

## **Table of Contents**

**State/Territory Name: LA**

**State Plan Amendment (SPA) #: 19-0032**

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) Summary Form (with 179-like data)
- 3) Approved SPA Pages

**DEPARTMENT OF HEALTH & HUMAN SERVICES**

Centers for Medicare & Medicaid Services  
601 East 12th Street, Suite 0300  
Kansas City, Missouri 64106-2898



Medicaid and CHIP Operations Group

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March 31, 2020

Ms. Erin Campbell, Acting Medicaid Director  
State of Louisiana  
Department of Health  
628 N. 4th Street  
P.O. Box 91030  
Baton Rouge, LA 70821-9030

RE: TN LA 19-0032

Dear Ms. Campbell:

We have reviewed the State's proposed amendment to the Louisiana State Plan submitted under Transmittal Number (TN) 19-0032 dated December 30, 2019. This state plan amendment is to amend the provisions governing extended services for pregnant women in order to implement tobacco cessation services mandated by the U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services and remove outdated references to the Louisiana Health Assessment Referral and Treatment (LaHART) program.

Based on the information submitted, we have approved the amendment on March 24, 2020, for incorporation into the official Louisiana State Plan with an effective date of February 20, 2020. A copy of the CMS-179 and approved plan pages are enclosed with this letter.

If you have any questions regarding this matter, you may contact Tobias Griffin at (214) 767-4425, or by email at [tobias.griffin@cms.hhs.gov](mailto:tobias.griffin@cms.hhs.gov).

Sincerely,

A black rectangular box redacting the signature of the sender.

Ja  
Division of Program Operations

Enclosure

cc:  
Billy Bob Farrell, Branch Manager  
Karen Barnes, LA Department of Health

<b>TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE &amp; MEDICAID SERVICES</b>	1. TRANSMITTAL NUMBER <b>19-0032</b>	2. STATE <b>Louisiana</b>
	3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	

TO: REGIONAL ADMINISTRATOR CENTERS FOR MEDICARE & MEDICAID SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE <b>February 20, 2020</b>
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5. TYPE OF PLAN MATERIAL (Check One)

NEW STATE PLAN       AMENDMENT TO BE CONSIDERED AS NEW PLAN       AMENDMENT

COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate transmittal for each amendment)

6. FEDERAL STATUTE/REGULATION CITATION  <b>42 CFR 440.210 (a) (2) (ii)</b> <b>42 CFR 447, Subpart B</b> 1905 (a)(4)(D) and 1905(a)(13) of the Act	7. FEDERAL BUDGET IMPACT a. FFY <b>2020</b> <del>\$139,451</del> \$2,424 b. FFY <b>2021</b> <del>\$216,740</del> \$3,769
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8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT  <b>Attachment 3.1-A, Item 20.b, Pages 1 and 2</b> <b>Attachment 3.1-A, Item 20.b, Page 3 (remove page)</b> <b>Continued in Box 23</b>	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable) <b>Same – TN 13-07</b> <b>Same – TN 12-67</b>
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10. SUBJECT OF AMENDMENT: **The purpose of this SPA is to amend the provisions governing extended services for pregnant women in order to implement tobacco cessation services mandated by the U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services and remove outdated references to the Louisiana Health Assessment Referral and Treatment (LaHART) program.**

11. GOVERNOR'S REVIEW (Check One)

GOVERNOR'S OFFICE REPORTED NO COMMENT       OTHER, AS SPECIFIED  
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED      The Governor does not review State Plan material.  
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

12. SIGNATURE OF STATE AGENCY OFFICIAL 	16. RETURN TO <b>Erin Campbell, Acting Medicaid Director</b> <b>State of Louisiana</b> <b>Department of Health</b> <b>628 North 4<sup>th</sup> Street</b> <b>P.O. Box 91030</b> <b>Baton Rouge, LA 70821-9030</b>
13. TYPED NAME <b>Cindy Rives, designee for Rebekah E. Gee MD, MPH</b>	
14. TITLE <b>Secretary</b>	
15. DATE SUBMITTED <b>December 30, 2019</b>	

**FOR REGIONAL OFFICE USE ONLY**

17. DATE RECEIVED <b>December 30, 2019</b>	18. DATE APPROVED <b>March 24, 2020</b>
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**PLAN APPROVED - ONE COPY ATTACHED**

19. EFFECTIVE DATE OF APPROVED MATERIAL <b>February 20, 2020</b>	20. SIGNATURE 
21. TYPED NAME <b>James G. Scott</b>	22. TITLE <b>Director</b> <b>Division of Program Operations</b>

23. REMARKS **The State requests a pen and ink change to boxes 6, 7 and 8.**

Attachment 4.19-B, Item 20b, Page 1	Same (TN 13-07)
Attachment 4.19-B, Item 20b, Page 2 (remove page)	Same (TN 13-07)
Attachment 4.19-B, Item 20b, Page 3 (remove page)	Same (TN 12-67)

STATE OF LOUISIANAAMOUNT, DURATION AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED  
LIMITATIONS OF THE AMOUNT, DURATION, AND SCOPE OF CERTAIN ITEMS OF PROVIDED  
MEDICAL AND REMEDIAL CARE AND SERVICES ARE DESCRIBED AS FOLLOWS:**CITATION****42 CFR 440.210(a)(2)(ii)****Sections 1904(a)(4)(D) and 1905(a)(13) of the Social Security Act****Substance Use Screening and Intervention Services**

The Department shall provide coverage of medically necessary substance use screening and brief intervention services to Medicaid-eligible pregnant women by or under the supervision of the medical professional providing care to the pregnant woman.

Screening services shall include the screening of pregnant women for:

1. Alcohol use;
2. Tobacco use;
3. Drug use; and/or
4. Domestic violence.

Brief intervention services shall include a counseling session, which shall be a minimum of 15-30 minutes in duration, with a health care professional intended to motivate the recipient to develop a plan to moderate or cease their use of alcohol/drugs and/or tobacco.

**Service Limits**

Substance use screening and intervention services shall be limited to one occurrence per pregnancy, or once every 270 days. Pregnant women may also receive up to eight tobacco cessation-counseling sessions per year. Limits may be exceeded, based on medical necessity.

If the recipient experiences a miscarriage or fetal death and becomes pregnant within the 270-day period, screening and brief intervention shall be reimbursed for the subsequent pregnancy.

STATE OF LOUISIANAAMOUNT, DURATION AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED  
LIMITATIONS OF THE AMOUNT, DURATION, AND SCOPE OF CERTAIN ITEMS OF PROVIDED  
MEDICAL AND REMEDIAL CARE AND SERVICES ARE DESCRIBED AS FOLLOWS:**CITATION****Section 1904(a)(4)(D) of the Social Security Act****Tobacco Cessation Counseling and Pharmacotherapy**

The Department shall provide coverage of diagnostic, therapeutic counseling services and pharmacotherapy for the cessation of tobacco use by pregnant women who use tobacco products or who are being treated for tobacco use.

Counseling services shall be face-to-face with an appropriate health care professional.

Pregnant women may receive four counseling sessions per quit attempt, up to two quit attempts per calendar year. Limits may be exceeded based on medical necessity. The period of coverage for these services shall include the prenatal period through 60 days postpartum. Services provided shall be:

1. By or under the supervision of a physician; or
2. By any other health care professional who is:
  - a. Legally authorized to furnish such services under Louisiana state law and is authorized to provide Medicaid coverable services other than tobacco cessation services; or
  - b. Legally authorized to provide tobacco cessation services under Louisiana state law and designated by the Secretary of the Department to provide these services.

STATE OF LOUISIANA

PAYMENTS FOR MEDICAL AND REMEDIAL CARE AND SERVICES

METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES – OTHER TYPES OF CARE OR SERVICES LISTED IN SECTION 1905 (A) OF THE ACT THAT ARE INCLUDED IN THE PROGRAM UNDER THE PLAN ARE DESCRIBED AS FOLLOWS:

**CITATION**

**42 CFR 447 Subpart B**

**Substance Use Screening and Intervention**

Reimbursement for substance use screening and intervention services provided to pregnant women shall be a flat fee based on the appropriate current procedural terminology (CPT) code.

**Tobacco Cessation Counseling and Pharmacotherapy**

Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers of tobacco cessation services for pregnant women.

Effective for dates of services on or after February 20, 2020, reimbursement for services will be made using the current professional services fee schedule published on the Medicaid provider website at [www.lamedicaid.com](http://www.lamedicaid.com).