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State/Territory Name: Louisiana

State Plan Amendment (SPA) #: LA-15-0001

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) SPA Summary Form
- 3) Approved SPA Pages

The complete title XXI state plan for Louisiana consists of the most recent state plan posted on Medicaid.gov under CHIP and State Plan Amendments. The link is provided below. The following approved templates are in addition to, or replace sections of the state's posted current state plan. The attached approval letter(s) explain how these templates fit into that state plan.

 $\label{link-to-state} \begin{tabular}{ll} Link to state title XXI state plans and amendments: $$ \underline{http://medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Childrens-Health-Insurance-Program-CHIP/CHIP-State-Program-Information.html $$ \underline{http://medicaid.gov/Medicaid-CHIP-Program-Information.html}$$$

DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services 7500 Security Boulevard, Mail Stop S2-26-12 Baltimore, Maryland 21244-1850



Children and Adults Health Programs Group

NOV 0 6 2015

Ms. J. Ruth Kennedy State Medicaid Director Department of Health and Hospitals Bienville Building 628 North 4th Street P. O. Box 91030 Baton Rouge, LA 70821-9030

Dear Ms. Kennedy:

I am pleased to inform you that your title XXI Children's Health Insurance Program (CHIP) state plan amendment (SPA), LA-15-0001, submitted on September 23, 2015, has been approved. The SPA has an effective date of November 1, 2015.

The SPA LA-15-0001 is approved to amend the provisions governing Federally Facilitated Marketplace (FFM) eligibility determinations. Through this SPA, Louisiana will only accept assessments of CHIP eligibility from the FFM rather than accept CHIP eligibility determinations made by the FFM. A copy of the approved CS24 state plan page is attached to be incorporated into the current CHIP state plan.

Your title XXI project officer is Ms. Kathleen Connors de Laguna. She is available to answer questions concerning this amendment and other CHIP-related issues. Ms. Connors de Laguna's contact information is as follows:

Centers for Medicare & Medicaid Services Center for Medicaid and CHIP Services 7500 Security Boulevard Mail Stop S2-01-16 Baltimore, MD 21244-1850 Telephone: (410) 786-2256

Fax: (410) 786-5882

E-mail: Kathleen.Connorsdelaguna@cms.hhs.gov

Official communications regarding program matters should be sent simultaneously to Ms. Connors de Laguna and Mr. Bill Brooks, Associate Regional Administrator (ARA) in our Dallas Regional Office. Mr. Brooks' address is:

Division of Medicaid and Children's Health Operations

Page 2 – Ms. J. Ruth Kennedy

Centers for Medicare & Medicaid Services 1301 Young Street, Rm. 714 Dallas, TX 75202

If you have additional questions please contact Mr. Manning Pellanda, Director, Division of State Coverage Programs at (410) 786-5143.

Anne Marie Costello
Acting Director

Enclosure

cc:

Bill Brooks, Associate Regional Administrator, Region VI, Dallas

BACK

Submit Date:

CONTINUE

Sep 23, 2015



SPA# LA-15-0001

CHIP Eligibility

State Name: Louisia	ana				OMB Co	ontrol Numbe	er: 0938-1148
Transmittal Number	r: LA - 15 - 0001				E	xpiration date	e: 10/31/2014
**************************************	Health Insurance Program lity - Eligibility Processing						CS24
2102(b)(3) & 2107((e)(1)(O) of the SSA and 42 CFR 45	57, subpart C					
The CHIP Ager enrollment.	ncy meets all of the requirements of	42 CFR 457,	subpart C for appli	cation proces	sing, eligib	ility screenin	ig and
Application Proces	ssing						
	ication the agency uses for individua cross income standard:	als applying f	or coverage who m	ay be eligible	e based on t	he applicable	€
The single, Care Act.	, streamlined application developed	by the Secret	ary in accordance w	vith section 1	413(b)(1)(<i>A</i>	(a) of the Affo	ordable
	tive single, streamlined application d 13(b)(1)(B) of the Affordable Care A		the state and appro-	ved by the Se	cretary in a	ccordance w	rith
	Ап	attachment	is submitted.				
agency ma	tive application used to apply for mu kes readily available the single or al s seeking assistance only through suc	lternative app				• • •	
·	A	An attachmei	nt is submitted.				
	rocedures permit an individual, or aubsite described in CFR 457.340(a), b						
The agency acc	cepts applications in the following of	other electroni	c means.				
☐ Other	electronic means:						
	Name of method		D	escription		-	
+	Fax	Received by	fax transmission				X
Screen and Enroll	Process						
application, per income children	ncy has coordinated eligibility and entiodic redeterminations, and follow-un are provided CHIP coverage and the affordability programs.	up eligibility	determinations. The	procedures	ensure that	only targeted	l low-
Procedures inc	lude:						

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CHIP Eligibility

Screening of application to identify all individuals eligible or potentially eligible for CHIP or other insurance affordability programs; and
Income eligibility test, with calculation of household income consistent with 42 CFR 457.315 for individuals identified as potentially eligible for Medicaid or other insurance affordability programs based on household income; and
Screening process for individuals who may qualify for Medicaid on a basis other than having household income at or below the applicable MAGI standard, based on information in the single streamlined application.
The CHIP agency has entered into an arrangement with the Exchange to make eligibility determinations for advanced premium tax credits in accordance with section 1943(b)(2) of the SSA.
Redetermination Processing
Redeterminations of eligibility for individuals whose financial eligibility is based on the applicable modified adjusted gross income standard are performed as follows, consistent with 42 CFR 457.343:
Once every 12 months.
Without requiring information from the individual if able to do so based on reliable information contained in the individual account or other more current information available to the agency.
If the agency cannot determine eligibility solely on the basis of the information available to it, or otherwise needs additional information to complete the redetermination, it provides the individual with a pre-populated renewal form containing the information already available.
Screening by Other Insurance Affordability Programs
The CHIP Agency provides assurance that it has adopted procedures to accept and process electronic accounts of individuals screened as potentially eligible for CHIP by other insurance affordability programs in accordance with the requirements of 42 CFR 457.348(b) and to determine eligibility in accordance with 42 CFR 457.340 in the same manner as if the application had been submitted directly to, and processed by the state.
The CHIP Agency elects the option to accept CHIP eligibility decisions made by the Exchange or other agencies administering insurance affordability programs as provided in 42 CFR 457.348 and to furnish CHIP in accordance with requirements of 42 CFR 457.340 to the same extent and in the same manner as if the applicant had been determined by the state to be eligible for CHIP.
Check all Insurance Affordability Programs that apply:
☐ The Exchange
Other Insurance Affordability Program
The CHIP Agency has entered into an agreement with agencies administering other insurance affordability programs to fulfill the requirements of 457.348(b) and will provide this agreement to the Secretary upon request.

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CHIP Eligibility

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 50 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.20140415

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