

State: LOUISIANA

Reasonable Limits on Amounts for Necessary Medical or Remedial Care
Recognized Under State Law but Not Covered Under the State Plan

Citation

42 CFR 435 Subparts H and I

Reasonable Limits

1. For medically necessary care, services, and items not paid under the Medicaid State Plan or, if covered under the Medicaid State Plan, denied due to service limitations. The medical or remedial care must be:
 - a. recognized under state law;
 - b. medically necessary as verified by an independent licensed physician or medical director; and
 - c. incurred no earlier than three months preceding the month in which it is reported to the state.
2. The medical or remedial care cannot be:
 - a. for cosmetic or elective purposes, except when medically necessary as verified by an independent licensed physician or medical director; and/or
 - b. for payment of a medical or dental service plan that has not been approved by the Louisiana Department of Insurance in accordance with the Louisiana Insurance Code or is sold by an entity not licensed by the Louisiana Department of Insurance to engage in the business of making contracts of insurance in the state of Louisiana.
3. The deduction for medical and remedial care expenses that were incurred as a result of imposition of transfer of assets penalty period is limited to \$0.
4. The deduction for medical and remedial care expenses that were incurred as a result of the individual's equity interest in the home, exceeding the limit established under 42 U.S.C. §1396p(f), is limited to \$0.