIX (i.e., no other agency or organization administers any portion of it).

○ Yes ◉ No

☒ Waivers of the single state agency requirement have been granted under authority of the Intergovernmental Cooperation Act of 1968.

The waivers are still in effect.

(•) Yes ( ) No

Enter the following information for each waiver:

Remove

Date waiver granted (MM/DD/YY): 06/18/14

The type of responsibility delegated is (check all that apply):

- [ ] Determining eligibility
- [x] Conducting fair hearings
- [ ] Other

Name of state agency to which responsibility is delegated:

Division of Administration Law (DAL)

Describe the organizational arrangement authorized, the nature and extent of responsibility for program administration delegated to the above named agency, and the resources and/or services of such agency to be utilized in administration of the plan:

LDH delegates its authority to conduct fair hearings to the DAL. The parties acknowledge that the authority is to conduct the entire Medicaid fair hearing function and issue a recommended decision regarding all applicant, beneficiary, and provider appeal cases as defined in a written Memorandum of Understanding.

In the MOU, the DAL also agrees to comply with any and all federal / state notice and hearing requirements contained in the Code of Federal Regulations 42 CFR Section 431, subpart E, the Louisiana Revised Statutes (and the rules properly promulgated there under) and the Louisiana Medicaid State Plan and subsequent amendments.

LDH retains the right to review all DAL Medicaid recipient appeals. The State's review will be limited to the proper application of Federal and State Medicaid law and regulations; any changes to any such DAL recipient appeal decision will be made only pursuant to a conclusion of law regarding the proper application of Federal and State Medicaid law and regulations.

DAL acknowledges and agrees that it will act as a neutral and impartial decision-maker on behalf of the Medicaid agency in recommending decisions for all Medicaid cases that will comply with all applicable federal and state laws, rules, regulations, policies, and guidance governing the Medicaid program.

The methods for coordinating responsibilities among the agencies involved in administration of the plan under the alternate organizational arrangement are as follows:

LDH retains oversight of the State Plan and has established a process to monitor the entire appeals process, including the quality and accuracy of the final decisions made by DAL.

LDH ensures that every applicant and enrollee is informed, in writing, of the fair hearing process and how to contact either agency to obtain information about fair hearings and that DAL will comply with all applicable federal and state laws, rules, regulations, policies, and guidance governing the Medicaid program.

Add

- [ ] The agency that administers or supervises the administration of the plan under Title X of the Act as of January 1, 1965, has been separately designated to administer or supervise the administration of that portion of this plan related to blind individuals.

The entity or entities that have responsibility for determinations of eligibility for families, adults, and for individuals under 21 are:

- ☒ The Medicaid agency
- ☒ Single state agency under Title IV-A (in the 50 states or the District of Columbia) or under Title I or XVI (AABD) in Guam, Puerto Rico, or the Virgin Islands
- ☐ An Exchange that is a government agency established under sections 1311(b)(1) or 1321(c)(1) of the Affordable Care Act

The entity that has responsibility for determinations of eligibility for the aged, blind, and disabled are:

- ☒ The Medicaid agency
- ☐ Single state agency under Title IV-A (in the 50 states or the District of Columbia) or under Title I or XVI (AABD) in Guam, Puerto Rico, or the Virgin Islands
- ☐ An Exchange that is a government agency established under sections 1311(b)(1) or 1321(c)(1) of the Affordable Care Act
- ☒ The Federal agency administering the SSI program

  Indicate which agency determines eligibility for any groups whose eligibility is not determined by the Federal agency:

  - ☒ Medicaid agency
  - ☐ Title IV-A agency
  - ☐ An Exchange

The entity or entities that have responsibility for conducting fair hearings with respect to denials of eligibility based on the applicable modified adjusted gross income standard are:

- ☒ Medicaid agency
- ☐ An Exchange that is a government agency established under sections 1311(b)(1) or 1321(c)(1) of the Affordable Care Act
- ☐ An Exchange appeals entity, including an entity established under section 1411(f) of the Affordable Care Act

The agency has established a review process whereby the agency reviews appeals decisions made by the Exchange or Exchange appeals entity or other state agency, but only with respect to conclusions of law, including interpretations of state or federal policies.

○ Yes ◉ No

## State Plan Administration
## Organization and Administration — A2

42 CFR 431.10
42 CFR 431.11

**Organization and Administration**

Provide a description of the organization and functions of the Medicaid agency.

LDH is the single State agency designated to administer the Medicaid Program under title XIX of the Social Security Act. The Bureau of Health Services Financing (BHSF) is the agency within LDH that is responsible for administering the State's Medicaid program and is responsible for determining the following: 1) eligibility policy and criteria, service coverage, and payment policies for the Medicaid and CHIP programs; 2) ensuring the State's health care programs maximize federal funding to finance health care services for the indigent; 3) developing effective methods for managing the

utilization of health care services and the cost of care in the State's programs; and 4) analyzing existing health care financing policies to ensure that they promote efficient, effective, and economical provisions of care.

BHSF is headed by the State Medicaid Director, who with an executive management team of five (5) Deputy Directors and a Medical Director, provide management, policy direction, strategic and financial planning for the agency as well as disseminating work assignments and coordinating operations for attainment of agency goals and objectives. The five Deputy Directors are as follows:

1) Medicaid Deputy Director of Finance - Financial Management/Operations; Managed Care Finance; Rate Setting and Audit; Health Economics; Pharmacy:
Responsible for the oversight and management of the financial aspects of the Medical Vendor Administration (the budgetary operations for BHSF) including the Medical Vendor Payments and Administration budgets; Managed Care Finance; contracts; Rate Setting and Audit; Health Economics and Pharmacy sections.

2) Medicaid Deputy Director of Medicaid Systems - Eligibility Systems Section; MMIS; Medicaid Systems Modernization:
Responsible for system administration pertaining to payment of claims, Medicaid eligibility data, and administration of Third Party Liability programs and systems. Responsibilities include management of the Fiscal Intermediary contract, Eligibility Systems maintenance and support contract, Third Party Liability and other administrative contracts; Medicaid Systems Modernization section.

3) Medicaid Deputy Director of Eligibility - Eligibility Field Operations; Health Plan Relations:
Responsible for the initial determination and redetermination of eligibility for all Medicaid and CHIP populations, except those determined by the single state IV-A agency and the Federal agency administering the SSI program, at office locations throughout the State; administers the Medicaid Eligibility Quality Control program; and handles Eligibility Field Operations which is divided into eight regional divisions specializing in certain eligibility functions such as initial eligibility determination of MAGI, Non-MAGI, or Long-term care groups and redetermination of eligibility. These regional divisions are state employees within LDH. Health plan relations coordinates provider and member support and maintains a customer support call center.

4) Medicaid Deputy Director of Policy, Waivers & Compliance - Policy and Compliance; Program Supports and Waivers; Behavioral Health; Program Integrity:
Responsible for maintaining the Medicaid State Plan and Administrative Rules governing eligibility, scope of benefits, and reimbursement policies; developing policy for, and managing, services and programs administered and/or monitored by LDH; as well as ensuring coordination and consistency among health care reimbursement policies developed by the various administrative sections within LDH; and ensuring compliance with state and federal regulations. Responsibilities also include oversight and management of all aspects of the Medicaid supports and waiver programs, Behavioral Health section and Program Integrity section.

5) Medicaid Deputy Director of Healthcare Delivery Systems – Medicaid Quality Management, Statistics and Reporting:
Responsible for ensuring the efficient, effective delivery of quality health care services to individuals served by programs administered by BHSF through informed benefit design; utilization management; continuous program evaluation, quality measurement and improvement practices. These responsibilities encompass preventive, acute, and chronic/long-term care services delivered through both the managed care and fee-for-service delivery systems.

The LDH Administrative Review Unit (ARU) is the section within LDH responsible for reviewing legal conclusions for appeal decisions made by the DAL. Additionally, the head of the ARU is the liaison with the DAL. LDH actively works with the DAL to ensure all aspects of the Medicaid fair hearing process comply fully with all federal and state regulations and policy. The relationship between LDH and the DAL is very professional and cooperative, with common goals of protection of the individual's fair hearing rights and full compliance with the 90 day federal time limit for issuance of a final decision.

Upload an organizational chart of the Medicaid agency.

**An attachment is submitted.**

Provide a description of the structure of the state's executive branch which includes how the Medicaid agency fits in with other health, human service and public assistance agencies.

The State's executive branch consist of the governor and nine other state elected officers. Under the governor there are 14 departments/divisions which carry out day-to-day operations of state government and/or provide services to Louisiana citizens. These make up the governor's Cabinet. The Cabinet leaders are appointed by (with the approval of the legislature), and report directly to, the governor.

LDH, the single state Medicaid agency, provides health and medical services for uninsured and medically indigent persons, and administers social services programs such as the food stamp program, temporary cash assistance program, kinship care subsidy program and disability determinations services. The Division of Administration, which includes the Division of Administrative Law (DAL), is responsible for conducting Medicaid fair hearings and is the central management and administrative support agency for the State. The Department of Children and Family Services (DCFS), which is the State's Title IV-A agency, administers social services programs such as child welfare, and other public assistance programs. All of these entities are in the governor's Cabinet.

Entities that determine eligibility other than the Medicaid Agency (if entities are described under Designation and Authority)

Remove

Type of entity that determines eligibility:

- (•) Single state agency under Title IV-A (in the 50 states or the District of Columbia) or under Title I or XVI (AABD) in Guam, Puerto Rico, or the Virgin Islands
- ( ) An Exchange that is a government agency established under sections 1311(b)(1) or 1321(c)(1) of the Affordable Care Act
- ( ) The Federal agency administering the SSI program

Provide a description of the staff designated by the entity and the functions they perform in carrying out their responsibility.

The Department of Children and Family Services is the single state agency under Title IV-A. Within DCFS, the Child Welfare Division makes Medicaid eligibility determinations for children who receive adoption assistance and foster care payments.

The Child Welfare Division determines adoption assistance and foster care payments for children under Title IV-E of the Social Security Act and for whom Medicaid must be provided under 42 CFR 435.145, Children with Non-IV-E Adoption Assistance group under 42 CFR 435.227, and Reasonable Classification of Individuals under Age 21 placed in foster care homes by public agencies under 42 CFR 435.222.

Add

Entities that conduct fair hearings other than the Medicaid Agency (if are described under Designation and Authority)

Remove

Type of entity that conducts fair hearings:

- ( ) An Exchange that is a government agency established under sections 1311(b)(1) or 1321(c)(1) of the Affordable Care Act
- ( ) An Exchange appeals entity, including an entity established under section 1411(f) of the Affordable Care Act

Provide a description of the staff designated by the entity and the functions they perform in carrying out their responsibility.

Add

Supervision of state plan administration by local political subdivisions (if described under Designation and Authority)

Is the supervision of the administration done through a state-wide agency which uses local political subdivisions?

○ Yes ◉ No

The types of the local subdivisions that administer the state plan under the supervision of the Medicaid agency are:

○ Counties

○ Parishes

○ Other

Are all of the local subdivisions indicated above used to administer the state plan?

○ Yes ○ No

| **State Plan Administration Assurances** | **A3** |
|---|---|

42 CFR 431.10
42 CFR 431.12
42 CFR 431.50

**Assurances**

☑ The state plan is in operation on a statewide basis, in accordance with all the requirements of 42 CFR 431.50.

☑ All requirements of 42 CFR 431.10 are met.

☑ There is a Medical Care Advisory Committee to the agency director on health and medical services established in accordance with meeting all the requirements of 42 CFR 431.12.

☑ The Medicaid agency does not delegate, to other than its own officials, the authority to supervise the plan or to develop or issue policies, rules, and regulations on program matters.

Assurance for states that have delegated authority to determine eligibility:

☑ There is a written agreement between the Medicaid agency and the Exchange or any other state or local agency that has been delegated authority to determine eligibility for Medicaid eligibility in compliance with 42 CFR 431.10(d).

Assurances for states that have delegated authority to conduct fair hearings:

☐ There is a written agreement between the Medicaid agency and the Exchange or Exchange appeals entity that has been delegated authority to conduct Medicaid fair hearings in compliance with 42 CFR 431.10(d).

☐ When authority is delegated to the Exchange or an Exchange appeals entity, individuals who have requested a fair hearing are given the option to have their fair hearing conducted instead by the Medicaid agency.

Assurance for states that have delegated authority to determine eligibility and/or to conduct fair hearings:

☑ The Medicaid agency does not delegate authority to make eligibility determinations or to conduct fair hearings to entities other than government agencies which maintain personnel standards on a merit basis.

PRA Disclosure Statement

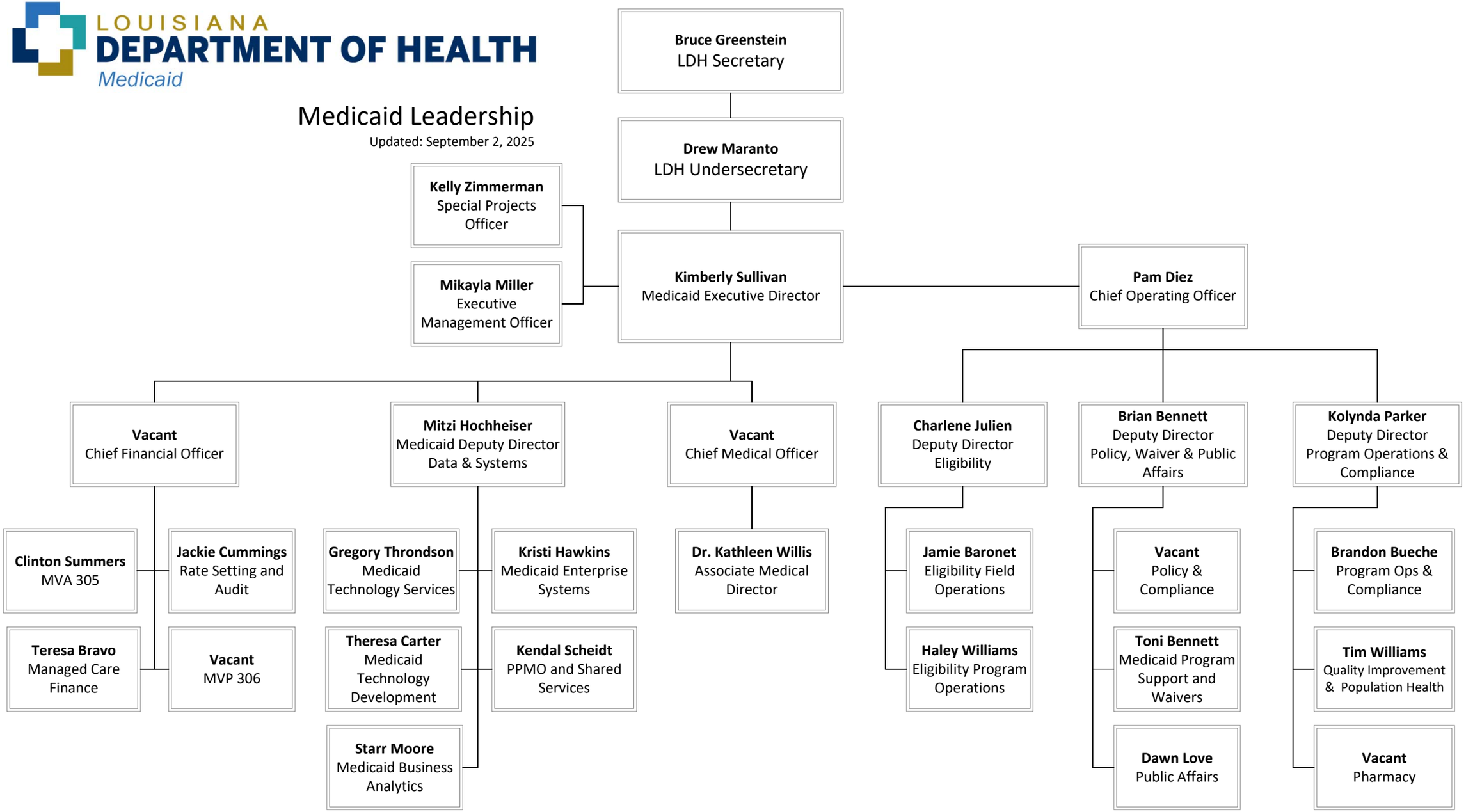
According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1148. The time required to complete this information collection is estimated to average 40 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

V.20160722

LOUISIANA DEPARTMENT OF HEALTH
Medicaid

# Medicaid Leadership

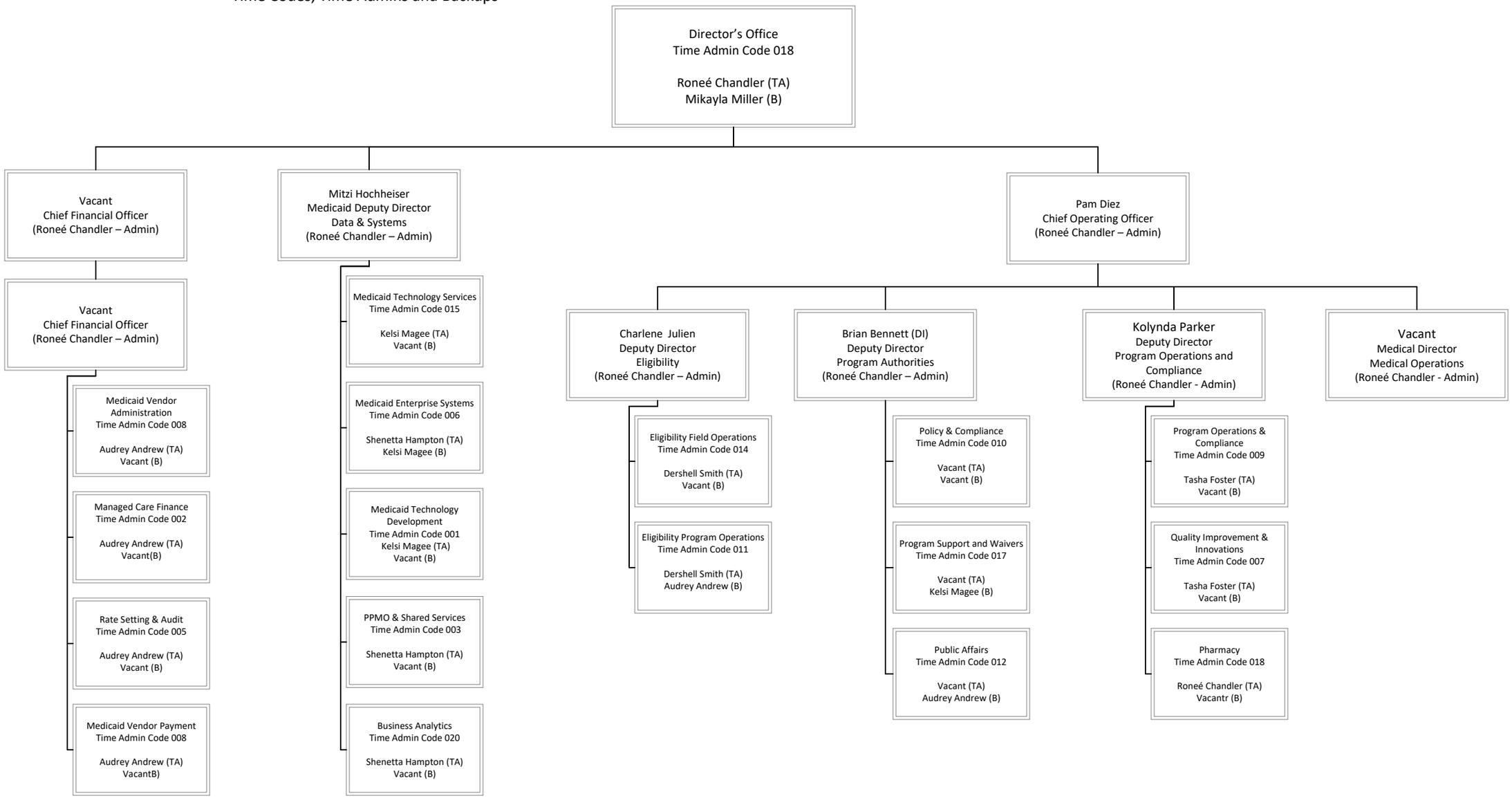
Updated: September 2, 2025



LOUISIANA DEPARTMENT OF HEALTH
Medicaid

Updated: September 2, 2025

Time Codes, Time Admins and Backups

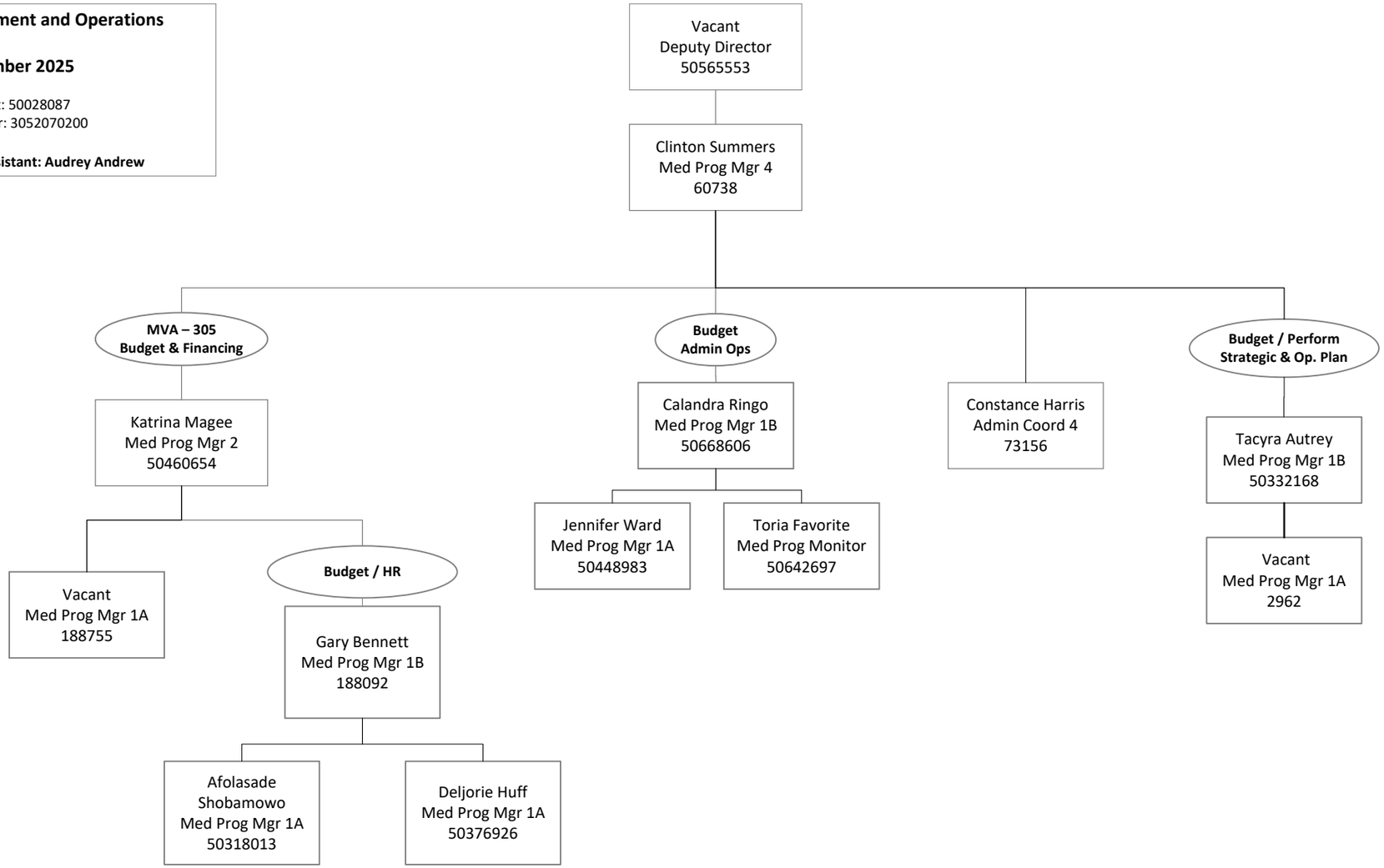


**Financial Management and Operations**

**September 2025**

Org Unit: 50028087
Cost Center: 3052070200

**Assigned Admin Assistant: Audrey Andrew**



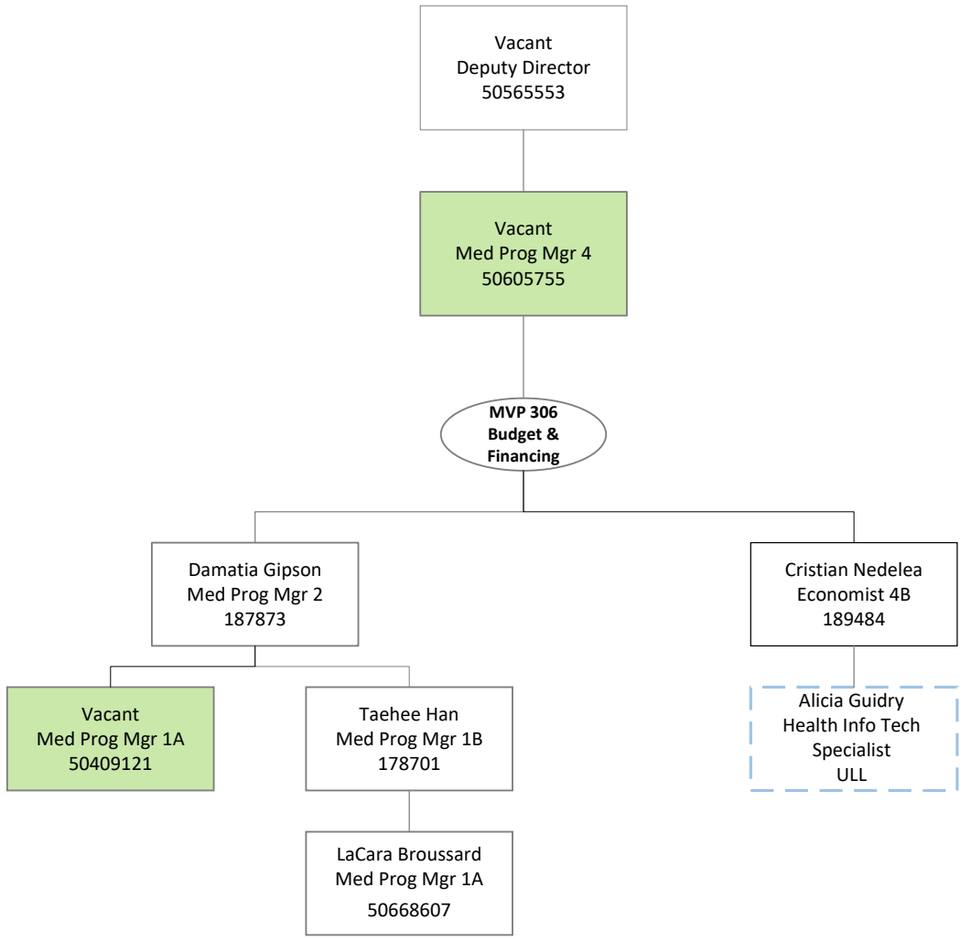

*Vacancy funding indicated in green
** Contingent on HR's final processing

**Financial Management and Operations**

**September 2025**

Org Unit: 50028087
Cost Center: 3052070202

**Assigned Admin Assistant: Audrey Andrew**

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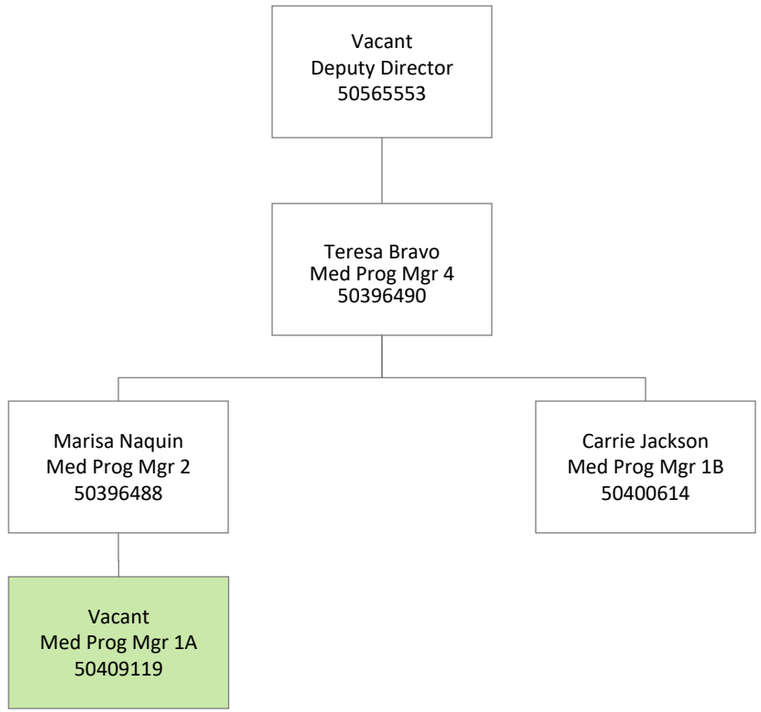
** Contingent on HR's final processing

**Managed Care Finance**

**September 2025**

Org Unit: 50480987
Cost Center: 3052020202

**Assigned Admin Assistant: Audrey Andrew**

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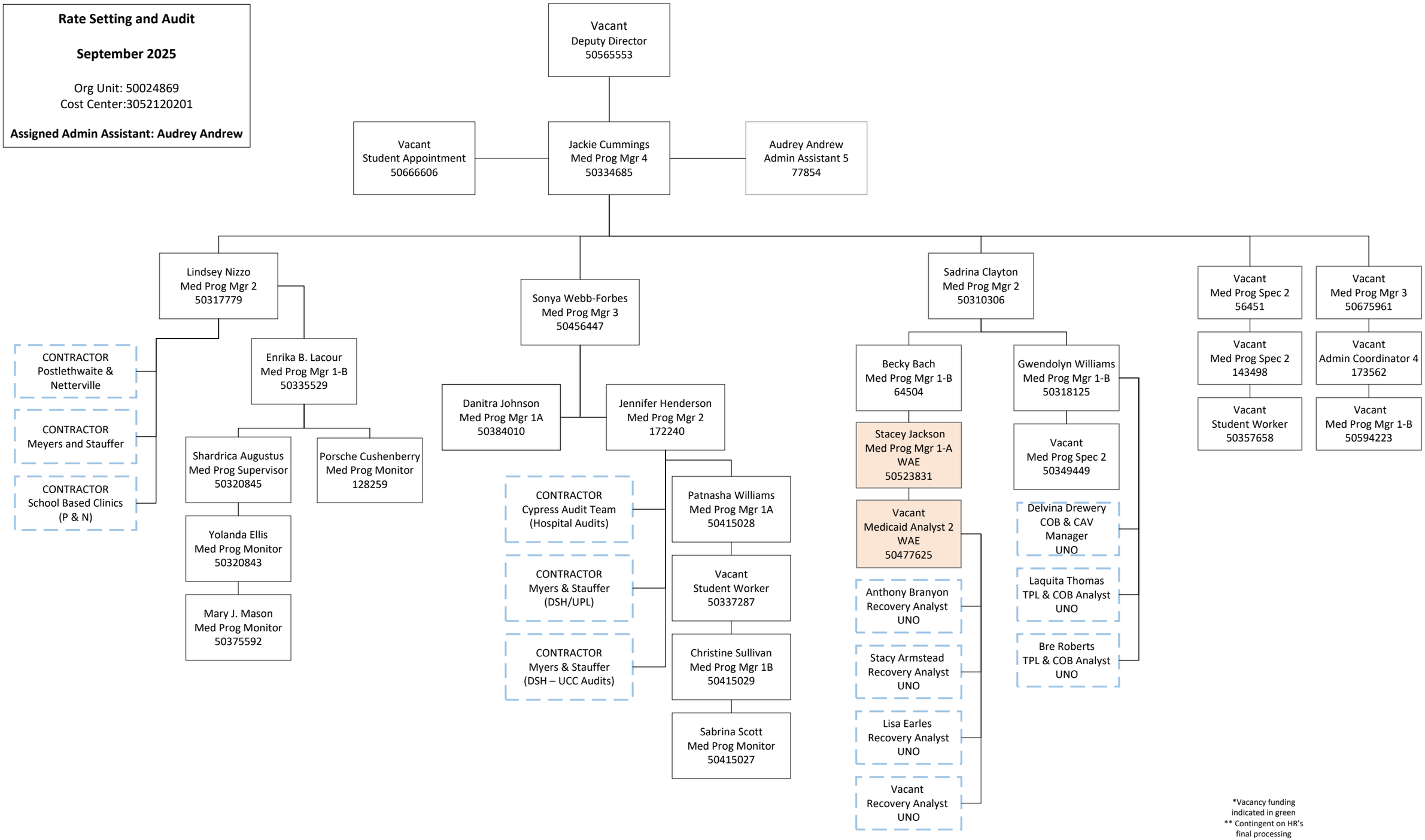
** Contingent on HR's final processing

**Rate Setting and Audit**

**September 2025**

Org Unit: 50024869
Cost Center:3052120201

**Assigned Admin Assistant: Audrey Andrew**

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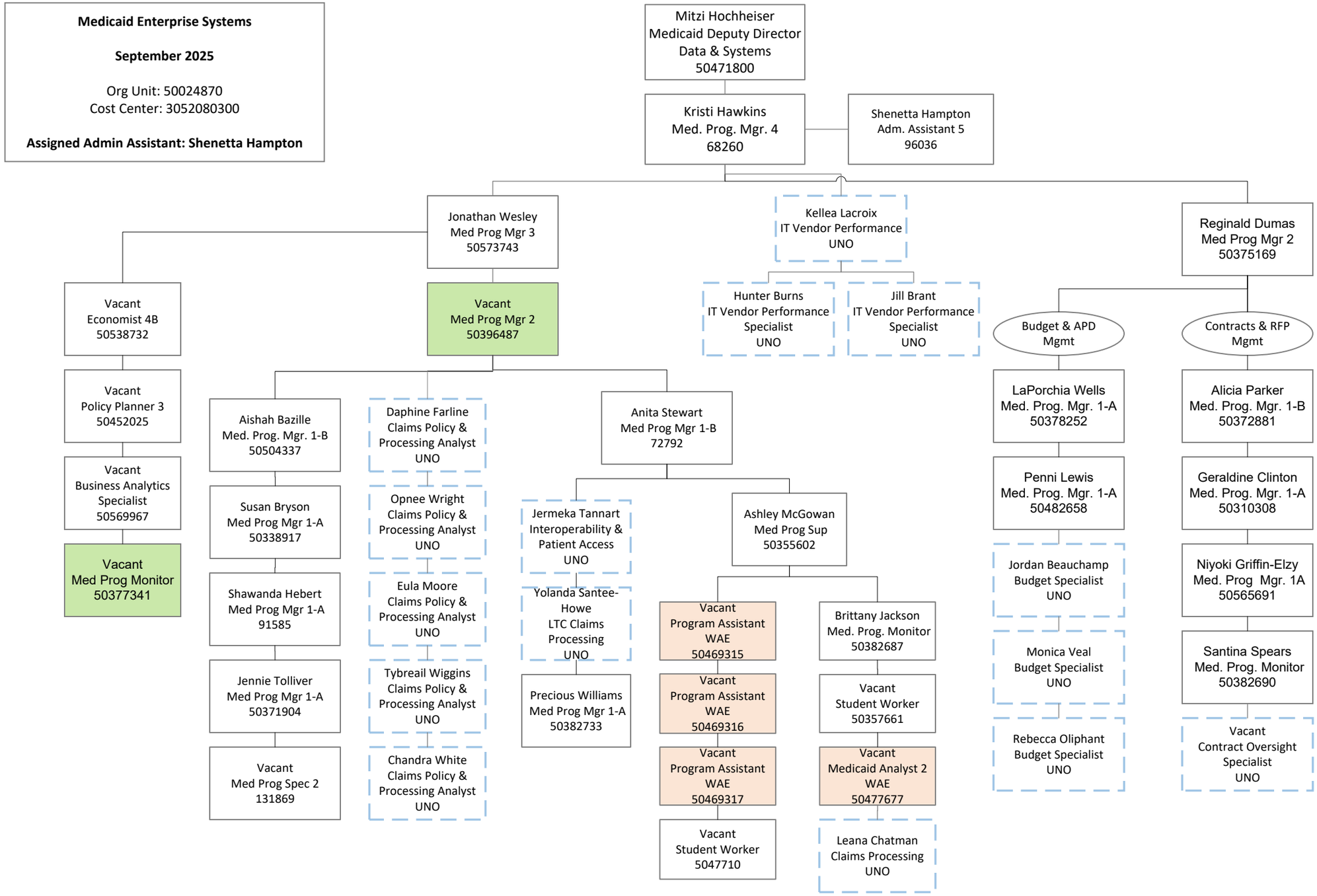
** Contingent on HR's final processing

**Medicaid Enterprise Systems**

**September 2025**

Org Unit: 50024870
Cost Center: 3052080300

**Assigned Admin Assistant: Shenetta Hampton**

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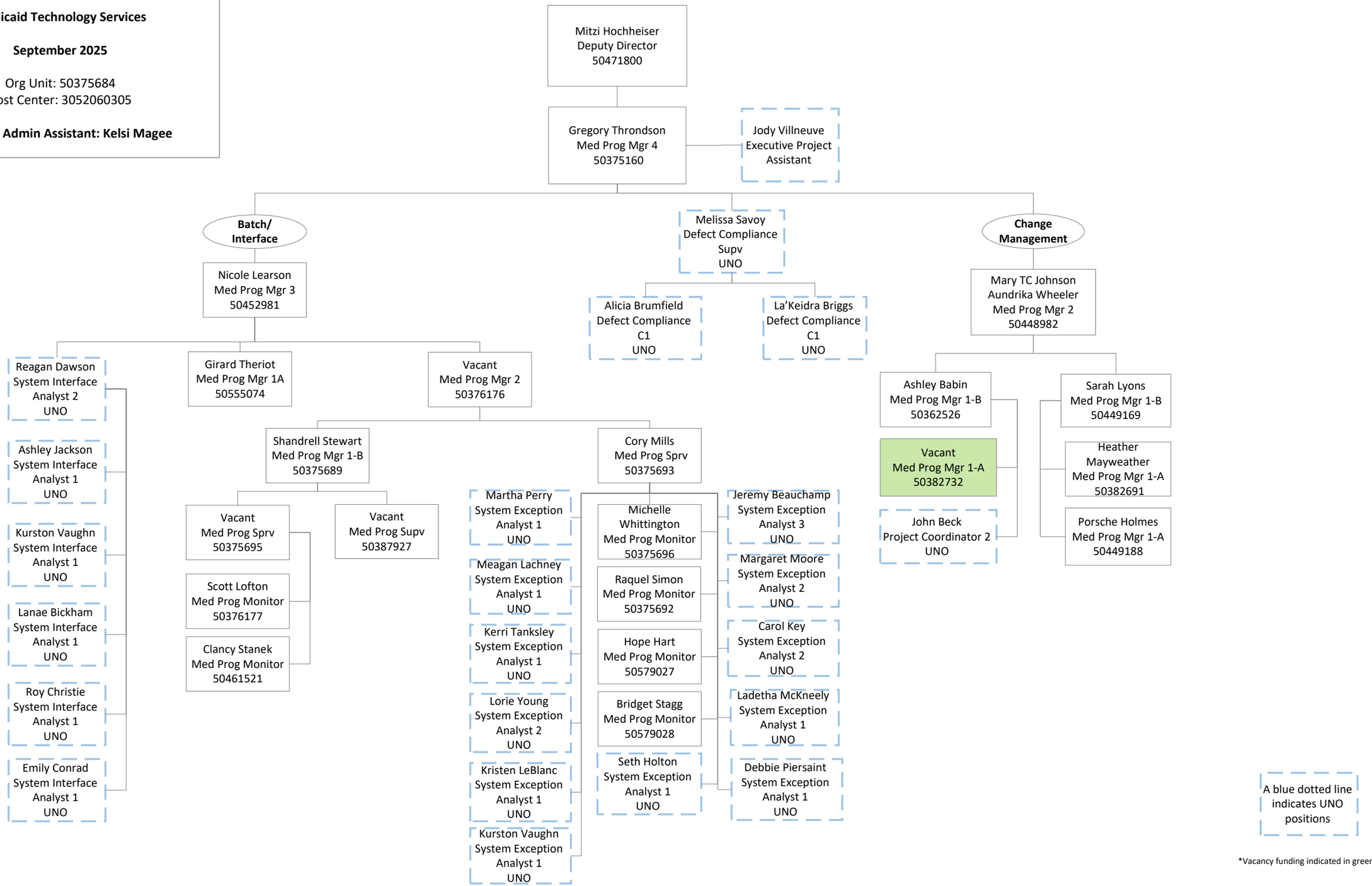
** Contingent on HR's final processing

**Medicaid Technology Services**

**September 2025**

Org Unit: 50375684
Cost Center: 3052060305

**Assigned Admin Assistant: Kelsi Magee**




A blue dotted line indicates UNO positions

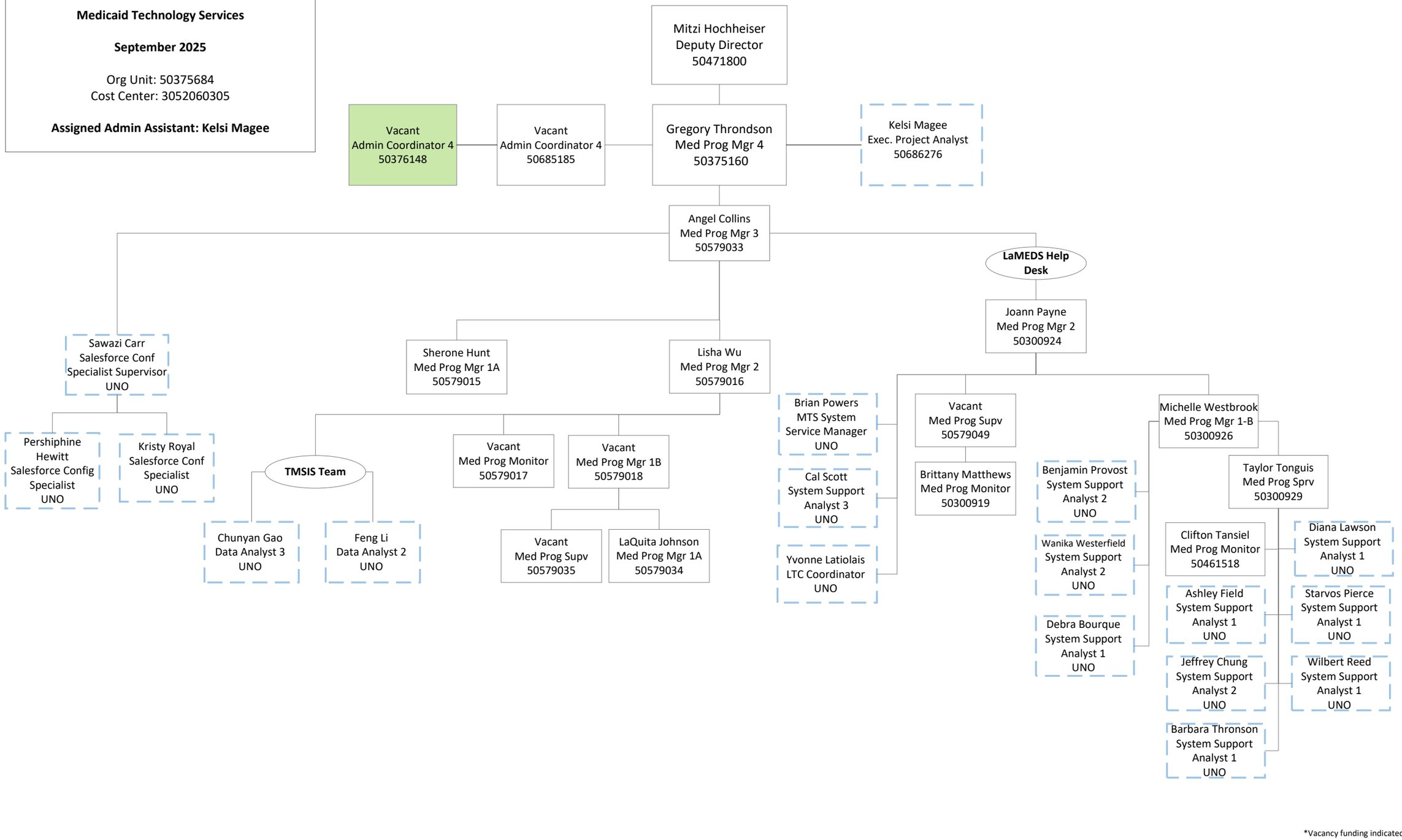
*Vacancy funding indicated in green

**Medicaid Technology Services**

**September 2025**

Org Unit: 50375684
Cost Center: 3052060305

**Assigned Admin Assistant: Kelsi Magee**

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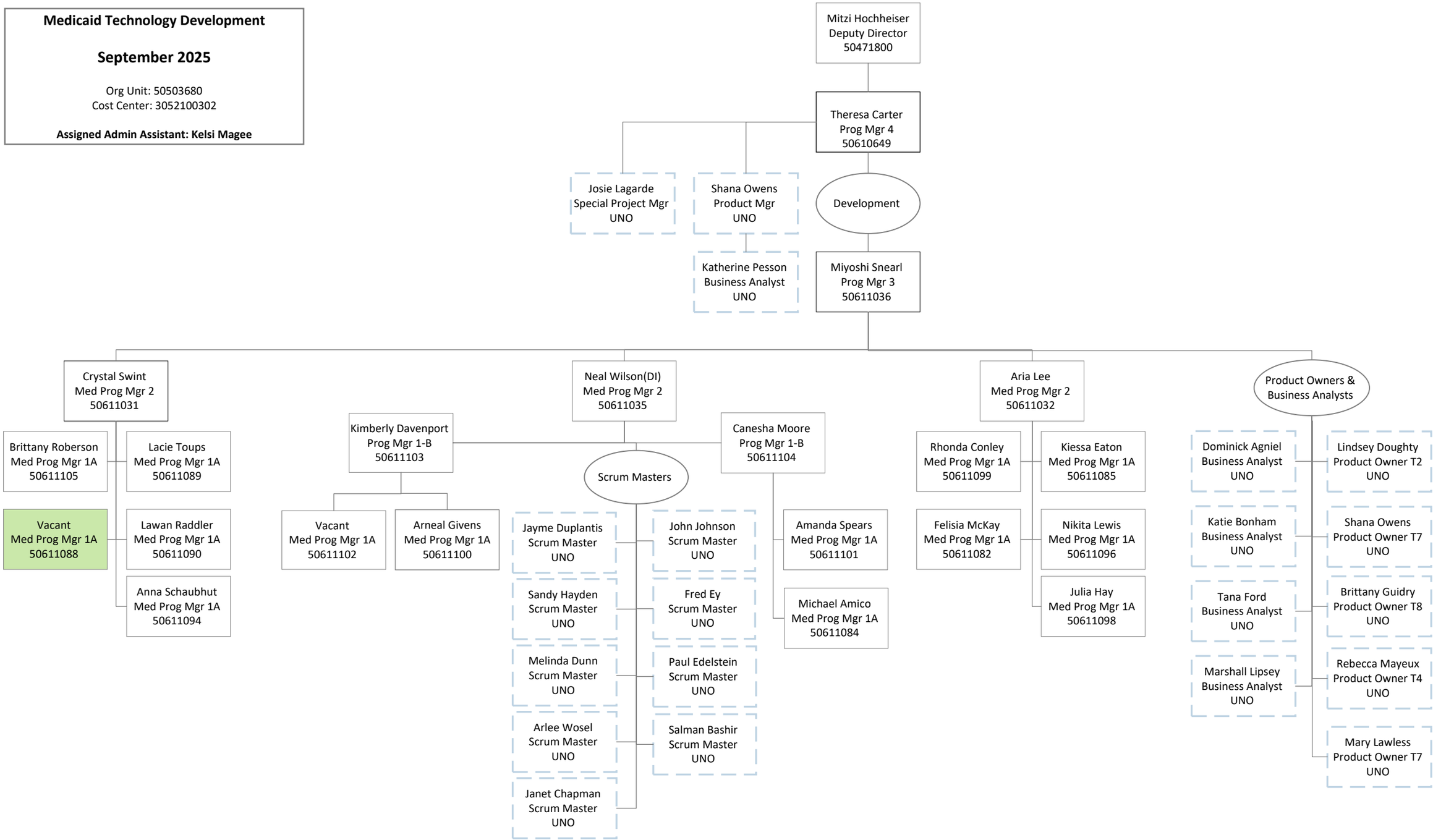
**Medicaid Technology Development**

**September 2025**

Org Unit: 50503680
Cost Center: 3052100302

**Assigned Admin Assistant: Kelsi Magee**



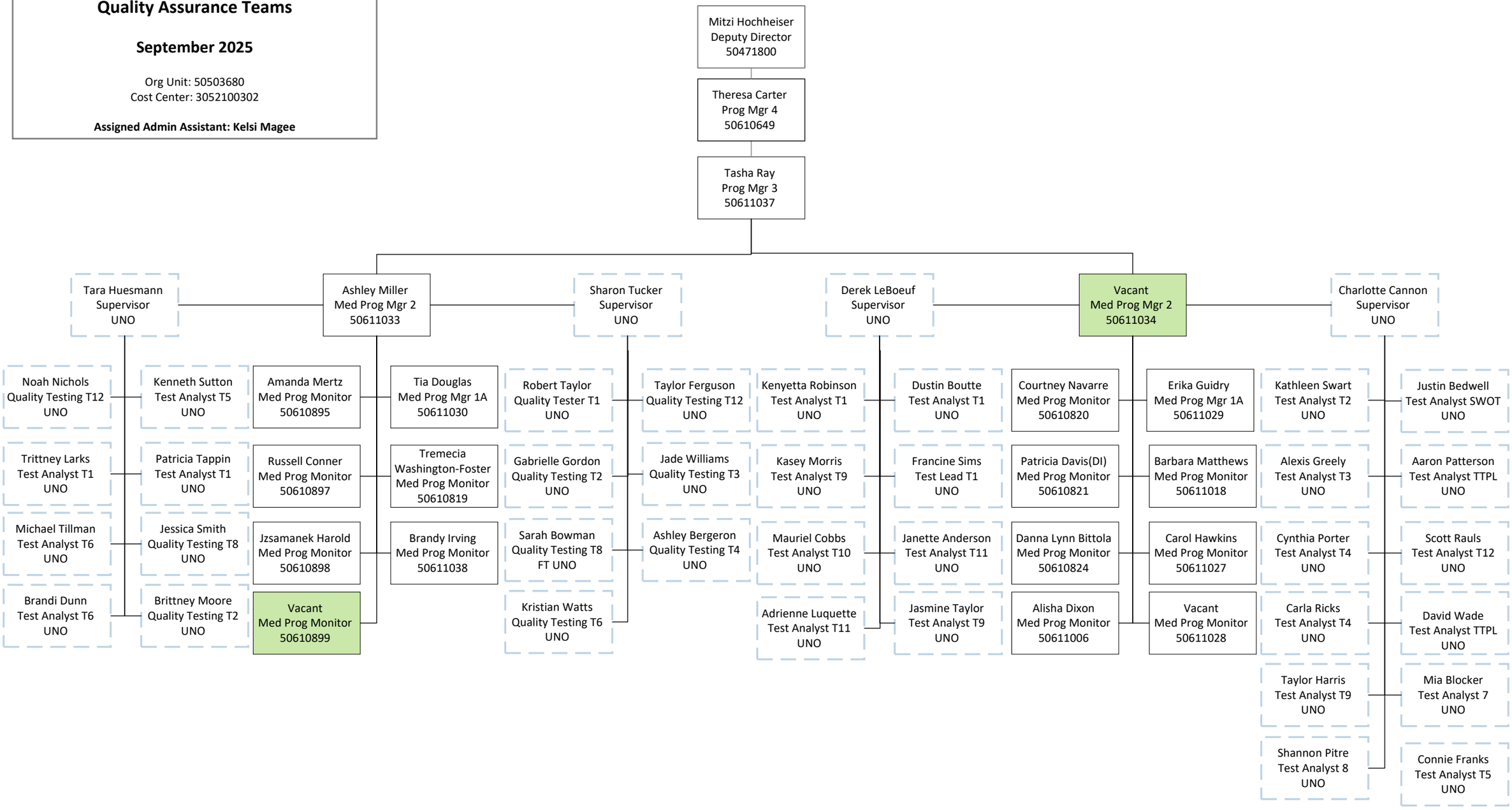
**Medicaid Technology Development**

# Quality Assurance Teams

**September 2025**

Org Unit: 50503680
Cost Center: 3052100302

**Assigned Admin Assistant: Kelsi Magee**

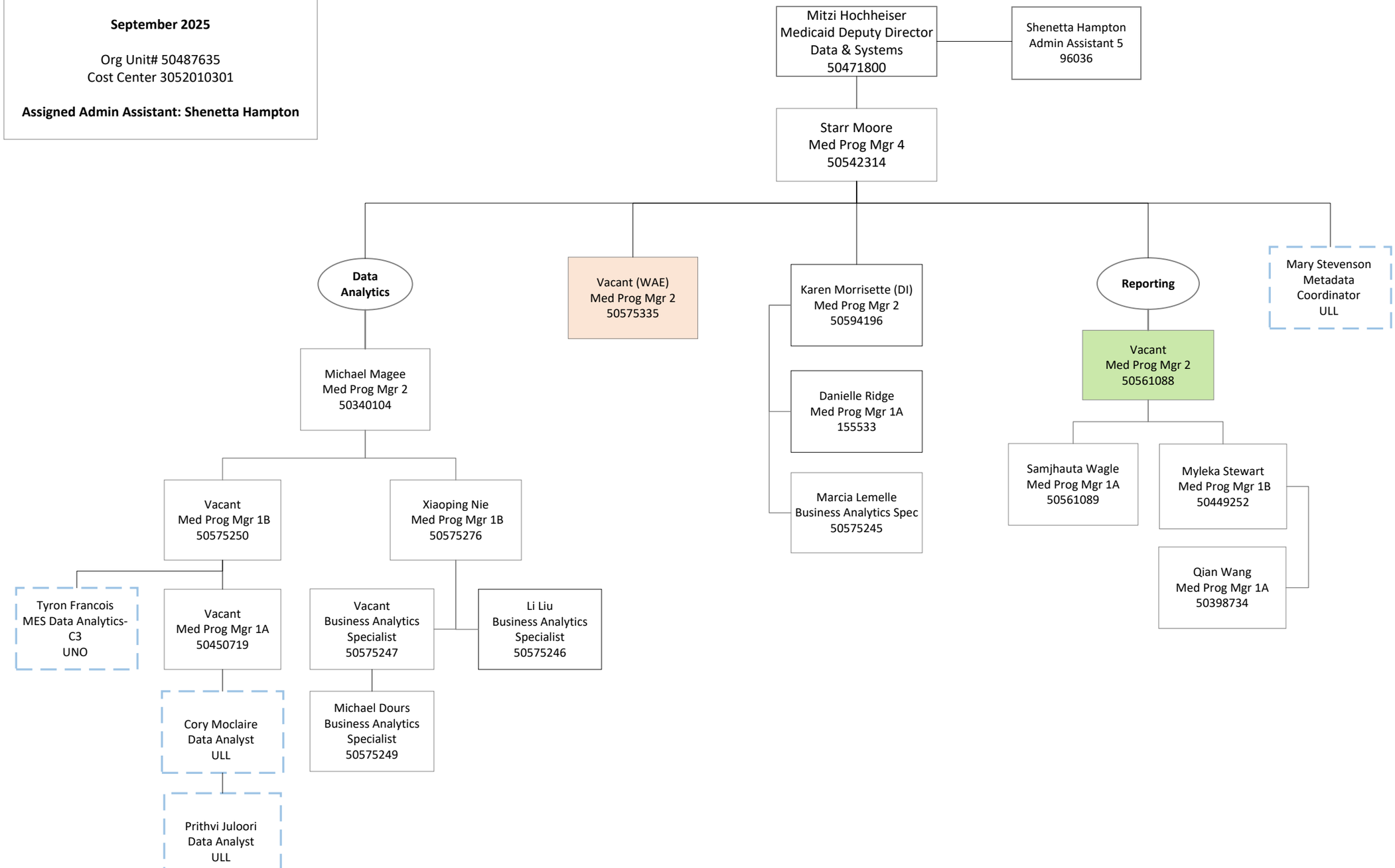


**Business Analytics**

**September 2025**

Org Unit# 50487635
Cost Center 3052010301

**Assigned Admin Assistant: Shenetta Hampton**



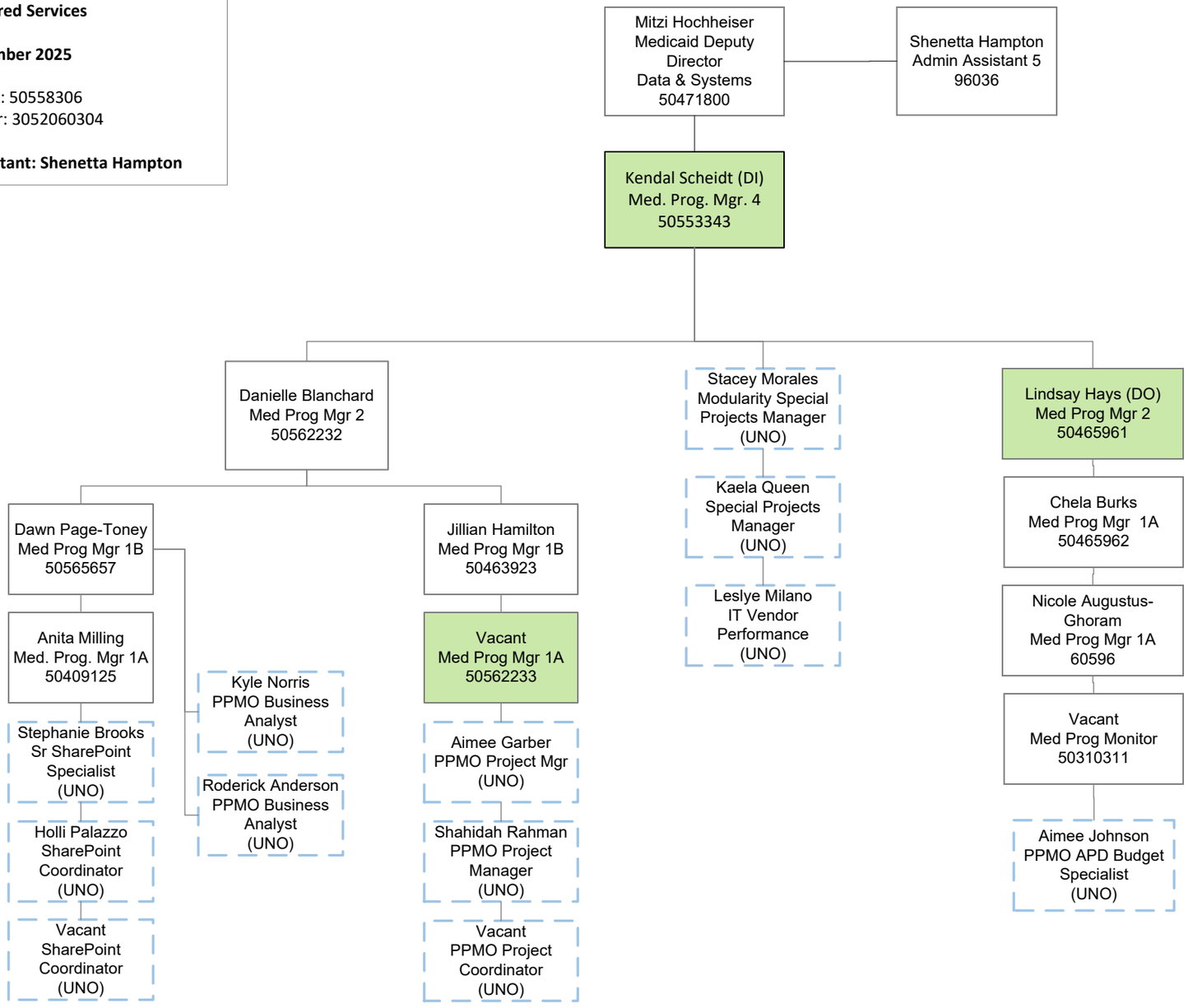

*Vacancy funding indicated in green
** Contingent on HR's final processing

**Project Portfolio Management Office and Shared Services**

**September 2025**

Org Unit: 50558306
Cost Center: 3052060304

**Assigned Admin Assistant: Shenetta Hampton**



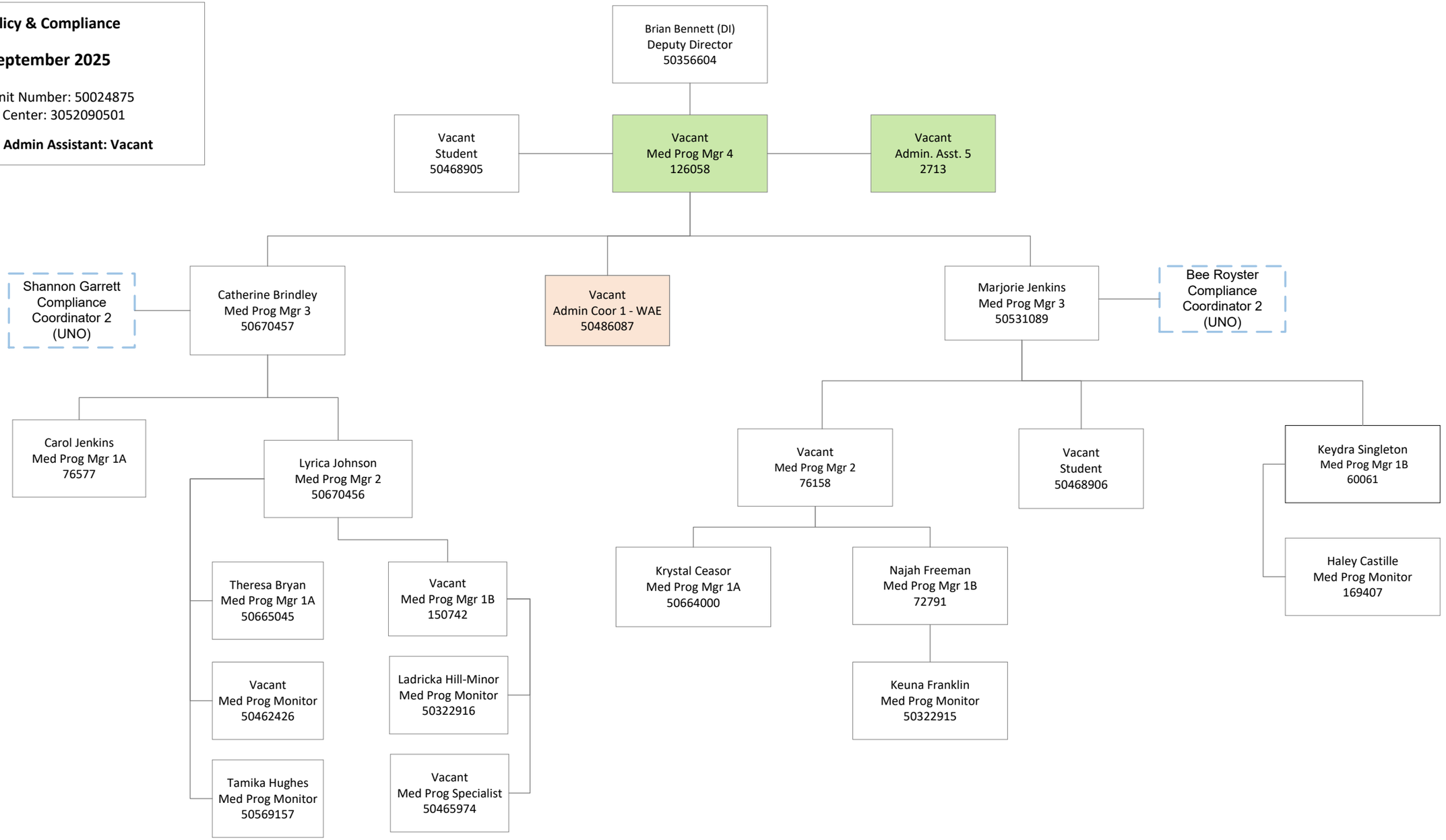

*Vacancy funding indicated in green
** Contingent on HR's final processing

**Policy & Compliance**

**September 2025**

Org Unit Number: 50024875
Cost Center: 3052090501

**Assigned Admin Assistant: Vacant**

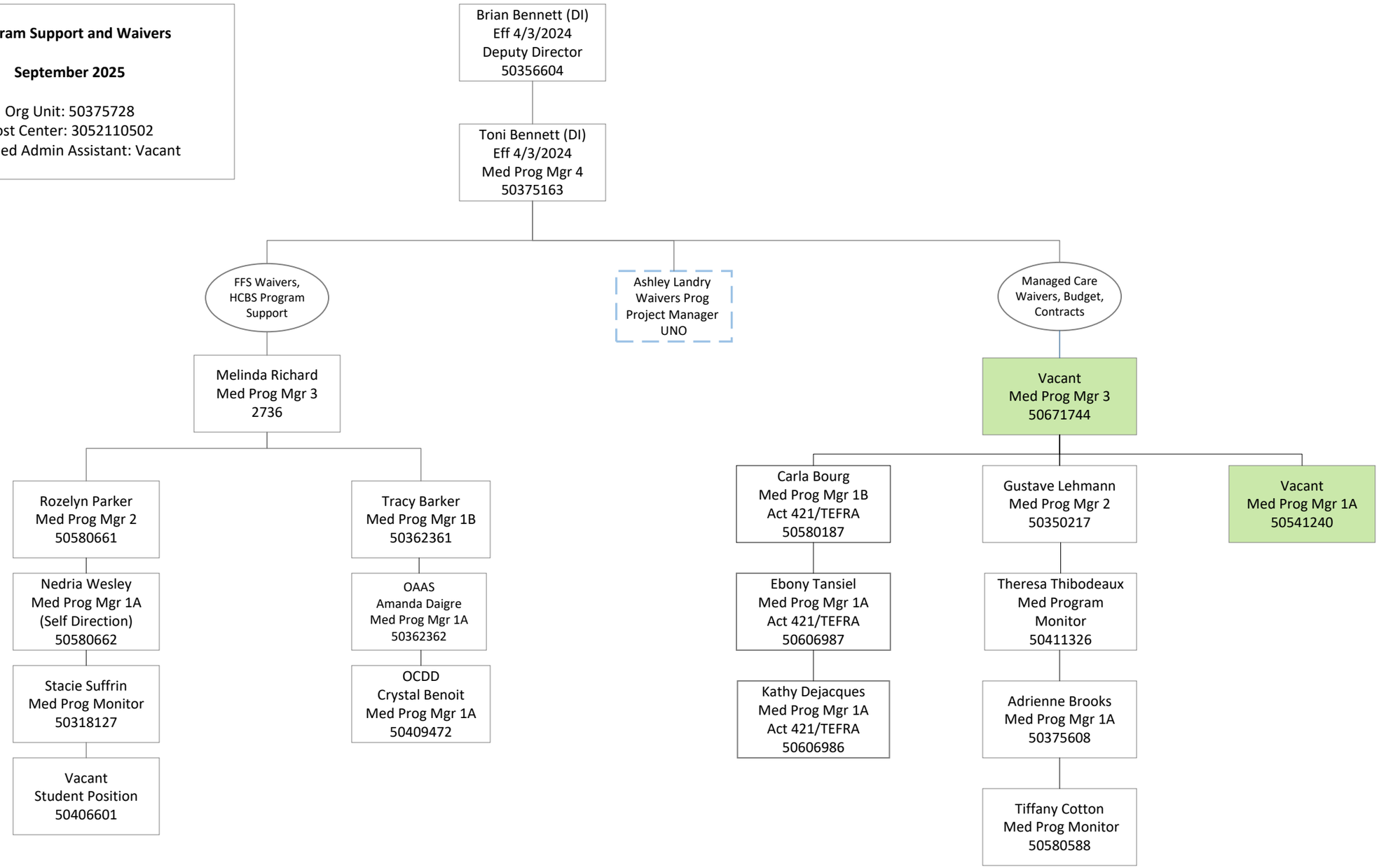



*Vacancy funding indicated in green
** Contingent on HR's final processing

**Program Support and Waivers**

**September 2025**

Org Unit: 50375728
Cost Center: 3052110502
Assigned Admin Assistant: Vacant



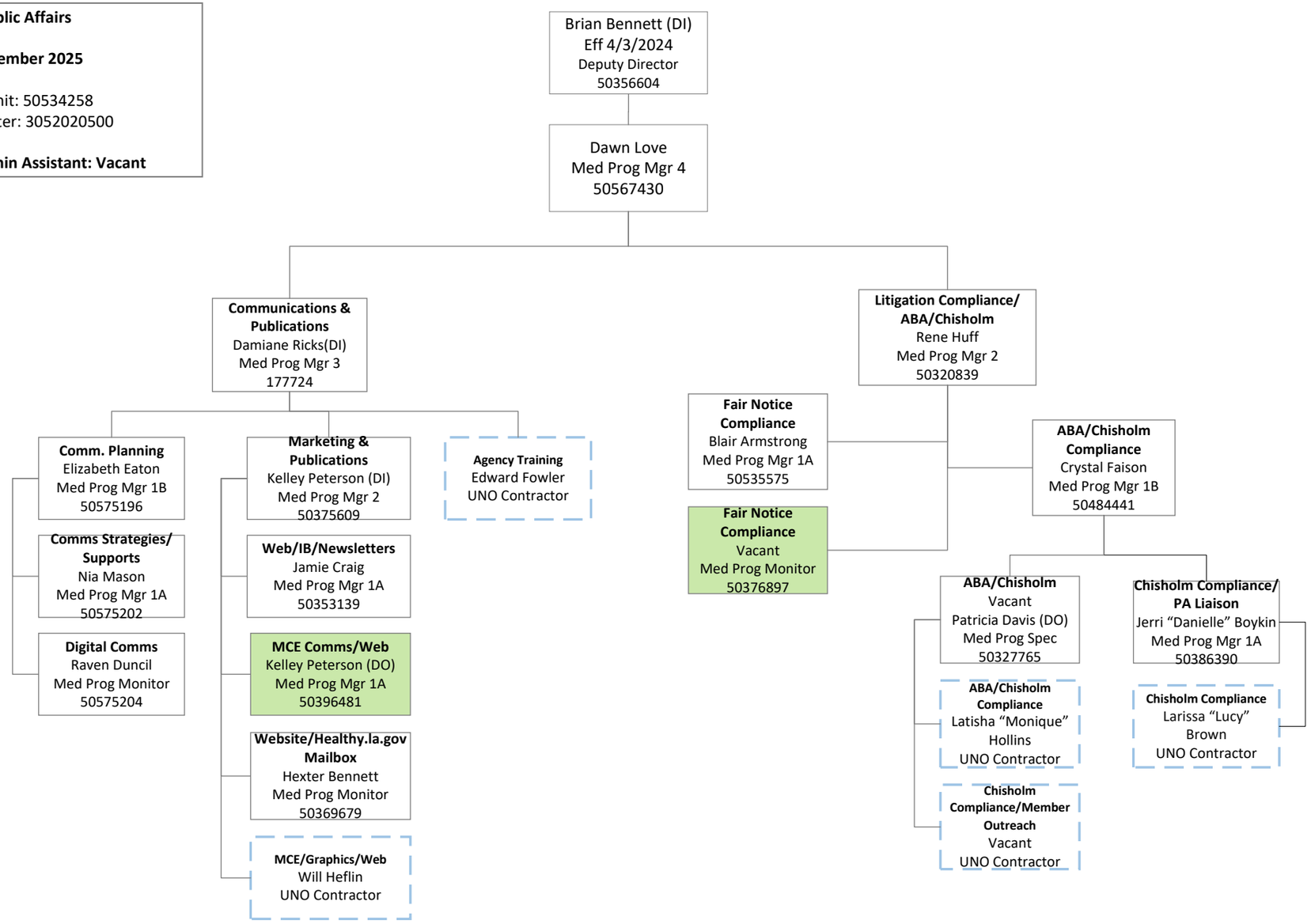

*Vacancy funding indicated in green
** Contingent on HR's final processing

**Public Affairs**

**September 2025**

Org Unit: 50534258
Cost Center: 3052020500

**Assigned Admin Assistant: Vacant**



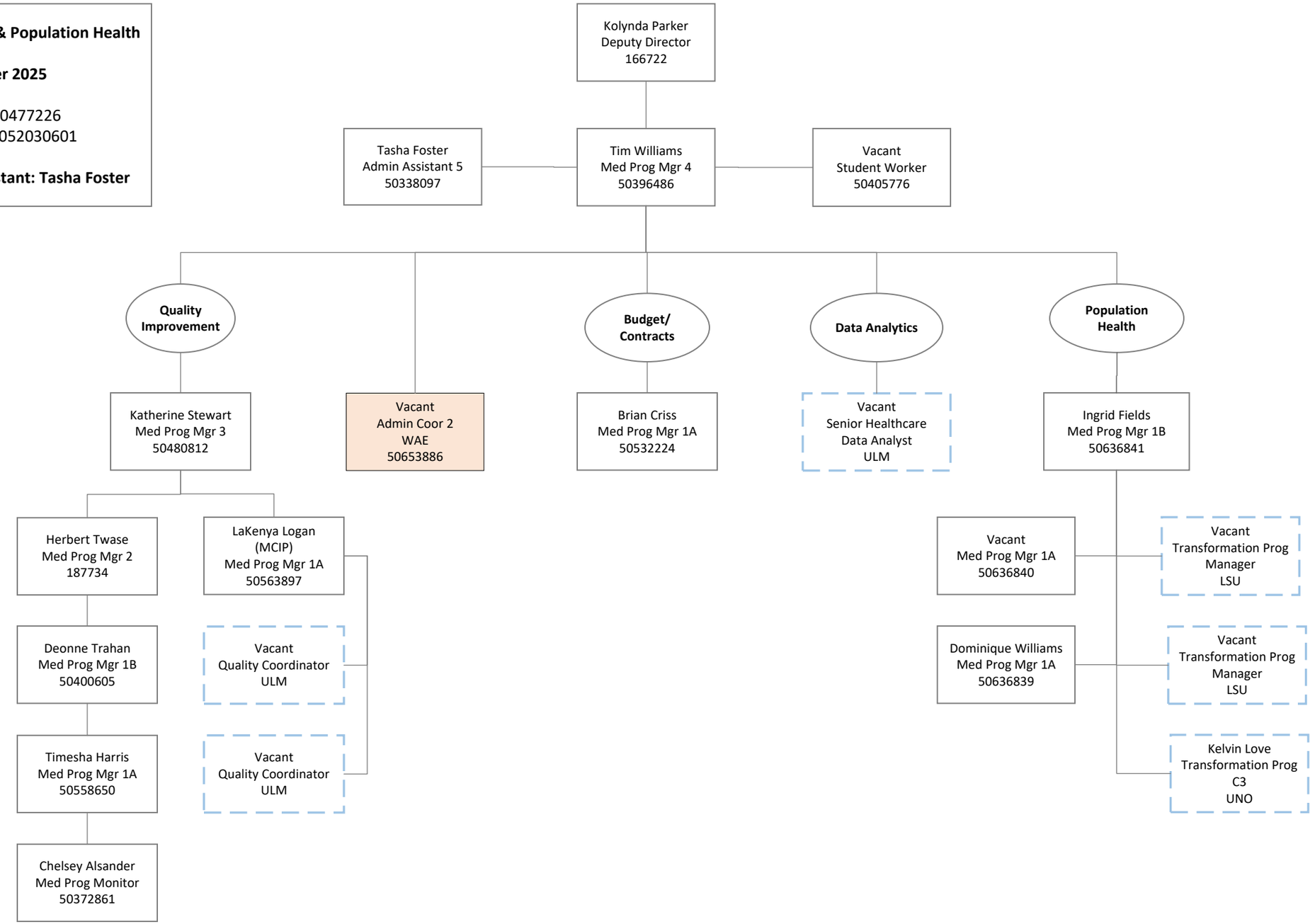

*Vacancy funding indicated in green
** Contingent on HR’s final processing

**Quality Improvement & Population Health**

**September 2025**

Org Unit # 50477226
Cost Center: 3052030601

**Assigned Admin Assistant: Tasha Foster**



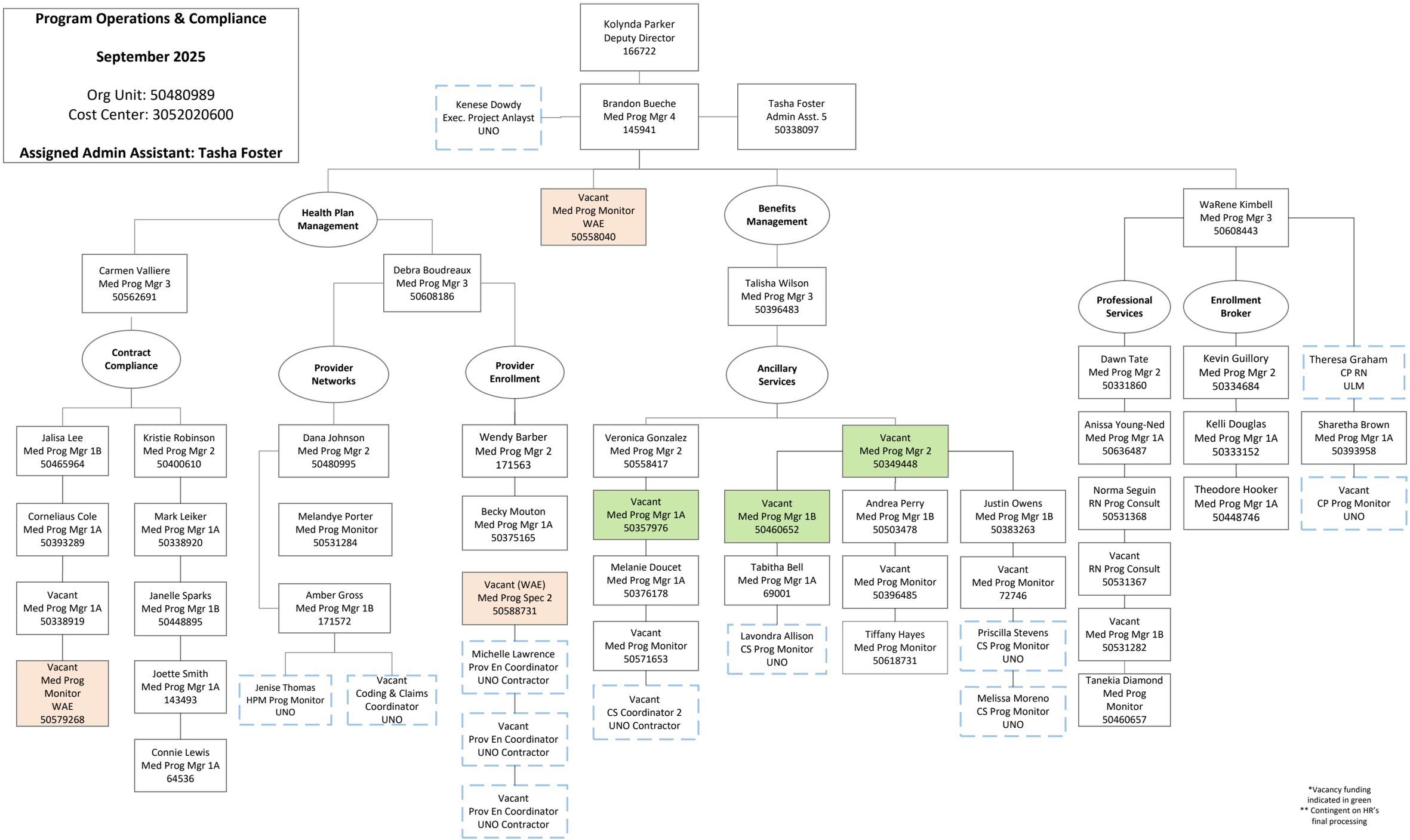

*Vacancy funding indicated in green
** Contingent on HR's final processing

**Program Operations & Compliance**

**September 2025**

Org Unit: 50480989
Cost Center: 3052020600

**Assigned Admin Assistant: Tasha Foster**




*Vacancy funding indicated in green
** Contingent on HR's final processing

# Pharmacy

## September 2025

Org Unit 50024868
Cost Center: 3052010100

**Assigned Admin Assistant: Roneé Chandler**

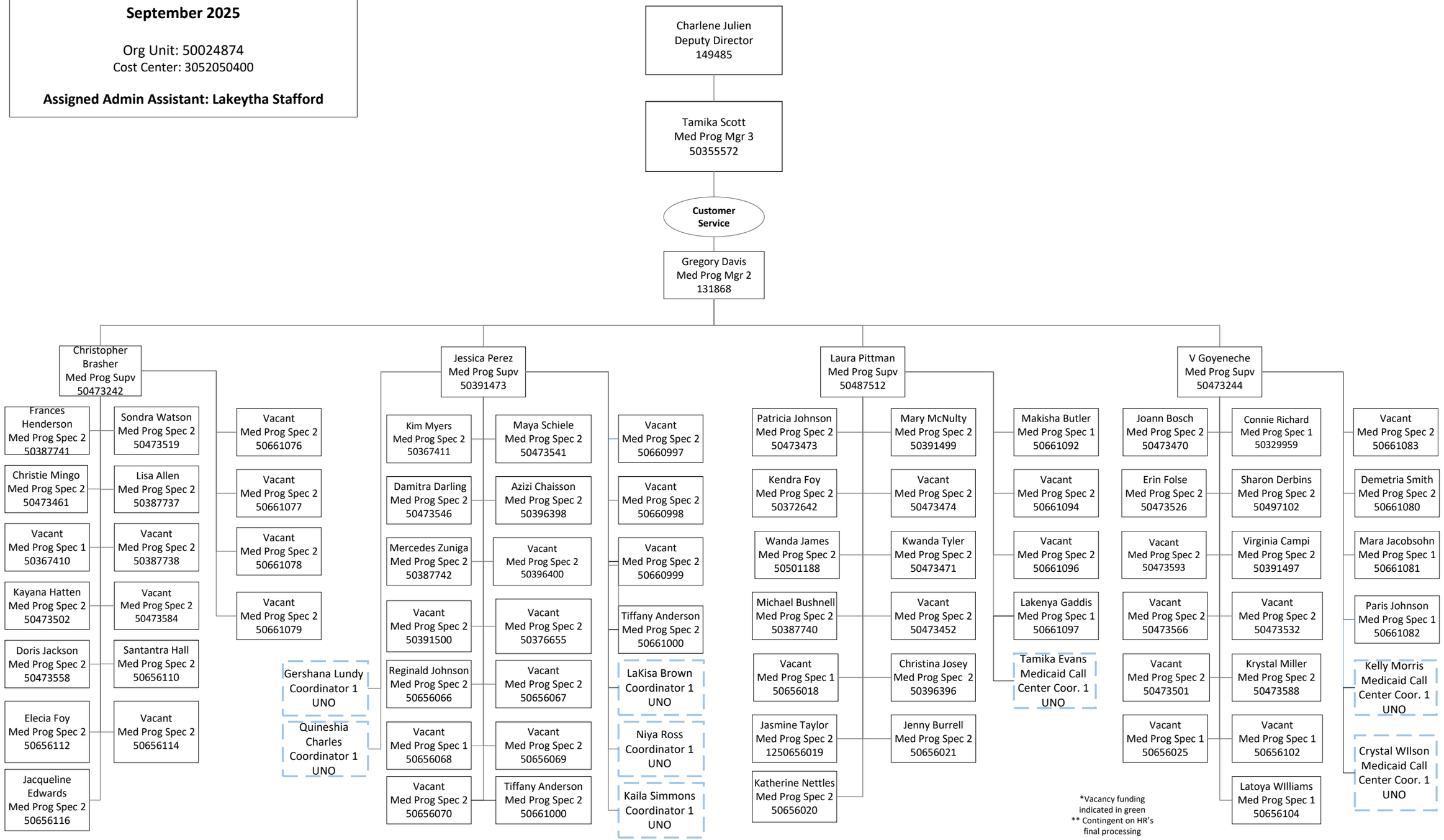

*Vacancy funding indicated in green
** Contingent on HR's final processing

**Eligibility Field Operations**

**September 2025**

Org Unit: 50024874
Cost Center: 3052050400

**Assigned Admin Assistant: Lakeytha Stafford**

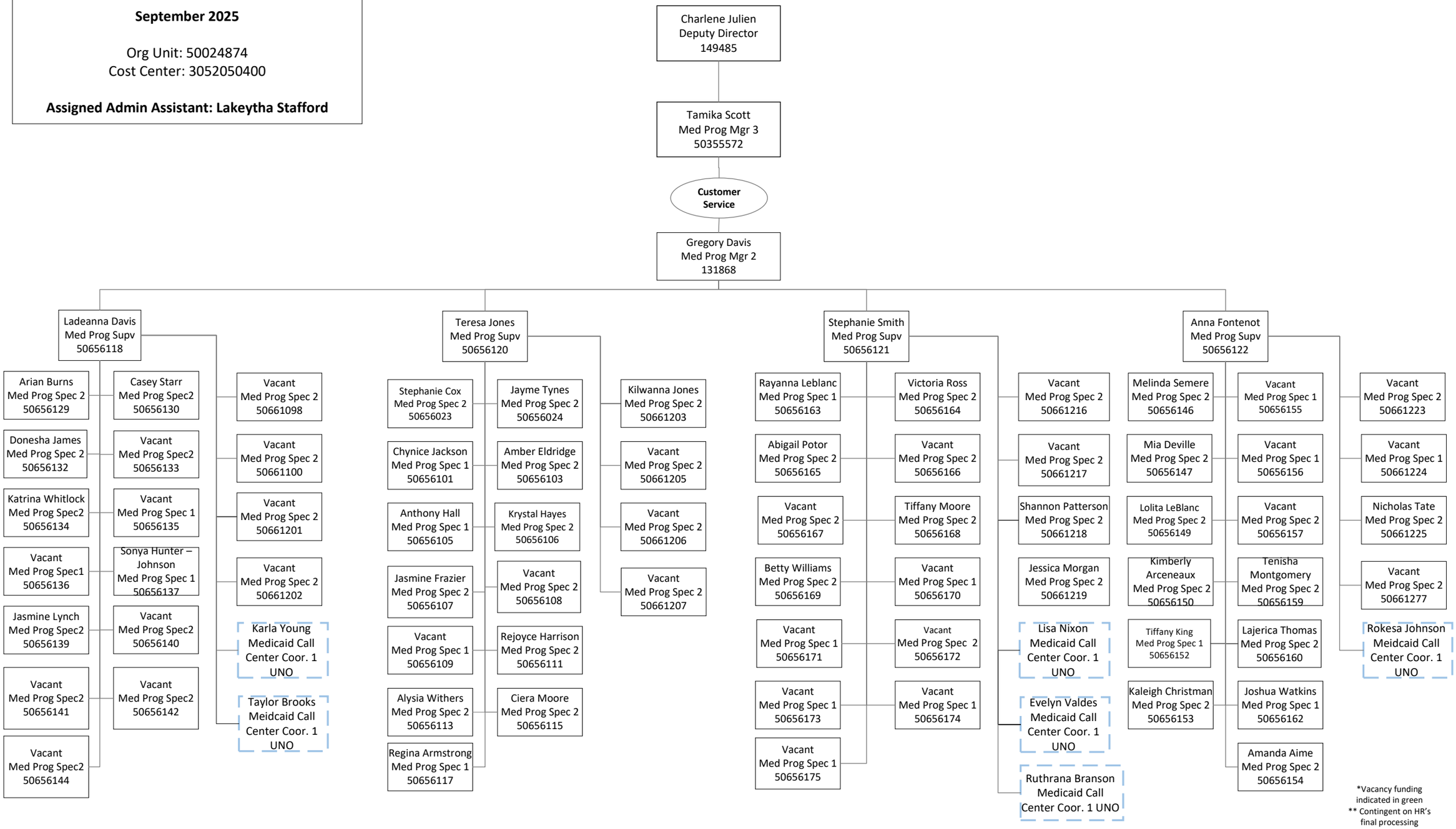


**Eligibility Field Operations**

**September 2025**

Org Unit: 50024874
Cost Center: 3052050400

**Assigned Admin Assistant: Lakeytha Stafford**



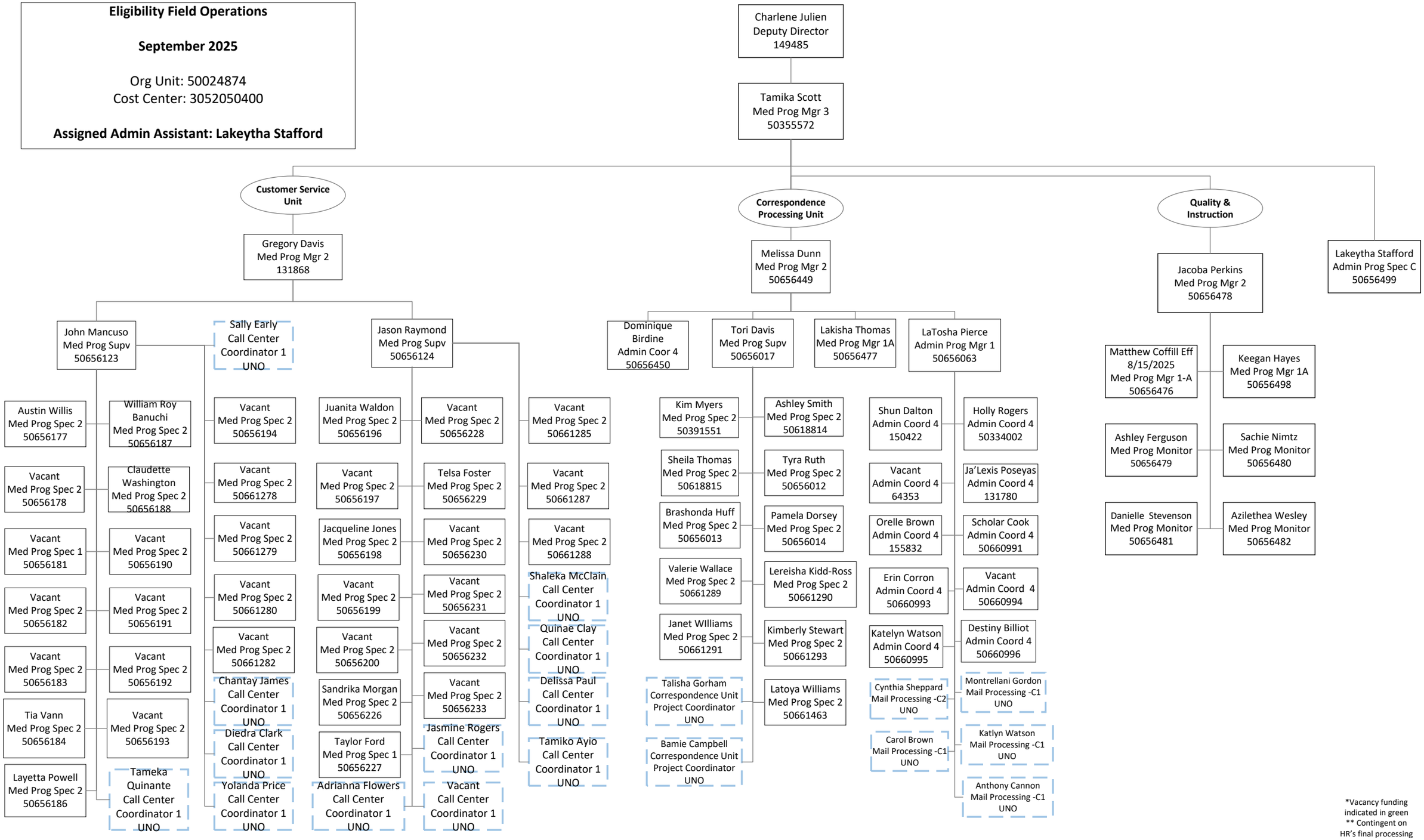

*Vacancy funding indicated in green
** Contingent on HR's final processing

**Eligibility Field Operations**

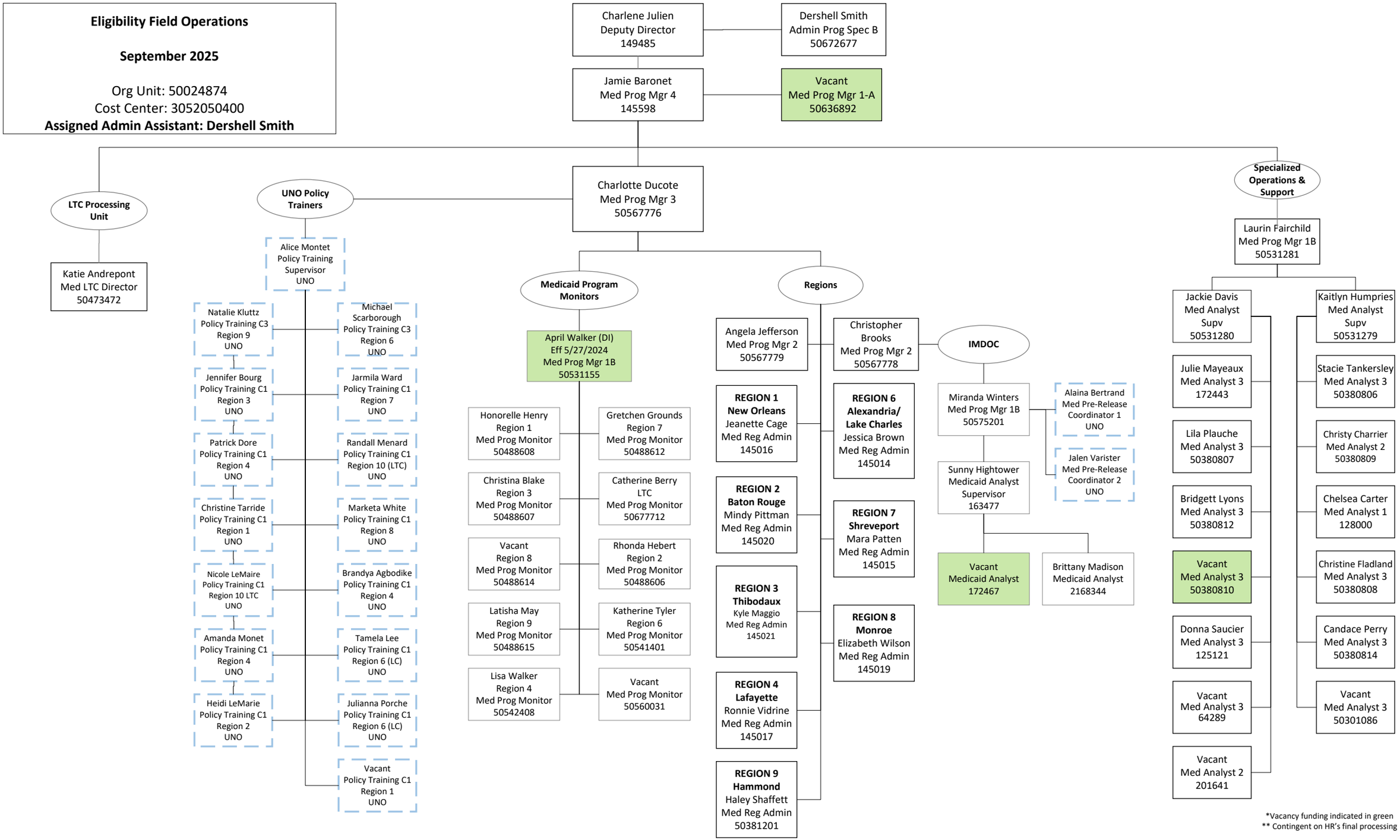
**September 2025**

Org Unit: 50024874
Cost Center: 3052050400

**Assigned Admin Assistant: Lakeytha Stafford**




*Vacancy funding indicated in green
** Contingent on HR's final processing

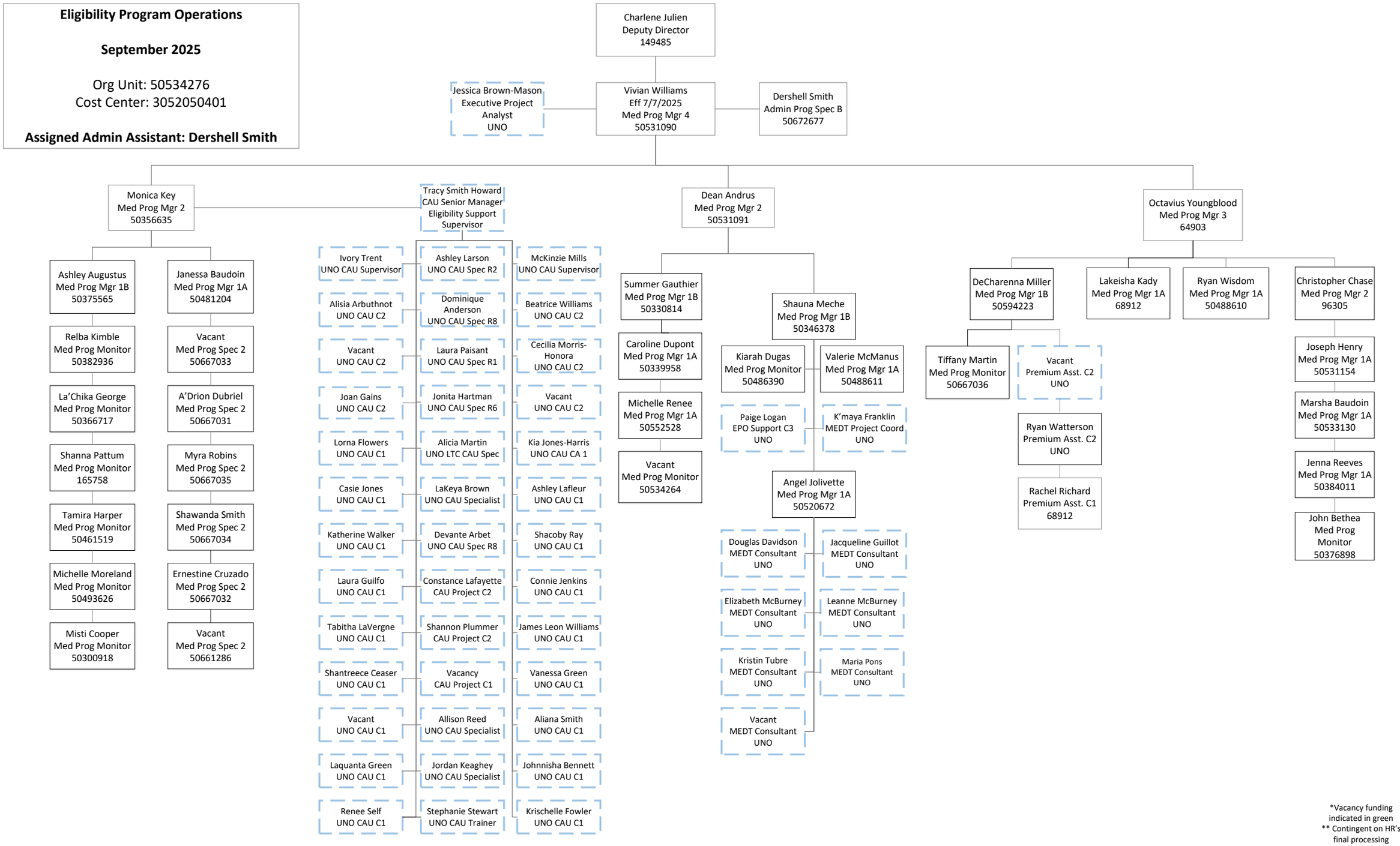

Eligibility Field Operations
September 2025
Org Unit: 50024874
Cost Center: 3052050400
Assigned Admin Assistant: Dershell Smith
Charlene Julien
Deputy Director
149485
Dershell Smith
Admin Prog Spec B
50672677
Jamie Baronet
Med Prog Mgr 4
145598
Vacant
Med Prog Mgr 1-A
50636892
LTC Processing Unit
Katie Andrepont
Med LTC Director
50473472
UNO Policy Trainers
Alice Montet
Policy Training Supervisor
UNO
Natalie Kluttz
Policy Training C3
Region 9
UNO
Michael Scarborough
Policy Training C3
Region 6
UNO
Jennifer Bourg
Policy Training C1
Region 3
UNO
Jarmila Ward
Policy Training C1
Region 7
UNO
Patrick Dore
Policy Training C1
Region 4
UNO
Randall Menard
Policy Training C1
Region 10 (LTC)
UNO
Christine Tarride
Policy Training C1
Region 1
UNO
Marketa White
Policy Training C1
Region 8
UNO
Nicole LeMaire
Policy Training C1
Region 10 LTC
UNO
Brandya Agbodike
Policy Training C1
Region 4
UNO
Amanda Monet
Policy Training C1
Region 4
UNO
Tamela Lee
Policy Training C1
Region 6 (LC)
UNO
Heidi LeMarie
Policy Training C1
Region 2
UNO
Julianna Porche
Policy Training C1
Region 6 (LC)
UNO
Vacant
Policy Training C1
Region 1
UNO
Charlotte Ducote
Med Prog Mgr 3
50567776
Medicaid Program Monitors
April Walker (DI)
Eff 5/27/2024
Med Prog Mgr 1B
50531155
Honorelle Henry
Region 1
Med Prog Monitor
50488608
Gretchen Grounds
Region 7
Med Prog Monitor
50488612
Christina Blake
Region 3
Med Prog Monitor
50488607
Catherine Berry
LTC
Med Prog Monitor
50677712
Vacant
Region 8
Med Prog Monitor
50488614
Rhonda Hebert
Region 2
Med Prog Monitor
50488606
Latisha May
Region 9
Med Prog Monitor
50488615
Katherine Tyler
Region 6
Med Prog Monitor
50541401
Lisa Walker
Region 4
Med Prog Monitor
50542408
Vacant
Med Prog Monitor
50560031
Regions
Angela Jefferson
Med Prog Mgr 2
50567779
Christopher Brooks
Med Prog Mgr 2
50567778
REGION 1
New Orleans
Jeanette Cage
Med Reg Admin
145016
REGION 6
Alexandria/
Lake Charles
Jessica Brown
Med Reg Admin
145014
REGION 2
Baton Rouge
Mindy Pittman
Med Reg Admin
145020
REGION 7
Shreveport
Mara Patten
Med Reg Admin
145015
REGION 3
Thibodaux
Kyle Maggio
Med Reg Admin
145021
REGION 8
Monroe
Elizabeth Wilson
Med Reg Admin
145019
REGION 4
Lafayette
Ronnie Vidrine
Med Reg Admin
145017
REGION 9
Hammond
Haley Shaffett
Med Reg Admin
50381201
IMDOC
Miranda Winters
Med Prog Mgr 1B
50575201
Alaina Bertrand
Med Pre-Release
Coordinator 1
UNO
Jalen Varister
Med Pre-Release
Coordinator 2
UNO
Sunny Hightower
Medicaid Analyst
Supervisor
163477
Vacant
Medicaid Analyst
172467
Brittany Madison
Medicaid Analyst
2168344
Specialized Operations & Support
Laurin Fairchild
Med Prog Mgr 1B
50531281
Jackie Davis
Med Analyst
Supv
50531280
Kaitlyn Humpries
Med Analyst
Supv
50531279
Julie Mayeaux
Med Analyst 3
172443
Stacie Tankersley
Med Analyst 3
50380806
Lila Plauche
Med Analyst 3
50380807
Christy Charrier
Med Analyst 2
50380809
Bridgett Lyons
Med Analyst 3
50380812
Chelsea Carter
Med Analyst 1
128000
Vacant
Med Analyst 3
50380810
Christine Fladland
Med Analyst 3
50380808
Donna Saucier
Med Analyst 3
125121
Candace Perry
Med Analyst 3
50380814
Vacant
Med Analyst 3
64289
Vacant
Med Analyst 3
50301086
Vacant
Med Analyst 2
201641
*Vacancy funding indicated in green
** Contingent on HR's final processing

**Eligibility Program Operations**

**September 2025**

Org Unit: 50534276
Cost Center: 3052050401

**Assigned Admin Assistant: Dershell Smith**



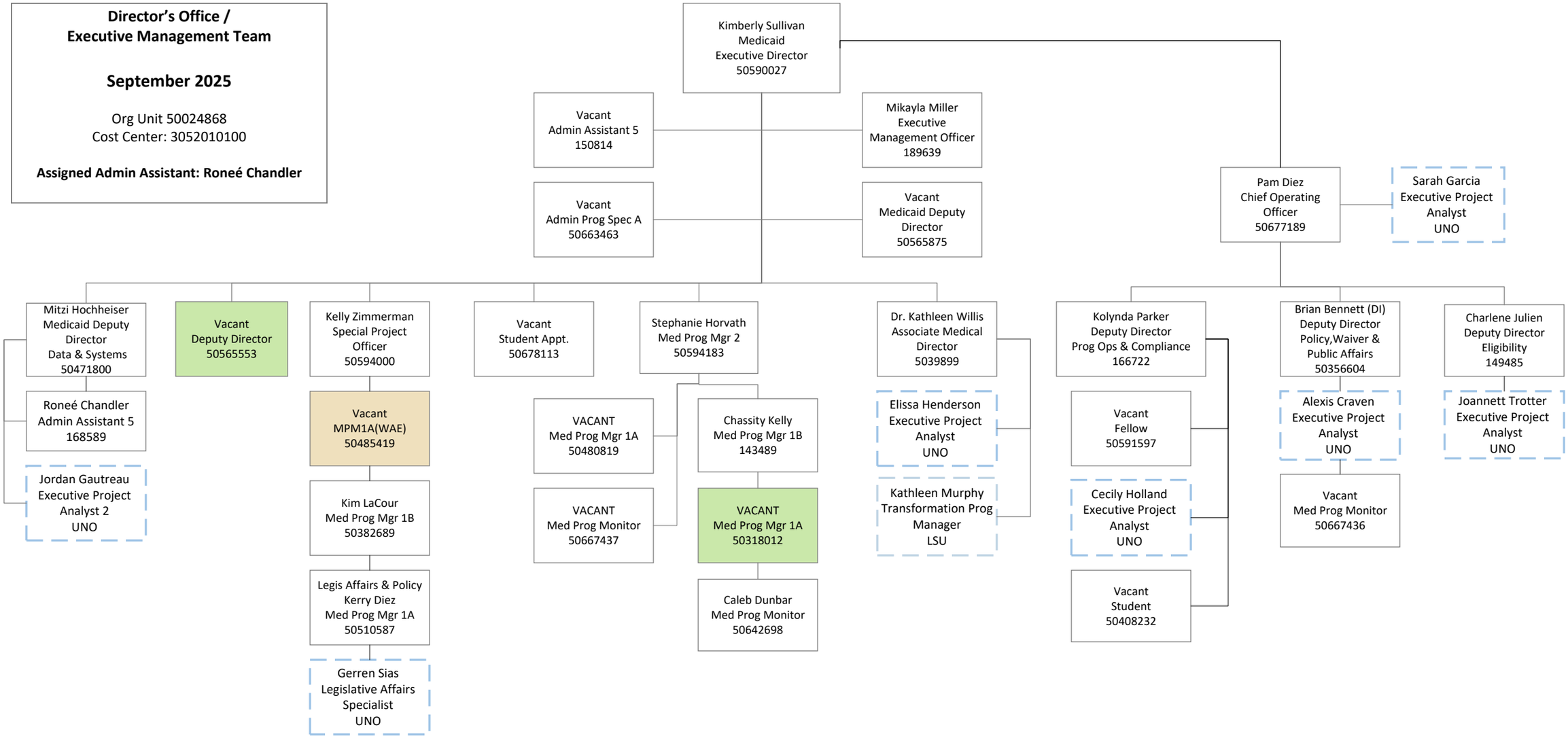

*Vacancy funding indicated in green
** Contingent on HR's final processing

**Director's Office /**
**Executive Management Team**

**September 2025**

Org Unit 50024868
Cost Center: 3052010100

**Assigned Admin Assistant: Roneé Chandler**




*Vacancy funding indicated in green
** Contingent on HR's final processing