



**State of Louisiana**  
Louisiana Department of Health  
Bureau of Health Services Financing

November 20, 2025

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Cameron Chase, Health Director  
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P. O. Box 1589  
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Dear Louisiana Tribal Contact:

**RE: Notification of Louisiana State Plan Amendments**

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 State Plan amendments (SPAs) that may have an impact on your tribe.

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Attached for your review and comments is a summary of the proposed SPAs. Please provide any comments you may have by **December 20, 2025**, to Marjorie Jenkins via email at [Marjorie.Jenkins@la.gov](mailto:Marjorie.Jenkins@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, you may contact Marjorie at the email address above or by telephone at (225) 342-3881.

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

Sincerely,

*Marjorie V. Jenkins* for  
Seth J. Gold  
Medicaid Executive Director

Attachment

SG/MJ/KC

c: Barbara Premhus  
Cecilia Williams

**State Plan Amendments for Submittal to CMS**  
Request for Tribal Comments  
November 20, 2025

**Medication-Assisted Treatment (MAT) Program**  
**Effective date: October 1, 2025**

The purpose of this SPA is to comply with Section 201 of the Consolidated Appropriations Act, 2024 (CAA, 2024) and [State Medicaid Director Letter \(SMD\) #24-004](#), by making the MAT for opioid use disorders benefit, permanent under State Plan. The MAT benefit includes Medicaid coverage of certain drugs, biological products, related counseling services, and behavioral therapy.

**Managed Care for Physical and Behavioral Health**  
**Effective date: March 1, 2026**

The purpose of the SPA is to amend the provisions governing beneficiaries' disenrollment from managed care organizations (MCOs) in order to allow a change in MCO twice in a calendar year. After the second plan change, beneficiaries will be locked into their selected MCO until the end of the calendar year, unless a change for cause is approved. This amendment does not reduce benefits, eligibility, or access to services. It solely modifies the process by which beneficiaries may change MCOs.

Note: Enrolled citizens of Federally Recognized Tribal Nations are exempt from enrollment in managed care plans contracted with the State.