Agency Budget Request FISCAL YEAR 2024–2025



Louisiana Department of Health

306 — Medical Vendor Payments



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Signature Page

BUDGET REQUEST

Fiscal Year Ending June 30,2025

NAME OF DEPARTMENT / AGENCY: Louisiana Department of Health	PHYSICAL ADDRESS: 628 North 4th Street
BUDGET UNIT: Medical Vendor Payments (MVP)	P.O. Box 91030, Baton Rouge, Louisiana
SCHEDULE NUMBER: 09-306	ZIP CODE: 70821-9030
TELEPHONE NUMBER: (877) 252-2447	WEB ADDRESS: http://www.ldh.la.gov
HEAD OF DEPARTMENT: PRINTED NAME/TITLE: Stephen R. Russo, JD, Secretary	HEAD OF BUDGET UNIT: PRINTED NAME/TITLE: Kim Sullivan, Interim Medicaid Exec Dir DATE: 10 · 2 · 4 · 23 EMAIL ADDRESS: Kimberly. Sullivan@la.gov
PROGRAM CONTACT PERSON: Anthony Shamis TITLE: Medicaid Program Mgr 4, MVP Budget & Financing TELEPHONE NUMBER: (225) 342-9493 EMAIL ADDRESS: Anthony.Shamis3@la.gov	FINANCIAL CONTACT PERSON: Rachel Newman TITLE: Medicaid Deputy Director & CFO TELEPHONE NUMBER: (225) 219-3455 EMAIL ADDRESS: Rachel.Newman2@la.gov

Operational Plan

OPERATIONAL PLAN FORM DEPARTMENT DESCRIPTION

DEPARTMENT NUMBER AND NAME: 09 - LOUISIANA DEPARTMENT OF HEALTH

DEPARTMENT MISSION: The mission of the Louisiana Department of Health is to protect and promote health and to ensure access to medical, preventive, and rehabilitative services for all citizens of the State of Louisiana.

DEPARTMENT GOAL(S):

In order to fulfill its mission, the Louisiana Department of Health intends to:

- 1. Provide quality services
- 2. Protect and promote health
- 3. Develop and stimulate services by others
- 4. Utilize available resources in the most effective manner

OPERATIONAL PLAN FORM AGENCY (BUDGET UNIT) DESCRIPTION

AGENCY NUMBER AND NAME: 09-306 Medical Vendor Payments (MVP)

AGENCY MISSION:

Our mission is to provide the right health care at the right time, reducing health disparities, and improving overall health outcomes in Louisiana.

AGENCY GOAL(S):

Goal

To make comprehensive, coordinated care and quality health services available to all who qualify

Goal II

To increase access to community-based services as an alternative to institutional care

Goal III

To reduce the per capita cost of care by balancing health care and prevention spending

STATEMENT OF AGENCY STRATEGIES FOR DEVELOPMENT AND IMPLEMENTATION OF HUMAN RESOURCE POLICIES THAT ARE HELPFUL AND BENEFICIAL TO WOMEN AND FAMILIES:

MVP is dedicated to the development and implementation of human resource policies that are helpful and beneficial to women and families and demonstrates its support through the following human resource policies: the Family Medical Leave Policy (8108-930), the Sexual Harassment Policy (8143-02) and the Equal Employment Opportunity Policy (8116-77). In addition, the allowance of flexibility in work schedules and the availability of Dependent Day Care Spending Accounts assist both women and their families. MVP also supports Act 1078 by insuring the provision of healthcare services to women and families.

OPERATIONAL PLAN FORM PROGRAM DESCRIPTION

PROGRAM NAME: Payments to Private Providers (3061)

PROGRAM AUTHORIZATION:

The Constitution of Louisiana (1974) Article 12, Section 8, declares that the Legislature may establish a system of economic and social welfare, unemployment compensation, and public health. Louisiana Revised Statutes 36:251 et seq., gives the Louisiana Department of Health (LDH) Secretary authority to direct and be responsible for the Medical Assistance Program, Title XIX of the Social Security Act, and the authority to act as the sole agent of the state or, in necessary cases, designate one of the offices within the department or its assistant secretary to cooperate with the federal government and with other state and local agencies in the administration of federal funds granted to the state or directly to the department or an office thereof to aid in the furtherance of any function of the department or its offices, including funding for the Medical Assistance Program. The Balanced Budget Act of 1997 (BBA) (Public Law 105-33), as amended by recent technical amendments (Public Law 105-100, signed into law on November 19, 1997).

PROGRAM MISSION:

The mission of Payments to Private Providers is to administer a high-performing Medicaid program that maximizes high-value care and minimizes waste, paying for value over volume of services, and ensuring compliance with federal and state requirements regarding medically necessary services for eligible individuals.

PROGRAM GOAL(S):

I. To reduce health care costs by providing comprehensive coordinated care that balances health care and prevention spending

II. To increase access to community-based services as an alternative to institutional care

PROGRAM ACTIVITY 1: Medicaid Managed Care

On February 1, 2012, the Louisiana Department of Health (LDH) transitioned nearly 900,000 Medicaid enrollees from the state's decades old FFS program to a Medicaid managed care model. Rollout occurred in phases based upon designated geographic service areas with the statewide rollout completed on June 1, 2012.

In transitioning from the FFS program to the Medicaid managed care model, Louisiana sought to:

- · Improve access to care.
- Improve care coordination.
- Increase emphasis on disease prevention and the early diagnosis and management of chronic conditions.
- Improve health outcomes and quality of care.
- · Provide for a more financially stable Medicaid program.

Louisiana's Medicaid managed care program is responsible for providing high-quality, innovative, and cost-effective health care to Medicaid enrollees. Guided by the Triple Aim, LDH partners with enrollees, providers, and health plans to continue building a Medicaid managed care delivery system that improves the health of populations (better health), enhances the experience of care for individuals (better care), and effectively manages costs of care (lower costs).

More specifically, the Medicaid managed care objectives include:

- · Advancing evidence-based practices, high-value care and service excellence
- · Supporting innovation and a culture of continuous quality improvement (CQI) in Louisiana
- · Ensuring enrollees ready access to care including through innovative means such as medical homes and telehealth
- Improving enrollee health
- Decreasing fragmentation and increasing integration across providers and care settings particularly for enrollees with behavioral health needs
- · Using a population health approach, supported by health information technology, to advance health equity and address social determinants of health
- Reducing complexity and administrative burden for providers and enrollees
- · Aligning financial incentives and building shared capacity to improve health care quality through data and collaboration
- · Minimizing wasteful spending, unnecessary utilization, and fraud

Today, Louisiana Medicaid serves approximately 35 percent of the state's population. Five (5) statewide Managed Care Organizations (MCOs), one (1) Behavioral Health Prepaid Inpatient Health Plan (PIHP), and two (2) Dental Prepaid Ambulatory Health Plans (PAHPs) pay for health care services for more than 90 percent of the Louisiana Medicaid population including 727,501 new adults since Medicaid expansion took effect in July 2016 (https://ldh.la.gov/HealthyLaDashboard/). The Louisiana Medicaid Managed Care program is a full risk-bearing, MCO health care delivery system responsible for providing specified Medicaid core benefits and services included in the Louisiana Medicaid State Plan to Medicaid recipients. An MCO assumes full risk for the cost of core benefits and services under the Contract and incurs loss if the cost of furnishing these core benefits and services exceeds the payment received for providing these services. LDH establishes a Per Member per Month (PMPM) actuarially sound risk-adjusted rate for MCO payments. The rates are not subject to negotiation or dispute resolution. These managed care entities (MCEs) pay for Medicaid benefits and services included in the Louisiana Medicaid State Plan, state statutes and administrative rules, and Medicaid policy and procedure manuals. In addition, these MCEs also provide specified value-added Medicaid benefits and services.

In December 2015, LDH integrated specialized behavioral health services into the managed care program in an effort to improve care coordination for enrollees and facilitate provision of whole person health care. Louisiana also continues to administer the Coordinated System of Care (CSoC), a single behavioral health PIHP to help children with behavioral health challenges that are at risk for out-of-home placement. Wraparound support and other services assist children with staying in or returning to their home.

The Dental Benefit Program (DPB) coordinates dental care for Medicaid recipients. The DBP provides children with preventive and diagnostic services such as regular exams and sealants as well as therapeutic services to treat dental medical problems. Adults receive denture services and comprehensive oral exams.

PROGRAM ACTIVITY 2: Long-Term Services and Supports

In 1981, the Federal Government created Title XIX, Home and Community-Based Services (HCBS), in order to provide home and community-based services to the elderly and persons with physical disabilities, developmental and intellectual disabilities, and/or mental illnesses. Since this act made an exception to the traditional Medicaid requirements, it requires states to seek waivers to offer these services. Waivers allow states to provide specific HCBS to target populations with the intent of preventing unnecessary institutionalization. Each HCBS waiver must be cost neutral or the costs to provide these services must be less than the average per capita cost of institutional care. These waiver programs allow Louisiana residents to receive Medicaid State Plan benefits while having greater flexibility to choose the services and supports that best suit their needs. They also allow individuals to preserve their independence by staying out of institutional settings and maintaining ties to families and friends.

DEPARTMENT ID: LOUISIANA DEPARTMENT OF HEALTH (09) AGENCY ID: MEDICAL VENDOR PAYMENTS (09-306) PROGRAM ID: A - PAYMENTS TO PRIVATE PROVIDERS PROGRAM ACTIVITY: A-1 - MEDICAID MANAGED CARE

> Objective: Through the Medicaid Managed Care Activity, increase budget predictability while providing for a service delivery model of high quality, medically necessary health services, and avoiding unnecessary spending on duplication of services and low value care.

Children's Budget Link: Not Applicable

Human Resource Policies Beneficial to Women and Families Link: Not Applicable
Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Not Applicable

				PERFORMANCE INDICATOR VALUES					
	L				PERFORMANCE		PERFORMANCE	PERFORMANCE	PERFORMANCE
	E		YEAREND	ACTUAL	STANDARD	EXISTING	AT	AT EXECUTIVE	STANDARD AS
LaPAS	V		PERFORMANCE	YEAREND	AS INITIALLY	PERFORMANCE	CONTINUATION	BUDGET	INITIALLY
PI	E		STANDARD	PERFORMANCE	APPROPRIATED	STANDARD	BUDGET LEVEL	LEVEL	APPROPRIATED
CODE	L	PERFORMANCE INDICATOR NAME	FY 2022-2023	FY 2022-2023	FY 2023-2024	FY 2023-2024	FY 2024-2025	FY 2024-2025	FY 2024-2025
25602		Percentage of Medicaid enrollees enrolled in a managed care model	85%	85%	85%	85%	84%		
25603	K	Percentage of Medicaid enrollee expenditures under a managed care model	79%	80% 1	81%	81%	81%		

¹ The percentage increase is due to the Healthy Louisiana Hospital Directed Payments that started in State Fiscal Year 2022-2023, which were not in the original targets.

DEPARTMENT ID: LOUISIANA DEPARTMENT OF HEALTH (09) AGENCY ID: MEDICAL VENDOR PAYMENTS (09-306) PROGRAM ID: A - PAYMENTS TO PRIVATE PROVIDERS PROGRAM ACTIVITY: A-1 - MEDICAID MANAGED CARE

	GENERAL PERFORMANCE INFORMATION:									
	PERFORMANCE INDICATOR VALUES									
LaPAS		PRIOR YEAR								
PI		ACTUAL	ACTUAL	ACTUAL	ACTUAL	ACTUAL				
CODE	PERFORMANCE INDICATOR NAME	FY 2018-2019	FY 2019-2020	FY 2020-2021	FY 2021-2022	FY 2022-2023				
25604	Annual amount of premium taxes paid by	\$423,731,985	\$450,247,830	\$511,575,725	\$558,951,031	\$673,291,917				
	Medicaid managed care plans									

DEPARTMENT ID: LOUISIANA DEPARTMENT OF HEALTH (09) AGENCY ID: MEDICAL VENDOR PAYMENTS (09-306) PROGRAM ID: A - PAYMENTS TO PRIVATE PROVIDERS PROGRAM ACTIVITY: A-1 - MEDICAID MANAGED CARE

Objective: Through the Medicaid Managed Care Activity, increase preventive and primary healthcare use, thereby improving quality, health outcomes, and patient experience for Louisiana Medicaid members.

Children's Budget Link: Not applicable Human Resource Policies Beneficial to Women and Families Link: Not Applicable

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Not Applicable

					PERFORMANCE IN	DICATOR VALUES			
	L				PERFORMANCE		PERFORMANCE	PERFORMANCE	PERFORMANCE
	E		YEAREND	ACTUAL	STANDARD	EXISTING	AT	AT EXECUTIVE	STANDARD AS
LaPAS	V		PERFORMANCE	YEAREND	AS INITIALLY	PERFORMANCE	CONTINUATION	BUDGET	INITIALLY
PI	E		STANDARD	PERFORMANCE	APPROPRIATED	STANDARD	BUDGET LEVEL	LEVEL	APPROPRIATED
CODE	L	PERFORMANCE INDICATOR NAME	FY 2022-2023	FY 2022-2023	FY 2023-2024	FY 2023-2024	FY 2024-2025	FY 2024-2025	FY 2024-2025
22947		Percentage of Medicaid enrollees aged 2-21 years of age who had at least one dental visit in a year	60%	50% 1	60%	60%	60%		
25576		Percentage of Medicaid enrollees, enrolled for at least 90 consecutive days aged 6-9, who receive a dental sealant on a permanent molar tooth	17%	15% 1	17%	17%	17%		
25577		Number of Medicaid enrollees aged 6-9 enrolled for at least 90 consecutive days, who receive a dental sealant on a permanent tooth	25,924	24,949 1	25,924	25,924	25,924		

¹ The Coronavirus Disease 2019 (COVID-19) Public Health Emergency (PHE) and members displaced from Hurricane Ida decreased dental service utilization.

DEPARTMENT ID: LOUISIANA DEPARTMENT OF HEALTH (09) AGENCY ID: MEDICAL VENDOR PAYMENTS (09-306) PROGRAM ID: A - PAYMENTS TO PRIVATE PROVIDERS PROGRAM ACTIVITY: A-1 - MEDICAID MANAGED CARE

	GENERAL PERFORMANCE INFORMATION:										
			PERFORMANCE INDICATOR VALUES								
LaPAS		PRIOR YEAR	PRIOR YEAR	PRIOR YEAR	PRIOR YEAR	PRIOR YEAR					
PI		ACTUAL	ACTUAL	ACTUAL	ACTUAL	ACTUAL					
CODE	PERFORMANCE INDICATOR NAME	FY 2018-2019	FY 2019-2020	FY 2020-2021	FY 2021-2022	FY 2022-2023					
26113	Percentage increase in adults' access to preventative/ambulatory health services for Healthy Louisiana members	80.00% 1	79.10% ²	75.53% ³	75.91% ⁴	73.65% 5					
26943	Percentage of well care visits for children in the first 15 months of age	Not Available 6	Not Available 6	54.28% ³	56.41% 4	59.52% 5					
26944	Percentage of well care visits for children15 to 30 months of age	Not Available 6	Not Available 6	66.98% ³	62.32% 4	63.95% 5					
26945	Percentage of child and adolescent well care visits	Not Available 6	Not Available 6	45.81% ³	47.32% ⁴	48.34% 5					

¹ Percentage reflects the Calendar (Measurement) Year 2018 Healthcare Effectiveness Data and Information Set (HEDIS) measures provided by the Island Peer Review Organization (IPRO) based on the statewide Managed Care Organization (MCO) averages.

² Percentage reflects the Calendar (Measurement) Year 2019 HEDIS measures provided by IPRO based on the statewide MCO averages.

³ Percentage reflects the Calendar (Measurement) Year 2020 HEDIS measures provided by IPRO based on the statewide MCO averages.

⁴ Percentage reflects the Calendar (Measurement) Year 2021 HEDIS measures provided by IPRO based on the statewide MCO averages.

⁵ Percentage reflects the Calendar (Measurement) Year 2022 HEDIS measures provided by IPRO based on the statewide MCO averages.

⁶ This is a new performance indicator.

DEPARTMENT ID: LOUISIANA DEPARTMENT OF HEALTH (09)
AGENCY ID: MEDICAL VENDOR PAYMENTS (09-306)
PROGRAM ID: A - PAYMENTS TO PRIVATE PROVIDERS

PROGRAM ACTIVITY: A-2 - LONG-TERM SERVICES AND SUPPORTS (LTSS)

3. K Objective: Through the Long-Term Services and Supports Activity, ensure the HCBS program remains in compliance with state and federal requirements so that Medicaid can continue to increase access for HCBS recipients.

Children's Budget Link: Not Applicable

Human Resource Policies Beneficial to Women and Families Link: Not Applicable

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Not Applicable

				PERFORMANCE INDICATOR VALUES					
	L				PERFORMANCE		PERFORMANCE	PERFORMANCE	PERFORMANCE
	E		YEAREND	ACTUAL	STANDARD	EXISTING	AT	AT EXECUTIVE	STANDARD AS
LaPAS	V		PERFORMANCE	YEAREND	AS INITIALLY	PERFORMANCE	CONTINUATION	BUDGET	INITIALLY
PI	E		STANDARD	PERFORMANCE	APPROPRIATED	STANDARD	BUDGET LEVEL	LEVEL	APPROPRIATED
CODE	L	PERFORMANCE INDICATOR NAME	FY 2022-2023	FY 2022-2023	FY 2023-2024	FY 2023-2024	FY 2024-2025	FY 2024-2025	FY 2024-2025
26589	K	Percentage of providers compliant with the state's	90%	92%	90%	90%	90%		
		EVV standard							
26590	K	Percentage of LTSS recipients receiving Home	45%	46%	45%	45%	45%		
		and Community Based Services (Modified)							

OPERATIONAL PLAN FORM PROGRAM DESCRIPTION

PROGRAM NAME: Payments to Public Providers (3062)

PROGRAM AUTHORIZATION:

The Constitution of Louisiana (1974) Article 12, Section 8, declares that the Legislature may establish a system of economic and social welfare, unemployment compensation, and public health. Louisiana Revised Statutes 36:251 et seq., gives the Louisiana Department of Health (LDH) Secretary authority to direct and be responsible for the Medical Assistance Program, Title XIX of the Social Security Act, and the authority to act as the sole agent of the state or, in necessary cases, designate one of the offices within the department or its assistant secretary to cooperate with the federal government and with other state and local agencies in the administration of federal funds granted to the state or directly to the department or an office thereof to aid in the furtherance of any function of the department or its offices, including funding for the Medical Assistance Program. The Balanced Budget Act of 1997 (BBA) (Public Law 105-33), as amended by recent technical amendments (Public Law 105-100, signed into law on November 19, 1997).

PROGRAM MISSION:

The mission of Payments to Public Providers is to administer the Medicaid Program to ensure operations are in accordance with federal and state statutes regarding medically necessary services to eligible recipients.

PROGRAM GOAL(S):

- I. To facilitate contractual arrangements between safety net public providers and Medicaid managed care entities
- II. To provide cost effective and medically appropriate Medicaid covered services through public providers

PROGRAM ACTIVITY 1: Payments to Public Providers

This activity provides access to care through state and local governmental providers of healthcare services, including some services not readily available in the private sector, such as services provided to individuals with severe mental illness (Eastern Louisiana Mental Health System, Central Louisiana State Hospital) and developmental disabilities (Pinecrest Services and Supports Center).

With the privatization of the Louisiana State University hospitals and clinics through Public-Private Partnerships, payments to public providers previously made to those entities shifted to the Payments to Private Providers' activity. Remaining public providers include the LDH Office of Public Health, which bills for services provided at local health units, and Local Education Authorities (LEAs) that provide health care services to children attending public schools.

School-based services can improve access to care for children who may have difficulty in receiving services in a physician's office or clinic. This will result in earlier identification of certain medical conditions leading to earlier intervention. The school nurse will make necessary referrals to a physician when appropriate and assist the child's family in making that appointment. School nurses must coordinate with the student's Medicaid managed care entity to assure continuity and coordination of care.

DEPARTMENT ID: LOUISIANA DEPARTMENT OF HEALTH (09)
AGENCY ID: MEDICAL VENDOR PAYMENTS (09-306)
PROGRAM ID: B - PAYMENTS TO PUBLIC PROVIDERS
PROGRAM ACTIVITY: B-1 - PAYMENTS TO PUBLIC PROVIDERS

1. K Objective: Through the Payment to Public Providers Activity, to track utilization of services provided by local school systems including nursing services, which allow for important medical screenings to be provided by these school systems with Medicaid reimbursement.

Children's Budget Link: Not Applicable

Human Resource Policies Beneficial to Women and Families Link: Not Applicable

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Not Applicable

				PERFORMANCE INDICATOR VALUES					
	L				PERFORMANCE		PERFORMANCE	PERFORMANCE	PERFORMANCE
	E		YEAREND	ACTUAL	STANDARD	EXISTING	AT	AT EXECUTIVE	STANDARD AS
LaPAS	V		PERFORMANCE	YEAREND	AS INITIALLY	PERFORMANCE	CONTINUATION	BUDGET	INITIALLY
PI	E		STANDARD	PERFORMANCE	APPROPRIATED	STANDARD	BUDGET LEVEL	LEVEL	APPROPRIATED
CODE	L	PERFORMANCE INDICATOR NAME	FY 2022-2023	FY 2022-2023	FY 2023-2024	FY 2023-2024	FY 2024-2025	FY 2024-2025	FY 2024-2025
24092	K	Number of Local Education Agencies	107	110	99 1	99	99		
		participating in School Nursing Services							
25580	K	Number of unduplicated recipients Receiving	191,000	147,569 ²	191,000	191,000	191,000		
		School Nursing Services from Local Education							
		Agencies							

¹ Local Education Agency (LEA) participation changes periodically and a decrease in program participation may indicate a charter school or group closure.

² The Louisiana Department of Education (LDOE) changed their Independent Education Program (IEP) software and other forms and school districts are reorganizing their paperwork and using the Early Intervention System (EIS) and the Recipient Eligibility Verification (REV) System to check individual coverage for students.

DEPARTMENT ID: LOUISIANA DEPARTMENT OF HEALTH (09)
AGENCY ID: MEDICAL VENDOR PAYMENTS (09-306)
PROGRAM ID: B - PAYMENTS TO PUBLIC PROVIDERS
PROGRAM ACTIVITY: B-1 - PAYMENTS TO PUBLIC PROVIDERS

	GENERAL PERFORMANCE INFORMATION:									
	PERFORMANCE INDICATOR VALUES									
LaPAS		PRIOR YEAR PRIOR YEAR PRIOR YEAR PRIOR YEAR								
PI		ACTUAL	ACTUAL	ACTUAL	ACTUAL	ACTUAL				
CODE	PERFORMANCE INDICATOR NAME	FY 2018-2019	FY 2019-2020	FY 2020-2021	FY 2021-2022	FY 2022-2023				
25582	Number of school nurses in participating Local	544	622	710	865	895				
	Education Agencies									

OPERATIONAL PLAN FORM PROGRAM DESCRIPTION

PROGRAM NAME: Buy-Ins & Supplements (3063)

PROGRAM AUTHORIZATION:

The Constitution of Louisiana (1974) Article 12, Section 8, declares that the Legislature may establish a system of economic and social welfare, unemployment compensation, and public health. Louisiana Revised Statutes 36:251 et seq., gives the Louisiana Department of Health (LDH) Secretary authority to direct and be responsible for the Medical Assistance Program, Title XIX of the Social Security Act, and the authority to act as the sole agent of the state or, in necessary cases, designate one of the offices within the department or its assistant secretary to cooperate with the federal government and with other state and local agencies in the administration of federal funds granted to the state or directly to the department or an office thereof to aid in the furtherance of any function of the department or its offices, including funding for the Medical Assistance Program. The Balanced Budget Act of 1997 (BBA) (Public Law 105-33), as amended by recent technical amendments (Public Law 105-100, signed into law on November 19, 1997).

PROGRAM MISSION:

The mission of the Buy-Ins & Supplements Program is to purchase health care services through the payment of premiums to other entities on behalf of certain Louisiana Medicaid and CHIP enrollees. This program has two major components:

- 1. Medicare Buy-Ins and Supplements is the federal program, which allows states to purchase Medicare coverage for individuals with limited income and resources by paying their monthly Medicare Part A and/or B premiums. By doing so, the state provides medical insurance protection to individuals with limited income and resources. For those individuals dually eligible for Medicaid and Medicare, it has the effect of transferring some medical costs for this population from the Title XIX Medicaid program, which is partially state financed, to the Title XVIII Medicare program (fully financed by the federal government). Federal matching money is available through the Medicaid program to assist states with the premium payments for Medicare buy-in enrollees.
- 2. The Louisiana Health Insurance Premium Payment (LaHIPP) is a program authorized under the authority of Section 1906 of the Social Security Act. It reimburses all or a portion of an employer sponsored insurance (ESI) or individual market premium on behalf of a Medicaid recipient, if purchasing such insurance is determined to be more cost effective than having Medicaid as the primary payer of medical expenses. Medicaid may also pay the out of pocket expenses (co-pays and deductibles) for LaHIPP eligibles enrolled in ESI or individual market coverage.

PROGRAM GOAL(S):

- I. To implement Medicaid cost avoidance through Buy-Ins (paying premiums) for Medicare and Medicaid dual eligibles
- II. To reduce Medicaid expenditures for Medicaid enrollees through reimbursement of employee's share of paid premiums for employer-based or individual market health insurance when cost effective to do so

PROGRAM ACTIVITY 1: Medicare Savings Program for Low-Income Seniors & Persons with Disabilities

The ultimate aim of the Medicare Savings Program (MSP) is to improve the health of its beneficiaries. Reducing financial barriers to healthcare can lead to better health outcomes, and expanding access to healthcare improves health status and mortality for those with the lowest incomes. The MSP has improved access to medical care services. Utilization of all medical service types is greater for MSP enrollees than for eligible non-enrollees, even when accounting for differences in health status and other characteristics. Data has shown that MSP enrollment increases access to preventative and primary care through use of outpatient hospital services and a higher frequency of office visits.

As an added benefit, people who qualify for the MSP are automatically eligible for the low-income subsidy (LIS or Extra Help), which helps pay for the premium, deductible, and some copayments of a Medicare Part D drug plan, enabling them to maintain drug coverage. The state receives regular Medicaid federal match on Qualified Medicare Beneficiaries (income below 100% Federal Poverty Level [FPL]) and Specified Low Income Beneficiaries (income between 100-120% FPL), but expenditures for Qualified Individuals (between 120-135% FPL) are 100% federally funded.

PROGRAM ACTIVITY 2: Louisiana Health Insurance Premium Payment (LaHIPP) Program

The LaHIPP Program Activity focuses on ensuring access to affordable and appropriate care to Medicaid & LaCHIP eligibles and their families who have access to Employer Sponsored Insurance (ESI) or individual market coverage. LDH reinstituted the LaHIPP program in April 2017 after it was retired in 2015. LaHIPP reimburses eligible Medicaid recipients for some costs related to ESI or individual market coverage, including premiums, copays, and deductibles when the provider bills Medicaid secondary. The program aims to reduce Medicaid costs by making it more affordable for eligible individuals to maintain private insurance coverage.

Through coordination of services with private health insurance, the state Medicaid agency can leverage other resources that this population would otherwise have to assume in the Medicaid program. LaHIPP reduces the number of uninsured Louisiana residents and establishes a third party resource as the primary payer of medical expenses to reduce Medicaid costs, assuring that Medicaid pays only after the responsible third party has met its legal obligation to pay.

States experience a number of benefits from building and growing premium assistance programs like LaHIPP, according to the National Academy for State Health Policy, including:

- 1) strengthening of the private insurance market and preventing the substitution of public coverage for available private coverage;
- 2) allowing Medicaid agencies to benefit from employer contributions towards the care of Medicaid eligibles;
- 3) easing the transition from public coverage to private coverage; and
- 4) allowing children to enroll in a single health plan with their parents for greater access to services.

DEPARTMENT ID: LOUISIANA DEPARTMENT OF HEALTH (09)

AGENCY ID: MEDICAL VENDOR PAYMENTS (09-306)

PROGRAM ID: C - BUY-INS & SUPPLEMENTS

PROGRAM ACTIVITY: C-1 - MEDICARE SAVINGS PROGRAM FOR LOW-INCOME SENIORS & PERSONS WITH DISABILITIES

Objective: The Medicare Savings Program for Low-Income Seniors & Persons with Disabilities activity will avoid expensive costs that Medicaid would otherwise fund. It ensures that eligible low-income senior citizens do not forego health coverage due to increasing Medicare premiums that make maintaining coverage increasingly difficult.

Children's Budget Link: Not Applicable

Human Resource Policies Beneficial to Women and Families Link: Not Applicable

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Not Applicable

				PERFORMANCE INDICATOR VALUES					
	L				PERFORMANCE		PERFORMANCE	PERFORMANCE	PERFORMANCE
	E		YEAREND	ACTUAL	STANDARD	EXISTING	AT	AT EXECUTIVE	STANDARD AS
LaPAS	V		PERFORMANCE	YEAREND	AS INITIALLY	PERFORMANCE	CONTINUATION	BUDGET	INITIALLY
PI	E		STANDARD	PERFORMANCE	APPROPRIATED	STANDARD	BUDGET LEVEL	LEVEL	APPROPRIATED
CODE	L	PERFORMANCE INDICATOR NAME	FY 2022-2023	FY 2022-2023	FY 2023-2024	FY 2023-2024	FY 2024-2025	FY 2024-2025	FY 2024-2025
2266	K	Total savings (costs of care less premium costs)	\$1,375,000,000	\$1,020,120,449 1	\$1,375,000,000	\$1,375,000,000	\$1,375,000,000		
		for Medicare benefits							

¹ Medicaid did not close any cases, paid more Buy-ins than normal, and enrolled more beneficiaries between April 1, 2022 and June 30, 2022. Some Medicare beneficiaries were in the Medicaid Expansion Program and they were ineligible in the past. The Federal Government also renewed the Coronavirus Disease 2019 (COVID-19) Public Health Emergency (PHE) on January 16, 2022 and ended the COVID-19 PHE exemption on May 11, 2023, which made Medicaid unwinding efforts to return to regular operations affect our trend. This population continues to grow and utilize more services as the baby boomer generation ages.

DEPARTMENT ID: LOUISIANA DEPARTMENT OF HEALTH (09) AGENCY ID: MEDICAL VENDOR PAYMENTS (09-306) PROGRAM ID: C - BUY-INS & SUPPLEMENTS

PROGRAM ACTIVITY: C-1 - MEDICARE SAVINGS PROGRAM FOR LOW-INCOME SENIORS & PERSONS WITH DISABILITIES

	GENERAL PERFORMANCE INFORMATION:								
	PERFORMANCE INDICATOR VALUES								
LaPAS		PRIOR YEAR							
PI		ACTUAL	ACTUAL	ACTUAL	ACTUAL	ACTUAL			
CODE	PERFORMANCE INDICATOR NAME	FY 2018-2019	FY 2019-2020	FY 2020-2021	FY 2021-2022	FY 2022-2023			
2261	Total number of recipients (Part A)	8,681	8,612	9,774	10,036	10,737			
2262	Total number of recipients (Part B)	210,129	213,456	226,267	236,420	244,823			
2263	Total number of Buy-In eligibles (Part A & B)	218,810	222,068	236,041	246,456	255,560			
2264	Buy-In Expenditures (Part A)	\$41,915,248	\$43,061,650	\$53,840,382	\$53,365,720	\$58,968,692			
2265	Buy-In Expenditures (Part B)	\$339,498,785	\$366,056,572	\$394,148,585	\$449,516,136	\$489,031,837			

DEPARTMENT ID: LOUISIANA DEPARTMENT OF HEALTH (09)

AGENCY ID: MEDICAL VENDOR PAYMENTS (09-306) PROGRAM ID: C - BUY-INS & SUPPLEMENTS

PROGRAM ACTIVITY: C-2 - LOUISIANA HEALTH INSURANCE PREMIUM PAYMENT (LAHIPP) PROGRAM

Objective: Each year, the Louisiana Health Insurance Premium Payment (LaHIPP) program will assist eligible Medicaid enrollees and their families in purchasing private health insurance through an employer or the individual market while maintaining Medicaid/LaCHIP coverage as a secondary payer of medical expenses for Medicaid enrollees, resulting in reduced cost to the state.

Children's Budget Link: Not Applicable

Human Resource Policies Beneficial to Women and Families Link: Not Applicable

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Not Applicable

				PERFORMANCE INDICATOR VALUES						
	L				PERFORMANCE		PERFORMANCE	PERFORMANCE	PERFORMANCE	
	E		YEAREND	ACTUAL	STANDARD	EXISTING	AT	AT EXECUTIVE	STANDARD AS	
LaPAS	V		PERFORMANCE	YEAREND	AS INITIALLY	PERFORMANCE	CONTINUATION	BUDGET	INITIALLY	
PI	E		STANDARD	PERFORMANCE	APPROPRIATED	STANDARD	BUDGET LEVEL	LEVEL	APPROPRIATED	
CODE	L	PERFORMANCE INDICATOR NAME	FY 2022-2023	FY 2022-2023	FY 2023-2024	FY 2023-2024	FY 2024-2025	FY 2024-2025	FY 2024-2025	
22327	K	Number of cases added in LaHIPP	1,200	536 ¹	1,000	1,000	1,000			
24099	K	LaHIPP Total Savings	\$3,000,000	\$856,192 2	\$4,000,000	\$4,000,000	\$4,000,000			
26593		Number of Medicaid enrollees with private coverage paid by LaHIPP	2,100	1,369 ³	2,100	2,100	2,100			
26594		Number of non-Medicaid family members with private coverage paid by LaHIPP	800	170 4	1,200	1,200	1,200			

¹ LaHIPP transitioned to a new Premium Identification Evaluation Reimbursement (PIER) case management system and decreased their performance standard. They are now conferring with Legal to revamp their cost effectiveness calculations to increase eligibility due to noncompliance with the 2019 State Plan Amendment (SPA). Multiple cases were in suspension or closed status during this SPA alignment neriod

² Medicaid unwinding and returning to regular operations after the Coronavirus Disease 2019 (COVID-19) Public Health Emergency (PHE) affected the LaHIPP program. COVID-19 PHE stipulation updates are underway. This reduction will allow for Medicaid case closures. LaHIPP also collaborated with Texicana (a third-party service provider) to increase LaHIPP enrollment.

³ Medicaid enrollees declined due to a 2019 SPA correction and a return to regular operations after the COVID-19 PHE exemption ended.

⁴ The state paid the lowest amount for non-Medicaid parties to ensure Medicaid members received LaHIPP coverage.

OPERATIONAL PLAN FORM PROGRAM DESCRIPTION

PROGRAM NAME: Uncompensated Care Costs (3064)

PROGRAM AUTHORIZATION:

The Constitution of Louisiana (1974) Article 12, Section 8, declares that the Legislature may establish a system of economic and social welfare, unemployment compensation, and public health. Louisiana Revised Statutes 36:251 et seq., gives the Louisiana Department of Health (LDH) Secretary authority to direct and be responsible for the Medical Assistance Program, Title XIX of the Social Security Act, and the authority to act as the sole agent of the state or, in necessary cases, designate one of the offices within the department or its assistant secretary to cooperate with the federal government and with other state and local agencies in the administration of federal funds granted to the state or directly to the department or an office thereof to aid in the furtherance of any function of the department or its offices, including funding for the Medical Assistance Program. The Balanced Budget Act of 1997 (BBA) (Public Law 105-33), as amended by recent technical amendments (Public Law 105-100, signed into law on November 19, 1997).

PROGRAM MISSION:

The mission of the Uncompensated Care Costs (UCC) Program is to encourage hospitals and providers to serve uninsured and indigent clients. Because of UCC, the client's quality and access to medical care is improved. Louisiana's disproportionate share hospital (DSH) cap allotment provides federal funding to cover a portion of qualifying hospitals' costs of treating uninsured and Medicaid patients.

PROGRAM GOAL(S):

I. To encourage qualifying providers (LSU facilities/public providers, LDH Office of Behavioral Health, and qualifying private hospitals) to provide access to medical care for the uninsured and those eligible for Medicaid with Medicaid reimbursement lower than the cost of service.

PROGRAM ACTIVITY 1: Uncompensated Care Costs (UCC) Program

Without access to care, the uninsured population is likely to experience poorer health outcomes because they may not receive recommended screenings and follow-up care for urgent medical conditions. Delaying or forgoing needed medical care increases overall health care costs either incurred because uninsured patients are more likely to be in an emergency room or hospitalized for avoidable medical conditions. High bills that uninsured patients incur can permanently jeopardize their family's financial security. The Uncompensated Care Costs Program also funds a significant portion of the cost of training physicians in Louisiana hospitals, which results in long-term increased access to primary, preventive and specialty care for all citizens.

DEPARTMENT ID: LOUISIANA DEPARTMENT OF HEALTH (09)
AGENCY ID: MEDICAL VENDOR PAYMENTS (09-306)
PROGRAM ID: D - Uncompensated Care Costs (UCC)
PROGRAM ACTIVITY: D-1 - Uncompensated Care Costs (UCC) Program

1. K Objective: Through the Uncompensated Care Costs activity, to encourage hospitals and other providers to provide access to medical care for the uninsured.

Children's Budget Link: This objective is linked to medical services for Medicaid eligible children funded under the Children's Budget.

Human Resource Policies Beneficial to Women and Families Link: This objective will support Act 1078 by ensuring the provision of healthcare services to women and families. Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Not Applicable

Explanatory Note: Disproportionate Share Hospitals (DSH) are federally mandatory hospitals serving a larger percentage of Medicaid and/ or uninsured patients.

				PERFORMANCE INDICATOR VALUES							
	L				PERFORMANCE		PERFORMANCE	PERFORMANCE	PERFORMANCE		
	E		YEAREND	ACTUAL	STANDARD	EXISTING	AT	AT EXECUTIVE	STANDARD AS		
LaPAS	V		PERFORMANCE	YEAREND	AS INITIALLY	PERFORMANCE	CONTINUATION	BUDGET	INITIALLY		
PI	E		STANDARD	PERFORMANCE	APPROPRIATED	STANDARD	BUDGET LEVEL	LEVEL	APPROPRIATED		
CODE	L	PERFORMANCE INDICATOR NAME	FY 2022-2023	FY 2022-2023	FY 2023-2024	FY 2023-2024	FY 2024-2025	FY 2024-2025	FY 2024-2025		
17040	S	Total DSH funds collected in millions	\$1,172.3	\$449.5 1	\$443.3	\$444.1 4	\$444.1				
17041	K	Total federal funds collected in millions	\$789.1	\$300.0 2	\$283.3	\$283.9 4	\$283.9				
17042	S	Total state match in millions	\$383.2	\$149.5 ³	\$160.0	\$160.2 4	\$160.2				

¹ Mid-Year Budget Adjustment Request Form (BA-7) Revision 2 reduced the \$1,172.3 million standard to \$368.9 million and provided funds to implement the Directed Payment Programs approved by the Centers for Medicare and Medicaid Services (CMS) effective July 1, 2022. Revision 5 increased the \$368.9 million target to \$443.3 million for a year-end carryforward to pay State Fiscal Year 2022-2023 obligations in State Fiscal Year 2023-2024.

² BA-7 Revision 2 reduced the \$789.1 million standard to \$248.6 million and provided funds to implement the Directed Payment Programs approved by CMS effective July 1, 2022. Revision 5 increased the \$248.6 million target to \$339.4 million for a year-end carryforward to pay State Fiscal Year 2022-2023 obligations in State Fiscal Year 2023-2024.

³ BA-7 Revision 2 reduced the \$383.2 million standard to \$120.3 million and provided funds to implement the Directed Payment Programs approved by CMS effective July 1, 2022. Revision 5 increased the \$120.3 million target to \$103.9 million for a year-end carryforward to pay State Fiscal Year 2022-2023 obligations in State Fiscal Year 2023-2024.

⁴ BA-7 Revision 1 allowed Medicaid to carry forward unspent Home and Community Based Services (HCBS) Spending Plan authority from State Fiscal Year 2022-2023 into State Fiscal Year 2023-2024. The BA-7 adjustment also provided the authority for Medicaid to pay State Fiscal Year 2022-2023 obligations in State Fiscal Year 2023-2024 and prevented Medicaid from utilizing funds appropriated in the current fiscal year for prior year obligations.

OPERATIONAL PLAN FORM OPERATIONAL PLAN ADDENDA

ORGANIZATION AND PROGRAM STRUCTURE CHARTS CHECKLIST:

Organization Chart Attached: X	Program and Activity Structure Chart Attached:
OTHER: List any other attachments to operational plan. 1. 2.	

CONTACT PERSON(S):

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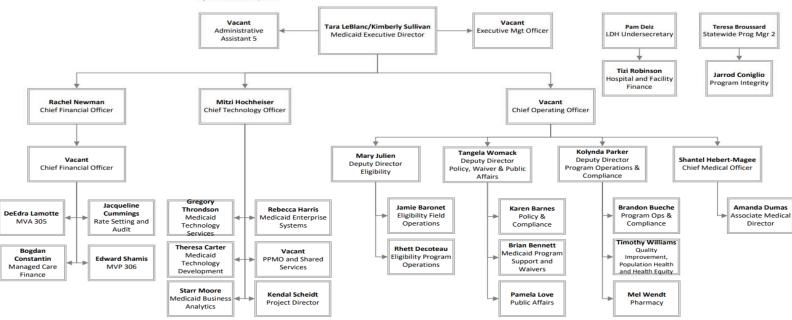
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Medicaid Leadership Updated: October 3, 2023





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Budget Request Overview

Agency Summary Statement Total Agency

AGENCY SUMMARY STATEMENT

Total Agency

Means of Financing

	FY2022-2023	Existing Operating Budget	FY2024-2025		
Description	Actuals	as of 10/01/2023	Total Request	Over/Under EOB	Percent Change
STATE GENERAL FUND (Direct)	1,867,274,340	2,273,579,905	2,549,450,756	275,870,851	12.13%
STATE GENERAL FUND BY:	_	_	_	_	_
INTERAGENCY TRANSFERS	95,130,777	168,237,585	166,436,529	(1,801,056)	(1.07)%
FEES & SELF-GENERATED	501,150,050	673,229,574	496,887,999	(176,341,575)	(26.19)%
STATUTORY DEDICATIONS	955,279,706	1,497,342,348	1,287,044,155	(210,298,193)	(14.04)%
FEDERAL FUNDS	13,376,842,689	14,161,340,272	12,842,168,441	(1,319,171,831)	(9.32)%
TOTAL MEANS OF FINANCING	\$16,795,677,562	\$18,773,729,684	\$17,341,987,880	\$(1,431,741,804)	(7.63)%

Agency Summary Statement Total Agency

Fees and Self-Generated

Description	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Reguest	Over/Under EOB	Percent Change
Fees & Self-generated	501,150,050	673,229,574	496,887,999	(176,341,575)	(26.19)%
Total:	\$501,150,050	\$673,229,574	\$496,887,999	\$(176,341,575)	(26.19)%

Statutory Dedications

Description	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Reguest	Over/Under EOB	Percent Change
•	Actuals	as 01 10/01/2023	iotai nequest	Over/Officer LOD	reiteilt Change
Louisiana Medical Assistance Trust Fund	634,118,651	1,081,594,356	871,296,163	(210,298,193)	(19.44)%
Medicaid Trust Fund for the Elderly	5,048,896	12,835,609	12,835,609	_	_
New Opportunities Waiver (NOW) Fund	32,081,129	43,348,066	43,348,066	_	_
Hospital Stabilization Fund	257,146,329	314,552,061	314,552,061		_
Louisiana Fund	11,879,184	16,732,459	16,732,459	_	_
Health Excellence Fund	15,005,517	28,279,797	28,279,797	_	_
Total:	\$955,279,706	\$1,497,342,348	\$1,287,044,155	\$(210,298,193)	(14.04)%

Agency Summary Statement Total Agency

Agency Expenditures

Description	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB	Percent Change
Salaries	_	_	_	_	_
Other Compensation	_	_	_	_	_
Related Benefits	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_	_
Travel	_	_	_	_	_
Operating Services	_	_	_	_	_
Supplies	_	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_
Other Charges	16,510,770,148	18,426,315,092	16,995,195,430	(1,431,119,662)	(7.77)%
Debt Service	_	_	_	_	_
Interagency Transfers	284,907,415	347,414,592	346,792,450	(622,142)	(0.18)%
TOTAL OTHER CHARGES	\$16,795,677,562	\$18,773,729,684	\$17,341,987,880	\$(1,431,741,804)	(7.63)%
Acquisitions	_	_	-	_	_
Major Repairs	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_	_
TOTAL EXPENDITURES	\$16,795,677,562	\$18,773,729,684	\$17,341,987,880	\$(1,431,741,804)	(7.63)%

Agency Summary Statement Total Agency

Cost Detail

Means of Financing

Description	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB
State General Fund	1,867,274,340	2,273,579,905	2,549,450,756	275,870,851
Interagency Transfers	95,130,777	168,237,585	166,436,529	(1,801,056)
Fees & Self-generated	501,150,050	673,229,574	496,887,999	(176,341,575)
Louisiana Medical Assistance Trust Fund	634,118,651	1,081,594,356	871,296,163	(210,298,193)
Medicaid Trust Fund for the Elderly	5,048,896	12,835,609	12,835,609	_
New Opportunities Waiver (NOW) Fund	32,081,129	43,348,066	43,348,066	_
Hospital Stabilization Fund	257,146,329	314,552,061	314,552,061	_
Louisiana Fund	11,879,184	16,732,459	16,732,459	_
Health Excellence Fund	15,005,517	28,279,797	28,279,797	_
Federal Funds	13,376,842,689	14,161,340,272	12,842,168,441	(1,319,171,831)
Total:	\$16,795,677,562	\$18,773,729,684	\$17,341,987,880	\$(1,431,741,804)

Other Charges

Commitment Item	Name	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB
5600000	TOTAL OTHER CHARGES	_	18,426,315,092	16,995,195,430	(1,431,119,662)
5610003	OTHER PUBLIC ASST	2,103,818	_	_	_
5610015	LOC AID-MEDICAID PMT	13,224,102,810	_	_	_
5620034	MISC-CANCELLATIONS	(1,188,746)	_	_	_
5620037	MISC-AUDT ADJ MIX-PD	3,494,251,782	_	_	_
5620038	MISC-RECOVERIES	(5,308,440)	_	_	_
5620039	MISC-REBATE-MEDICAID	(2,028,580)	_	_	_
5620041	MISC-THIRD PARTY ADJ	(4,936,309)	_	_	_
5620042	MISC-ADT ADJ MXD-REC	(1,397,660)	_	_	_
5620043	MISC-RECOUP-STINST	(95,858,173)	_	_	_
5620045	MISC-CASULTY INS-REC	(2,769,127)	_	_	_
5620046	MISC-HEALTH INS-RCVD	5,246		_	_
5620047	MISC-VOLUNTARY RELAT	(810,060)	_	_	_

Agency Summary Statement Total Agency

Other Charges (continued)

Commitment Item	Name	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB
5620048	MISC-E.D.S. FED TPL	(36,647)	_	_	_
5620049	MISC-PRO COL-MAP STF	(405,566)	_	_	_
5620050	MISC-FIS TPL CLM ADJ	(9,809,224)	_	_	_
5620052	MISC-STTPL COL 3RD	(8,944,193)	_	_	_
5620069	MISC-INTERAGENCY OTH	200,000	<u> </u>	_	_
5620146	MISC-OC-RECOUPMENTS	(76,398,760)	_	_	_
5620150	MISC-OC-MEDICAID INT	(2,023)	_	_	_
Total Other Charges:		\$16,510,770,148	\$18,426,315,092	\$16,995,195,430	\$(1,431,119,662)

Interagency Transfers

Commitment Item	Name	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB
5950000	TOTAL IAT	_	347,414,592	346,792,450	(622,142)
5950001	IAT-COMMODITY/SERV	138,311,045	_	_	_
5950033	IAT-INTER AGY TRANS	146,596,370	_	_	_
Total Interagency Transfers:		\$284,907,415	\$347,414,592	\$346,792,450	\$(622,142)
Total Agency Expenditures:		\$16,795,677,562	\$18,773,729,684	\$17,341,987,880	\$(1,431,741,804)

PROGRAM SUMMARY STATEMENT

3061 - Payments to Private Providers

Means of Financing

		Existing Operating Budget	FY2024-2025		
Description	Actuals	as of 10/01/2023	Total Request	Over/Under EOB	Percent Change
STATE GENERAL FUND (Direct)	1,454,240,722	1,718,803,500	1,958,230,384	239,426,884	13.93%
STATE GENERAL FUND BY:	_	_	_	_	_
INTERAGENCY TRANSFERS	81,130,156	154,317,161	152,684,028	(1,633,133)	(1.06)%
FEES & SELF-GENERATED	476,432,596	648,806,735	472,759,776	(176,046,959)	(27.13)%
STATUTORY DEDICATIONS	946,784,056	1,488,194,482	1,277,896,289	(210,298,193)	(14.13)%
FEDERAL FUNDS	12,442,359,569	13,255,967,589	11,932,275,231	(1,323,692,358)	(9.99)%
TOTAL MEANS OF FINANCING	\$15,400,947,099	\$17,266,089,467	\$15,793,845,708	\$(1,472,243,759)	(8.53)%

Fees and Self-Generated

Description	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB	Percent Change
Fees & Self-generated	476,432,596	648,806,735	472,759,776	(176,046,959)	(27.13)%
Total:	\$476,432,596	\$648,806,735	\$472,759,776	\$(176,046,959)	(27.13)%

Statutory Dedications

Description	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB	Percent Change
Louisiana Medical Assistance Trust Fund	625,623,001	1,072,446,490	862,148,297	(210,298,193)	(19.61)%
Medicaid Trust Fund for the Elderly	5,048,896	12,835,609	12,835,609	_	_
New Opportunities Waiver (NOW) Fund	32,081,129	43,348,066	43,348,066	_	_
Hospital Stabilization Fund	257,146,329	314,552,061	314,552,061	_	_
Louisiana Fund	11,879,184	16,732,459	16,732,459	_	_
Health Excellence Fund	15,005,517	28,279,797	28,279,797	_	_
Total:	\$946,784,056	\$1,488,194,482	\$1,277,896,289	\$(210,298,193)	(14.13)%

Program Expenditures

Description	FY2022-2023 Actuals		FY2024-2025 Total Request	Over/Under EOB	Percent Change
Salaries	_	-	_	_	_
Other Compensation	<u> </u>	_	_	_	_
Related Benefits	<u> </u>	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_	_
Travel		_	_	_	_
Operating Services	_	_	_	_	_
Supplies		_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_
Other Charges	15,400,947,099	17,266,089,467	15,793,845,708	(1,472,243,759)	(8.53)%
Debt Service	<u> </u>	_	_	_	_
Interagency Transfers	<u> </u>	_	_	_	_
TOTAL OTHER CHARGES	\$15,400,947,099	\$17,266,089,467	\$15,793,845,708	\$(1,472,243,759)	(8.53)%
Acquisitions		_	_	_	_
Major Repairs	<u> </u>	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_	_
TOTAL EXPENDITURES	\$15,400,947,099	\$17,266,089,467	\$15,793,845,708	\$(1,472,243,759)	(8.53)%

Cost Detail

Means of Financing

Description	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB
State General Fund	1,454,240,722	1,718,803,500	1,958,230,384	239,426,884
Interagency Transfers	81,130,156	154,317,161	152,684,028	(1,633,133)
Fees & Self-generated	476,432,596	648,806,735	472,759,776	(176,046,959)
Louisiana Medical Assistance Trust Fund	625,623,001	1,072,446,490	862,148,297	(210,298,193)
Medicaid Trust Fund for the Elderly	5,048,896	12,835,609	12,835,609	_
New Opportunities Waiver (NOW) Fund	32,081,129	43,348,066	43,348,066	_
Hospital Stabilization Fund	257,146,329	314,552,061	314,552,061	_
Louisiana Fund	11,879,184	16,732,459	16,732,459	_
Health Excellence Fund	15,005,517	28,279,797	28,279,797	_
Federal Funds	12,442,359,569	13,255,967,589	11,932,275,231	(1,323,692,358)
Total:	\$15,400,947,099	\$17,266,089,467	\$15,793,845,708	\$(1,472,243,759)

Other Charges

Commitment Item	Name	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB
5600000	TOTAL OTHER CHARGES	_	17,266,089,467	15,793,845,708	(1,472,243,759)
5610003	OTHER PUBLIC ASST	(16,891)	_	_	_
5610015	LOC AID-MEDICAID PMT	12,431,938,580	_	_	_
5620034	MISC-CANCELLATIONS	(1,165,381)	_	_	_
5620037	MISC-AUDT ADJ MIX-PD	3,130,037,094	_	_	_
5620038	MISC-RECOVERIES	(949,027)	_	_	_
5620039	MISC-REBATE-MEDICAID	(2,027,476)	_	_	_
5620042	MISC-ADT ADJ MXD-REC	(1,397,660)	_	_	_
5620043	MISC-RECOUP-STINST	(56,753,718)	_	_	_
5620045	MISC-CASULTY INS-REC	(2,765,738)	_	_	_
5620046	MISC-HEALTH INS-RCVD	5,246	_	_	_
5620047	MISC-VOLUNTARY RELAT	(800,681)		_	_
5620048	MISC-E.D.S. FED TPL	(36,574)	_	_	_

Other Charges (continued)

Commitment Item	Name	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB
5620049	MISC-PRO COL-MAP STF	(405,566)	_	_	_
5620050	MISC-FIS TPL CLM ADJ	(9,783,594)	_	_	_
5620052	MISC-STTPL COL 3RD	(8,944,193)	_	_	_
5620069	MISC-INTERAGENCY OTH	200,000	_	_	_
5620146	MISC-OC-RECOUPMENTS	(76,185,300)	_	_	_
5620150	MISC-OC-MEDICAID INT	(2,023)	_	_	_
Total Other Charges:		\$15,400,947,099	\$17,266,089,467	\$15,793,845,708	\$(1,472,243,759)
Total Expenditures for Program 3061		\$15,400,947,099	\$17,266,089,467	\$15,793,845,708	\$(1,472,243,759)

3062 - Payments to Public Providers

Means of Financing

Description	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB	Percent Change
STATE GENERAL FUND (Direct)	44,780,535	57,245,750	58,774,085	1,528,335	2.67%
STATE GENERAL FUND BY:		_	_	_	_
INTERAGENCY TRANSFERS	_	_	_	_	_
FEES & SELF-GENERATED		_	_	_	_
STATUTORY DEDICATIONS	8,495,650	9,147,866	9,147,866	_	_
FEDERAL FUNDS	173,890,727	195,871,825	194,511,755	(1,360,070)	(0.69)%
TOTAL MEANS OF FINANCING	\$227,166,912	\$262,265,441	\$262,433,706	\$168,265	0.06%

Statutory Dedications

Description	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB	Percent Change
Louisiana Medical Assistance Trust Fund	8,495,650	9,147,866	9,147,866	_	_
Hospital Stabilization Fund	_	_	_	_	_
Total:	\$8,495,650	\$9,147,866	\$9,147,866	_	_

Program Expenditures

Description	FY2022-2023 Actuals		FY2024-2025 Total Request	Over/Under EOB	Percent Change
Salaries	_	_	_	_	_
Other Compensation	_	_	_	_	_
Related Benefits	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_	_
Travel	_	_	_	_	_
Operating Services	_	_	_	_	_
Supplies	_	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_
Other Charges	46,647,523	50,442,600	50,442,600	_	_
Debt Service	_	_	_	_	_
Interagency Transfers	180,519,389	211,822,841	211,991,106	168,265	0.08%
TOTAL OTHER CHARGES	\$227,166,912	\$262,265,441	\$262,433,706	\$168,265	0.06%
Acquisitions	_	_	_		_
Major Repairs	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_	_
TOTAL EXPENDITURES	\$227,166,912	\$262,265,441	\$262,433,706	\$168,265	0.06%

Cost Detail

Means of Financing

Description	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB
State General Fund	44,780,535	57,245,750	58,774,085	1,528,335
Louisiana Medical Assistance Trust Fund	8,495,650	9,147,866	9,147,866	_
Federal Funds	173,890,727	195,871,825	194,511,755	(1,360,070)
Total:	\$227,166,912	\$262,265,441	\$262,433,706	\$168,265

Other Charges

Commitment Item	Name	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB
5600000	TOTAL OTHER CHARGES	_	50,442,600	50,442,600	_
5610015	LOC AID-MEDICAID PMT	46,919,342	_	_	_
5620034	MISC-CANCELLATIONS	(18,714)	_	_	_
5620038	MISC-RECOVERIES	(3,170)	_	_	_
5620045	MISC-CASULTY INS-REC	(3,184)	_	_	_
5620047	MISC-VOLUNTARY RELAT	(9,129)	_	_	_
5620048	MISC-E.D.S. FED TPL	(74)	_	_	_
5620050	MISC-FIS TPL CLM ADJ	(25,249)	_	_	_
5620146	MISC-OC-RECOUPMENTS	(212,299)	_	_	_
Total Other Charges:		\$46,647,523	\$50,442,600	\$50,442,600	_

Interagency Transfers

Commitment Item	Name	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB
5950000	TOTAL IAT	_	211,822,841	211,991,106	168,265
5950001	IAT-COMMODITY/SERV	138,311,045	_	_	_
5950033	IAT-INTER AGY TRANS	42,208,344	_	_	_
Total Interagency Transfers:		\$180,519,389	\$211,822,841	\$211,991,106	\$168,265
Total Expenditures for Program 3062		\$227,166,912	\$262,265,441	\$262,433,706	\$168,265

3063 - Medicare Buy-Ins & Supplements

Means of Financing

Description	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB	Percent Change
STATE GENERAL FUND (Direct)	303,380,780	375,627,270	411,421,916	35,794,646	9.53%
STATE GENERAL FUND BY:	_	_	_	_	_
INTERAGENCY TRANSFERS	_	_	_	_	_
FEES & SELF-GENERATED	_	_	_	_	_
STATUTORY DEDICATIONS	_	_	_	_	_
FEDERAL FUNDS	434,931,583	425,618,053	430,947,504	5,329,451	1.25%
TOTAL MEANS OF FINANCING	\$738,312,363	\$801,245,323	\$842,369,420	\$41,124,097	5.13%

Program Expenditures

Description	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB	Percent Change
Salaries	_	_	-	_	_
Other Compensation	_	_	_	_	_
Related Benefits	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_	_
Travel	_	_	_	_	_
Operating Services	_	_	_	_	_
Supplies	_	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_
Other Charges	738,312,363	801,245,323	842,369,420	41,124,097	5.13%
Debt Service	_	_	_	_	_
Interagency Transfers	_	_	_	_	_
TOTAL OTHER CHARGES	\$738,312,363	\$801,245,323	\$842,369,420	\$41,124,097	5.13%
Acquisitions	_	_	-	_	_
Major Repairs	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS		_	_	_	_
TOTAL EXPENDITURES	\$738,312,363	\$801,245,323	\$842,369,420	\$41,124,097	5.13%

Cost Detail

Means of Financing

	FY2022-2023	Existing Operating Budget	FY2024-2025	
Description	Actuals	as of 10/01/2023	Total Request	Over/Under EOB
State General Fund	303,380,780	375,627,270	411,421,916	35,794,646
Federal Funds	434,931,583	425,618,053	430,947,504	5,329,451
Total:	\$738,312,363	\$801,245,323	\$842,369,420	\$41,124,097

Other Charges

Commitment Item	Name	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB
5600000	TOTAL OTHER CHARGES	_	801,245,323	842,369,420	41,124,097
5610003	OTHER PUBLIC ASST	2,120,709	_	_	_
5610015	LOC AID-MEDICAID PMT	745,492,342	_	_	_
5620034	MISC-CANCELLATIONS	(4,567)	_	_	_
5620038	MISC-RECOVERIES	(4,356,242)	_	_	_
5620039	MISC-REBATE-MEDICAID	(1,104)	_	_	_
5620041	MISC-THIRD PARTY ADJ	(4,936,309)	_	_	_
5620043	MISC-RECOUP-STINST	(672)	_	_	_
5620047	MISC-VOLUNTARY RELAT	(250)	_	_	_
5620050	MISC-FIS TPL CLM ADJ	(381)	_	_	_
5620146	MISC-OC-RECOUPMENTS	(1,162)	_	_	_
Total Other Charges:		\$738,312,363	\$801,245,323	\$842,369,420	\$41,124,097
Total Expenditures for Program 3063		\$738,312,363	\$801,245,323	\$842,369,420	\$41,124,097

3064 - Uncompensated Care Costs

Means of Financing

	FY2022-2023	Existing Operating Budget	FY2024-2025		
Description	Actuals	as of 10/01/2023	Total Request	Over/Under EOB	Percent Change
STATE GENERAL FUND (Direct)	64,872,304	121,903,385	121,024,371	(879,014)	(0.72)%
STATE GENERAL FUND BY:	_	_	_	_	_
INTERAGENCY TRANSFERS	14,000,621	13,920,424	13,752,501	(167,923)	(1.21)%
FEES & SELF-GENERATED	24,717,454	24,422,839	24,128,223	(294,616)	(1.21)%
STATUTORY DEDICATIONS	_	_	_	_	_
FEDERAL FUNDS	325,660,810	283,882,805	284,433,951	551,146	0.19%
TOTAL MEANS OF FINANCING	\$429,251,189	\$444,129,453	\$443,339,046	\$(790,407)	(0.18)%

Fees and Self-Generated

Description	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Reguest	Over/Under EOB	Percent Change
	Actuals	d5 01 10/0 1/2025	Total nequest	Over/Ollder EOB	
Fees & Self-generated	24,717,454	24,422,839	24,128,223	(294,616)	(1.21)%
Total:	\$24,717,454	\$24,422,839	\$24,128,223	\$(294,616)	(1.21)%

Program Expenditures

Description	FY2022-2023 Actuals		FY2024-2025 Total Request	Over/Under EOB	Percent Change
Salaries	_	_	_	_	_
Other Compensation	_	_	_	_	_
Related Benefits	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_	_
Travel	_	_	_	_	_
Operating Services	_	_	_	_	_
Supplies	_	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_
Other Charges	324,863,163	308,537,702	308,537,702	_	_
Debt Service	_	_	_	_	_
Interagency Transfers	104,388,026	135,591,751	134,801,344	(790,407)	(0.58)%
TOTAL OTHER CHARGES	\$429,251,189	\$444,129,453	\$443,339,046	\$(790,407)	(0.18)%
Acquisitions	_	_	_	_	_
Major Repairs	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_	_
TOTAL EXPENDITURES	\$429,251,189	\$444,129,453	\$443,339,046	\$(790,407)	(0.18)%

Cost Detail

Means of Financing

Description	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB
State General Fund	64,872,304	121,903,385	121,024,371	(879,014)
Interagency Transfers	14,000,621	13,920,424	13,752,501	(167,923)
Fees & Self-generated	24,717,454	24,422,839	24,128,223	(294,616)
Federal Funds	325,660,810	283,882,805	284,433,951	551,146
Total:	\$429,251,189	\$444,129,453	\$443,339,046	\$(790,407)

Other Charges

Commitment Item	Name	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB
5600000	TOTAL OTHER CHARGES	_	308,537,702	308,537,702	_
5610015	LOC AID-MEDICAID PMT	(247,453)	_	_	_
5620034	MISC-CANCELLATIONS	(84)	_	_	_
5620037	MISC-AUDT ADJ MIX-PD	364,214,688	_	_	_
5620043	MISC-RECOUP-STINST	(39,103,783)	_	_	_
5620045	MISC-CASULTY INS-REC	(205)	_	_	_
Total Other Charges:		\$324,863,163	\$308,537,702	\$308,537,702	_

Interagency Transfers

Commitment Item	Name	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB
5950000	TOTAL IAT	_	135,591,751	134,801,344	(790,407)
5950033	IAT-INTER AGY TRANS	104,388,026	_	_	_
Total Interagency Transfers:		\$104,388,026	\$135,591,751	\$134,801,344	\$(790,407)
Total Expenditures for Program 3064		\$429,251,189	\$444,129,453	\$443,339,046	\$(790,407)
Total Agency Expenditures:		\$16,795,677,562	\$18,773,729,684	\$17,341,987,880	\$(1,431,741,804)

Source of Funding Summary

Agency Overview

SOURCE OF FUNDING SUMMARY

Agency Overview

Interagency Transfers

Description	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Reguest	Over/Under EOB	Form ID
	Actuais	as 01 10/01/2023	i otai nequest	Over/Officer LOB	FUIIII ID
LSU HOSPITALS	153,159,018	160,311,613	158,510,557	(1,801,056)	24182
DCFS	<u> </u>	6,820,908	6,820,908	_	24183
OGB	525,698	1,105,064	1,105,064	_	24194
POOLING	(58,553,939)	_	_	_	28709
Total Interagency Transfers	\$95,130,777	\$168,237,585	\$166,436,529	\$(1,801,056)	

Fees & Self-generated

Description	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB	Form ID
LINCC	496,806,760	663,975,752	487,634,177	(176,341,575)	24191
MEDICAL MATCH	4,343,290	9,253,822	9,253,822	_	24257
Total Fees & Self-generated	\$501,150,050	\$673,229,574	\$496,887,999	\$(176,341,575)	

Statutory Dedications

Description	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB	Form ID
Z13-LOUISIANA FUND	11,879,184	16,732,459	16,732,459	_	23741
H30-NOW FUND	32,081,129	43,348,066	43,348,066	_	24178
H08-LA MATF	482,107,861	896,985,442	871,296,163	(25,689,279)	24184
H08PY- LA MATF-EXCESS	152,010,790	184,608,914	_	(184,608,914)	24186
Z17-HEALTH EXCELLENCE	15,005,517	28,279,797	28,279,797	_	24187
H19-MED TRUST ELDERLY	5,048,896	12,835,609	12,835,609	_	24188
H37-HOSPITAL STAB	257,146,329	314,552,061	314,552,061	_	24190
Total Statutory Dedications	\$955,279,706	\$1,497,342,348	\$1,287,044,155	\$(210,298,193)	

Federal Funds

	FY2022-2023 Ex	cisting Operating Budget	FY2024-2025		
Description	Actuals	as of 10/01/2023	Total Request	Over/Under EOB	Form ID
US HHS	13,376,842,689	14,161,340,272	12,842,168,441	(1,319,171,831)	24180
Total Federal Funds	\$13,376,842,689	\$14,161,340,272	\$12,842,168,441	\$(1,319,171,831)	
Total Sources of Funding:	\$14,928,403,222	\$16,500,149,779	\$14,792,537,124	\$(1,707,612,655)	

SOURCE OF FUNDING DETAIL

Interagency Transfers

Form 24182 — 306 - LSU Hospitals/ LDH IAT

	Existing Opera	ating Budget as of 1	0/01/2023	FY202	24-2025 Total Requ	est	FY2	.025-2026 Projected	
Expenditures	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match
Salaries	_	_	_	_	_	_	_	_	_
Other Compensation	_	_	_	_	_	_	_	_	_
Related Benefits	_	_	_	_	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_	_	_	_	_	_
Travel	_	_	_	_	_	_	_	_	_
Operating Services	_	_	_	_	_	_	_	_	_
Supplies	_	_	_	_	_	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_	_	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_	_	_	_	_
Other Charges	160,311,613		_	158,510,557	_	_	159,110,003	_	_
Debt Service	_	_	_	_	_	_	_	_	_
Interagency Transfers	<u>—</u>	<u> </u>	_	_	<u> </u>	_	_	<u> </u>	_
TOTAL OTHER CHARGES	\$160,311,613	_	_	\$158,510,557	_	_	\$159,110,003	_	_
Acquisitions			_	_	_	_	_	_	_
Major Repairs	_	_	_	_	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_	_	_	_	_	_
TOTAL EXPENDITURES	\$160,311,613	_	_	\$158,510,557	_	_	\$159,110,003	_	_

Form 24182 — 306 - LSU Hospitals/ LDH IAT

Question	Narrative Response
State the purpose, source and legal citation.	Interagency Transfer Revenues from Intergovernmental Transfers from LSU state clinics and hospitals.
Agency discretion or Federal requirement?	Agency discretion
Describe any budgetary peculiarities.	These funds are used to match Federal Funds. Act 447 of the 2023 Regular Session based the Medicaid Vendor Payments budget on a blended FMAP (Federal Medical Assistance Percentage) of 68.57%. The preliminary/estimated match rates for FY25 are as follows: the Title XIX blended rate is 32.04% state and 67.96% federal; the LaCHIP blended rate is 22.43% state and 77.57% federal, and the Title XIX Federal Fiscal Year 2025 rate is 31.94% state and 68.06% federal.
Is the Total Request amount for multiple years?	All funds budgeted in the Existing Operating Budget are anticipated to be expended as of June 30, 2024, and therefore will not be available for carry forward into fiscal year 2024-2025.
Additional information or comments.	N/A
Provide the amount of any indirect costs.	N/A
Any indirect costs funded with other MOF?	N/A
Objectives and indicators in the Operational Plan.	N/A
Additional information or comments.	N/A

Form 24183 — 306 - DCFS for CSoC

		ating Budget as of 1	10/01/2023	FY202	24-2025 Total Requ	est	FY2	025-2026 Projected	
Expenditures	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match
Salaries	_	_	_	_	_	_	_	_	_
Other Compensation		_	_	_		_	_	_	_
Related Benefits	_	_	_	_	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_	_	_	_	_	_
Travel		_	_	_	_	_	_	_	_
Operating Services	_	_	_	_	_	_	_	_	_
Supplies	_	_	_	_	_	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_	_	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_	_	_	_	_
Other Charges	6,820,908	_	_	6,820,908	_	_	6,820,908	_	_
Debt Service	_	_	_	_	_	_	_	_	_
Interagency Transfers		_	_	_		_	_		_
TOTAL OTHER CHARGES	\$6,820,908	_	_	\$6,820,908	_	_	\$6,820,908	_	_
Acquisitions	_	_	_	_	_	_	_	_	_
Major Repairs	_	_	_	_	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_	_	_	_	_	_
TOTAL EXPENDITURES	\$6,820,908	_	_	\$6,820,908	_	_	\$6,820,908	_	_

Form 24183 — 306 - DCFS for CSoC

Question	Narrative Response
State the purpose, source and legal citation.	These funds represent revenue that will be received from the DCFS (Department of Children and Family Services) for Coordinated System of Care expenditures.
Agency discretion or Federal requirement?	The line item requests reflect agency estimates of programmatic costs.
Describe any budgetary peculiarities.	These funds are used to match Federal Funds. Act 447 of the 2023 Regular Session based the Medicaid Vendor Payments budget on a blended FMAP (Federal Medical Assistance Percentage) of 68.57%. The preliminary/estimated match rates for FY25 are as follows: the Title XIX blended rate is 32.04% state and 67.96% federal; the LaCHIP blended rate is 22.43% state and 77.57% federal, and the Title XIX Federal Fiscal Year 2025 rate is 31.94% state and 68.06% federal.
Is the Total Request amount for multiple years?	All funds budgeted in the Existing Operating Budget are anticipated to be expended as of June 30, 2024, and therefore will not be available for carry forward into fiscal year 2024-2025.
Additional information or comments.	N/A
Provide the amount of any indirect costs.	N/A
Any indirect costs funded with other MOF?	N/A
Objectives and indicators in the Operational Plan.	N/A
Additional information or comments.	N/A

Form 24194 — 306 - CHIP Phase V Affordable Plan Premiums

	Existing Opera	ating Budget as of 1	10/01/2023	FY202	24-2025 Total Requ	est	FY2	025-2026 Projected	
Expenditures	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match
Salaries	_	_	_	_	_	_	_	_	_
Other Compensation	_		_	_		_	_	_	_
Related Benefits	_	_	_	_	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_	_	_	_	_	_
Travel	_	_	_	_	_	_	_	_	_
Operating Services	_	_	_	_	_	_	_	_	_
Supplies	_	_	_	_	_	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_	_	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_	_	_	_	_
Other Charges	1,105,064	_	_	1,105,064		_	1,105,064	_	_
Debt Service	_	_	_	_	_	_	_	_	_
Interagency Transfers	_	_	_	_	_	_	_	_	_
TOTAL OTHER CHARGES	\$1,105,064	_	_	\$1,105,064	_	_	\$1,105,064	_	_
Acquisitions		_	_	_		_	_	_	_
Major Repairs	_	_	_	_	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_	_	_	_	_	_
TOTAL EXPENDITURES	\$1,105,064	_	_	\$1,105,064	_	_	\$1,105,064	_	_

Form 24194 — 306 - CHIP Phase V Affordable Plan Premiums

Question	Narrative Response
State the purpose, source and legal citation.	The LaCHIP Affordable Plan provides coverage to uninsured children in families who earn too much to qualify for regular LaCHIP or Medicaid. The children in the program receive services through the Healthy Louisiana Managed Care Organizations. Families pay a premium to the Office of Group Benefits, which in turn transfers the funds via Interagency Transfers to Medicaid. This IAT revenue is for the premiums collected. These funds are used for Chip Phase V expenditures and therefore represent both the state and federal share of expenditures.
Agency discretion or Federal requirement?	Agency discretion
Describe any budgetary peculiarities.	These funds are used to match Federal Funds. Act 447 of the 2023 Regular Session based the Medicaid Vendor Payments budget on a blended FMAP (Federal Medical Assistance Percentage) of 68.57%. The preliminary/estimated match rates for FY25 are as follows: the Title XIX blended rate is 32.04% state and 67.96% federal; the LaCHIP blended rate is 22.43% state and 77.57% federal, and the Title XIX Federal Fiscal Year 2025 rate is 31.94% state and 68.06% federal.
Is the Total Request amount for multiple years?	All funds budgeted in the Existing Operating Budget are anticipated to be expended as of June 30, 2024, and therefore will not be available for carry forward into fiscal year 2024-2025.
Additional information or comments.	N/A
Provide the amount of any indirect costs.	N/A
Any indirect costs funded with other MOF?	N/A
Objectives and indicators in the Operational Plan.	N/A
Additional information or comments.	N/A

Form 28709 — 306 - Pooling

	Existing Operating Budget as of 10/01/2023			FY20	24-2025 Total Requ	est	FY2025-2026 Projected		
Expenditures	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match
Salaries	_	_	_	_	_	_	_	_	_
Other Compensation			_	_	_	_	_		_
Related Benefits	_	_	_	_	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_	_	_	_	_	_
Travel	_	_	_	_	_	_	_	_	_
Operating Services	_	_	_	_	_	_	_	_	_
Supplies	_	_	_	_	_	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_	_	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_	_	_	_	_
Other Charges		_	_	_	_	_	_		_
Debt Service	_	_	_	_	_	_	_	_	_
Interagency Transfers	_	_	_	_	_	_	_	_	_
TOTAL OTHER CHARGES	_	_	_	_	_	_	_	_	_
Acquisitions		_	_	_	_	_	_		_
Major Repairs	_	_	_	_	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_	_	_	_	_	_
TOTAL EXPENDITURES	_	_	_	_	_	_	_	_	_

Form 28709 — 306 - Pooling

Question	Narrative Response
State the purpose, source and legal citation.	N/A
Agency discretion or Federal requirement?	N/A
Describe any budgetary peculiarities.	N/A
Is the Total Request amount for multiple years?	N/A
Additional information or comments.	N/A
Provide the amount of any indirect costs.	N/A
Any indirect costs funded with other MOF?	N/A
Objectives and indicators in the Operational Plan.	N/A
Additional information or comments.	N/A

Statutory Dedications

Form 23741 — 306 - Louisiana Fund - Tobacco Settlement

	Existing Opera	ating Budget as of 1	0/01/2023	FY202	24-2025 Total Reque	est	FY2	.025-2026 Projected	
Expenditures	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match
Salaries	_	_	_	_	_	_	_	_	_
Other Compensation		_	_		_	_	_	_	_
Related Benefits	_	_	_	_	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_	_	_	_	_	_
Travel	_	_	_	_	_	_	_	_	_
Operating Services	_	_	_	_	_	_	_	_	_
Supplies	_	_	_	_	_	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_	_	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_	_	_	_	_
Other Charges	16,732,459	<u> </u>	_	16,732,459	_	_	16,732,459	_	_
Debt Service	_	_	_	_	_	_	_	_	_
Interagency Transfers		_	_	_	_	_	_	_	_
TOTAL OTHER CHARGES	\$16,732,459	_	_	\$16,732,459	_	_	\$16,732,459	_	_
Acquisitions		_	_	_	_	_	_	<u> </u>	_
Major Repairs	_	_	_	_	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_	_	_	_	_	_
TOTAL EXPENDITURES	\$16,732,459	_	_	\$16,732,459	_	_	\$16,732,459	_	_

Form 23741 — 306 - Louisiana Fund - Tobacco Settlement

Question	Narrative Response
State the purpose, source and legal citation.	In 1998, Louisiana and forty five other states settled suits against major tobacco companies. The states claimed the tobacco companies were responsible for the impact of tobacco use on the states and their citizens. Louisiana's portion of the settlements were placed into the Millennium Trust Fund. Earnings from that fund are then split out into other funds, such as the Louisiana Fund and the Health Excellence Fund. Based upon a predetermined formula, Medicaid is appropriated a certain percentage of funding from both the Louisiana and the Health Trust Funds each year. The purpose of these funds is to finance expenditures for Medicaid and LaCHIP recipients.
Agency discretion or Federal requirement?	The line item requests reflect agency estimates of programmatic costs.
Describe any budgetary peculiarities.	These funds are used to match Federal Funds. Act 447 of the 2023 Regular Session based the Medicaid Vendor Payments budget on a blended FMAP (Federal Medical Assistance Percentage) of 68.57%. The preliminary/estimated match rates for FY25 are as follows: the Title XIX blended rate is 32.04% state and 67.96% federal; the LaCHIP blended rate is 22.43% state and 77.57% federal, and the Title XIX Federal Fiscal Year 2025 rate is 31.94% state and 68.06% federal. This funding is allocated across various budget units in the Appropriations Bill. The allocation for the Medical Vendor Program is determined by the Division of Administration (DOA).
Is the Total Request amount for multiple years?	All funds budgeted in the Existing Operating Budget are anticipated to be expended as of June 30, 2024, and therefore will not be available for carry forward into fiscal year 2024-2025.
Additional information or comments.	N/A
Provide the amount of any indirect costs.	N/A
Any indirect costs funded with other MOF?	N/A
Objectives and indicators in the Operational Plan.	N/A
Additional information or comments.	N/A

Form 24178 — 306 - New Opportunities Waiver (NOW) Fund

	Existing Opera	ating Budget as of 1	0/01/2023	FY202	24-2025 Total Requ	est	FY2	2025-2026 Projected	
Expenditures	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match
Salaries	_	_	_	_	_	_	_	_	_
Other Compensation	_	_	_	_	_	_	_	_	_
Related Benefits	_	_	_	_	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_	_	_	_	_	_
Travel		<u> </u>	_	_	_	_	_	_	_
Operating Services	_	_	_	_	_	_	_	_	_
Supplies	_	_	_	_	_	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_	_	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_	_	_	_	_
Other Charges	43,348,066	<u> </u>	_	43,348,066	_	_	43,348,066	_	_
Debt Service	_	_	_	_	_	_	_	_	_
Interagency Transfers	_	_	_	_	_	_	_	_	_
TOTAL OTHER CHARGES	\$43,348,066	_	_	\$43,348,066	_	_	\$43,348,066	_	_
Acquisitions		<u> </u>	_	_	_	_	_	_	_
Major Repairs	_	_	_	_	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_	_	_	_	_	_
TOTAL EXPENDITURES	\$43,348,066	_	_	\$43,348,066	_	_	\$43,348,066	_	_

Form 24178 — 306 - New Opportunities Waiver (NOW) Fund

Question	Narrative Response
State the purpose, source and legal citation.	In any fiscal year, state treasurer is to deposit 12% of all recurring SGF revenue, not to exceed \$50,000,000, as recognized by the Revenue Estimating Conference in excess of the Official Forecast at the beginning of the current fiscal year into the New Opportunities Waiver Fund, and monies in the fund from this Subparagraph shall be used for appropriation in the ensuing fiscal year. Monies designated for the fund and received by the state treasurer from donations, gifts, grants, appropriations, or other revenue.
Agency discretion or Federal requirement?	Line item requests for expenditures reflect agency discretion.
Describe any budgetary peculiarities.	These funds are used to match Federal Funds. Act 447 of the 2023 Regular Session based the Medicaid Vendor Payments budget on a blended FMAP (Federal Medical Assistance Percentage) of 68.57%. The preliminary/estimated match rates for FY25 are as follows: the Title XIX blended rate is 32.04% state and 67.96% federal; the LaCHIP blended rate is 22.43% state and 77.57% federal, and the Title XIX Federal Fiscal Year 2025 rate is 31.94% state and 68.06% federal.
Is the Total Request amount for multiple years?	All funds budgeted in the Existing Operating Budget are anticipated to be expended as of June 30, 2024, and therefore will not be available for carry forward into fiscal year 2024-2025.
Additional information or comments.	N/A
Provide the amount of any indirect costs.	N/A
Any indirect costs funded with other MOF?	N/A
Objectives and indicators in the Operational Plan.	N/A
Additional information or comments.	N/A

Form 24184 — 306 - LA Medical Assistance Trust Fund - Prem Tax & Prov Fee

		ating Budget as of 1	0/01/2023		24-2025 Total Requ	est		025-2026 Projected	
Expenditures	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match
Salaries	_	_	_	_	_	_	_	_	_
Other Compensation	_	_	_	_	_	_	_	_	_
Related Benefits	_	_	_	_	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_	_	_	_	_	_
Travel	_	_	_	_	_	_	_	_	_
Operating Services	_	_	_	_	_	_	_	_	_
Supplies	_	_	_	_	_	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_	_	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_	_	_	_	_
Other Charges	887,837,576		_	862,148,297	_	_	862,148,297		_
Debt Service	_	_	_	_	_	_	_	_	_
Interagency Transfers	9,147,866	_	_	9,147,866	_	_	9,147,866	_	_
TOTAL OTHER CHARGES	\$896,985,442	_	_	\$871,296,163	_	_	\$871,296,163	_	_
Acquisitions	_	_	_	_	_	_	_	_	_
Major Repairs	_	_	_	_	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_	_	_	_	_	_
TOTAL EXPENDITURES	\$896,985,442	_	_	\$871,296,163	_	_	\$871,296,163	_	_

Form 24184 — 306 - LA Medical Assistance Trust Fund - Prem Tax & Prov Fee

Question	Narrative Response
State the purpose, source and legal citation.	This fund was created by Act 260 of the 1992 Louisiana Regular Session. Premium Tax - This portion of the fund, labeled Premium Taxes, is for deposits made to the fund from Premium Tax collections as opposed to collections from fees imposed on certain health care providers (Nursing Homes, ICF/DDs, Pharmacy, and Ambulance). During the 2012 Regular Legislative Session, an initial \$18,000,000 was added to MATF for Premium Tax collections. As required by RS:22:832, the Bayou Health per member per month premiums are taxed. The budget request is based on a 2.25% premium tax for the Medicaid Dental Plan PMPMs, and a 5.5% premium tax for the Medicaid Managed Care Organizations PMPMs. Balances in the fund at the end of a fiscal year remain in the fund, and can be used for appropriation in subsequent fiscal years. Provider Fees - The funds in this trust are collected from fees imposed on certain health care providers (Nursing Homes, ICF/DDs, Pharmacy, and Ambulance transportation), and any other monies which may be provided by law. The purpose is to further provide for the operation of the Medicaid Program in the state and for the maintenance of health care services available under the program. Balances in the fund at the end of a fiscal year remain in the fund, and can be used for appropriation in subsequent fiscal years.
Agency discretion or Federal requirement?	Premium Tax - The line item requests reflect agency estimates. Provider Fees - The state treasurer established a separate account within the fund for each healthcare provider group in which provider fees are collected and deposited into the fund in accordance with law. The Department of Health and Hospitals, or its successor, shall expend monies deposited into each account only for the reimbursement of services to the provider group that paid the fee into the account in any fiscal year, except the general account may be expended for any Medicaid program expenditure.
Describe any budgetary peculiarities.	Premium Tax - These funds are used to match Federal Funds. Act 447 of the 2023 Regular Session based the Medicaid Vendor Payments budget on a blended FMAP (Federal Medical Assistance Percentage) of 68.57%. The preliminary/ estimated match rates for FY25 are as follows: the Title XIX blended rate is 32.04% state and 67.96% federal; the LaCHIP blended rate is 22.43% state and 77.57% federal, and the Title XIX Federal Fiscal Year 2025 rate is 31.94% state and 68.06% federal. Premium Tax collections may fluctuate based on the total managed care Per Member Per Month payments made during each calendar year. Provider Fees - These funds are used to match Federal Funds. Act 447 of the 2023 Regular Session based the Medicaid Vendor Payments budget on a blended FMAP (Federal Medical Assistance Percentage) of 68.57%. The preliminary/estimated match rates for FY25 are as follows: the Title XIX blended rate is 32.04% state and 67.96% federal; the LaCHIP blended rate is 22.43% state and 77.57% federal, and the Title XIX Federal Fiscal Year 2025 rate is 31.94% state and 68.06% federal. There are federal requirements concerning the source and applications of the fees imposed on the health care providers. Based on how the fees are regulated to the provider population determines the eligibility to be utilized as state match to draw-down federal monies. The fees are collected based on the quantity of services provided (i.e., bed days, prescriptions). As this quantity increases or decreases, so does the amount of the fees deposited into the Trust Fund.
Is the Total Request amount for multiple years?	All funds budgeted in the Existing Operating Budget are anticipated to be expended as of June 30, 2024, and therefore will not be available for carry forward into fiscal year 2024-2025.
Additional information or comments.	N/A
Provide the amount of any indirect costs.	N/A

Form 24184 — 306 - LA Medical Assistance Trust Fund - Prem Tax & Prov Fee (continued)

Question	Narrative Response
Any indirect costs funded with other MOF?	N/A
Objectives and indicators in the Operational Plan.	N/A
Additional information or comments.	N/A

Form 24186 — 306 - LA Medical Assistance Trust Fund - Carryforward

		ating Budget as of 1	0/01/2023		24-2025 Total Requ	est		025-2026 Projected	
Expenditures	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match
Salaries	_	_	_	_	_	_	_	_	_
Other Compensation	_	_	_	_	_	_	_	_	_
Related Benefits	_	_	_	_	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_	_	_	_	_	_
Travel			_	_	_	_	_	_	_
Operating Services	_	_	_	_	_	_	_	_	_
Supplies	_	<u> </u>	_	_	_	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_	_	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_	_	_	_	_
Other Charges	184,608,914	_	_	_	_	_	_	_	_
Debt Service	_	_	_	_	_	_	_	_	_
Interagency Transfers	_	<u> </u>	_	_	_	_	_	_	_
TOTAL OTHER CHARGES	\$184,608,914	_	_	_	_	_	_	_	_
Acquisitions	_	_	_	_	_	_	_	_	_
Major Repairs	_	_	_	_	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_	_	_	_	_	_
TOTAL EXPENDITURES	\$184,608,914	_	_	_	_	_	_	_	_

Form 24186 — 306 - LA Medical Assistance Trust Fund - Carryforward

Question	Narrative Response
State the purpose, source and legal citation.	The Louisiana Medical Assistance Trust Fund (MATF) was created by Act 260 of the 1992 Louisiana Regular Session. This portion of the fund, labeled Carryforward or Excess, is for deposits made to the fund from any other monies, as opposed to collections from fees imposed on certain health care providers (Nursing Homes, ICF/MRs, and Pharmacy) or Premium Taxes. This is from a balance in the fund that was not spent in the prior fiscal year. Balances in the fund at the end of a fiscal year remain in the fund and can be used for appropriation in subsequent fiscal years.
Agency discretion or Federal requirement?	The line item requests reflect agency estimates.
Describe any budgetary peculiarities.	These funds are used to match Federal Funds. Act 447 of the 2023 Regular Session based the Medicaid Vendor Payments budget on a blended FMAP (Federal Medical Assistance Percentage) of 68.57%. The preliminary/estimated match rates for FY25 are as follows: the Title XIX blended rate is 32.04% state and 67.96% federal; the LaCHIP blended rate is 22.43% state and 77.57% federal, and the Title XIX Federal Fiscal Year 2025 rate is 31.94% state and 68.06% federal.
Is the Total Request amount for multiple years?	All funds budgeted in the Existing Operating Budget are anticipated to be expended as of June 30, 2024, and therefore will not be available for carry forward into fiscal year 2024-2025.
Additional information or comments.	N/A
Provide the amount of any indirect costs.	N/A
Any indirect costs funded with other MOF?	N/A
Objectives and indicators in the Operational Plan.	N/A
Additional information or comments.	N/A

Form 24187 — 306 - Health Excellence Fund

	Existing Opera	ating Budget as of 1	0/01/2023	FY202	24-2025 Total Reque	est	FY2	2025-2026 Projected	
Expenditures	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match
Salaries	_	_	_	_	_	_	_	_	_
Other Compensation	<u> </u>	_	_	_	_	_	_	_	_
Related Benefits	_	_	_	_	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_	_	_	_	_	_
Travel		_	_	_	_	_	_	<u> </u>	_
Operating Services	_	_	_	_	_	_	_	_	_
Supplies	_	_	_	_	_	_	_	_	
TOTAL OPERATING EXPENSES	_	_	_	_	_	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_	_	_	_	_
Other Charges	28,279,797	_	_	28,279,797	_	_	28,279,797	_	_
Debt Service	_	_	_	_	_	_	_	_	_
Interagency Transfers	_	_	_	_	_	_	_	_	_
TOTAL OTHER CHARGES	\$28,279,797	_	_	\$28,279,797	_	_	\$28,279,797	_	_
Acquisitions	_	_	_	_	_	_	_	<u> </u>	_
Major Repairs	_	_	_	_	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_	_	_	_	_	_
TOTAL EXPENDITURES	\$28,279,797	_	_	\$28,279,797	_	_	\$28,279,797	_	_

Form 24187 — 306 - Health Excellence Fund

Question	Narrative Response
State the purpose, source and legal citation.	In 1998, Louisiana and forty-five other states settled suits against major tobacco companies. The states claimed the tobacco companies were responsible for the impact of tobacco use on the states and their citizens. Louisiana's portion of the settlements were placed into the Millennium Trust Fund. Earnings from that fund are then split out into other funds, such as the Louisiana Fund and the Health Excellence Fund. Based upon a predetermined formula, Medicaid is appropriated a certain percentage of funding from both the Louisiana and the Health Trust Funds each year. The purpose of these funds is to finance expenditures for Medicaid and LaCHIP recipients.
Agency discretion or Federal requirement?	The line item requests reflect agency estimates of programmatic costs.
Describe any budgetary peculiarities.	These funds are used to match Federal Funds. Act 447 of the 2023 Regular Session based the Medicaid Vendor Payments budget on a blended FMAP (Federal Medical Assistance Percentage) of 68.57%. The preliminary/estimated match rates for FY25 are as follows: the Title XIX blended rate is 32.04% state and 67.96% federal; the LaCHIP blended rate is 22.43% state and 77.57% federal, and the Title XIX Federal Fiscal Year 2025 rate is 31.94% state and 68.06% federal. This funding is allocated across various budget units in the Appropriations Bill. The allocation for the Medical Vendor Program is determined by the Division of Administration (DOA).
Is the Total Request amount for multiple years?	All funds budgeted in the Existing Operating Budget are anticipated to be expended as of June 30, 2024, and therefore will not be available for carry forward into fiscal year 2024-2025.
Additional information or comments.	N/A
Provide the amount of any indirect costs.	N/A
Any indirect costs funded with other MOF?	N/A
Objectives and indicators in the Operational Plan.	N/A
Additional information or comments.	N/A

Form 24188 — 306 - Medicaid Trust Fund for the Elderly

	Existing Opera	ating Budget as of 1	0/01/2023	FY202	24-2025 Total Reque	est	FY2	.025-2026 Projected	
Expenditures	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match
Salaries	_	_	_	_	_	_	_	_	_
Other Compensation	_	_	_	_	_	_	_	_	_
Related Benefits	_	_	_	_	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_	_	_	_	_	_
Travel		_	_	_	_	_	_	<u> </u>	_
Operating Services	_	_	_	_	_	_	_	_	_
Supplies		_	_	_	_	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_	_	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_	_	_	_	_
Other Charges	12,835,609	_	_	12,835,609	_	_	12,835,609	_	_
Debt Service	_	_	_	_	_	_	_	_	_
Interagency Transfers		_	_	_	_	_	_	_	_
TOTAL OTHER CHARGES	\$12,835,609	_	_	\$12,835,609	_	_	\$12,835,609	_	_
Acquisitions	_	_	_	_	_	_	_	_	_
Major Repairs	_	_	_	_	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_	_	_	_	_	_
TOTAL EXPENDITURES	\$12,835,609	_	_	\$12,835,609	_	_	\$12,835,609	_	_

Form 24188 — 306 - Medicaid Trust Fund for the Elderly

Question	Narrative Response
State the purpose, source and legal citation.	The Nursing facility intergovernmental transfer payments establish enhanced payments based on Medicare upper payment limits in accordance with the Code of Federal Regulations, section 42 CFR 447.272. The Department of Health and Hospitals, Medical Vendor Administration has implemented this program as directed by Act 143 of the 1st Extraordinary Session of the 2000 Louisiana Legislature. Matching funds for the purpose of drawing down the federal funds will be from the principle of the Medicaid Trust Fund for the Elderly and will immediately be redeposited into the trust fund. Appropriations to fund the ongoing expenses of Medicaid are made annually based upon the anticipated interest earnings from the fund. Two thirds of these earnings are appropriated directly from this Trust Fund to be used for institutional Long Term Care costs, and the remaining one third is transferred to the Health Trust Fund to be appropriated for use in funding community-based services, such as Elderly and Disabled Waiver slots, Adult Day Health Care Waiver slots, Personal Care Attendant services, and to address access to care issues.
Agency discretion or Federal requirement?	The line item requests meet federal requirements and in accordance with the mandates of Act 143 of the First Extraordinary Session of the 2000 Legislature. The funding generated through the Nursing Home Intergovernmental Transfer Program shall be deposited into the 'Medicaid Trust Fund for the Elderly.' Effective July 1, 2002 only the interest generated by the trust fund shall be available for expenditure purposes. The principal in the fund shall not be subject to appropriation except as provided by law, which includes for the re-basing of nursing homes in accordance with the approved state Medicaid plan.
Describe any budgetary peculiarities.	These funds are used to match Federal Funds. Act 447 of the 2023 Regular Session based the Medicaid Vendor Payments budget on a blended FMAP (Federal Medical Assistance Percentage) of 68.57%. The preliminary/estimated match rates for FY25 are as follows: the Title XIX blended rate is 32.04% state and 67.96% federal; the LaCHIP blended rate is 22.43% state and 77.57% federal, and the Title XIX Federal Fiscal Year 2025 rate is 31.94% state and 68.06% federal.
Is the Total Request amount for multiple years?	All funds budgeted in the Existing Operating Budget are anticipated to be expended as of June 30, 2024, and therefore will not be available for carry forward into fiscal year 2024-2025.
Additional information or comments.	N/A
Provide the amount of any indirect costs.	N/A
Any indirect costs funded with other MOF?	N/A
Objectives and indicators in the Operational Plan.	N/A
Additional information or comments.	N/A

Form 24190 — 306 - Hospital Stabilization Fund

	Existing Opera	ating Budget as of 1	0/01/2023	FY202	24-2025 Total Requ	est	FY2	2025-2026 Projected	
Expenditures	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match
Salaries	_	_	_	_	_	_	_	_	_
Other Compensation	_	_	_	_	_	_	_	_	_
Related Benefits	_	_	_	_	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_	_	_	_	_	_
Travel		_	_	_	_	_	_	_	_
Operating Services	_	_	_	_	_	_	_	_	_
Supplies	_	_	_	_	_	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_	_	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_	_	_	_	_
Other Charges	314,552,061	_	_	314,552,061	_	_	314,552,061	_	_
Debt Service	_	_	_	_	_	_	_	_	_
Interagency Transfers	_	_	_	_	_	_	_	_	_
TOTAL OTHER CHARGES	\$314,552,061	_	_	\$314,552,061	_	_	\$314,552,061	_	_
Acquisitions	_	_	_	_	_	_	_	_	_
Major Repairs	_	_	_	_	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_	_	_	_	_	_
TOTAL EXPENDITURES	\$314,552,061	_	_	\$314,552,061	_	_	\$314,552,061	_	_

Form 24190 — 306 - Hospital Stabilization Fund

Question	Narrative Response
State the purpose, source and legal citation.	House Concurrent Resolution (HCR) 51 of the 2016 Regular Legislative Session resolved that the Legislature of Louisiana enact the annual hospital stabilization formula pursuant to Article VII, Section 10.13 of the Constitution of Louisiana: I. Hospital Stabilization Assessment. The Department of Health and Hospitals shall allocate the assessment to each assessed hospital on a pro rata basis by calculating the quotient of the total assessment divided by the total inpatient and outpatient hospital net patient revenue of all assessed hospitals as reported in the Medicare cost report ending in state fiscal year 2015 and multiplying the quotient by each assessed hospital's total inpatient and outpatient hospital net patient revenue. HCR51 provides for a hospital assessment beginning January 1, 2017. HCR8 of the 2017 RLS maintains the reimbursement rates in effect for dates of service on or after January 1, 2017 (as provided for in the 2017 hospital HCR51). Additionally, for dates of service on or after January 1, 2018, HCR8 provides additional rate increases. HCR8 of the 2017 RLS provides for a hospital assessment beginning January 1, 2018. HCR6 of the 2018 Regular Legislative Session maintains/annualizes the hospital reimbursement rates in effect for dates of service on or after January 1, 2018 (rate increase provided for in 2018 hospital HCR 8). Additionally, for dates of service on or after January 1, 2019 (6 months of FY 18) this measure provides additional outpatient reimbursement rate increases to the level of rates in effect on June 30, 2009 or September 30, 2009. The FY 24 Hospital Stabilization Fund appropriation is based on HCR 2 of the 2023 Regular Legislative Session. These resolutions provide that the Department of Health shall calculate, levy, and collect a hospital provider fee assessment conditioned upon Medicaid expansion, and state/federal approval. The premium assessment revenue can be used to draw federal matching funds that will be used partially for hospital rate increases and for partially off
Agency discretion or Federal requirement?	Line item requests for expenditures reflect agency discretion.
Describe any budgetary peculiarities.	These funds are used to match Federal Funds. Act 447 of the 2023 Regular Session based the Medicaid Vendor Payments budget on a blended FMAP (Federal Medical Assistance Percentage) of 68.57%. The preliminary/estimated match rates for FY25 are as follows: the Title XIX blended rate is 32.04% state and 67.96% federal; the LaCHIP blended rate is 22.43% state and 77.57% federal, and the Title XIX Federal Fiscal Year 2025 rate is 31.94% state and 68.06% federal.
Is the Total Request amount for multiple years?	All funds budgeted in the Existing Operating Budget are anticipated to be expended as of June 30, 2024, and therefore will not be available for carry forward into fiscal year 2024-2025.
Additional information or comments.	N/A
Provide the amount of any indirect costs.	N/A
Any indirect costs funded with other MOF?	N/A
Objectives and indicators in the Operational Plan.	N/A
Additional information or comments.	N/A

Source of Funding Detail Federal Funds

Federal Funds

Form 24180 — 306 - Medical Assistance Grant

	Existing Opera	ating Budget as of 1	0/01/2023	FY202	24-2025 Total Requ	est	FY2	025-2026 Projected	
Expenditures	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match
Salaries	_	_	_	_	_	_	_	_	_
Other Compensation		_	_			_			_
Related Benefits	_	_	_	_	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_	_	_	_	_	_
Travel		_	_	_	_	_			_
Operating Services	_	_	_	_	_	_	_	_	_
Supplies	_	_	_	_	_	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_	_	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_	_	_	_	_
Other Charges	13,924,414,947	_	_	12,607,183,107	_	_	12,607,183,107		_
Debt Service	_	_	_	_	_	_	_	_	_
Interagency Transfers	236,925,325	_	_	234,985,334	_	_	234,985,334	_	_
TOTAL OTHER CHARGES	\$14,161,340, 272	_	_	\$12,842,168, 441	_	_	\$12,842,168, 441	_	_
Acquisitions	_	_	_	_	_	_	_	_	_
Major Repairs	_	_	_	_	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_	_	_	_	_	_
TOTAL EXPENDITURES	\$14,161,340, 272	<u>—</u>	_	\$12,842,168, 441	_	_	\$12,842,168, 441	<u>—</u>	_

Source of Funding Detail Federal Funds

Form 24180 — 306 - Medical Assistance Grant

Question	Narrative Response
State the purpose, source and legal citation.	Medicaid, Title XIX formula grant as authorized under the Social Security Act, Title XIX, as amended; public Laws 89-97, 90-248 and 91-56, 42 USC 1396, et seq., as amended; Public Laws 92-223, 92-603, 93-66, 96-499, 97-35, 97-248, 98-369, 99-272, 99-509, 100-93, 100-202, 100-203, 100-360, 100-436, 100-485, 100-647, 101-166, 101-234, 101-239, 101-508, 101-517, 102-234, 102-170, 102-394, 103-66, 103-112, 103-333,104-91, 104-191, 104-193 and 104-208. The purpose of these funds are to provide financial assistance to states for payments of medical assistance on behalf of recipients who meet income and source requirements for coverage under this grant. Non-federal revenues are eligible to match this grant which is generated from statistical factors calculated on 'per capita income' by state based on a 3-year average.
Agency discretion or Federal requirement?	The line item requests reflect agency estimates of programmatic costs. The Title XIX grant for programmatic expenditures mandates that federal matching funds are drawn to reimburse specific providers for their service delivery. The total expenditures are to be state matched at the appropriate state participation percentage.
Describe any budgetary peculiarities.	These funds are used to match Federal Funds. Act 447 of the 2023 Regular Session based the Medicaid Vendor Payments budget on a blended FMAP (Federal Medical Assistance Percentage) of 68.57%. The preliminary/estimated match rates for FY25 are as follows: the Title XIX blended rate is 32.04% state and 67.96% federal; the LaCHIP blended rate is 22.43% state and 77.57% federal, and the Title XIX Federal Fiscal Year 2025 rate is 31.94% state and 68.06% federal.
Is the Total Request amount for multiple years?	All funds budgeted in the Existing Operating Budget are anticipated to be expended as of June 30, 2024, and therefore will not be available for carry forward into fiscal year 2024-2025.
Additional information or comments.	N/A
Provide the amount of any indirect costs.	N/A
Any indirect costs funded with other MOF?	N/A
Objectives and indicators in the Operational Plan.	N/A
Additional information or comments.	N/A

Fees & Self-generated

Form 24191 — 306 - Low Income & Needy Care Collaboration SGR

	Existing Opera	nting Budget as of 1	0/01/2023	FY202	24-2025 Total Requ	est	FY2	.025-2026 Projected	
Expenditures	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match
Salaries	_	_	_	_	_	_	_	_	_
Other Compensation	_	_	_	_	_	_	_	_	_
Related Benefits	_	_	_	_	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_	_	_	_	_	_
Travel	_	_	_	_	_	_	_	_	_
Operating Services	_	_	_	_	_	_	_	_	_
Supplies	_	_	_	_	_	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_	_	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_	_	_	_	_
Other Charges	663,975,752	_	_	487,634,177	_	_	487,634,177	_	_
Debt Service	_	_	_	_	_	_	_	_	_
Interagency Transfers	<u>—</u>	<u>—</u>	_	_	_	_	_	_	
TOTAL OTHER CHARGES	\$663,975,752	_	_	\$487,634,177	_	_	\$487,634,177	_	_
Acquisitions			_	_	_	_	_	_	_
Major Repairs	_	_	_	_	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_	_	_	_	_	_
TOTAL EXPENDITURES	\$663,975,752	_	_	\$487,634,177	_	_	\$487,634,177	_	_

Form 24191 — 306 - Low Income & Needy Care Collaboration SGR

Question	Narrative Response
State the purpose, source and legal citation.	Fees and Self Generated Revenues from Intergovernmental Transfers from non-state public hospitals which are used to match Federal Funds.
Agency discretion or Federal requirement?	Agency discretion
Describe any budgetary peculiarities.	These funds are used to match Federal Funds. Act 447 of the 2023 Regular Session based the Medicaid Vendor Payments budget on a blended FMAP (Federal Medical Assistance Percentage) of 68.57%. The preliminary/estimated match rates for FY25 are as follows: the Title XIX blended rate is 32.04% state and 67.96% federal; the LaCHIP blended rate is 22.43% state and 77.57% federal, and the Title XIX Federal Fiscal Year 2025 rate is 31.94% state and 68.06% federal.
Is the Total Request amount for multiple years?	All funds budgeted in the Existing Operating Budget are anticipated to be expended as of June 30, 2024, and therefore will not be available for carry forward into fiscal year 2024-2025.
Additional information or comments.	N/A
Provide the amount of any indirect costs.	N/A
Any indirect costs funded with other MOF?	N/A
Objectives and indicators in the Operational Plan.	N/A
Additional information or comments.	N/A

Form 24257 — 306 - Medical Match

	Existing Opera	ating Budget as of 1	10/01/2023	FY202	24-2025 Total Requ	est	FY2025-2026 Projected		
Expenditures	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match
Salaries	_	_	_	_	_	_	_	<u> </u>	_
Other Compensation			_	_		_	_	_	_
Related Benefits	_	_	_	_	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_	_	_	_	_	_
Travel	_	_	_	_	_	_	_	_	_
Operating Services	_	_	_	_	_	_	_	_	_
Supplies	_	_	_	_	_	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_	_	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_	_	_	_	_
Other Charges	9,253,822	_	_	9,253,822	_	_	9,253,822	<u>—</u>	_
Debt Service	_	_	_	_	_	_	_	_	_
Interagency Transfers	_	_	_	_	_	_	_	_	_
TOTAL OTHER CHARGES	\$9,253,822	_	_	\$9,253,822	_	_	\$9,253,822	_	_
Acquisitions		_	_	_	_	_	_	_	_
Major Repairs	_	_	_	_	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_	_	_	_	_	_
TOTAL EXPENDITURES	\$9,253,822	_	_	\$9,253,822	_	_	\$9,253,822	_	_

Form 24257 — 306 - Medical Match

Question	Narrative Response
State the purpose, source and legal citation.	Act 447 (HB-1) of the 2023 Regular Session states: 'Revenues from refunds and recoveries in the Medical Vendor Program are authorized to be expended in Fiscal Year 2022-2023.' This revenue source is represented in Medical Match and includes Third Party Liability (TPL) collections. Code of Federal Regulations 42 CFR 433.138 and 433.139 determine the legal liability of third parties to pay for services under the State plan for payments of claims involving third parties 42 CFR 433.145 through 433.148 assignment of rights to benefits and cooperation with the agency in obtaining medical support or payments 42 CFR 433.151 through 433.154 cooperative agreements and incentive payments for third party collections. State Medicaid Manual part 3900.1 -3910.15: The purpose of establishing and maintaining effective TPL programs is to reduce Medicaid expenditures. Third parties are entities which are legally responsible for paying the medical claims of Medicaid recipients. Federal law and regulations require States to assure that Medicaid recipients utilize all other resources available to them to pay for all or part of their medical care needs before turning to Medicaid. The main components of this are: 1) health insurance - we contract this out to HMS, and through data matches with insurance carriers they identify Medicaid recipients that have other health insurance coverage retrospectively as well as prospectively; 2) casualty coverage resulting from an accident or injury - our Trauma unit works with insurance companies and attorneys to settle cases where there is TPL; 3) Estate Recovery - our Estate Recovery unit works with attorneys to seek reimbursement for services rendered to an individual that was over age 55 and living in a nursing home or received home and community based services through the Medicaid program.
Agency discretion or Federal requirement?	The line item requests reflect agency estimates of programmatic costs.
Describe any budgetary peculiarities.	This funding source is contingent upon collections.
Is the Total Request amount for multiple years?	All funds budgeted in the Existing Operating Budget are anticipated to be expended as of June 30, 2024, and therefore will not be available for carry forward into fiscal year 2024-2025.
Additional information or comments.	N/A
Provide the amount of any indirect costs.	N/A
Any indirect costs funded with other MOF?	N/A
Objectives and indicators in the Operational Plan.	N/A
Additional information or comments.	N/A

Expenditures by Means of Financing Existing Operating Budget

EXPENDITURES BY MEANS OF FINANCING

Existing Operating Budget

Expenditures	Used as a Cash Match	Total Means of Financing By Expenditure	Total State General Fund	Interagency Transfers Form ID 24182 LSU HOSPITALS	Interagency Transfers Form ID 24183 DCFS	Interagency Transfers Form ID 24194 OGB
Salaries	_	_	_	_	_	_
Other Compensation	_	_	_	_	_	_
Related Benefits	_	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_	_	_
Travel	_	_	_	_	_	_
Operating Services	_	_	_	_	_	_
Supplies	_	_	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_	_
Other Charges	_	18,426,315,092	2,172,238,504	160,311,613	6,820,908	1,105,064
Debt Service	_	_	_	_	_	_
Interagency Transfers	_	347,414,592	101,341,401	_	_	_
TOTAL OTHER CHARGES	_	\$18,773,729,684	\$2,273,579,905	\$160,311,613	\$6,820,908	\$1,105,064
Acquisitions	_	_	_	_	_	_
Major Repairs	_	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_	_	_
TOTAL EXPENDITURES	_	\$18,773,729,684	\$2,273,579,905	\$160,311,613	\$6,820,908	\$1,105,064

Expenditures by Means of Financing Existing Operating Budget

Expenditures	Fees & Self-generated Form ID 24191 LINCC	Fees & Self-generated Form ID 24257 MEDICAL MATCH	Statutory Dedications Form ID 23741 Z13-LOUISIANA FUND	Statutory Dedications Form ID 24178 H30-NOW FUND	Statutory Dedications Form ID 24184 H08-LA MATF	Statutory Dedications Form ID 24186 H08PY- LA MATF- EXCESS
Salaries	_	_	_	_	_	_
Other Compensation	_	_	-	-	_	_
Related Benefits	_	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_	_	_
Travel	_	_	_	_	_	_
Operating Services	_	_	_	_	_	_
Supplies	_	_	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_	_
Other Charges	663,975,752	9,253,822	16,732,459	43,348,066	887,837,576	184,608,914
Debt Service	_	_	_	_	_	_
Interagency Transfers	_	_	_	_	9,147,866	_
TOTAL OTHER CHARGES	\$663,975,752	\$9,253,822	\$16,732,459	\$43,348,066	\$896,985,442	\$184,608,914
Acquisitions	_	_	_	_	_	_
Major Repairs	_	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_	_	_
TOTAL EXPENDITURES	\$663,975,752	\$9,253,822	\$16,732,459	\$43,348,066	\$896,985,442	\$184,608,914

Expenditures by Means of Financing

Expenditures	Statutory Dedications Form ID 24187 Z17-HEALTH EXCELLENCE	Statutory Dedications Form ID 24188 H19-MED TRUST ELDERLY	Statutory Dedications Form ID 24190 H37-HOSPITAL STAB	Federal Funds Form ID 24180 US HHS
Salaries	_	_	_	_
Other Compensation	_	_	_	_
Related Benefits	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_
Travel	_	_	_	_
Operating Services	_	_	_	_
Supplies	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_
Other Charges	28,279,797	12,835,609	314,552,061	13,924,414,947
Debt Service	_	_	_	_
Interagency Transfers	_	_	_	236,925,325
TOTAL OTHER CHARGES	\$28,279,797	\$12,835,609	\$314,552,061	\$14,161,340,272
Acquisitions	_	_	_	_
Major Repairs	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_
TOTAL EXPENDITURES	\$28,279,797	\$12,835,609	\$314,552,061	\$14,161,340,272

Expenditures by Means of Financing Total Request

Total Request

Expenditures	Used as a Cash Match	Total Means of Financing By Expenditure	Total State General Fund	Interagency Transfers Form ID 24182 LSU HOSPITALS	Interagency Transfers Form ID 24183 DCFS	Interagency Transfers Form ID 24194 OGB
Salaries	_			_	_	_
Other Compensation	_	_	_	_	_	_
Related Benefits	_	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_	_	_
Travel	_	_	_	_	_	_
Operating Services	_	_	_	_	_	_
Supplies	_	_	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_	_
Other Charges	_	16,995,195,430	2,446,791,506	158,510,557	6,820,908	1,105,064
Debt Service	_	_	_	_	_	_
Interagency Transfers	_	346,792,450	102,659,250	_	_	_
TOTAL OTHER CHARGES	_	\$17,341,987,880	\$2,549,450,756	\$158,510,557	\$6,820,908	\$1,105,064
Acquisitions	_	_	_	_	_	_
Major Repairs	_	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_	_	_
TOTAL EXPENDITURES	_	\$17,341,987,880	\$2,549,450,756	\$158,510,557	\$6,820,908	\$1,105,064

Expenditures by Means of Financing Total Request

Expenditures	Statutory Dedications Form ID 23741 Z13-LOUISIANA FUND	Statutory Dedications Form ID 24178 H30-NOW FUND	Statutory Dedications Form ID 24184 H08-LA MATF	Statutory Dedications Form ID 24187 Z17-HEALTH EXCELLENCE	Statutory Dedications Form ID 24188 H19-MED TRUST ELDERLY	Statutory Dedications Form ID 24190 H37-HOSPITAL STAB
Salaries	_	_	_	_	_	_
Other Compensation	_	_	_	_	_	_
Related Benefits	_	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_	_	_
Travel	_	_	_	_	_	_
Operating Services	_	_	_	_	_	_
Supplies	_	_	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_	_
Other Charges	16,732,459	43,348,066	862,148,297	28,279,797	12,835,609	314,552,061
Debt Service	_	_	_	_	_	_
Interagency Transfers	_	_	9,147,866	_	_	_
TOTAL OTHER CHARGES	\$16,732,459	\$43,348,066	\$871,296,163	\$28,279,797	\$12,835,609	\$314,552,061
Acquisitions	_	_	_	_	_	_
Major Repairs	_	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_	_	_
TOTAL EXPENDITURES	\$16,732,459	\$43,348,066	\$871,296,163	\$28,279,797	\$12,835,609	\$314,552,061

Expenditures by Means of Financing Total Request

Expenditures	Federal Funds Form ID 24180 US HHS	Fees & Self-generated Form ID 24191 LINCC	Fees & Self-generated Form ID 24257 MEDICAL MATCH
Salaries	_	_	_
Other Compensation	_	_	_
Related Benefits	_	_	_
TOTAL PERSONAL SERVICES	_	_	_
Travel	_	_	_
Operating Services	_	_	_
Supplies	_	_	_
TOTAL OPERATING EXPENSES	_	_	_
PROFESSIONAL SERVICES	_	_	_
Other Charges	12,607,183,107	487,634,177	9,253,822
Debt Service	_	_	_
Interagency Transfers	234,985,334	_	_
TOTAL OTHER CHARGES	\$12,842,168,441	\$487,634,177	\$9,253,822
Acquisitions	_	_	_
Major Repairs	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_
TOTAL EXPENDITURES	\$12,842,168,441	\$487,634,177	\$9,253,822

Revenue Collections/Income Interagency Transfers

REVENUE COLLECTIONS/INCOME

Interagency Transfers

003 - Interagency Transfers

Source	Commitment Item	Commitment Item Name	FY2022-2023 Actuals	FY-2024 Estimate	FY2024-2025 Projected	Over/Under Current Year Estimate
SOURCE						
LSU HOSPITALS	4710059	MR-FROM STATE AGENCY	153,159,018	160,311,613	158,510,557	(1,801,056)
OGB	4710059	MR-FROM STATE AGENCY	525,698	1,105,064	1,105,064	_
DCFS	4710059	MR-FROM STATE AGENCY	_	6,820,908	6,820,908	_
INTERAGENCY TRANSFERS	4710059	MR-FROM STATE AGENCY	(58,553,939)	_	_	_
Total Collections/Income			\$95,130,777	\$168,237,585	\$166,436,529	\$(1,801,056)
TYPE						
Expenditures Source of Funding	Form (BR-6)		95,130,777	168,237,585	166,436,529	(1,801,056)
Total Expenditures, Transfers and C	arry Forwards to	Next FY	\$95,130,777	\$168,237,585	\$166,436,529	\$(1,801,056)
Difference in Total Collections/Incor Forwards to Next FY	me and Total Expe	enditures, Transfers and Carry	_	_	_	_

Revenue Collections/Income Fees & Self-generated

Fees & Self-generated

002 - Fees & Self-generated

Source	Commitment Item	Commitment Item Name	FY2022-2023 Actuals	FY-2024 Estimate	FY2024-2025 Projected	Over/Under Current Year Estimate
SOURCE						
MEDICAL MATCH	4710029	MR-PRIVATE SOURCES	4,343,290	9,253,822	9,253,822	_
UPL IGT	4710029	MR-PRIVATE SOURCES	438,990,510	598,781,744	422,734,785	(176,046,959)
LINCC	4710029	MR-PRIVATE SOURCES	33,098,796	40,771,169	40,771,169	_
UPL IGT	4710029	MR-PRIVATE SOURCES	24,717,454	24,422,839	24,128,223	(294,616)
Total Collections/Income			\$501,150,050	\$673,229,574	\$496,887,999	\$(176,341,575)
ТҮРЕ						
Expenditures Source of Funding F	orm (BR-6)		501,150,050	673,229,574	496,887,999	(176,341,575)
Total Expenditures, Transfers and Ca	rry Forwards to	Next FY	\$501,150,050	\$673,229,574	\$496,887,999	\$(176,341,575)
Difference in Total Collections/Incom Forwards to Next FY	e and Total Expe	enditures, Transfers and Carry	_	_	_	_

Revenue Collections/Income Statutory Dedications

Statutory Dedications

H08 - Louisiana Medical Assistance Trust Fund

Source	Commitmen Item	t Commitment Item Name	FY2022-2023 Actuals	FY-2024 Estimate	FY2024-2025 Projected	Over/Under Current Year Estimate
SOURCE						
H08-LA MATF	4830014	INTRAFUND TRANSFER	482,107,861	896,985,442	871,296,163	(25,689,279)
H08PY- LA MATF-EXCESS	4830014	INTRAFUND TRANSFER	152,010,790	184,608,914	_	(184,608,914)
Total Collections/Income			\$634,118,651	\$1,081,594,356	\$871,296,163	\$(210,298,193)
ТҮРЕ						
Expenditures Source of Funding	g Form (BR-6)		634,118,651	1,081,594,356	871,296,163	(210,298,193)
Total Expenditures, Transfers and	Carry Forwards to	Next FY	\$634,118,651	\$1,081,594,356	\$871,296,163	\$(210,298,193)
Difference in Total Collections/Inco Forwards to Next FY	ome and Total Exp	enditures, Transfers and Carry	_	_	_	_

H19 - Medicaid Trust Fund for the Elderly

Source	Commitment Item	Commitment Item Name	FY2022-2023 Actuals	FY-2024 Estimate	FY2024-2025 Projected	Over/Under Current Year Estimate
SOURCE						
H19-MED TRUST ELDERLY	4830014	INTRAFUND TRANSFER	5,048,896	12,835,609	12,835,609	_
Total Collections/Income			\$5,048,896	\$12,835,609	\$12,835,609	_
TYPE						
Expenditures Source of Funding	Form (BR-6)		5,048,896	12,835,609	12,835,609	_
Total Expenditures, Transfers and Carry Forwards to Next FY			\$5,048,896	\$12,835,609	\$12,835,609	_
Difference in Total Collections/Income and Total Expenditures, Transfers and Carry Forwards to Next FY			_	_	_	_

Revenue Collections/Income Statutory Dedications

H30 - New Opportunities Waiver (NOW) Fund

Source	Commitment Item	Commitment Item Name	FY2022-2023 Actuals	FY-2024 Estimate	FY2024-2025 Projected	Over/Under Current Year Estimate
SOURCE						
H30-NOW FUND	4830014	INTRAFUND TRANSFER	32,081,129	43,348,066	43,348,066	_
Total Collections/Income			\$32,081,129	\$43,348,066	\$43,348,066	_
ТҮРЕ						
Expenditures Source of Funding	Form (BR-6)		32,081,129	43,348,066	43,348,066	_
Total Expenditures, Transfers and C	Carry Forwards to	Next FY	\$32,081,129	\$43,348,066	\$43,348,066	_
Difference in Total Collections/Incor Forwards to Next FY	me and Total Exp	enditures, Transfers and Carry	_	_	_	_

H37 - Hospital Stabilization Fund

Source	Commitment Item	Commitment Item Name	FY2022-2023 Actuals	FY-2024 Estimate	FY2024-2025 Projected	Over/Under Current Year Estimate
SOURCE						
H37-HOSPITAL STAB	4830014	INTRAFUND TRANSFER	257,146,329	314,552,061	314,552,061	_
Total Collections/Income			\$257,146,329	\$314,552,061	\$314,552,061	_
ТҮРЕ						
Expenditures Source of Funding F	orm (BR-6)		257,146,329	314,552,061	314,552,061	_
Total Expenditures, Transfers and Carry Forwards to Next FY			\$257,146,329	\$314,552,061	\$314,552,061	_
Difference in Total Collections/Incom Forwards to Next FY	ne and Total Exp	enditures, Transfers and Carry	_	_	_	_

Revenue Collections/Income Statutory Dedications

Z13 - Louisiana Fund

Source	Commitment Item	Commitment Item Name	FY2022-2023 Actuals	FY-2024 Estimate	FY2024-2025 Projected	Over/Under Current Year Estimate
SOURCE						
Z13-LOUISIANA FUND	4830014	INTRAFUND TRANSFER	11,879,184	16,732,459	16,732,459	_
Total Collections/Income			\$11,879,184	\$16,732,459	\$16,732,459	_
ТҮРЕ						
Expenditures Source of Funding	Form (BR-6)		11,879,184	16,732,459	16,732,459	_
Total Expenditures, Transfers and	Carry Forwards to	Next FY	\$11,879,184	\$16,732,459	\$16,732,459	_
Difference in Total Collections/Income and Total Expenditures, Transfers and Carry Forwards to Next FY		_	_	_	_	

Z17 - Health Excellence Fund

Source	Commitment Item	Commitment Item Name	FY2022-2023 Actuals	FY-2024 Estimate	FY2024-2025 Projected	Over/Under Current Year Estimate
SOURCE						
Z17-HEALTH EXCELLENCE	4830014	INTRAFUND TRANSFER	15,005,517	28,279,797	28,279,797	_
Total Collections/Income			\$15,005,517	\$28,279,797	\$28,279,797	_
ТҮРЕ						
Expenditures Source of Funding	Form (BR-6)		15,005,517	28,279,797	28,279,797	_
Total Expenditures, Transfers and C	Carry Forwards to	Next FY	\$15,005,517	\$28,279,797	\$28,279,797	_
Difference in Total Collections/Income and Total Expenditures, Transfers and Carry Forwards to Next FY		_	_	_	_	

Revenue Collections/Income Federal Funds

Federal Funds

006 - Federal Funds

Source	Commitment Item	Commitment Item Name	FY2022-2023 Actuals	FY-2024 Estimate	FY2024-2025 Projected	Over/Under Current Year Estimate
SOURCE						
MEDICAID	4060035	FR-OTHER	13,580,082,063	14,161,340,272	12,842,168,441	(1,319,171,831)
POOLING	4060035	FR-OTHER	(203,239,374)	_	_	_
Total Collections/Income			\$13,376,842,689	\$14,161,340,272	\$12,842,168,441	\$(1,319,171,831)
TYPE						
Expenditures Source of Fundir	ng Form (BR-6)		13,376,842,689	14,161,340,272	12,842,168,441	(1,319,171,831)
Total Expenditures, Transfers and Carry Forwards to Next FY		\$13,376,842,689	\$14,161,340,272	\$12,842,168,441	\$(1,319,171,831)	
Difference in Total Collections/Income and Total Expenditures, Transfers and Carry Forwards to Next FY		_	_	<u> </u>	_	

Justification of Differences

Form 25451 — 306 - IAT - LSU Hospitals

Question	Narrative Response
Explain any transfers to other appropriations.	N/A
Break out INA by Source of Funding.	N/A
Additional information or comments.	N/A

Form 25452 — 306 - IAT - CHIP Phase V Affordable Plan

Question	Narrative Response
Explain any transfers to other appropriations.	N/A
Break out INA by Source of Funding.	N/A
Additional information or comments.	N/A

Form 25457 — 306 - IAT - DCFS - for Coordinated System of Care

Question	Narrative Response
Explain any transfers to other appropriations.	N/A
Break out INA by Source of Funding.	N/A
Additional information or comments.	N/A

Form 25458 — 306 - SG - Medical Match

Question	Narrative Response
Explain any transfers to other appropriations.	N/A
Break out INA by Source of Funding.	N/A
Additional information or comments.	N/A

Form 25460 — 306 - SG - Hospitals

Question	Narrative Response
Explain any transfers to other appropriations.	N/A
Break out INA by Source of Funding.	N/A
Additional information or comments.	N/A

Form 25462 — 306 - SG - LINCC

Question	Narrative Response
Explain any transfers to other appropriations.	N/A
Break out INA by Source of Funding.	N/A
Additional information or comments.	N/A

Form 25464 — 306 - LA MATF - Premium Taxes & Provider Fees

Question	Narrative Response
Explain any transfers to other appropriations.	N/A
Break out INA by Source of Funding.	N/A
Additional information or comments.	N/A

Form 25466 — 306 - LA MATF - Carryforward

Question	Narrative Response
Explain any transfers to other appropriations.	N/A
Break out INA by Source of Funding.	N/A
Additional information or comments.	N/A

Form 25467 — 306 - LA Fund - Tobacco Settlement

Question	Narrative Response
Explain any transfers to other appropriations.	N/A
Break out INA by Source of Funding.	N/A
Additional information or comments.	N/A

Form 25468 — 306 - Health Excellence Fund (Tobacco Settlement)

Question	Narrative Response
Explain any transfers to other appropriations.	N/A
Break out INA by Source of Funding.	N/A
Additional information or comments.	N/A

Form 25469 — 306 - Medical Trust Fund for the Elderly

Question	Narrative Response
Explain any transfers to other appropriations.	N/A
Break out INA by Source of Funding.	N/A
Additional information or comments.	N/A

Form 25470 — 306 - New Opportunities Waivers Fund

Question	Narrative Response
Explain any transfers to other appropriations.	N/A
Break out INA by Source of Funding.	N/A
Additional information or comments.	N/A

Form 25471 — 306 - Hospital Stabilization Fund

Question	Narrative Response
Explain any transfers to other appropriations.	N/A
Break out INA by Source of Funding.	N/A
Additional information or comments.	N/A

Form 25472 — 306 - Medical Assistance Grant, Refugee, CHIP, other

Question	Narrative Response	
Explain any transfers to other appropriations.	N/A	
Break out INA by Source of Funding.	N/A	
Additional information or comments.	N/A	

Form 25473 — 306 - FED - Pooling

Question	Narrative Response
Explain any transfers to other appropriations.	N/A
Break out INA by Source of Funding.	N/A
Additional information or comments.	N/A

Form 25481 — 306 - Physician, Ambulance & Hospital

Question	Narrative Response
Explain any transfers to other appropriations.	N/A
Break out INA by Source of Funding.	N/A
Additional information or comments.	N/A

Form 28741 — 306 - IAT - POOLING

Question	Narrative Response
Explain any transfers to other appropriations.	N/A
Break out INA by Source of Funding.	N/A
Additional information or comments.	N/A

SCHEDULE OF REQUESTED EXPENDITURES

3061 - Payments to Private Providers

Other Charges

FY2024-2025 Request	Means of Financing	Description
11,932,275,231	Federal Funds	
472,759,776	Fees & Self-generated	
28,279,797	Health Excellence Fund	
314,552,061	Hospital Stabilization Fund	
152,684,028	Interagency Transfers	
12,835,609	Louisiana Fund	
862,148,297	Louisiana Medical Assistance Trust Fund	
16,732,459	Medicaid Trust Fund for the Elderly	
43,348,066	New Opportunities Waiver (NOW) Fund	
1,958,230,384	State General Fund	
\$15,793,845,708		Payments to Private Providers
\$15,793,845,708	Total Other Charges	

3062 - Payments to Public Providers

Other Charges

FY2024-2025 Request	Means of Financing	Description
50,442,600	Federal Funds	
\$50,442,600		Local Education for School Board Health
\$50,442,600	Total Other Charges	

Interagency Transfers

FY2024-2025 Request	Means of Financing	Receiving Agency	Description
57,766	Federal Funds		
3,668	Louisiana Medical Assistance Trust Fund		
23,566	State General Fund		
\$85,000		ACADIANA AREA HUMAN SRVC DIST	Acadiana Area Human Services District
1,709,777	Federal Funds		
108,565	Louisiana Medical Assistance Trust Fund		
697,516	State General Fund		
\$2,515,858		CAPITAL AREA HUMAN SRV DSTRCT	Capital Area Human Services District (Disc)
3,602	Federal Funds		
229	Louisiana Medical Assistance Trust Fund		
1,469	State General Fund		
\$5,300		CENTRAL LA HUMAN SERVICE DIST	Central Louisiana Human Services District
16,990	Federal Funds		
1,079	Louisiana Medical Assistance Trust Fund		
6,931	State General Fund		
\$25,000		FLA PAR HUMAN SERVCS AUTHORITY	Florida Parishes Human Services District (Disc)
54,368	Federal Funds		
3,449	Louisiana Medical Assistance Trust Fund		
22,183	State General Fund		
\$80,000		SSC-SCHOOLS FOR DEAF & VIS IMP	LA School for the Deaf and Visually Impaired
860,217	Federal Funds		
54,621	Louisiana Medical Assistance Trust Fund		

Interagency Transfers (continued)

FY2024-2025 Request	Means of Financing	Receiving Agency	Description
350,932	State General Fund		223.4
\$1,265,770		LSUHCS - LSU HEALTH CARE SRVS	LSU HCSD
10,118,590	Federal Funds		
642,494	Louisiana Medical Assistance Trust Fund		
4,127,953	State General Fund		
\$14,889,037		LSU BOARD OF SUPERVISORS	LSU Physicians
110,949,544	Federal Funds		
7,044,893	Louisiana Medical Assistance Trust Fund		
45,262,693	State General Fund		
\$163,257,130		OFF FOR CITIZENS DEV DISABLIT.	Office for Citizens with Developmental Disabilities
2,330,946	Federal Funds		
148,007	Louisiana Medical Assistance Trust Fund		
950,926	State General Fund		
\$3,429,879		OFFICE OF BEHAVIORAL HEALTH	Office of Behavioral Health for free standing psych units
1,035,367	Federal Funds		
65,742	Louisiana Medical Assistance Trust Fund		
422,386	State General Fund		
\$1,523,495		OFFICE OF PUBLIC HEALTH	Office of Public Health
7,877	Federal Funds		
500	Louisiana Medical Assistance Trust Fund		
3,213	State General Fund		
\$11,590		S CNTL LA HUMAN SVCS AUTHORITY	South Central LA Human Services Authority
570,858	Federal Funds		
36,247	Louisiana Medical Assistance Trust Fund		
232,886	State General Fund		
\$839,991		SPECIAL SCHOOL DISTRICTS	Special School District #1
81,552	Federal Funds		
5,178	Louisiana Medical Assistance Trust Fund		
33,270	State General Fund		
\$120,000		THRIVE ACADEMY	Thrive Academy
16,271,701	Federal Funds		

Interagency Transfers (continued)

FY2024-2025 Request	Means of Financing	Receiving Agency	Description
1,033,194	Louisiana Medical Assistance Trust Fund		
6,638,161	State General Fund		
\$23,943,056		DHH-VILLA FELICIANA MEDCOMPLX	Villa Feliciana Medical Complex
\$211,991,106	Total Interagency Transfers		

3063 - Medicare Buy-Ins & Supplements

Other Charges

FY2024-2025 Request	Means of Financing	Description	
233,807,854	State General Fund		
\$233,807,854		Clawback Payments	
3,909,633	Federal Funds		
1,245,460	State General Fund		
\$5,155,093		LaHIPP	
427,037,871	Federal Funds		
176,368,602	State General Fund		
\$603,406,473		Medicare Premiums & Supplements	
\$842,369,420	Total Other Charges		

3064 - Uncompensated Care Costs

Other Charges

FY2024-2025 Request	Means of Financing	Description
31,656,450	State General Fund	
\$31,656,450		118 Civil Beds
118,698,448	Federal Funds	
24,128,223	Fees & Self-generated	
13,752,501	Interagency Transfers	
17,823,484	State General Fund	
\$174,402,656		DSH - Hospital Directed Payment Model
1,361,200	Federal Funds	
638,800	State General Fund	
\$2,000,000		Louisiana Behavioral
62,629,248	Federal Funds	
23,157,517	State General Fund	
\$85,786,765		Low Income and Needy Care Collaboration
681	Federal Funds	
319	State General Fund	
\$1,000		Non-rural Hospitals - High Medicaid DSH Pool
9,998,580	Federal Funds	
4,692,251	State General Fund	
\$14,690,831		OBH Public/Private CEA Agreements
\$308,537,702	Total Other Charges	

Interagency Transfers

FY2024-2025 Request	Means of Financing	Receiving Agency	Description
10,405,951	Federal Funds		
4,883,428	State General Fund		
\$15,289,379		LSUHCS - LSU HEALTH CARE SRVS	LSU/HSC - HCSD Lallie Kemp
81,339,843	Federal Funds		
38,172,122	State General Fund		
\$119,511,965		OFFICE OF BEHAVIORAL HEALTH	Office of Behavioral Health for free standing psych units
\$134,801,344	Total Interagency Transfers		

Continuation Budget Adjustments

Agency Summary Statement Total Agency

AGENCY SUMMARY STATEMENT

Total Agency

Means of Financing

	Existing Operating Budget						FY2024-2025 Requested
Description	as of 10/01/2023	Non-Recurring	Inflation	Compulsory	Workload	Other	Continuation Level
STATE GENERAL FUND (Direct)	2,273,579,905	(1,221,894)	_	25,635,484	(36,333,877)	287,791,138	2,549,450,756
STATE GENERAL FUND BY:	_		_	_	_	_	_
INTERAGENCY TRANSFERS	168,237,585	_	_	_	_	(1,801,056)	166,436,529
FEES & SELF-GENERATED	673,229,574	(37,205,571)	_	_	(93,647,504)	(45,488,500)	496,887,999
STATUTORY DEDICATIONS	1,497,342,348	_	_	_	(35,934,097)	(174,364,096)	1,287,044,155
FEDERAL FUNDS	14,161,340,272	(251,481,267)	_	54,375,391	(1,099,515,439)	(22,550,516)	12,842,168,441
TOTAL MEANS OF FINANCING	\$18,773,729,684	\$(289,908,732)	_	\$80,010,875	\$(1,265,430,917)	\$43,586,970	\$17,341,987,880

Agency Summary Statement Total Agency

Fees and Self-Generated

Description	Existing Operating Budget as of 10/01/2023	Non-Recurring	Inflation	Compulsory	Workload	Other	FY2024-2025 Requested Continuation Level
Fees & Self-generated	673,229,574	(37,205,571)	_	_	(93,647,504)	(45,488,500)	496,887,999
Total:	\$673,229,574	\$(37,205,571)	_	<u> </u>	\$(93,647,504)	\$(45,488,500)	\$496,887,999

Statutory Dedications

Description	Existing Operating Budget as of 10/01/2023	Non Doguwing	Inflation	Commulsons	Workload	Other	FY2024-2025 Requested Continuation Level
•	as 01 10/01/2023	Non-Recurring	IIIIIauon	Compulsory	Workioau	Uther	Continuation Level
Health Excellence Fund	28,279,797	_	_	_	_	_	28,279,797
Hospital Stabilization Fund	314,552,061	_	_	_	_	_	314,552,061
Louisiana Fund	16,732,459	_	_	_	_	_	16,732,459
Louisiana Medical Assistance Trust Fund	1,081,594,356	_	_	_	(35,934,097)	(174,364,096)	871,296,163
Medicaid Trust Fund for the Elderly	12,835,609	_	_	_	_	_	12,835,609
New Opportunities Waiver (NOW) Fund	43,348,066	_	_	_	_	_	43,348,066
Total:	\$1,497,342,348	_	_	_	\$(35,934,097)	\$(174,364,096)	\$1,287,044,155

Agency Summary Statement Total Agency

Expenditures and Positions

Description	Existing Operating Budget as of 10/01/2023	Non-Recurring	Inflation	Compulsory	Workload	Other	FY2024-2025 Requested Continuation Level
Salaries	_	_	_	_	_	_	_
Other Compensation	_	_		_	_	_	_
Related Benefits	_	_	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_	_	_	_
Travel	_	_	_	_	_	_	_
Operating Services	_	_	_	_	_	_	_
Supplies	_	_	_	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_	_	_
Other Charges	18,426,315,092	(285,320,324)	_	76,044,609	(1,265,430,917)	43,586,970	16,995,195,430
Debt Service	_	_	_	_	_	_	_
Interagency Transfers	347,414,592	(4,588,408)		3,966,266	_	_	346,792,450
TOTAL OTHER CHARGES	\$18,773,729,684	\$(289,908,732)	_	\$80,010,875	\$(1,265,430,917)	\$43,586,970	\$17,341,987,880
Acquisitions	_	_	_	_	_	_	_
Major Repairs	_	_	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_	_	_	_
TOTAL EXPENDITURES	\$18,773,729,684	\$(289,908,732)	_	\$80,010,875	\$(1,265,430,917)	\$43,586,970	\$17,341,987,880
Classified	_	_	_	_	_	_	_
Unclassified	_	_	_	_	_	_	_
TOTAL AUTHORIZED T.O. POSITIONS	_	_	_	_	_	_	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_	_	_	_	_	_	_
TOTAL NON-T.O. FTE POSITIONS	_	_	_	_	_	_	_

Total Agency Request Type: NON-RECUR

CONTINUATION BUDGET ADJUSTMENTS - SUMMARIZED

Form 25991 — FY24-25 Non-recurring Carryforwards Means of Financing

	Amount
STATE GENERAL FUND (Direct)	(1,221,894)
STATE GENERAL FUND BY:	_
INTERAGENCY TRANSFERS	_
FEES & SELF-GENERATED	(37,205,571)
STATUTORY DEDICATIONS	_
FEDERAL FUNDS	(178,186,891)
TOTAL MEANS OF FINANCING	\$(216,614,356)

Expenditures

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	_
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	(212,025,948)
Debt Service	_
Interagency Transfers	(4,588,408)
TOTAL OTHER CHARGES	\$(216,614,356)
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	\$(216,614,356)

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

Total Agency Request Type: NON-RECUR

Form 28658 — 306 - Non-Recur 1X HCBS Spending Plan Federal Authority Means of Financing

	Amount
STATE GENERAL FUND (Direct)	_
STATE GENERAL FUND BY:	_
INTERAGENCY TRANSFERS	_
FEES & SELF-GENERATED	_
STATUTORY DEDICATIONS	_
FEDERAL FUNDS	(73,294,376)
TOTAL MEANS OF FINANCING	\$(73,294,376)

Expenditures

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	_
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	(73,294,376)
Debt Service	_
Interagency Transfers	_
TOTAL OTHER CHARGES	\$(73,294,376)
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	\$(73,294,376)

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

Form 27965 — 306 - Nursing Home Inflationary Adjustment Means of Financing

	Amount
STATE GENERAL FUND (Direct)	21,709,219
STATE GENERAL FUND BY:	-
INTERAGENCY TRANSFERS	_
FEES & SELF-GENERATED	_
STATUTORY DEDICATIONS	
FEDERAL FUNDS	46,047,394
TOTAL MEANS OF FINANCING	\$67,756,613

Expenditures

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	_
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	67,756,613
Debt Service	_
Interagency Transfers	_
TOTAL OTHER CHARGES	\$67,756,613
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	\$67,756,613

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

Form 27971 — 306 - Federally Qualified Health Clinics Annualization Means of Financing

	Amount
STATE GENERAL FUND (Direct)	224,306
STATE GENERAL FUND BY:	_
INTERAGENCY TRANSFERS	_
FEES & SELF-GENERATED	_
STATUTORY DEDICATIONS	_
FEDERAL FUNDS	475,775
TOTAL MEANS OF FINANCING	\$700,081

Expenditures

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	_
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	700,081
Debt Service	_
Interagency Transfers	_
TOTAL OTHER CHARGES	\$700,081
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	\$700,081

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

Form 27974 — 306 - Intermediate Care Facilities Inflationary Adjustment Means of Financing

	Amount
STATE GENERAL FUND (Direct)	2,085,805
STATE GENERAL FUND BY:	_
INTERAGENCY TRANSFERS	_
FEES & SELF-GENERATED	_
STATUTORY DEDICATIONS	_
FEDERAL FUNDS	4,424,200
TOTAL MEANS OF FINANCING	\$6,510,005

Expenditures

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	_
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	6,510,005
Debt Service	_
Interagency Transfers	_
TOTAL OTHER CHARGES	\$6,510,005
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	\$6,510,005

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

Form 27977 — 306 - Rural Health Clinics Annualization Means of Financing

	Amount
STATE GENERAL FUND (Direct)	96,651
STATE GENERAL FUND BY:	_
INTERAGENCY TRANSFERS	_
FEES & SELF-GENERATED	_
STATUTORY DEDICATIONS	_
FEDERAL FUNDS	205,007
TOTAL MEANS OF FINANCING	\$301,658

Expenditures

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	_
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	301,658
Debt Service	_
Interagency Transfers	_
TOTAL OTHER CHARGES	\$301,658
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	\$301,658

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

Form 27979 — 306 - Rural Hospital Inflation Inpatient Per Diems Means of Financing

	Amount
STATE GENERAL FUND (Direct)	248,711
STATE GENERAL FUND BY:	_
INTERAGENCY TRANSFERS	_
FEES & SELF-GENERATED	_
STATUTORY DEDICATIONS	_
FEDERAL FUNDS	527,541
TOTAL MEANS OF FINANCING	\$776,252

Expenditures

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	_
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	776,252
Debt Service	_
Interagency Transfers	_
TOTAL OTHER CHARGES	\$776,252
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	\$776,252

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

Form 27981 — 306 - ICF Rebase Of Public Facilities Means of Financing

	Amount
STATE GENERAL FUND (Direct)	1,270,792
STATE GENERAL FUND BY:	
INTERAGENCY TRANSFERS	<u> </u>
FEES & SELF-GENERATED	
STATUTORY DEDICATIONS	<u> </u>
FEDERAL FUNDS	2,695,474
TOTAL MEANS OF FINANCING	\$3,966,266

Expenditures

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	_
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	_
Debt Service	_
Interagency Transfers	3,966,266
TOTAL OTHER CHARGES	\$3,966,266
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	\$3,966,266

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

Form 27972 — 306 - Clawback Means of Financing

	Amount
STATE GENERAL FUND (Direct)	28,350,436
STATE GENERAL FUND BY:	<u> </u>
INTERAGENCY TRANSFERS	_
FEES & SELF-GENERATED	<u> </u>
STATUTORY DEDICATIONS	_
FEDERAL FUNDS	<u> </u>
TOTAL MEANS OF FINANCING	\$28,350,436

Expenditures

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	_
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	28,350,436
Debt Service	_
Interagency Transfers	_
TOTAL OTHER CHARGES	\$28,350,436
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	\$28,350,436

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

Form 27975 — 306 - Healthy LA Managed Care Organization (MCO) Adjustment

Means of Financing

	Amount
STATE GENERAL FUND (Direct)	(71,678,837)
STATE GENERAL FUND BY:	-
INTERAGENCY TRANSFERS	_
FEES & SELF-GENERATED	(58,989,099)
STATUTORY DEDICATIONS	(35,286,426)
FEDERAL FUNDS	(1,095,153,165)
TOTAL MEANS OF FINANCING	\$(1,261,107,527)

Expenditures

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	_
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	(1,261,107,527)
Debt Service	_
Interagency Transfers	_
TOTAL OTHER CHARGES	\$(1,261,107,527)
Acquisitions	_
Major Repairs	-
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	\$(1,261,107,527)

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

Form 27991 — 306 - Dental Managed Care Adjustment Means of Financing

	Amount
STATE GENERAL FUND (Direct)	236,211
STATE GENERAL FUND BY:	-
INTERAGENCY TRANSFERS	_
FEES & SELF-GENERATED	(46,135)
STATUTORY DEDICATIONS	(647,671)
FEDERAL FUNDS	(6,388,642)
TOTAL MEANS OF FINANCING	\$(6,846,237)

Expenditures

	Amount
Salaries	_
Other Compensation	_
Related Benefits	-
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	_
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	(6,846,237)
Debt Service	_
Interagency Transfers	_
TOTAL OTHER CHARGES	\$(6,846,237)
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	\$(6,846,237)

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

Form 27994 — 306 - Managed Care Incentive Payment (MCIP) Adjustment Means of Financing

	Amount
STATE GENERAL FUND (Direct)	_
STATE GENERAL FUND BY:	_
INTERAGENCY TRANSFERS	_
FEES & SELF-GENERATED	(34,612,270)
STATUTORY DEDICATIONS	_
FEDERAL FUNDS	(12,308,680)
TOTAL MEANS OF FINANCING	\$(46,920,950)

Expenditures

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	_
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	(46,920,950)
Debt Service	_
Interagency Transfers	-
TOTAL OTHER CHARGES	\$(46,920,950)
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	\$(46,920,950)

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

Form 27998 — 306 - Medicare Part A & B Means of Financing

	Amount
STATE GENERAL FUND (Direct)	4,092,681
STATE GENERAL FUND BY:	<u> </u>
INTERAGENCY TRANSFERS	_
FEES & SELF-GENERATED	_
STATUTORY DEDICATIONS	_
FEDERAL FUNDS	8,680,980
TOTAL MEANS OF FINANCING	\$12,773,661

Expenditures

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	<u> </u>
Travel	_
Operating Services	_
Supplies	<u> </u>
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	12,773,661
Debt Service	_
Interagency Transfers	<u> </u>
TOTAL OTHER CHARGES	\$12,773,661
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	\$12,773,661

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

Form 28128 — 306 - Phase-In of 750 Community Choices Waiver Slots Means of Financing

	Amount
STATE GENERAL FUND (Direct)	2,665,632
STATE GENERAL FUND BY:	_
INTERAGENCY TRANSFERS	_
FEES & SELF-GENERATED	_
STATUTORY DEDICATIONS	_
FEDERAL FUNDS	5,654,068
TOTAL MEANS OF FINANCING	\$8,319,700

Expenditures

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	_
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	8,319,700
Debt Service	_
Interagency Transfers	_
TOTAL OTHER CHARGES	\$8,319,700
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	\$8,319,700

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

Form 27963 — 306 - MOF 1X Swap Means of Financing

	Amount
STATE GENERAL FUND (Direct)	285,067,808
STATE GENERAL FUND BY:	_
INTERAGENCY TRANSFERS	_
FEES & SELF-GENERATED	_
STATUTORY DEDICATIONS	(174,364,096)
FEDERAL FUNDS	(110,703,712)
TOTAL MEANS OF FINANCING	_

Expenditures

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	_
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	_
Debt Service	_
Interagency Transfers	_
TOTAL OTHER CHARGES	_
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	_

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

Form 28001 — 306 - MOF Swap due to FMAP Change - Privates Means of Financing

	Amount
STATE GENERAL FUND (Direct)	(49,987,013)
STATE GENERAL FUND BY:	_
INTERAGENCY TRANSFERS	(1,633,133)
FEES & SELF-GENERATED	(1,712,659)
STATUTORY DEDICATIONS	
FEDERAL FUNDS	53,332,805
TOTAL MEANS OF FINANCING	_

Expenditures

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	_
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	_
Debt Service	_
Interagency Transfers	_
TOTAL OTHER CHARGES	_
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	_

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

Form 28002 — 306 - MOF Swap due to FMAP Change - Publics Means of Financing

	Amount
STATE GENERAL FUND (Direct)	(635,768)
STATE GENERAL FUND BY:	_
INTERAGENCY TRANSFERS	_
FEES & SELF-GENERATED	_
STATUTORY DEDICATIONS	_
FEDERAL FUNDS	635,768
TOTAL MEANS OF FINANCING	_

Expenditures

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	_
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	_
Debt Service	_
Interagency Transfers	_
TOTAL OTHER CHARGES	_
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	_

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

Form 28003 — 306 - MOF Swap due to FMAP Change - Buy Ins & Suppements

Means of Financing

	Amount
STATE GENERAL FUND (Direct)	(2,161,549)
STATE GENERAL FUND BY:	
INTERAGENCY TRANSFERS	_
FEES & SELF-GENERATED	_
STATUTORY DEDICATIONS	_
FEDERAL FUNDS	2,161,549
TOTAL MEANS OF FINANCING	_

Expenditures

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	_
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	_
Debt Service	_
Interagency Transfers	_
TOTAL OTHER CHARGES	_
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	_

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

Form 28004 — 306 - MOF Swap due to FMAP Change - Uncompensated Care Costs

Means of Financing

	Amount
STATE GENERAL FUND (Direct)	(1,938,830)
STATE GENERAL FUND BY:	-
INTERAGENCY TRANSFERS	(167,923)
FEES & SELF-GENERATED	(294,616)
STATUTORY DEDICATIONS	_
FEDERAL FUNDS	2,401,369
TOTAL MEANS OF FINANCING	_

Expenditures

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	_
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	_
Debt Service	_
Interagency Transfers	_
TOTAL OTHER CHARGES	_
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	_

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

Form 29186 — 306 - Physician FMAP Differential Means of Financing

	Amount
STATE GENERAL FUND (Direct)	57,446,490
STATE GENERAL FUND BY:	
INTERAGENCY TRANSFERS	_
FEES & SELF-GENERATED	(57,446,490)
STATUTORY DEDICATIONS	_
FEDERAL FUNDS	_
TOTAL MEANS OF FINANCING	_

Expenditures

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	_
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	_
Debt Service	_
Interagency Transfers	_
TOTAL OTHER CHARGES	_
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	_

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

Form 29262 — 306 - Hospital Fee for Service UPL to Cap Means of Financing

	Amount
STATE GENERAL FUND (Direct)	
STATE GENERAL FUND BY:	
INTERAGENCY TRANSFERS	_
FEES & SELF-GENERATED	13,965,265
STATUTORY DEDICATIONS	_
FEDERAL FUNDS	29,621,705
TOTAL MEANS OF FINANCING	\$43,586,970

Expenditures

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	_
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	43,586,970
Debt Service	_
Interagency Transfers	_
TOTAL OTHER CHARGES	\$43,586,970
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	\$43,586,970

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

PROGRAM SUMMARY STATEMENT

3061 - Payments to Private Providers

Means of Financing

	Existing Operating Budget						FY2024-2025 Requested
Description	as of 10/01/2023	Non-Recurring	Inflation	Compulsory	Workload	Other	Continuation Level
STATE GENERAL FUND (Direct)	1,718,803,500	_	_	24,364,692	(68,776,994)	283,839,186	1,958,230,384
STATE GENERAL FUND BY:	_	_	_	_	_	_	_
INTERAGENCY TRANSFERS	154,317,161	_	_	_	_	(1,633,133)	152,684,028
FEES & SELF-GENERATED	648,806,735	(37,205,571)	_	_	(93,647,504)	(45,193,884)	472,759,776
STATUTORY DEDICATIONS	1,488,194,482	_	_	_	(35,934,097)	(174,364,096)	1,277,896,289
FEDERAL FUNDS	13,255,967,589	(248,114,753)	_	51,679,917	(1,108,196,419)	(19,061,103)	11,932,275,231
TOTAL MEANS OF FINANCING	\$17,266,089,467	\$(285,320,324)	_	\$76,044,609	\$(1,306,555,014)	\$43,586,970	\$15,793,845,708

Fees and Self-Generated

Description	Existing Operating Budget as of 10/01/2023	Non-Recurring	Inflation	Compulsory	Workload	Other	FY2024-2025 Requested Continuation Level
Fees & Self-generated	648,806,735	(37,205,571)	_	_	(93,647,504)	(45,193,884)	472,759,776
Total:	\$648,806,735	\$(37,205,571)	_	_	\$(93,647,504)	\$(45,193,884)	\$472,759,776

Statutory Dedications

Description	Existing Operating Budget as of 10/01/2023	Non-Recurring	Inflation	Compulsory	Workload	Other	FY2024-2025 Requested Continuation Level
<u> </u>		Non-Necurring	IIIIIativii	Compaisory	WOIRIOGU	Other	
Health Excellence Fund	28,279,797	_	_	_	_	_	28,279,797
Hospital Stabilization Fund	314,552,061	_	_	_		_	314,552,061
Louisiana Fund	16,732,459	_	_	_	_	_	16,732,459
Louisiana Medical Assistance Trust Fund	1,072,446,490	_	_	_	(35,934,097)	(174,364,096)	862,148,297
Medicaid Trust Fund for the Elderly	12,835,609	_	_	_	_	_	12,835,609
New Opportunities Waiver (NOW) Fund	43,348,066	_	_	_	_	_	43,348,066
Total:	\$1,488,194,482	_	_	_	\$(35,934,097)	\$(174,364,096)	\$1,277,896,289

Expenditures and Positions

Description	Existing Operating Budget as of 10/01/2023	Non-Recurring	Inflation	Compulsory	Workload	Other	FY2024-2025 Requested Continuation Level
Salaries	_	_	_	_	_	_	_
Other Compensation	_	_	_	_	_	_	_
Related Benefits	_	_	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_	_	_	_
Travel	_	_	_	<u> </u>	_	_	_
Operating Services	_	_	_	_	_	_	_
Supplies	_	_	_	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_	_	_
Other Charges	17,266,089,467	(285,320,324)	_	76,044,609	(1,306,555,014)	43,586,970	15,793,845,708
Debt Service	_	_	_	_	_	_	_
Interagency Transfers	_	_	_	_	_	_	_
TOTAL OTHER CHARGES	\$17,266,089,467	\$(285,320,324)	_	\$76,044,609	\$(1,306,555,014)	\$43,586,970	\$15,793,845,708
Acquisitions	_	_	_	_	_	_	_
Major Repairs	_	_	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_	_	_	_
TOTAL EXPENDITURES	\$17,266,089,467	\$(285,320,324)	_	\$76,044,609	\$(1,306,555,014)	\$43,586,970	\$15,793,845,708
Classified	_	_	_	_	_	_	_
Unclassified	_	_	_	_	_	_	_
TOTAL AUTHORIZED T.O. POSITIONS	_	_	_	_	_	_	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_	_	_	_	_	_	_
TOTAL NON-T.O. FTE POSITIONS	_	_	_	_	_	_	_

3062 - Payments to Public Providers

Means of Financing

	Existing Operating Budget						FY2024-2025 Reguested
Description	as of 10/01/2023	Non-Recurring	Inflation	Compulsory	Workload	Other	Continuation Level
STATE GENERAL FUND (Direct)	57,245,750	(1,011,408)	_	1,270,792	_	1,268,951	58,774,085
STATE GENERAL FUND BY:	_	_	_	_	_	_	_
INTERAGENCY TRANSFERS	_	_	_	_	_	_	_
FEES & SELF-GENERATED	_	_	_	_	_	_	_
STATUTORY DEDICATIONS	9,147,866	_	_	_	_	_	9,147,866
FEDERAL FUNDS	195,871,825	(2,786,593)	_	2,695,474	_	(1,268,951)	194,511,755
TOTAL MEANS OF FINANCING	\$262,265,441	\$(3,798,001)	_	\$3,966,266		_	\$262,433,706

Statutory Dedications

Description	Existing Operating Budget as of 10/01/2023	Non-Recurring	Inflation	Compulsory	Workload	Other	FY2024-2025 Requested Continuation Level
Louisiana Medical Assistance Trust Fund	9,147,866	_	_	_	_	_	9,147,866
Total:	\$9,147,866	_	_	_	_	_	\$9,147,866

Expenditures and Positions

Description	Existing Operating Budget as of 10/01/2023	Non-Recurring	Inflation	Compulsory	Workload	Other	FY2024-2025 Requested Continuation Level
Salaries	_		_		_	_	_
Other Compensation	_	_	_	_	_	_	_
Related Benefits	_	_	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_	_	_	_
Travel	_	_	_	_	_	_	_
Operating Services	_	_	_	_	_	_	_
Supplies	_	_	_	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_	_	_
Other Charges	50,442,600	_	_	_	_	_	50,442,600
Debt Service	_	_	_	_	_	_	_
Interagency Transfers	211,822,841	(3,798,001)	_	3,966,266	_	_	211,991,106
TOTAL OTHER CHARGES	\$262,265,441	\$(3,798,001)	_	\$3,966,266	_	_	\$262,433,706
Acquisitions	_	<u> </u>	_	_	_	_	_
Major Repairs	_	_	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_	_	_	_
TOTAL EXPENDITURES	\$262,265,441	\$(3,798,001)	_	\$3,966,266	_	_	\$262,433,706
Classified	_	<u> </u>	_	_	_	_	_
Unclassified	<u> </u>	_	_	_	_	_	_
TOTAL AUTHORIZED T.O. POSITIONS	_	_	_	<u> </u>	_	_	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_	_	_	_	_	_	_
TOTAL NON-T.O. FTE POSITIONS	_	_	_	_	_	_	_

3063 - Medicare Buy-Ins & Supplements

Means of Financing

	Existing Operating Budget						FY2024-2025 Reguested
Description	as of 10/01/2023	Non-Recurring	Inflation	Compulsory	Workload	Other	Continuation Level
STATE GENERAL FUND (Direct)	375,627,270	_	_	_	32,443,117	3,351,529	411,421,916
STATE GENERAL FUND BY:	_	_	_	_	_	_	_
INTERAGENCY TRANSFERS	_	_	_	_	_	_	_
FEES & SELF-GENERATED	_	_	_	_	_	_	_
STATUTORY DEDICATIONS	_	_	_	_	_	_	_
FEDERAL FUNDS	425,618,053	_	<u> </u>	_	8,680,980	(3,351,529)	430,947,504
TOTAL MEANS OF FINANCING	\$801,245,323	_	-	_	\$41,124,097	-	\$842,369,420

Expenditures and Positions

Description	Existing Operating Budget as of 10/01/2023	Non-Recurring	Inflation	Compulsory	Workload	Other	FY2024-2025 Requested Continuation Level
Salaries	_		_	_	_	_	_
Other Compensation	_	_	_	_	_	_	_
Related Benefits	_	_	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_	_	_	_
Travel	_	_	_	_	_	_	_
Operating Services	_	_	_	_	_	_	_
Supplies	_	_	_	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_	_	_
Other Charges	801,245,323	_	_	_	41,124,097	_	842,369,420
Debt Service	_	_	_	_	_	_	_
Interagency Transfers	_	_	_	_	_	_	_
TOTAL OTHER CHARGES	\$801,245,323	_	_	_	\$41,124,097	_	\$842,369,420
Acquisitions	_	_	_	<u>—</u>	_	<u> </u>	_
Major Repairs	_	_	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_	_	_	_
TOTAL EXPENDITURES	\$801,245,323	_	_	_	\$41,124,097	_	\$842,369,420
Classified	_	_	_	_	_	_	_
Unclassified	_	_	_	_	_	_	_
TOTAL AUTHORIZED T.O. POSITIONS	_	_	_	_	_	_	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_	_	_	_	_	_	_
TOTAL NON-T.O. FTE POSITIONS	_	_	_	_	_	_	_

Program Summary Statement 3064 - Uncompensated Care Costs

3064 - Uncompensated Care Costs

Means of Financing

	Existing Operating Budget						FY2024-2025 Requested
Description	as of 10/01/2023	Non-Recurring	Inflation	Compulsory	Workload	Other	Continuation Level
STATE GENERAL FUND (Direct)	121,903,385	(210,486)	_	_	_	(668,528)	121,024,371
STATE GENERAL FUND BY:	_	_	_	_	_	_	_
INTERAGENCY TRANSFERS	13,920,424	_	_	_	_	(167,923)	13,752,501
FEES & SELF-GENERATED	24,422,839	_	_	_	_	(294,616)	24,128,223
STATUTORY DEDICATIONS	_	_	_	_	_	_	_
FEDERAL FUNDS	283,882,805	(579,921)	_	_	_	1,131,067	284,433,951
TOTAL MEANS OF FINANCING	\$444,129,453	\$(790,407)	_	-	_	_	\$443,339,046

Program Summary Statement 3064 - Uncompensated Care Costs

Fees and Self-Generated

Description	Existing Operating Budget as of 10/01/2023	Non-Recurring	Inflation	Compulsory	Workload	Other	FY2024-2025 Requested Continuation Level
Fees & Self-generated	24,422,839	_	_	_	_	(294,616)	24,128,223
Total:	\$24,422,839	_	_	_	_	\$(294,616)	\$24,128,223

Program Summary Statement 3064 - Uncompensated Care Costs

Expenditures and Positions

Description	Existing Operating Budget as of 10/01/2023	Non-Recurring	Inflation	Compulsory	Workload	Other	FY2024-2025 Requested Continuation Level
Salaries	_			_	_	_	<u> </u>
Other Compensation	_	_	_	_	_	_	_
Related Benefits	_	_	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	-	_	_	_	_	_
Travel	_	_	_	_	_	_	_
Operating Services	_	_	_	_	_	_	_
Supplies	_	_	_	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_	_	_
Other Charges	308,537,702	_	_	_	<u> </u>	_	308,537,702
Debt Service	_	_	_	_	_	_	_
Interagency Transfers	135,591,751	(790,407)		_	_	_	134,801,344
TOTAL OTHER CHARGES	\$444,129,453	\$(790,407)	_	_	_	_	\$443,339,046
Acquisitions	_	<u> </u>	_	_	_	_	_
Major Repairs	_	_	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_	_	_	_
TOTAL EXPENDITURES	\$444,129,453	\$(790,407)	_	_	_	_	\$443,339,046
Classified	_	<u> </u>	_	_	_	_	_
Unclassified	_	_	_	_	_	_	_
TOTAL AUTHORIZED T.O. POSITIONS	_	_	_	_	_	_	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_	_	_	_	_	_	_
TOTAL NON-T.O. FTE POSITIONS	_	_	_	_	_	_	_

CONTINUATION BUDGET ADJUSTMENTS - BY PROGRAM

Form 25991 — FY24-25 Non-recurring Carryforwards

3061 - Payments to Private Providers

Means of Financing

	Amount
STATE GENERAL FUND (Direct)	_
STATE GENERAL FUND BY:	<u> </u>
INTERAGENCY TRANSFERS	_
FEES & SELF-GENERATED	(37,205,571)
STATUTORY DEDICATIONS	_
FEDERAL FUNDS	(174,820,377)
TOTAL MEANS OF FINANCING	\$(212,025,948)

Expenditures

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	_
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	(212,025,948)
Debt Service	_
Interagency Transfers	_
TOTAL OTHER CHARGES	\$(212,025,948)
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	\$(212,025,948)

Positions

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

Fees and Self-Generated

	Amount
Fees & Self-generated	(37,205,571)
Total:	\$(37,205,571)

	Amount
Total:	

Supporting Detail Means of Financing

Description	Amount
Federal Funds	(174,820,377)
Fees & Self-generated	(37,205,571)
Total:	\$(212,025,948)

Other Charges

Commitment item	Name	Amount
5600000	TOTAL OTHER CHARGES	(212,025,948)
Total:		\$(212,025,948)

3062 - Payments to Public Providers

Means of Financing

	Amount
STATE GENERAL FUND (Direct)	(1,011,408)
STATE GENERAL FUND BY:	_
INTERAGENCY TRANSFERS	_
FEES & SELF-GENERATED	_
STATUTORY DEDICATIONS	_
FEDERAL FUNDS	(2,786,593)
TOTAL MEANS OF FINANCING	\$(3,798,001)

Expenditures

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	_
Debt Service	_
Interagency Transfers	(3,798,001)
TOTAL OTHER CHARGES	\$(3,798,001)
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	<u> </u>
TOTAL EXPENDITURES	\$(3,798,001)

Positions

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

Statutory Dedications

	Amou	nt
Ī	tal:	—

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Supporting Detail Means of Financing

Description	Amount
Federal Funds	(2,786,593)
State General Fund	(1,011,408)
Total:	\$(3,798,001)

Interagency Transfer

Commitment item	Name	Amount
5950000	TOTAL IAT	(3,798,001)
Total:		\$(3,798,001)

3064 - Uncompensated Care Costs

Means of Financing

	Amount
STATE GENERAL FUND (Direct)	(210,486)
STATE GENERAL FUND BY:	_
INTERAGENCY TRANSFERS	_
FEES & SELF-GENERATED	_
STATUTORY DEDICATIONS	_
FEDERAL FUNDS	(579,921)
TOTAL MEANS OF FINANCING	\$(790,407)

Expenditures

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	_
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	_
Debt Service	_
Interagency Transfers	(790,407)
TOTAL OTHER CHARGES	\$(790,407)
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	\$(790,407)

Positions

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

	Amount
Total:	_

Supporting Detail

Means of Financing

Description	Amount
Federal Funds	(579,921)
State General Fund	(210,486)
Total:	\$(790,407)

Interagency Transfer

Commitment item	Name	Amount
5950000	TOTAL IAT	(790,407)
Total:		\$(790,407)

Form 28658 — 306 - Non-Recur 1X HCBS Spending Plan Federal Authority

3061 - Payments to Private Providers

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	_
STATE GENERAL FUND BY:	
INTERAGENCY TRANSFERS	_
FEES & SELF-GENERATED	_
STATUTORY DEDICATIONS	
FEDERAL FUNDS	(73,294,376)
TOTAL MEANS OF FINANCING	\$(73,294,376)

EXPENDITURES

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	_
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	(73,294,376)
Debt Service	_
Interagency Transfers	_
TOTAL OTHER CHARGES	\$(73,294,376)
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	\$(73,294,376)

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

Question	Narrative Response
Explain the need for this request.	This request is to Non-Recur Federal Budget Authority appropriated in FY 24 that will no longer be needed in FY 25.
Cite performance indicators for the adjustment.	N/A
What would the impact be if this is not funded?	N/A
Is revenue a fixed amount or can it be adjusted?	N/A
Is the expenditure of these revenues restricted?	N/A
Additional information or comments.	N/A

Form 27965 — 306 - Nursing Home Inflationary Adjustment

3061 - Payments to Private Providers

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	21,709,219
STATE GENERAL FUND BY:	<u> </u>
INTERAGENCY TRANSFERS	_
FEES & SELF-GENERATED	_
STATUTORY DEDICATIONS	_
FEDERAL FUNDS	46,047,394
TOTAL MEANS OF FINANCING	\$67,756,613

EXPENDITURES

	Amount
Salaries	_
Other Compensation	<u> </u>
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	<u> </u>
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	67,756,613
Debt Service	_
Interagency Transfers	<u> </u>
TOTAL OTHER CHARGES	\$67,756,613
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	\$67,756,613

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

Question	Narrative Response
Explain the need for this request.	This request is for inflation factor that applies to nursing homes in non-rebase years. Since the nursing homes were rebased in FY2024, a rebase is not required in FY2025. However, an inflation factor must be applied in the years that they are not rebased. Administrative rule and Medicaid State Plan allow for a rebase every other year and inflationary adjustments on non-rebase years. SFY 25 is an inflationary year. Louisiana Administrative Code Title 50, Part II. Nursing Facilities, Subpart 5. Reimbursement, Chapter 200. Reimbursement Methodology, Section 20005. Rate Determination, B.1., states: 1. Effective July 3, 2009, and at a minimum, every second year thereafter, the base resident-day-weighted median costs and prices shall be rebased using the most recent four month or greater unqualified audited or desk reviewed cost reports that are available as of the April 1, prior to the July 1, rate setting or the department may apply a historic audit adjustment factor to the most recently filed cost reports. The department, at its discretion, may rebase at an earlier time. a. For rate periods between rebasing, an index factor shall be applied to the base resident-day weighted medians and prices.î
Cite performance indicators for the adjustment.	There are no performance indicators associated with this request.
What would the impact be if this is not funded?	We will be in violation of the Louisiana Admin Code, Title 50, Part II. Subpart 5, Chapter 200, Section 20005.B.1, effective July 3, 2009 and Louisiana Admin Code, Title 50, Part XV, Subpart 3, Chapter 43, Section 4307.C.
Is revenue a fixed amount or can it be adjusted?	Revenue can be adjusted based on the recommended level of expenditures.
Is the expenditure of these revenues restricted?	N/A
Additional information or comments.	N/A

Form 27971 — 306 - Federally Qualified Health Clinics Annualization

3061 - Payments to Private Providers

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	224,306
STATE GENERAL FUND BY:	<u> </u>
INTERAGENCY TRANSFERS	_
FEES & SELF-GENERATED	<u> </u>
STATUTORY DEDICATIONS	_
FEDERAL FUNDS	475,775
TOTAL MEANS OF FINANCING	\$700,081

EXPENDITURES

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	_
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	700,081
Debt Service	_
Interagency Transfers	_
TOTAL OTHER CHARGES	\$700,081
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	\$700,081

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

Question	Narrative Response
Explain the need for this request.	This request is for the annualization of 22 FQHCs added in SFY24, the addition of 24 new FQHCs in SFY25, and the federally mandated annual MEI adjustment to FQHC rates. The funding is needed to ensure that Louisiana Department of Health meets the guidelines in accordance with Section 1902(aa) provisions of BIPA of 2000, effective January 1, 2001.
Cite performance indicators for the adjustment.	There are no performance indicators associated with this request.
What would the impact be if this is not funded?	Failure to fund this request may result in the State being unable to meet federal reimbursement requirements and subject to federal penalties for non-compliance. In addition, reduced access to FQHC services may result in increased utilization of more costly hospital services, both emergency room visits for non-emergent conditions and inpatient admissions that could have been prevented by timely preventive and primary care.
Is revenue a fixed amount or can it be adjusted?	N/A
Is the expenditure of these revenues restricted?	N/A
Additional information or comments.	N/A

Form 27974 — 306 - Intermediate Care Facilities Inflationary Adjustment

3061 - Payments to Private Providers

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	2,085,805
STATE GENERAL FUND BY:	_
INTERAGENCY TRANSFERS	_
FEES & SELF-GENERATED	_
STATUTORY DEDICATIONS	_
FEDERAL FUNDS	4,424,200
TOTAL MEANS OF FINANCING	\$6,510,005

EXPENDITURES

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	-
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	6,510,005
Debt Service	_
Interagency Transfers	-
TOTAL OTHER CHARGES	\$6,510,005
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	\$6,510,005

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

Question	Narrative Response
Explain the need for this request.	Inflationary Adjustment for Non-rebase Year: Per the ICF/IID SPA ATTACHMENT 4.19-D. page 15a: 'For rate periods between rebasing, the rates will be trended forward using the Skilled Nursing Facility without Capital Market Basket Index, published by IHS Global Insight Incorporated (IGI), formerly Data Resources Incorporated (DRI), for December 2022, divided by the index for December 2024.'
Cite performance indicators for the adjustment.	There are no performance indicators associated with this request.
What would the impact be if this is not funded?	If this request is not funded LDH would be in violation of the State Plan Amendment referenced above.
Is revenue a fixed amount or can it be adjusted?	Revenue can be adjusted based on the recommended level of expenditures.
Is the expenditure of these revenues restricted?	N/A
Additional information or comments.	N/A

Form 27977 — 306 - Rural Health Clinics Annualization

3061 - Payments to Private Providers

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	96,651
STATE GENERAL FUND BY:	_
INTERAGENCY TRANSFERS	_
FEES & SELF-GENERATED	_
STATUTORY DEDICATIONS	_
FEDERAL FUNDS	205,007
TOTAL MEANS OF FINANCING	\$301,658

EXPENDITURES

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	-
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	301,658
Debt Service	_
Interagency Transfers	-
TOTAL OTHER CHARGES	\$301,658
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	\$301,658

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

Question	Narrative Response
Explain the need for this request.	This request is for the annualization of 12 RHCs added in SFY24, the addition of 10 new RHCs in SFY25, and the federally mandated annual MEI adjustment to RHC rates. The funding is needed to ensure that Louisiana Department of Health meets the guidelines in accordance with Section 1902 (aa) provisions of BIPA of 2000, effective January 1, 2001.
Cite performance indicators for the adjustment.	There are no performance indicators associated with this request.
What would the impact be if this is not funded?	Failure to fund this request may result in the State being unable to meet federal reimbursement requirements and subject to federal penalties for non-compliance. In addition, reduced access to RHC services may result in increased utilization of more costly hospital services, both emergency room visits for non-emergent conditions and inpatient admissions that could have been prevented by timely preventive and primary care.
Is revenue a fixed amount or can it be adjusted?	The requested revenue can be adjusted based upon the recommended level of expenditures.
Is the expenditure of these revenues restricted?	N/A
Additional information or comments.	N/A

Form 27979 — 306 - Rural Hospital Inflation Inpatient Per Diems

3061 - Payments to Private Providers

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	248,711
STATE GENERAL FUND BY:	_
INTERAGENCY TRANSFERS	_
FEES & SELF-GENERATED	_
STATUTORY DEDICATIONS	_
FEDERAL FUNDS	527,541
TOTAL MEANS OF FINANCING	\$776,252

EXPENDITURES

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	_
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	776,252
Debt Service	_
Interagency Transfers	_
TOTAL OTHER CHARGES	\$776,252
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	\$776,252

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

Question	Narrative Response
Explain the need for this request.	This request is to inflate the small rural hospitals inpatient per diem rates. Act 327 of the 2007 Legislative Session mandates that the rural hospital inpatient rates are inflated biannually in the rate year that is not a rebase year. The inpatient rates were rebased using the average increase from previous years effective 7/1/22. Therefore, funding will be needed to cover an inflationary adjustment for the beginning of the new rate year effective 7/1/24.
Cite performance indicators for the adjustment.	There are no performance indicators associated with this request.
What would the impact be if this is not funded?	If this request is not funded, LDH would not be in compliance with Act 327 of the 2007 Legislative Session.
Is revenue a fixed amount or can it be adjusted?	The requested revenue can be adjusted based upon the recommended level of expenditures.
Is the expenditure of these revenues restricted?	N/A
Additional information or comments.	N/A

Form 27981 — 306 - ICF Rebase Of Public Facilities

3062 - Payments to Public Providers

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	1,270,792
STATE GENERAL FUND BY:	_
INTERAGENCY TRANSFERS	_
FEES & SELF-GENERATED	_
STATUTORY DEDICATIONS	_
FEDERAL FUNDS	2,695,474
TOTAL MEANS OF FINANCING	\$3,966,266

EXPENDITURES

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	_
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	_
Debt Service	_
Interagency Transfers	3,966,266
TOTAL OTHER CHARGES	\$3,966,266
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	\$3,966,266

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

Question	Narrative Response
Explain the need for this request.	This request would provide a rebase for the per diems of the 6 public Intermediate Care Facilities (ICFs). Currently, the rule and SPA authority only provides for mandatory rebasing of private facilities. The public ICFs are not mandated for rebase in rule; however, the last rebase for these public facilities was SFY 19-20.
Cite performance indicators for the adjustment.	There are no performance indicators associated with this request.
What would the impact be if this is not funded?	While the current rule does not provide for mandatory rebasing of public facilities, the six state run facilities for ICF services have not been rebased in three years which places their staffing levels and facilities at funding levels lower than their private counterparts as they are not inflated at the same rate as private facilities.
Is revenue a fixed amount or can it be adjusted?	Revenue can be adjusted based on the recommended level of expenditures.
Is the expenditure of these revenues restricted?	N/A
Additional information or comments.	N/A

Form 27972 — 306 - Clawback

3063 - Medicare Buy-Ins & Supplements

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	28,350,436
STATE GENERAL FUND BY:	_
INTERAGENCY TRANSFERS	<u>—</u>
FEES & SELF-GENERATED	_
STATUTORY DEDICATIONS	_
FEDERAL FUNDS	<u> </u>
TOTAL MEANS OF FINANCING	\$28,350,436

EXPENDITURES

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	_
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	28,350,436
Debt Service	_
Interagency Transfers	_
TOTAL OTHER CHARGES	\$28,350,436
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	\$28,350,436

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

Form 27972 — 306 - Clawback Request Type: WORKLOAD

Question	Narrative Response
Explain the need for this request.	This adjustment is for Medicare Part D premium payments to CMS to defray a portion of the Medicare drug expenditures for individuals whose projected Medicaid coverages are assumed by Medicare Part D.
Cite performance indicators for the adjustment.	There are no current LaPas performance indicators.
What would the impact be if this is not funded?	The agency would be out of compliance with Federal regulations.
Is revenue a fixed amount or can it be adjusted?	The requested revenue is a fixed amount based on projections from monthly billing statements provided by the Federal Centers for Medicare and Medicaid Services.
Is the expenditure of these revenues restricted?	N/A
Additional information or comments.	N/A

Form 27975 — 306 - Healthy LA Managed Care Organization (MCO) Adjustment

3061 - Payments to Private Providers

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	(71,678,837)
STATE GENERAL FUND BY:	<u>—</u>
INTERAGENCY TRANSFERS	<u> </u>
FEES & SELF-GENERATED	(58,989,099)
STATUTORY DEDICATIONS	(35,286,426)
FEDERAL FUNDS	(1,095,153,165)
TOTAL MEANS OF FINANCING	\$(1,261,107,527)

EXPENDITURES

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	<u> </u>
Travel	_
Operating Services	_
Supplies	_
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	(1,261,107,527)
Debt Service	_
Interagency Transfers	_
TOTAL OTHER CHARGES	\$(1,261,107,527)
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	
TOTAL EXPENDITURES	\$(1,261,107,527)

AUTHORIZED POSITIONS

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

Fees and Self-Generated

	Amount
Fees & Self-generated	(58,989,099)
Total:	\$(58,989,099)

	Amount
Louisiana Medical Assistance Trust Fund	(35,286,426)
Total:	\$(35,286,426)

Question	Narrative Response
Explain the need for this request.	This request is for changes in funding for the Managed Care Organization (MCO) Program for physical, specialized behavioral health and non-emergency medical transportation services. It reflects 12 months of capitated PMPM payments and includes the following: 1) utilization/trend adjustment, 2) enrollment/kick changes, 3) Pharmacy Rebates, and 4) premium tax changes. MCIP is excluded from this request.
Cite performance indicators for the adjustment.	The MCO program impacts the following performance indicators: 25602 Percentage of Medicaid enrollees enrolled in a managed care model, 25603 Percentage of Medicaid enrollee expenditures under a managed care model, and 25604 Annual amount of premium taxes paid by Medicaid managed care plans
What would the impact be if this is not funded?	If the adjustment is not funded, there will be a surplus in the budget authority for projected Healthy Louisiana payments in SFY25.
Is revenue a fixed amount or can it be adjusted?	The requested amount is based on the actuarially sound capitation rate developed by the state's actuaries. Adjustments that would reduce the rate below the actuarially sound capitation would require a reduction of provider payment rates and/or benefits and services covered under the at-risk contract.
Is the expenditure of these revenues restricted?	The requested amount is based on the minimum of the actuarially sound rate range developed by the state's actuaries. The rate point can be adjusted based on the recommended level of expenditures, but only within the limits of the rate range. Adjustments that would reduce the rate below the floor of the range would require a reduction of provider payment rates and/or benefits and services covered under the at-risk contract.
Additional information or comments.	N/A

Form 27991 — 306 - Dental Managed Care Adjustment

3061 - Payments to Private Providers

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	236,211
STATE GENERAL FUND BY:	_
INTERAGENCY TRANSFERS	_
FEES & SELF-GENERATED	(46,135)
STATUTORY DEDICATIONS	(647,671)
FEDERAL FUNDS	(6,388,642)
TOTAL MEANS OF FINANCING	\$(6,846,237)

EXPENDITURES

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	_
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	(6,846,237)
Debt Service	_
Interagency Transfers	_
TOTAL OTHER CHARGES	\$(6,846,237)
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	\$(6,846,237)

AUTHORIZED POSITIONS

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

Fees and Self-Generated

	Amount
Fees & Self-generated	(46,135)
Total:	\$(46,135)

	Amount
Louisiana Medical Assistance Trust Fund	(647,671)
Total:	\$(647,671)

Question	Narrative Response
Explain the need for this request.	This request is for changes in funding for the managed care Dental Benefit Program (PAHP) for dental services. It reflects 12 months of capitated PMPM payments and includes the following: 1) utilization/trend adjustment, 2) enrollment changes and 3) premium tax changes.
Cite performance indicators for the adjustment.	The managed dental benefit program impacts the following performance indicators: 25602 Percentage of Medicaid enrollees enrolled in a managed care model, 25603 Percentage of Medicaid enrollee expenditures under a managed care model, and 25604 Annual amount of premium taxes paid by Medicaid managed care plans.
What would the impact be if this is not funded?	If this adjustment is not funded, there will be a surplus in the budget authority for projected Dental payments in SFY25.
Is revenue a fixed amount or can it be adjusted?	The requested amount is based on an actuarially sound capitation rate developed by the state's actuaries. Adjustments that would reduce the rate below the actuarially sound capitation would require a reduction of provider payment rates and/or benefits and services covered under the at-risk contract.
Is the expenditure of these revenues restricted?	The requested amount is based on the minimum of the actuarially sound rate range developed by the state's actuaries. The rate point can be adjusted based on the recommended level of expenditures, but only within the limits of the rate range. Adjustments that would reduce the rate below the floor of the range would require a reduction of provider payment rates and/or benefits and services covered under the at-risk contract.
Additional information or comments.	N/A

Form 27994 — 306 - Managed Care Incentive Payment (MCIP) Adjustment

3061 - Payments to Private Providers

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	_
STATE GENERAL FUND BY:	_
INTERAGENCY TRANSFERS	_
FEES & SELF-GENERATED	(34,612,270)
STATUTORY DEDICATIONS	_
FEDERAL FUNDS	(12,308,680)
TOTAL MEANS OF FINANCING	\$(46,920,950)

EXPENDITURES

	Amount
Salaries	_
Other Compensation	<u> </u>
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	—
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	(46,920,950)
Debt Service	_
Interagency Transfers	_
TOTAL OTHER CHARGES	\$(46,920,950)
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	\$(46,920,950)

AUTHORIZED POSITIONS

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

Fees and Self-Generated

	Amount
Fees & Self-generated	(34,612,270)
Total:	\$(34,612,270)

	Amount	
Total:	-	-

Question	Narrative Response
Explain the need for this request.	The Managed Care Incentive Program (MCIP) leverages changes in federal regulations allowing state Medicaid programs to include incentive arrangements in MCO contracts that permit payments over and above capitation rates. Specifically, LDH will make additional payments to MCOs of up to 5% of payments attributable to enrollees of services covered by the incentive arrangements for achievement of LDH-approved performance measures and quality outcomes. The 5% allowable of capitation payments for MCIP payments is based on total projected capitation payments (including Hospital Directed Payments) for a year which changes yearly depending on rates and enrollment, etc. This adjustment reflects the 5% change in payments based on the SFY25 projected Healthy Louisiana (HLA) Managed Care Program payments (excluding SCHIP and pharmacy rebates).
Cite performance indicators for the adjustment.	The MCO program impacts the following performance indicator: 25603 Percentage of Medicaid enrollee expenditures under a managed care model.
What would the impact be if this is not funded?	If this adjustment is not funded, there will be a surplus in the budget authority for projected MCIP payments in SFY25.
Is revenue a fixed amount or can it be adjusted?	The level of revenue requested is based upon the calculation of 5% of total projected payments made to each MCO in a program year. Expenditures are based upon MCOs achievement of LDH-approved performance/quality milestones in that same program year.
Is the expenditure of these revenues restricted?	N/A
Additional information or comments.	N/A

Form 27998 — 306 - Medicare Part A & B

3063 - Medicare Buy-Ins & Supplements

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	4,092,681
STATE GENERAL FUND BY:	_
INTERAGENCY TRANSFERS	_
FEES & SELF-GENERATED	_
STATUTORY DEDICATIONS	_
FEDERAL FUNDS	8,680,980
TOTAL MEANS OF FINANCING	\$12,773,661

EXPENDITURES

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	_
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	12,773,661
Debt Service	_
Interagency Transfers	_
TOTAL OTHER CHARGES	\$12,773,661
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	\$12,773,661

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

Question	Narrative Response
Explain the need for this request.	This request is for funding the federally mandated changes to Medicare premiums for 'Dual Eligibles'. (low-income seniors and disabled individuals who qualify for both Medicare and Medicaid) who enroll in the Medicare Savings Program and the Low-Income Subsidy (LIS) program. Part A actual premium rates are projected to be \$509.00 on January 1, 2024 and increase to \$536.00 on January 1, 2025. Part B actual premium rates are projected to be \$174.80 on January 1, 2024 and increase to \$185.00 on January 1, 2025.
Cite performance indicators for the adjustment.	'Total Number of Recipients (Part A)' (LAPAS Code 2261), 'Total Number of Recipients (Part B)' (LAPAS Code 2262), 'Total Number of Buy-In Eligibles' (LAPAS Code 2263), 'Buy-In Expenditures Part A' (LAPAS Code 2264), 'Buy-In Expenditures Part B' (LAPAS Code 2265), and 'Total Savings (Costs of Care Less Premium Costs) for Medicare Benefits' (LAPAS Code 2266).
What would the impact be if this is not funded?	Non-compliance with federal mandate.
Is revenue a fixed amount or can it be adjusted?	N/A
Is the expenditure of these revenues restricted?	N/A
Additional information or comments.	N/A

Form 28128 — 306 - Phase-In of 750 Community Choices Waiver Slots

3061 - Payments to Private Providers

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	2,665,632
STATE GENERAL FUND BY:	_
INTERAGENCY TRANSFERS	_
FEES & SELF-GENERATED	_
STATUTORY DEDICATIONS	_
FEDERAL FUNDS	5,654,068
TOTAL MEANS OF FINANCING	\$8,319,700

EXPENDITURES

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	_
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	8,319,700
Debt Service	_
Interagency Transfers	_
TOTAL OTHER CHARGES	\$8,319,700
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	\$8,319,700

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

Question	Narrative Response
Explain the need for this request.	The Community Choices Waiver (CCW) serves individuals age 65 and older or age 22-65 who are disabled according to the Medicaid standard for SSI disability criteria; and who meet Medicaid financial eligibility and meet the criteria for admission to a nursing facility. This budget request is needed to phase-in 750 slots during SFY 25 budget year.
Cite performance indicators for the adjustment.	Percentage of participants receiving Medicaid long term care in the community rather than in nursing homes
What would the impact be if this is not funded?	The number of applications for CCW services exceeds the number of available slots. As of 8/31/23 the number of persons on the registry waiting to receive CCW was 8,746. The wait list is expected to increase as the state's aging population continues to grow, and as public expectations for alternatives to nursing home care grows. The length of the wait time raises legal issues which could subject the state to litigation.
Is revenue a fixed amount or can it be adjusted?	The requested revenue can be adjusted based upon the recommended level of expenditures.
Is the expenditure of these revenues restricted?	N/A
Additional information or comments.	N/A

Form 27963 — 306 - MOF 1X Swap

3061 - Payments to Private Providers

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	276,379,709
STATE GENERAL FUND BY:	_
INTERAGENCY TRANSFERS	_
FEES & SELF-GENERATED	_
STATUTORY DEDICATIONS	(174,364,096)
FEDERAL FUNDS	(102,015,613)
TOTAL MEANS OF FINANCING	_

EXPENDITURES

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	_
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	_
Debt Service	_
Interagency Transfers	_
TOTAL OTHER CHARGES	_
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	_

AUTHORIZED POSITIONS

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

	Amount
Louisiana Medical Assistance Trust Fund	(174,364,096)
Total:	\$(174,364,096)

3062 - Payments to Public Providers

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	1,904,719
STATE GENERAL FUND BY:	_
INTERAGENCY TRANSFERS	_
FEES & SELF-GENERATED	_
STATUTORY DEDICATIONS	_
FEDERAL FUNDS	(1,904,719)
TOTAL MEANS OF FINANCING	_

EXPENDITURES

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	_
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	_
Debt Service	_
Interagency Transfers	_
TOTAL OTHER CHARGES	_
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	_

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

3063 - Medicare Buy-Ins & Supplements

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	5,513,078
STATE GENERAL FUND BY:	_
INTERAGENCY TRANSFERS	_
FEES & SELF-GENERATED	_
STATUTORY DEDICATIONS	_
FEDERAL FUNDS	(5,513,078)
TOTAL MEANS OF FINANCING	_

EXPENDITURES

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	_
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	_
Debt Service	_
Interagency Transfers	_
TOTAL OTHER CHARGES	_
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	_

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

3064 - Uncompensated Care Costs

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	1,270,302
STATE GENERAL FUND BY:	_
INTERAGENCY TRANSFERS	_
FEES & SELF-GENERATED	_
STATUTORY DEDICATIONS	_
FEDERAL FUNDS	(1,270,302)
TOTAL MEANS OF FINANCING	_

EXPENDITURES

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	_
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	_
Debt Service	_
Interagency Transfers	_
TOTAL OTHER CHARGES	_
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	_

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

Question	Narrative Response
Explain the need for this request.	This request is to remove the one-time/non-recurring revenue from the FY24 base budget. The FY24 existing budget contains revenue from sources that will not materialize or will be reduced in FY25 that are used to match recurring expenditures. This adjustment is for the means of financing only. (See attachment.)
Cite performance indicators for the adjustment.	Specific performance indicators cannot be addressed in relation to this adjustment as it affects the entire agency.
What would the impact be if this is not funded?	Without the correction of the means of financing, Medical Vendor Payments would not have sufficient revenues to support existing expenditures. Claims payments would not be able to exceed the available revenue.
Is revenue a fixed amount or can it be adjusted?	Fixed based on the appropriated level.
Is the expenditure of these revenues restricted?	N/A
Additional information or comments.	N/A

Form 28001 — 306 - MOF Swap due to FMAP Change - Privates

3061 - Payments to Private Providers

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	(49,987,013)
STATE GENERAL FUND BY:	<u>—</u>
INTERAGENCY TRANSFERS	(1,633,133)
FEES & SELF-GENERATED	(1,712,659)
STATUTORY DEDICATIONS	_
FEDERAL FUNDS	53,332,805
TOTAL MEANS OF FINANCING	_

EXPENDITURES

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	_
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	_
Debt Service	_
Interagency Transfers	_
TOTAL OTHER CHARGES	_
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	_

AUTHORIZED POSITIONS

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

Fees and Self-Generated

	Amount
Fees & Self-generated	(1,712,659)
Total:	\$(1,712,659)

	Amount	
Total:	-	-

Question	Narrative Response
Explain the need for this request.	This request is to refinance the FY24 existing operating budget based on the annual change in FMAP (Federal Medical Assistance Percentage) so that the FY25 starting point is appropriate for the other requested adjustments. The FMAPs are calculated pursuant to the Social Security Act (the Act). Sections 1905(b) and 1101(a)(8)(B) of the Act require the Secretary of Health and Human Services Department (HHS) to publish the FMAP rates each year, and that notice is done in the Federal Register. The Secretary calculates the percentages, using formulas in sections 1905(b) and 1101(a)(8), and calculations by the Department of Commerce of average income per person in each state and for the United States (meaning, for this purpose, the fifty states and the District of Columbia). The match rates for FY25 are as follows: The Title XIX blended rate is 32.04% state and 67.96% federal; the LaCHIP blended rate is 22.43% state and 77.57% federal; and the Title XIX Federal Fiscal Year 25 rate is 31.94% state and 68.06% federal. In general, the FY24 budget was based on an overall blended rate of 68.57%. The FMAP for the adult 'expansion' group, as added to the Act by section 2001 of the Patient Protection and Affordable Care Act of 2010, changed to 90% in calendar year 2020, where it remains indefinitely.
Cite performance indicators for the adjustment.	Specific performance indicators cannot be addressed in relation to this adjustment as it affects the entire agency.
What would the impact be if this is not funded?	Without correcting the means of financing, Medical Vendor Payments would not have sufficient revenues to support existing expenditures. Claims payments cannot exceed the available revenue.
Is revenue a fixed amount or can it be adjusted?	The revenue can be adjusted based upon the recommended level of expenditures.
Is the expenditure of these revenues restricted?	N/A
Additional information or comments.	N/A

Form 28002 — 306 - MOF Swap due to FMAP Change - Publics

3062 - Payments to Public Providers

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	(635,768)
STATE GENERAL FUND BY:	_
INTERAGENCY TRANSFERS	_
FEES & SELF-GENERATED	_
STATUTORY DEDICATIONS	_
FEDERAL FUNDS	635,768
TOTAL MEANS OF FINANCING	_

EXPENDITURES

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	-
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	_
Debt Service	_
Interagency Transfers	-
TOTAL OTHER CHARGES	_
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	_

AUTHORIZED POSITIONS

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

Question	Narrative Response
Explain the need for this request.	This request is to refinance the FY24 existing operating budget based on the annual change in FMAP (Federal Medical Assistance Percentage) so that the FY25 starting point is appropriate for the other requested adjustments. The FMAPs are calculated pursuant to the Social Security Act (the Act). Sections 1905(b) and 1101(a)(8)(B) of the Act require the Secretary of Health and Human Services Department (HHS) to publish the FMAP rates each year, and that notice is done in the Federal Register. The Secretary calculates the percentages, using formulas in sections 1905(b) and 1101(a)(8), and calculations by the Department of Commerce of average income per person in each state and for the United States (meaning, for this purpose, the fifty states and the District of Columbia). The match rates for FY25 are as follows: The Title XIX blended rate is 32.04% state and 67.96% federal; the LaCHIP blended rate is 22.43% state and 77.57% federal; and the Title XIX Federal Fiscal Year 25 rate is 31.94% state and 68.06% federal. In general, the FY24 budget was based on an overall blended rate of 68.57%. The FMAP for the adult 'expansion' group, as added to the Act by section 2001 of the Patient Protection and Affordable Care Act of 2010, changed to 90% in calendar year 2020, where it remains indefinitely.
Cite performance indicators for the adjustment.	Specific performance indicators cannot be addressed in relation to this adjustment as it affects the entire agency.
What would the impact be if this is not funded?	Without correcting the means of financing, Medical Vendor Payments would not have sufficient revenues to support existing expenditures. Claims payments cannot exceed the available revenue.
Is revenue a fixed amount or can it be adjusted?	The revenue can be adjusted based upon the recommended level of expenditures.
Is the expenditure of these revenues restricted?	N/A
Additional information or comments.	N/A

Form 28003 — 306 - MOF Swap due to FMAP Change - Buy Ins & Suppements

3063 - Medicare Buy-Ins & Supplements

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	(2,161,549)
STATE GENERAL FUND BY:	-
INTERAGENCY TRANSFERS	_
FEES & SELF-GENERATED	-
STATUTORY DEDICATIONS	<u> </u>
FEDERAL FUNDS	2,161,549
TOTAL MEANS OF FINANCING	_

EXPENDITURES

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	-
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	_
Debt Service	_
Interagency Transfers	-
TOTAL OTHER CHARGES	_
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	_

AUTHORIZED POSITIONS

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

Question	Narrative Response
Explain the need for this request.	This request is to refinance the FY24 existing operating budget based on the annual change in FMAP (Federal Medical Assistance Percentage) so that the FY25 starting point is appropriate for the other requested adjustments. The FMAPs are calculated pursuant to the Social Security Act (the Act). Sections 1905(b) and 1101(a)(8)(B) of the Act require the Secretary of Health and Human Services Department (HHS) to publish the FMAP rates each year, and that notice is done in the Federal Register. The Secretary calculates the percentages, using formulas in sections 1905(b) and 1101(a)(8), and calculations by the Department of Commerce of average income per person in each state and for the United States (meaning, for this purpose, the fifty states and the District of Columbia). The match rates for FY25 are as follows: The Title XIX blended rate is 32.04% state and 67.96% federal; the LaCHIP blended rate is 22.43% state and 77.57% federal; and the Title XIX Federal Fiscal Year 25 rate is 31.94% state and 68.06% federal. In general, the FY24 budget was based on an overall blended rate of 68.57%. The FMAP for the adult 'expansion' group, as added to the Act by section 2001 of the Patient Protection and Affordable Care Act of 2010, changed to 90% in calendar year 2020, where it remains indefinitely.
Cite performance indicators for the adjustment.	Specific performance indicators cannot be addressed in relation to this adjustment as it affects the entire agency.
What would the impact be if this is not funded?	Without correcting the means of financing, Medical Vendor Payments would not have sufficient revenues to support existing expenditures. Claims payments cannot exceed the available revenue.
Is revenue a fixed amount or can it be adjusted?	The revenue can be adjusted based upon the recommended level of expenditures.
Is the expenditure of these revenues restricted?	N/A
Additional information or comments.	N/A

Form 28004 — 306 - MOF Swap due to FMAP Change - Uncompensated Care Costs

3064 - Uncompensated Care Costs

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	(1,938,830)
STATE GENERAL FUND BY:	_
INTERAGENCY TRANSFERS	(167,923)
FEES & SELF-GENERATED	(294,616)
STATUTORY DEDICATIONS	_
FEDERAL FUNDS	2,401,369
TOTAL MEANS OF FINANCING	_

EXPENDITURES

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	_
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	_
Debt Service	_
Interagency Transfers	_
TOTAL OTHER CHARGES	_
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	_

AUTHORIZED POSITIONS

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

Fees and Self-Generated

	Amount
Fees & Self-generated	(294,616)
Total:	\$(294,616)

	Amount
Total:	_

Question	Narrative Response
Explain the need for this request.	This request is to refinance the FY24 existing operating budget based on the annual change in FMAP (Federal Medical Assistance Percentage) so that the FY25 starting point is appropriate for the other requested adjustments. The FMAPs are calculated pursuant to the Social Security Act (the Act). Sections 1905(b) and 1101(a)(8)(B) of the Act require the Secretary of Health and Human Services Department (HHS) to publish the FMAP rates each year, and that notice is done in the Federal Register. The Secretary calculates the percentages, using formulas in sections 1905(b) and 1101(a)(8), and calculations by the Department of Commerce of average income per person in each state and for the United States (meaning, for this purpose, the fifty states and the District of Columbia). The match rates for FY25 are as follows: The Title XIX blended rate is 32.04% state and 67.96% federal; the LaCHIP blended rate is 22.43% state and 77.57% federal; and the Title XIX Federal Fiscal Year 25 rate is 31.94% state and 68.06% federal. In general, the FY24 budget was based on an overall blended rate of 68.57%. The FMAP for the adult 'expansion' group, as added to the Act by section 2001 of the Patient Protection and Affordable Care Act of 2010, changed to 90% in calendar year 2020, where it remains indefinitely.
Cite performance indicators for the adjustment.	Specific performance indicators cannot be addressed in relation to this adjustment as it affects the entire agency.
What would the impact be if this is not funded?	Without correcting the means of financing, Medical Vendor Payments would not have sufficient revenues to support existing expenditures. Claims payments cannot exceed the available revenue.
Is revenue a fixed amount or can it be adjusted?	The revenue can be adjusted based upon the recommended level of expenditures.
Is the expenditure of these revenues restricted?	N/A
Additional information or comments.	N/A

Form 29186 — 306 - Physician FMAP Differential

3061 - Payments to Private Providers

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	57,446,490
STATE GENERAL FUND BY:	
INTERAGENCY TRANSFERS	-
FEES & SELF-GENERATED	(57,446,490)
STATUTORY DEDICATIONS	<u> </u>
FEDERAL FUNDS	
TOTAL MEANS OF FINANCING	_

EXPENDITURES

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	_
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	_
Debt Service	_
Interagency Transfers	_
TOTAL OTHER CHARGES	_
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	_

AUTHORIZED POSITIONS

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

Fees and Self-Generated

	Amount
Fees & Self-generated	(57,446,490)
Total:	\$(57,446,490)

	Amount
To	al: —

Question	Narrative Response
Explain the need for this request.	This request is for financing associated with the transition of the Physician (Full Medicaid Pricing) FMP program to an alternative payment method.
Cite performance indicators for the adjustment.	There are no performance indicators associated with this request.
What would the impact be if this is not funded?	If this request is not funded, Medicaid may not have sufficient State General Fund in SFY 2025.
Is revenue a fixed amount or can it be adjusted?	The requested revenue is fixed based on current Physician FMP estimates.
Is the expenditure of these revenues restricted?	N/A
Additional information or comments.	N/A

Form 29262 — 306 - Hospital Fee for Service UPL to Cap

3061 - Payments to Private Providers

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	_
STATE GENERAL FUND BY:	_
INTERAGENCY TRANSFERS	_
FEES & SELF-GENERATED	13,965,265
STATUTORY DEDICATIONS	_
FEDERAL FUNDS	29,621,705
TOTAL MEANS OF FINANCING	\$43,586,970

EXPENDITURES

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	_
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	43,586,970
Debt Service	_
Interagency Transfers	_
TOTAL OTHER CHARGES	\$43,586,970
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	\$43,586,970

AUTHORIZED POSITIONS

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

Fees and Self-Generated

	Amount
Fees & Self-generated	13,965,265
Total:	\$13,965,265

	Amount
Total:	_

Question	Narrative Response
Explain the need for this request.	This request is to fund Hospital Legacy Upper Payment Limit (UPL) to the current cap of \$52,093,589. The current funding level is \$8,506,619. The requested \$43,586,970 is the additional authority needed to bring Hospital UPL to the current cap.
Cite performance indicators for the adjustment.	There are no performance indicators associated with this request.
What would the impact be if this is not funded?	If this request is not funded, Medicaid would not have adequate expenditure authority to spend up to the Hospital UPL Cap.
Is revenue a fixed amount or can it be adjusted?	The requested revenue is fixed based on the Hospital UPL Cap.
Is the expenditure of these revenues restricted?	N/A
Additional information or comments.	N/A



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Technical and Other Adjustments

Agency Summary Statement Total Agency

AGENCY SUMMARY STATEMENT

Total Agency

Means of Financing	Existing Operating Budget as of 10/01/2023	FY2024-2025 Requested Continuation Adjustment	FY2024-2025 Requested in this Adjustment Package	FY2024-2025 Requested Realignment
STATE GENERAL FUND (Direct)	2,273,579,905	275,870,851	_	2,549,450,756
STATE GENERAL FUND BY:	_	_	_	_
INTERAGENCY TRANSFERS	168,237,585	(1,801,056)	_	166,436,529
FEES & SELF-GENERATED	673,229,574	(176,341,575)	_	496,887,999
STATUTORY DEDICATIONS	1,497,342,348	(210,298,193)	_	1,287,044,155
FEDERAL FUNDS	14,161,340,272	(1,319,171,831)	_	12,842,168,441
TOTAL MEANS OF FINANCING	\$18,773,729,684	\$(1,431,741,804)	-	\$17,341,987,880
Salaries	_	_	_	_
Other Compensation	_	_	_	_
Related Benefits	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_
Travel	_	_	_	_
Operating Services	_	_	_	_
Supplies	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_
Other Charges	18,426,315,092	(1,431,119,662)	_	16,995,195,430
Debt Service	_	_	_	_
Interagency Transfers	347,414,592	(622,142)	_	346,792,450
TOTAL OTHER CHARGES	\$18,773,729,684	\$(1,431,741,804)	_	\$17,341,987,880
Acquisitions	_	_	_	_
Major Repairs	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_
TOTAL EXPENDITURES	\$18,773,729,684	\$(1,431,741,804)	_	\$17,341,987,880
Classified	_	_	_	_
Unclassified	_	_	_	_
TOTAL AUTHORIZED T.O. POSITIONS	_	_	_	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_	_	_	_
TOTAL NON-T.O. FTE POSITIONS	_	_	_	_

Agency Summary Statement Program Breakout

PROGRAM BREAKOUT

Means of Financing	Requested in this Adjustment Package	3061 Payments to Private Providers	3062 Payments to Public Providers	3063 Medicare Buy-Ins & Supplements	3064 Uncompensated Care Costs
STATE GENERAL FUND (Direct)	_	_	-	_	_
STATE GENERAL FUND BY:	_	_	_	_	_
INTERAGENCY TRANSFERS	_	_	_	_	_
FEES & SELF-GENERATED	_	—	_	_	_
STATUTORY DEDICATIONS	_	_	_	_	_
FEDERAL FUNDS	_	_	_	_	_
TOTAL MEANS OF FINANCING	_	_	_	_	_
Salaries	_	_	_	_	_
Other Compensation	_	_	_	_	_
Related Benefits	_	—	_	_	_
TOTAL SALARIES	_	_	_	_	_
Travel	_	_	_	_	_
Operating Services	_	_	_	_	_
Supplies	_	—	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_
Other Charges	_	_	_	_	_
Debt Service	_	_	_	_	_
Interagency Transfers	_	_	_	_	_
TOTAL OTHER CHARGES	_	_	_	_	_
Acquisitions	_	_	_	_	_
Major Repairs	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_	_
TOTAL EXPENDITURES & REQUEST	_	_	_	_	_
Classified	_	_	_	_	_
Unclassified	_	_	_	_	_
TOTAL AUTHORIZED T.O. POSITIONS	_	_	_	_	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_	_	_	_	_
TOTAL NON-T.O. FTE POSITIONS	_	_	_	_	_

PROGRAM SUMMARY STATEMENT

3061 - Payments to Private Providers

Means of Financing	Existing Operating Budget as of 10/01/2023	FY2024-2025 Requested Continuation Adjustment	FY2024-2025 Requested in this Adjustment Package	FY2024-2025 Requested Realignment
STATE GENERAL FUND (Direct)	1,718,803,500	239,426,884	_	1,958,230,384
STATE GENERAL FUND BY:	_	_	_	_
INTERAGENCY TRANSFERS	154,317,161	(1,633,133)	_	152,684,028
FEES & SELF-GENERATED	648,806,735	(176,046,959)	_	472,759,776
STATUTORY DEDICATIONS	1,488,194,482	(210,298,193)	_	1,277,896,289
FEDERAL FUNDS	13,255,967,589	(1,323,692,358)	_	11,932,275,231
TOTAL MEANS OF FINANCING	\$17,266,089,467	\$(1,472,243,759)	_	\$15,793,845,708
Salaries	_	_	_	_
Other Compensation	_	_	_	_
Related Benefits	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_
Travel	_	_	_	_
Operating Services	_	_	_	_
Supplies	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_
Other Charges	17,266,089,467	(1,472,243,759)	_	15,793,845,708
Debt Service	_	_	_	_
Interagency Transfers	_	_	_	_
TOTAL OTHER CHARGES	\$17,266,089,467	\$(1,472,243,759)	_	\$15,793,845,708
Acquisitions	_	_	_	_
Major Repairs	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_
TOTAL EXPENDITURES	\$17,266,089,467	\$(1,472,243,759)	_	\$15,793,845,708
Classified	_	_	_	_
Unclassified	_	_	_	_
TOTAL AUTHORIZED T.O. POSITIONS	_	_	_	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_	_	_	_
TOTAL NON-T.O. FTE POSITIONS	_	_	_	_

3062 - Payments to Public Providers

Means of Financing	Existing Operating Budget as of 10/01/2023	FY2024-2025 Requested Continuation Adjustment	FY2024-2025 Requested in this Adjustment Package	FY2024-2025 Requested Realignment
STATE GENERAL FUND (Direct)	57,245,750	1,528,335	_	58,774,085
STATE GENERAL FUND BY:	_	_	_	_
INTERAGENCY TRANSFERS	_	_	_	_
FEES & SELF-GENERATED	_	_	_	_
STATUTORY DEDICATIONS	9,147,866	_	_	9,147,866
FEDERAL FUNDS	195,871,825	(1,360,070)	_	194,511,755
TOTAL MEANS OF FINANCING	\$262,265,441	\$168,265	_	\$262,433,706
Salaries	_	_	_	_
Other Compensation	_	_	_	_
Related Benefits	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_
Travel	_	_	_	_
Operating Services	_	_	_	_
Supplies	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_
Other Charges	50,442,600	_	_	50,442,600
Debt Service	_	_	_	_
Interagency Transfers	211,822,841	168,265	_	211,991,106
TOTAL OTHER CHARGES	\$262,265,441	\$168,265	_	\$262,433,706
Acquisitions	_	_	_	_
Major Repairs	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_
TOTAL EXPENDITURES	\$262,265,441	\$168,265	_	\$262,433,706
Classified	_	_	_	_
Unclassified	_	_	_	_
TOTAL AUTHORIZED T.O. POSITIONS	_	_	_	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_	_	_	_
TOTAL NON-T.O. FTE POSITIONS	_	_	_	_

3063 - Medicare Buy-Ins & Supplements

STATE GENERAL FUND (Direct) STATE GENERAL FUND BY: INTERAGENCY TRANSFERS FEES & SELF-GENERATED STATUTORY DEDICATIONS FEDERAL FUNDS TOTAL MEANS OF FINANCING Salaries Other Compensation Related Benefits	375,627,270 — — — — — 425,618,053	35,794,646 — — — —	_ _ _	411,421,916 —
INTERAGENCY TRANSFERS FEES & SELF-GENERATED STATUTORY DEDICATIONS FEDERAL FUNDS TOTAL MEANS OF FINANCING Salaries Other Compensation		_ _ _ _	_ _	_
FEES & SELF-GENERATED STATUTORY DEDICATIONS FEDERAL FUNDS TOTAL MEANS OF FINANCING Salaries Other Compensation		_ _ _	_	
STATUTORY DEDICATIONS FEDERAL FUNDS TOTAL MEANS OF FINANCING Salaries Other Compensation		_ _		_
FEDERAL FUNDS TOTAL MEANS OF FINANCING Salaries Other Compensation		_	_	_
TOTAL MEANS OF FINANCING Salaries Other Compensation			_	_
Salaries Other Compensation	COO1 245 222	5,329,451	_	430,947,504
Other Compensation	\$801,245,323	\$41,124,097	_	\$842,369,420
·	_	_	_	_
Related Benefits	_	_	_	_
	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_
Travel	_	_	_	_
Operating Services	_	_	_	_
Supplies	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_
Other Charges	801,245,323	41,124,097	_	842,369,420
Debt Service	_	_	_	_
Interagency Transfers	_	_	_	_
TOTAL OTHER CHARGES	\$801,245,323	\$41,124,097	_	\$842,369,420
Acquisitions	_	_	_	_
Major Repairs	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_
TOTAL EXPENDITURES	\$801,245,323	\$41,124,097	_	\$842,369,420
Classified	_	_	_	_
Unclassified	_	-	_	-
TOTAL AUTHORIZED T.O. POSITIONS	_	-	_	-
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_	_	_	_
TOTAL NON-T.O. FTE POSITIONS				

Program Summary Statement 3064 - Uncompensated Care Costs

3064 - Uncompensated Care Costs

Means of Financing	Existing Operating Budget as of 10/01/2023	FY2024-2025 Requested Continuation Adjustment	FY2024-2025 Requested in this Adjustment Package	FY2024-2025 Requested Realignment
STATE GENERAL FUND (Direct)	121,903,385	(879,014)	_	121,024,371
STATE GENERAL FUND BY:	_	_	_	_
INTERAGENCY TRANSFERS	13,920,424	(167,923)	_	13,752,501
FEES & SELF-GENERATED	24,422,839	(294,616)	_	24,128,223
STATUTORY DEDICATIONS	_	_	_	_
FEDERAL FUNDS	283,882,805	551,146	_	284,433,951
TOTAL MEANS OF FINANCING	\$444,129,453	\$(790,407)	_	\$443,339,046
Salaries	-	_	_	_
Other Compensation	_	_	_	_
Related Benefits	-	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_
Travel	-	_	_	_
Operating Services	_	_	_	_
Supplies	-	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_
Other Charges	308,537,702	_	_	308,537,702
Debt Service	_	_	_	_
Interagency Transfers	135,591,751	(790,407)	_	134,801,344
TOTAL OTHER CHARGES	\$444,129,453	\$(790,407)	_	\$443,339,046
Acquisitions	-	_	_	_
Major Repairs	<u> </u>	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_
TOTAL EXPENDITURES	\$444,129,453	\$(790,407)	_	\$443,339,046
Classified	_	_	_	_
Unclassified	_	_	_	_
TOTAL AUTHORIZED T.O. POSITIONS	_	_	_	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_	_	_	_
TOTAL NON-T.O. FTE POSITIONS	_	_	_	_



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New or Expanded Requests

Agency Summary Statement Total Agency

AGENCY SUMMARY STATEMENT

Total Agency

Means of Financing and Expenditures	existing Operating Budget as of 10/01/2023	FY2024-2025 Requested Continuation Adjustment	FY2024-2025 Requested in Technical/Other Package	FY2024-2025 Requested New/Expanded	FY2024-2025 Requested Realignment
STATE GENERAL FUND (Direct)	2,273,579,905	275,870,851	_	_	2,549,450,756
STATE GENERAL FUND BY:	_	_	_	_	_
INTERAGENCY TRANSFERS	168,237,585	(1,801,056)	_	_	166,436,529
FEES & SELF-GENERATED	673,229,574	(176,341,575)	_	_	496,887,999
STATUTORY DEDICATIONS	1,497,342,348	(210,298,193)	_	_	1,287,044,155
FEDERAL FUNDS	14,161,340,272	(1,319,171,831)	_	_	12,842,168,441
TOTAL MEANS OF FINANCING	\$18,773,729,684	\$(1,431,741,804)	_	_	\$17,341,987,880
Salaries	-	-	-	_	_
Other Compensation	_	_	_	_	_
Related Benefits	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_	_
Travel	-	-	-	_	_
Operating Services	_	_	_	_	_
Supplies	_	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_
Other Charges	18,426,315,092	(1,431,119,662)	-	_	16,995,195,430
Debt Service	_	_	_	_	_
Interagency Transfers	347,414,592	(622,142)	_	_	346,792,450
TOTAL OTHER CHARGES	\$18,773,729,684	\$(1,431,741,804)	_	_	\$17,341,987,880
Acquisitions	_	_	_	_	_
Major Repairs	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_	_
TOTAL EXPENDITURES	\$18,773,729,684	\$(1,431,741,804)	_	_	\$17,341,987,880
Classified	_	_	_	_	_
Unclassified	_	_	_	_	_
TOTAL AUTHORIZED T.O. POSITIONS	_	_	_	_	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_	_	_	_	_
TOTAL NON-T.O. FTE POSITIONS	_	_	_	_	_

Agency Summary Statement Total Agency

Fees and Self-Generated

	Existing Operating Budget	FY2024-2025 Requested	FY2024-2025 Requested in Technical/Other	FY2024-2025 Requested	FY2024-2025 Requested
Description	as of 10/01/2023	Continuation Adjustment	Package	New/Expanded	Realignment
Fees & Self-generated	673,229,574	(176,341,575)	_	_	496,887,999
Total:	\$673,229,574	\$(176,341,575)	_	_	\$496,887,999

Description	Existing Operating Budget as of 10/01/2023	FY2024-2025 Requested Continuation Adjustment	FY2024-2025 Requested in Technical/Other Package	FY2024-2025 Requested New/Expanded	FY2024-2025 Requested Realignment
Health Excellence Fund	28,279,797	_	_	_	28,279,797
Hospital Stabilization Fund	314,552,061	_	_	_	314,552,061
Louisiana Fund	16,732,459	_	_	_	16,732,459
Louisiana Medical Assistance Trust Fund	1,081,594,356	(210,298,193)	_	_	871,296,163
Medicaid Trust Fund for the Elderly	12,835,609	_	_	_	12,835,609
New Opportunities Waiver (NOW) Fund	43,348,066	_	_	_	43,348,066
Total:	\$1,497,342,348	\$(210,298,193)	_	_	\$1,287,044,155

PROGRAM SUMMARY STATEMENT

3061 - Payments to Private Providers

Means of Financing and Expenditures	Existing Operating Budget as of 10/01/2023	FY2024-2025 Requested Continuation Adjustment	FY2024-2025 Requested in Technical/Other Package	FY2024-2025 Requested New/Expanded	FY2024-2025 Requested Realignment
STATE GENERAL FUND (Direct)	1,718,803,500	239,426,884	_	_	1,958,230,384
STATE GENERAL FUND BY:	_	_	_	_	_
INTERAGENCY TRANSFERS	154,317,161	(1,633,133)	_	_	152,684,028
FEES & SELF-GENERATED	648,806,735	(176,046,959)	_	_	472,759,776
STATUTORY DEDICATIONS	1,488,194,482	(210,298,193)	_	_	1,277,896,289
FEDERAL FUNDS	13,255,967,589	(1,323,692,358)	_	_	11,932,275,231
TOTAL MEANS OF FINANCING	\$17,266,089,467	\$(1,472,243,759)	_	_	\$15,793,845,708
Salaries	-	_	_	-	_
Other Compensation	_	_	_	_	_
Related Benefits	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_	_
Travel	_	_	_	_	_
Operating Services	_	_	_	_	_
Supplies	_	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_
Other Charges	17,266,089,467	(1,472,243,759)	_	_	15,793,845,708
Debt Service	_	_	_	_	_
Interagency Transfers	_	_	_	_	_
TOTAL OTHER CHARGES	\$17,266,089,467	\$(1,472,243,759)	_	_	\$15,793,845,708
Acquisitions	_	_	_	_	_
Major Repairs	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_	_
TOTAL EXPENDITURES	\$17,266,089,467	\$(1,472,243,759)	_	_	\$15,793,845,708
Classified	_	_	_	_	_
Unclassified	_	_	_	_	_
TOTAL AUTHORIZED T.O. POSITIONS	_	_	_		_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_	_	_	_	_
TOTAL NON-T.O. FTE POSITIONS	<u> </u>	_	_	_	_

Fees and Self-Generated

	Existing Operating Budget	FY2024-2025 Requested	FY2024-2025 Requested in Technical/Other	FY2024-2025 Requested	FY2024-2025 Requested
Description	as of 10/01/2023	Continuation Adjustment	Package	New/Expanded	Realignment
Fees & Self-generated	648,806,735	(176,046,959)	_	_	472,759,776
Total:	\$648,806,735	\$(176,046,959)	_	_	\$472,759,776

Description	Existing Operating Budget as of 10/01/2023	FY2024-2025 Requested Continuation Adjustment	FY2024-2025 Requested in Technical/Other Package	FY2024-2025 Requested New/Expanded	FY2024-2025 Requested Realignment
Health Excellence Fund	28,279,797	_	_	_	28,279,797
Hospital Stabilization Fund	314,552,061	_	_	_	314,552,061
Louisiana Fund	16,732,459	_	_	_	16,732,459
Louisiana Medical Assistance Trust Fund	1,072,446,490	(210,298,193)	_	_	862,148,297
Medicaid Trust Fund for the Elderly	12,835,609	_	_	_	12,835,609
New Opportunities Waiver (NOW) Fund	43,348,066	_	_	_	43,348,066
Total:	\$1,488,194,482	\$(210,298,193)	_	_	\$1,277,896,289

3062 - Payments to Public Providers

Means of Financing and Expenditures	Existing Operating Budget as of 10/01/2023	FY2024-2025 Requested Continuation Adjustment	FY2024-2025 Requested in Technical/Other Package	FY2024-2025 Requested New/Expanded	FY2024-2025 Requested Realignment
STATE GENERAL FUND (Direct)	57,245,750	1,528,335	_	-	58,774,085
STATE GENERAL FUND BY:	_	_	_	_	_
INTERAGENCY TRANSFERS	_	_	_	_	_
FEES & SELF-GENERATED	_	_	_	_	_
STATUTORY DEDICATIONS	9,147,866	_	_	-	9,147,866
FEDERAL FUNDS	195,871,825	(1,360,070)	_	_	194,511,755
TOTAL MEANS OF FINANCING	\$262,265,441	\$168,265	_	_	\$262,433,706
Salaries	_	_	_	-	_
Other Compensation	_	_	_	_	_
Related Benefits	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_	_
Travel	_	_	_	_	_
Operating Services	_	_	_	_	_
Supplies	_	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_
Other Charges	50,442,600	_	_	-	50,442,600
Debt Service	_	_	_	_	_
Interagency Transfers	211,822,841	168,265	_	_	211,991,106
TOTAL OTHER CHARGES	\$262,265,441	\$168,265	_	_	\$262,433,706
Acquisitions	_	_	_	_	_
Major Repairs	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_	_
TOTAL EXPENDITURES	\$262,265,441	\$168,265	_	_	\$262,433,706
Classified	_	_	_	_	_
Unclassified	_	_	_	_	_
TOTAL AUTHORIZED T.O. POSITIONS	_	_	_	_	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_	_	_	_	_
TOTAL NON-T.O. FTE POSITIONS	_	_	_	_	_

Description	Existing Operating Budget as of 10/01/2023	FY2024-2025 Requested Continuation Adjustment	FY2024-2025 Requested in Technical/Other Package	FY2024-2025 Requested New/Expanded	FY2024-2025 Requested Realignment
Louisiana Medical Assistance Trust Fund	9,147,866	_	_	_	9,147,866
Total:	\$9,147,866	_	_	_	\$9,147,866

3063 - Medicare Buy-Ins & Supplements

Means of Financing and Expenditures	Existing Operating Budget as of 10/01/2023	FY2024-2025 Requested Continuation Adjustment	FY2024-2025 Requested in Technical/Other Package	FY2024-2025 Requested New/Expanded	FY2024-2025 Requested Realignment
STATE GENERAL FUND (Direct)	375,627,270	35,794,646	_	_	411,421,916
STATE GENERAL FUND BY:	_	_	_	_	_
INTERAGENCY TRANSFERS	_	_	_	_	_
FEES & SELF-GENERATED	_	_	_	_	_
STATUTORY DEDICATIONS	_	_	_	_	_
FEDERAL FUNDS	425,618,053	5,329,451	_	_	430,947,504
TOTAL MEANS OF FINANCING	\$801,245,323	\$41,124,097	-	-	\$842,369,420
Salaries	_	_	_	_	_
Other Compensation	_	_	_	_	_
Related Benefits	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_	_
Travel	_	_	_	_	_
Operating Services	_	_	_	_	_
Supplies	_	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	-	_	_
PROFESSIONAL SERVICES	_	_	-	_	_
Other Charges	801,245,323	41,124,097	_	_	842,369,420
Debt Service	_	_	_	_	_
Interagency Transfers	_	_	_	_	_
TOTAL OTHER CHARGES	\$801,245,323	\$41,124,097	_	-	\$842,369,420
Acquisitions	_	_	_	_	_
Major Repairs	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_		_		_
TOTAL EXPENDITURES	\$801,245,323	\$41,124,097	_	_	\$842,369,420
Classified	_	_	_	_	_
Unclassified	_	_	_	_	_
TOTAL AUTHORIZED T.O. POSITIONS	_	_	_	_	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_	_	_	_	_
TOTAL NON-T.O. FTE POSITIONS					_

D	Existing Operating Budget as of 10/01/2023	•	FY2024-2025 Requested in Technical/Other Package	FY2024-2025 Requested New/Expanded	FY2024-2025 Requested Realignment
T	otal: —	_	_	_	_

Program Summary Statement 3064 - Uncompensated Care Costs

3064 - Uncompensated Care Costs

Means of Financing and Expenditures	Existing Operating Budget as of 10/01/2023	FY2024-2025 Requested Continuation Adjustment	FY2024-2025 Requested in Technical/Other Package	FY2024-2025 Requested New/Expanded	FY2024-2025 Requested Realignment
STATE GENERAL FUND (Direct)	121,903,385	(879,014)	_	-	121,024,371
STATE GENERAL FUND BY:	_	_	_	_	_
INTERAGENCY TRANSFERS	13,920,424	(167,923)	_	_	13,752,501
FEES & SELF-GENERATED	24,422,839	(294,616)	_	_	24,128,223
STATUTORY DEDICATIONS	_	_	_	_	_
FEDERAL FUNDS	283,882,805	551,146	_	_	284,433,951
TOTAL MEANS OF FINANCING	\$444,129,453	\$(790,407)	_	_	\$443,339,046
Salaries	_	_	_	_	_
Other Compensation	_	_	_	_	_
Related Benefits	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_	_
Travel	_	_	_	_	_
Operating Services	_	_	_	_	_
Supplies	_	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_
Other Charges	308,537,702	_	_	-	308,537,702
Debt Service	_	_	_	_	_
Interagency Transfers	135,591,751	(790,407)	_	_	134,801,344
TOTAL OTHER CHARGES	\$444,129,453	\$(790,407)	_	_	\$443,339,046
Acquisitions	-	_	-	-	_
Major Repairs	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_	_
TOTAL EXPENDITURES	\$444,129,453	\$(790,407)	_	_	\$443,339,046
Classified	_	_	_	_	_
Unclassified	_	_	_	_	_
TOTAL AUTHORIZED T.O. POSITIONS			_	_	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	S	_	_	_	_
TOTAL NON-T.O. FTE POSITIONS		_		-	_

Fees and Self-Generated

			FY2024-2025 Requested		
	Existing Operating Budget	FY2024-2025 Requested	in Technical/Other	FY2024-2025 Requested	FY2024-2025 Requested
Description	as of 10/01/2023	Continuation Adjustment	Package	New/Expanded	Realignment
Fees & Self-generated	24,422,839	(294,616)	_	_	24,128,223
Total:	\$24,422,839	\$(294,616)	_	_	\$24,128,223

Description E	xisting Operating Budget as of 10/01/2023	FY2024-2025 Requested Continuation Adjustment	FY2024-2025 Requested in Technical/Other Package	FY2024-2025 Requested New/Expanded	FY2024-2025 Requested Realignment
Total:	_	_	_	_	_



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Total Request Summary

Agency Summary Statement Total Agency

AGENCY SUMMARY STATEMENT

Total Agency

Means of Financing

Description	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Requested Continuation Adjustments	FY2024-2025 Requested in Technical/Other Adjustments	FY2024-2025 Requested New or Expanded Adjustments	FY2024-2025 Total Request	Over/Under EOB
STATE GENERAL FUND (Direct)	1,867,274,340	2,273,579,905	275,870,851	_	_	2,549,450,756	275,870,851
STATE GENERAL FUND BY:	_	_	_	_	_	_	_
INTERAGENCY TRANSFERS	95,130,777	168,237,585	(1,801,056)	_	_	166,436,529	(1,801,056)
FEES & SELF-GENERATED	501,150,050	673,229,574	(176,341,575)	_	_	496,887,999	(176,341,575)
STATUTORY DEDICATIONS	955,279,706	1,497,342,348	(210,298,193)	_	_	1,287,044,155	(210,298,193)
FEDERAL FUNDS	13,376,842,689	14,161,340,272	(1,319,171,831)	_	_	12,842,168,441	(1,319,171,831)
TOTAL MEANS OF FINANCING	\$16,795,677,562	\$18,773,729,684	\$(1,431,741,804)	_	_	\$17,341,987,880	\$(1,431,741,804)

Agency Summary Statement Total Agency

Statutory Dedications

Description	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Requested Continuation Adjustments	FY2024-2025 Requested in Technical/Other Adjustments	FY2024-2025 Requested New or Expanded Adjustments	FY2024-2025 Total Request	Over/Under EOB
Health Excellence Fund	15,005,517	28,279,797	_	_	_	28,279,797	_
Hospital Stabilization Fund	257,146,329	314,552,061	_	_	_	314,552,061	_
Louisiana Fund	11,879,184	16,732,459	_	_	_	16,732,459	_
Louisiana Medical Assistance Trust Fund	634,118,651	1,081,594,356	(210,298,193)	_	_	871,296,163	(210,298,193)
Medicaid Trust Fund for the Elderly	5,048,896	12,835,609	_	_	_	12,835,609	_
New Opportunities Waiver (NOW) Fund	32,081,129	43,348,066	_	_	_	43,348,066	_
Total:	\$955,279,706	\$1,497,342,348	\$(210,298,193)	_	_	\$1,287,044,155	\$(210,298,193)

Agency Summary Statement Total Agency

Expenditures and Positions

Description	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Requested Continuation Adjustments	FY2024-2025 Requested in Technical/Other Adjustments	FY2024-2025 Requested New or Expanded Adjustments	FY2024-2025 Total Request	Over/Under EOB
Salaries	— Actuals	— —		— — —		—	— —
Other Compensation	_	_	_	_	_	_	_
Related Benefits	_	_	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_	_	_	_
Travel	_	_	_	_	_	_	_
Operating Services	_	_	_	_	_	_	_
Supplies	_	_	_	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	-	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_	_	_
Other Charges	16,510,770,148	18,426,315,092	(1,431,119,662)	_	_	16,995,195,430	(1,431,119,662)
Debt Service	_	_	_	_	_	_	_
Interagency Transfers	284,907,415	347,414,592	(622,142)	<u> </u>	_	346,792,450	(622,142)
TOTAL OTHER CHARGES	\$16,795,677,562	\$18,773,729,684	\$(1,431,741,804)	_	_	\$17,341,987,880	\$(1,431,741,804)
Acquisitions	_	_	_	_	_	_	_
Major Repairs	_	_	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_	_	_	_
TOTAL EXPENDITURES	\$16,795,677,562	\$18,773,729,684	\$(1,431,741,804)	_	_	\$17,341,987,880	\$(1,431,741,804)
Classified	_	_	_	<u> </u>	_	_	_
Unclassified	_	_	_	_	_	_	_
TOTAL AUTHORIZED T.O. POSITIONS	_	_	_	_	_	_	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_	_	-	_	_	_	_
TOTAL NON-T.O. FTE POSITIONS	_	_	_	_	_	_	_

PROGRAM SUMMARY STATEMENT

3061 - Payments to Private Providers

Means of Financing

Description	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Requested Continuation Adjustments	FY2024-2025 Requested in Technical/Other Adjustments	FY2024-2025 Requested New or Expanded Adjustments	FY2024-2025 Total Request	Over/Under EOB
STATE GENERAL FUND (Direct)	1,454,240,722	1,718,803,500	239,426,884	_	_	1,958,230,384	239,426,884
STATE GENERAL FUND BY:	_	_	_	_	_	_	_
INTERAGENCY TRANSFERS	81,130,156	154,317,161	(1,633,133)	_	_	152,684,028	(1,633,133)
FEES & SELF-GENERATED	476,432,596	648,806,735	(176,046,959)	_	_	472,759,776	(176,046,959)
STATUTORY DEDICATIONS	946,784,056	1,488,194,482	(210,298,193)	_	_	1,277,896,289	(210,298,193)
FEDERAL FUNDS	12,442,359,569	13,255,967,589	(1,323,692,358)	_	_	11,932,275,231	(1,323,692,358)
TOTAL MEANS OF FINANCING	\$15,400,947,099	\$17,266,089,467	\$(1,472,243,759)	_	_	\$15,793,845,708	\$(1,472,243,759)

Statutory Dedications

Description	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Requested Continuation Adjustments	FY2024-2025 Requested in Technical/Other Adjustments	FY2024-2025 Requested New or Expanded Adjustments	FY2024-2025 Total Request	Over/Under EOB
Health Excellence Fund	15,005,517	28,279,797	_	_	_	28,279,797	_
Hospital Stabilization Fund	257,146,329	314,552,061	_	_	_	314,552,061	_
Louisiana Fund	11,879,184	16,732,459	_	_	_	16,732,459	_
Louisiana Medical Assistance Trust Fund	625,623,001	1,072,446,490	(210,298,193)	_	_	862,148,297	(210,298,193)
Medicaid Trust Fund for the Elderly	5,048,896	12,835,609	_	_	_	12,835,609	_
New Opportunities Waiver (NOW) Fund	32,081,129	43,348,066	_	_	_	43,348,066	_
Total:	\$946,784,056	\$1,488,194,482	\$(210,298,193)	_	_	\$1,277,896,289	\$(210,298,193)

Expenditures and Positions

Description	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Requested Continuation Adjustments	FY2024-2025 Requested in Technical/Other Adjustments	FY2024-2025 Requested New or Expanded Adjustments	FY2024-2025 Total Request	Over/Under EOB
Salaries	_	_	_	_	_	_	_
Other Compensation	_	_	_	_	_	_	_
Related Benefits	_	_	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_	_	_	_
Travel	_	_	_	_	_	_	_
Operating Services	_	_	_	_	_	_	_
Supplies	_	_	_	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_	_	_
Other Charges	15,400,947,099	17,266,089,467	(1,472,243,759)	_	_	15,793,845,708	(1,472,243,759)
Debt Service	_	_	_	_	_	_	_
Interagency Transfers	_	_	_	_	_	_	_
TOTAL OTHER CHARGES	\$15,400,947,099	\$17,266,089,467	\$(1,472,243,759)	_	_	\$15,793,845,708	\$(1,472,243,759)
Acquisitions	_	_	_	_	_	_	_
Major Repairs	_	_	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_	_	_	_
TOTAL EXPENDITURES	\$15,400,947,099	\$17,266,089,467	\$(1,472,243,759)	_	_	\$15,793,845,708	\$(1,472,243,759)
Classified	_	_	_	_	_	_	_
Unclassified	_	_	_	_	_	_	_
TOTAL AUTHORIZED T.O. POSITIONS	_	_	_	_	_	_	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_	_	_	_	_	_	_
TOTAL NON-T.O. FTE POSITIONS	_	_	_	_	_	_	_

3062 - Payments to Public Providers

Means of Financing

Description	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Requested Continuation Adjustments	FY2024-2025 Requested in Technical/Other Adjustments	FY2024-2025 Requested New or Expanded Adjustments	FY2024-2025 Total Request	Over/Under EOB
STATE GENERAL FUND (Direct)	44,780,535	57,245,750	1,528,335	_	_	58,774,085	1,528,335
STATE GENERAL FUND BY:	_	_	_	_	_	_	_
INTERAGENCY TRANSFERS	_	_	_	_	_	_	_
FEES & SELF-GENERATED	_	_	_	_	_	_	_
STATUTORY DEDICATIONS	8,495,650	9,147,866	_	_	_	9,147,866	_
FEDERAL FUNDS	173,890,727	195,871,825	(1,360,070)	_	_	194,511,755	(1,360,070)
TOTAL MEANS OF FINANCING	\$227,166,912	\$262,265,441	\$168,265	-	_	\$262,433,706	\$168,265

Statutory Dedications

Description	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Requested Continuation Adjustments	FY2024-2025 Requested in Technical/Other Adjustments	FY2024-2025 Requested New or Expanded Adjustments	FY2024-2025 Total Request	Over/Under EOB
Hospital Stabilization Fund	_	_	_		_	_	_
Louisiana Medical Assistance Trust Fund	8,495,650	9,147,866	_	_	_	9,147,866	_
Total:	\$8,495,650	\$9,147,866	_	_	_	\$9,147,866	_

Expenditures and Positions

Description	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Requested Continuation Adjustments	FY2024-2025 Requested in Technical/Other Adjustments	FY2024-2025 Requested New or Expanded Adjustments	FY2024-2025 Total Request	Over/Under EOB
Salaries	_	_	_	_	_	_	_
Other Compensation	<u> </u>	_	_	_	_	_	_
Related Benefits	_	_	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_	_	_	_
Travel	_	_	_	_	_	_	_
Operating Services	_	_	_	_	_	_	_
Supplies	_	_	_	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_	_	_
Other Charges	46,647,523	50,442,600	<u> </u>	_	_	50,442,600	_
Debt Service	_	_	_	_	_	_	
Interagency Transfers	180,519,389	211,822,841	168,265	_	_	211,991,106	168,265
TOTAL OTHER CHARGES	\$227,166,912	\$262,265,441	\$168,265	_	_	\$262,433,706	\$168,265
Acquisitions	_	_	_	_	_	<u> </u>	_
Major Repairs	_	_	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_	_	_	_
TOTAL EXPENDITURES	\$227,166,912	\$262,265,441	\$168,265	_	_	\$262,433,706	\$168,265
Classified	_	_	_	_	_	_	_
Unclassified	_	_	_	_	_	_	
TOTAL AUTHORIZED T.O. POSITIONS	_	_	_	_	_	_	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_	_	_	_	_	_	_
TOTAL NON-T.O. FTE POSITIONS	_	_	_	_	_	_	_

3063 - Medicare Buy-Ins & Supplements

Means of Financing

Description	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Requested Continuation Adjustments	FY2024-2025 Requested in Technical/Other Adjustments	FY2024-2025 Requested New or Expanded Adjustments	FY2024-2025 Total Request	Over/Under EOB
STATE GENERAL FUND (Direct)	303,380,780	375,627,270	35,794,646	_	_	411,421,916	35,794,646
STATE GENERAL FUND BY:	_	_	_	_	_	_	_
INTERAGENCY TRANSFERS	_	_	_	_	_	_	_
FEES & SELF-GENERATED	_	_	_	_	_	_	_
STATUTORY DEDICATIONS	_	_	_	_	_	_	_
FEDERAL FUNDS	434,931,583	425,618,053	5,329,451	_	_	430,947,504	5,329,451
TOTAL MEANS OF FINANCING	\$738,312,363	\$801,245,323	\$41,124,097	_	_	\$842,369,420	\$41,124,097

Expenditures and Positions

	FY2022-2023	Existing Operating Budget	FY2024-2025 Requested Continuation	FY2024-2025 Requested in Technical/Other	FY2024-2025 Requested New or Expanded	FY2024-2025	
Description	Actuals	as of 10/01/2023	Adjustments	Adjustments	Adjustments	Total Request	Over/Under EOB
Salaries	_	_	_	_	_	_	_
Other Compensation	_	_	_	_	_	_	_
Related Benefits	_	_	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_	_	-	_
Travel	_	_	_	_	_	<u> </u>	_
Operating Services	_	_	_	_	_	_	_
Supplies	_	_	_	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_	_	_
Other Charges	738,312,363	801,245,323	41,124,097	_	_	842,369,420	41,124,097
Debt Service	_	_	_	_	_	_	_
Interagency Transfers	_	_	_	_	_	_	_
TOTAL OTHER CHARGES	\$738,312,363	\$801,245,323	\$41,124,097	_	_	\$842,369,420	\$41,124,097
Acquisitions	_	_	_	_	_	_	_
Major Repairs	_	_	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	-	_	_	_
TOTAL EXPENDITURES	\$738,312,363	\$801,245,323	\$41,124,097	_	_	\$842,369,420	\$41,124,097
Classified	_	_	_	_	_	_	_
Unclassified	_	_	_	_	_	_	_
TOTAL AUTHORIZED T.O. POSITIONS	_	_	_	_	_	_	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_	_	_	_	_	_	_
TOTAL NON-T.O. FTE POSITIONS	_	_	_	_	_	_	_

Program Summary Statement 3064 - Uncompensated Care Costs

3064 - Uncompensated Care Costs

Means of Financing

Description	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Requested Continuation Adjustments	FY2024-2025 Requested in Technical/Other Adjustments	FY2024-2025 Requested New or Expanded Adjustments	FY2024-2025 Total Request	Over/Under EOB
STATE GENERAL FUND (Direct)	64,872,304	121,903,385	(879,014)	_	_	121,024,371	(879,014)
STATE GENERAL FUND BY:	_	_	_	_	_	_	_
INTERAGENCY TRANSFERS	14,000,621	13,920,424	(167,923)	_	_	13,752,501	(167,923)
FEES & SELF-GENERATED	24,717,454	24,422,839	(294,616)	_	_	24,128,223	(294,616)
STATUTORY DEDICATIONS	_	_	_	_	_	_	_
FEDERAL FUNDS	325,660,810	283,882,805	551,146	_	_	284,433,951	551,146
TOTAL MEANS OF FINANCING	\$429,251,189	\$444,129,453	\$(790,407)	-	_	\$443,339,046	\$(790,407)

Program Summary Statement 3064 - Uncompensated Care Costs

Expenditures and Positions

Description	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Requested Continuation Adjustments	FY2024-2025 Requested in Technical/Other Adjustments	FY2024-2025 Requested New or Expanded Adjustments	FY2024-2025 Total Request	Over/Under EOB
Salaries	_	_	_	_	_	_	_
Other Compensation	_	_	_	_	_	_	_
Related Benefits	_	_	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_	_	_	_
Travel	_	_	_	_	_	_	_
Operating Services	_	_	_	_	_	_	_
Supplies	_	_	_	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_	_	_
Other Charges	324,863,163	308,537,702	_	_	_	308,537,702	_
Debt Service	_	_	_	_	_	_	_
Interagency Transfers	104,388,026	135,591,751	(790,407)	_	_	134,801,344	(790,407)
TOTAL OTHER CHARGES	\$429,251,189	\$444,129,453	\$(790,407)	_	_	\$443,339,046	\$(790,407)
Acquisitions	_	_	_	_	_	_	_
Major Repairs	_	_	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_	_	_	_
TOTAL EXPENDITURES	\$429,251,189	\$444,129,453	\$(790,407)	_	_	\$443,339,046	\$(790,407)
Classified	_	_	_	_	_	_	_
Unclassified	_	_	_	_	_	_	_
TOTAL AUTHORIZED T.O. POSITIONS	_	_	_	_	_	_	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_	_	_	_	_	_	_
TOTAL NON-T.O. FTE POSITIONS	_	_	_	_	_	_	_

Addenda

Interagency Transfers

INTERAGENCY TRANSFERS

INTERAGENCY AGREEMENT

BR-19B (8/08)

Interagency Agreement Between Department of Health and Hospitals-Medical Vendor Payments (09-306) and the Department of Children and Family Services (#10-360) (Recipient Agency and #) (Sending Agency and #)

For Fiscal Year 2024 - 2025, Department of Health and Hospitals -Medical Vendor Payments (# 09-306) is budgeted to receive the following revenue \$6,820,908 (Agency Name and #)

from DCFS-Office of Children and Family Services (# 10-360) by Interagency Transfer for the following reason(s):

(Agency Name and #)

The reason for the Interagency Agreement is: To represent funds that will be received from the Department of Children and Family Services for Coordinated System of Care expenditures in the amount of \$6,820,908.

Rachel Newman Digitally signed by Rachel Newman Date 2023 10:23 14 33:16-05/00"

Recipient Agency Fiscal Officer

Date

Sending Agency Fiscal Officer

10. Lu. 23

NOTE

It is the Receiving Agency's responsibility to ensure the execution of this Agreement.

Both Agencies must submit copies of this Agreement with their Budget Request (and any subsequent BA-7s as documentation for I.A.T. revenues and I.A.T. expense).

Children's Budget

CHILDREN'S BUDGET

0

CHILD - DS Department: 09A - Louisiana Department of Health **STATE OF LOUISIANA** Fiscal Year 2024 - 2025 **Childrens Budget** Agency: MEDICAL VENDOR PAYMENTS Report Date: 10/26/23 **Department Summary** Service Agency **General Fund** Service Name **Agency Name** IAT **Self Generated Stat Deds** Federal Funds **Total Funds Positions** Number Number Medical Services for Medicaid Eligible Children MVP01 306 Medical Vendor Payments \$774,514,244 \$48,093,796 \$213,205,790 \$284,352,127 \$2,880,742,815 \$4,200,908,772 0

\$48,093,796

\$213,205,790

\$284,352,127

\$2,880,742,815

\$4,200,908,772

\$774,514,244

Total:

Department: 09A - Louisiana Department of Health Agency: MEDICAL VENDOR PAYMENTS		STATE OF LOUISIA Childrens Budget by Department	ANA		CHILD - DC Fiscal Year 2024 - 2025 Report Date: 10/26/23
Means of Financing:	Existing Operating Budget	Requested Continuation	Requested NE	Total Requested	Total Recommended
STATE GENERAL FUND (Direct)	\$700,950,391	\$73,563,853	\$0	\$774,514,244	\$0
STATE GENERAL FUND BY:					
INTERAGENCY TRANSFERS	\$48,819,499	(\$725,703)	\$0	\$48,093,796	\$0
FEES & SELF-GENERATED	\$249,970,680	(\$36,764,890)	\$0	\$213,205,790	\$0
STATUTORY DEDICATIONS	\$340,678,079	(\$56,325,952)	\$0	\$284,352,127	\$0
FEDERAL FUNDS	\$3,054,174,788	(\$173,431,973)	\$0	\$2,880,742,815	\$0
TOTAL MEANS OF FINANCING	\$4,394,593,437	(\$193,684,665)	\$0	\$4,200,908,772	\$0
Salaries	\$0	\$0	\$0	\$0	\$0
Other Compensation	\$0	\$0	\$0	\$0	\$0
Related Benefits	\$0	\$0	\$0	\$0	\$0
TOTAL PERSONAL SERVICES	\$0	\$0	\$0	\$0	\$0
Travel	\$0	\$0	\$0	\$0	\$0
Operating Services	\$0	\$0	\$0	\$0	\$0
Supplies	\$0	\$0	\$0	\$0	\$0
TOTAL OPERATING EXPENSES	\$0	\$0	\$0	\$0	\$0
PROFESSIONAL SERVICES	\$0	\$0	\$0	\$0	\$0
Other Charges	\$4,298,099,728	(\$193,684,665)	\$0	\$4,104,415,063	\$0
Debt Service	\$0	\$0	\$0	\$0	\$0
Interagency Transfers	\$96,493,709	\$0	\$0	\$96,493,709	\$0
TOTAL OTHER CHARGES	\$4,394,593,437	(\$193,684,665)	\$0	\$4,200,908,772	\$0
Acquisitions	\$0	\$0	\$0	\$0	\$0
Major Repairs	\$0	\$0	\$0	\$0	\$0
TOTAL ACQ. & MAJOR REPAIRS	\$0	\$0	\$0	\$0	\$0

Department: 09A - Louisiana Department of Health Agency: MEDICAL VENDOR PAYMENTS Childrens Budget by Department		Fig. 1 V 2024 - 202			
TOTAL EXPENDITURES	\$4,394,593,437	(\$193,684,665)	\$0	\$4,200,908,772	\$0
Classified	0	0	0	0	0
Unclassified	0	0	0	0	0
TOTAL AUTHORIZED T.O. POSITIONS	0	0	0	0	0
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	0	0	0	0	0
TOTAL NON-T.O. FTE POSITIONS	0	0	0	0	0
TOTAL POSITIONS	0	0	0	0	0

STATE OF LOUISIANA

CHILD - AS Fiscal Year 2024 - 2025

Agency: MEDICAL VENDOR PAYMENTS

Childrens Budget Agency Summary

Report Date: 10/26/23

306 - Medical Vendor Payments

Service Number	Service Name	Program Number	Program Name	General Fund	IAT	Self Generated	Stat Deds	Federal Funds	Total Funds	Positions
MVP01	Medical Services for Medicaid Eligible Children	3061	Payments to Private Providers	\$707,962,525	\$43,075,272	\$204,400,987	\$280,973,644	\$2,703,611,131	\$3,940,023,559	0
MVP01	Medical Services for Medicaid Eligible Children	3062	Payments to Public Providers	\$21,610,604	\$0	\$0	\$3,378,483	\$71,870,582	\$96,859,669	0
MVP01	Medical Services for Medicaid Eligible Children	3064	Uncompensated Care Costs	\$44,941,115	\$5,018,524	\$8,804,803	\$0	\$105,261,102	\$164,025,544	0
			Total:	\$774,514,244	\$48,093,796	\$213,205,790	\$284,352,127	\$2,880,742,815	\$4,200,908,772	0

STATE OF LOUISIANA

CHILD - AC Fiscal Year 2024 - 2025 Report Date: 10/26/23

Agency: MEDICAL VENDOR PAYMENTS

Childrens Budget by Agency

306 - Medical Vendor Payments

Means of Financing:	Existing Operating Budget	Requested Continuation	Requested NE	Total Requested	Total Recommended
STATE GENERAL FUND (Direct)	\$700,950,391	\$73,563,853	\$0	\$774,514,244	\$0
STATE GENERAL FUND BY:					
INTERAGENCY TRANSFERS	\$48,819,499	(\$725,703)	\$0	\$48,093,796	\$0
FEES & SELF-GENERATED	\$249,970,680	(\$36,764,890)	\$0	\$213,205,790	\$0
STATUTORY DEDICATIONS	\$340,678,079	(\$56,325,952)	\$0	\$284,352,127	\$0
FEDERAL FUNDS	\$3,054,174,788	(\$173,431,973)	\$0	\$2,880,742,815	\$0
TOTAL MEANS OF FINANCING	\$4,394,593,437	(\$193,684,665)	\$0	\$4,200,908,772	\$0
Salaries	\$0	\$0	\$0	\$0	\$0
Other Compensation	\$0	\$0	\$0	\$0	\$0
Related Benefits	\$0	\$0	\$0	\$0	\$0
TOTAL PERSONAL SERVICES	\$0	\$0	\$0	\$0	\$0
Travel	\$0	\$0	\$0	\$0	\$0
Operating Services	\$0	\$0	\$0	\$0	\$0
Supplies	\$0	\$0	\$0	\$0	\$0
TOTAL OPERATING EXPENSES	\$0	\$0	\$0	\$0	\$0
PROFESSIONAL SERVICES	\$0	\$0	\$0	\$0	\$0
Other Charges	\$4,298,099,728	(\$193,684,665)	\$0	\$4,104,415,063	\$0
Debt Service	\$0	\$0	\$0	\$0	\$0
Interagency Transfers	\$96,493,709	\$0	\$0	\$96,493,709	\$0
TOTAL OTHER CHARGES	\$4,394,593,437	(\$193,684,665)	\$0	\$4,200,908,772	\$0
Acquisitions	\$0	\$0	\$0	\$0	\$0
Major Repairs	\$0	\$0	\$0	\$0	\$0

Department: 09A - Louisiana Department of Health Agency: MEDICAL VENDOR PAYMENTS	STATE OF LOUISIA Childrens Budget by Agency	ANA		CHILD - AC Fiscal Year 2024 - 2025 Report Date: 10/26/23		
TOTAL ACQ. & MAJOR REPAIRS	\$0	\$0	\$0	\$0	\$0	
TOTAL EXPENDITURES	\$4,394,593,437	(\$193,684,665)	\$0	\$4,200,908,772	\$0	
Classified	0	0	0	0	0	
Unclassified	0	0	0	0	0	
TOTAL AUTHORIZED T.O. POSITIONS	0	0	0	0	0	
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	0	0	0	0	0	
TOTAL NON-T.O. FTE POSITIONS	0	0	0	0	0	
TOTAL POSITIONS	0	0	0	0	0	

STATE OF LOUISIANA

CHILD1 Fiscal Year 2024 - 2025 Report Date: 10/26/23

Agency: MEDICAL VENDOR PAYMENTS

Childrens Budget by Agency/Program and Service

306 - Medical Vendor Payments

3061 - Payments to Private Providers

MVP01 - Medical Services for Medicaid Eligible Children

Means of Financing:	Existing Operating Budget	Requested Continuation	Requested NE	Total Requested	Total Recommended
STATE GENERAL FUND (Direct)	\$634,787,172	\$73,175,353	\$0	\$707,962,525	\$0
STATE GENERAL FUND BY:					
INTERAGENCY TRANSFERS	\$43,678,419	(\$603,147)	\$0	\$43,075,272	\$0
FEES & SELF-GENERATED	\$240,950,856	(\$36,549,869)	\$0	\$204,400,987	\$0
STATUTORY DEDICATIONS	\$337,299,596	(\$56,325,952)	\$0	\$280,973,644	\$0
FEDERAL FUNDS	\$2,876,992,181	(\$173,381,050)	\$0	\$2,703,611,131	\$0
TOTAL MEANS OF FINANCING	\$4,133,708,224	(\$193,684,665)	\$0	\$3,940,023,559	\$0
Salaries	\$0	\$0	\$0	\$0	\$0
Other Compensation	\$0	\$0	\$0	\$0	\$0
Related Benefits	\$0	\$0	\$0	\$0	\$0
TOTAL PERSONAL SERVICES	\$0	\$0	\$0	\$0	\$0
Travel	\$0	\$0	\$0	\$0	\$0
Operating Services	\$0	\$0	\$0	\$0	\$0
Supplies	\$0	\$0	\$0	\$0	\$0
TOTAL OPERATING EXPENSES	\$0	\$0	\$0	\$0	\$0
PROFESSIONAL SERVICES	\$0	\$0	\$0	\$0	\$0
Other Charges	\$4,133,708,224	(\$193,684,665)	\$0	\$3,940,023,559	\$0
Debt Service	\$0	\$0	\$0	\$0	\$0
Interagency Transfers	\$0	\$0	\$0	\$0	\$0
TOTAL OTHER CHARGES	\$4,133,708,224	(\$193,684,665)	\$0	\$3,940,023,559	\$0

Department: 09A - Louisiana Department of Health Agency: MEDICAL VENDOR PAYMENTS		STATE OF LOUISIANA Childrens Budget by Agency/Program and Service				
Acquisitions	\$0	\$0	\$0	\$0	\$0	
Major Repairs	\$0	\$0	\$0	\$0	\$0	
TOTAL ACQ. & MAJOR REPAIRS	\$0	\$0	\$0	\$0	\$0	
TOTAL EXPENDITURES	\$4,133,708,224	(\$193,684,665)	\$0	\$3,940,023,559	\$0	
Classified	0	0	0	0	0	
Unclassified	0	0	0	0	0	
TOTAL AUTHORIZED T.O. POSITIONS	0	0	0	0	0	
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	0	0	0	0	0	
TOTAL NON-T.O. FTE POSITIONS	0	0	0	0	0	
TOTAL POSITIONS	0	0	0	0	0	

STATE OF LOUISIANA Childrens Budget

CHILD1
Fiscal Year 2024 - 2025
Report Date: 10/26/23

Agency: MEDICAL VENDOR PAYMENTS

by Agency/Program and Service

3062 - Payments to Public Providers

MVP01 - Medical Services for Medicaid Eligible Children

Means of Financing:	Existing Operating Budget	Requested Continuation	Requested NE	Total Requested	Total Recommended
STATE GENERAL FUND (Direct)	\$21,141,956	\$468,648	\$0	\$21,610,604	\$0
STATE GENERAL FUND BY:					
INTERAGENCY TRANSFERS	\$0	\$0	\$0	\$0	\$0
FEES & SELF-GENERATED	\$0	\$0	\$0	\$0	\$0
STATUTORY DEDICATIONS	\$3,378,483	\$0	\$0	\$3,378,483	\$0
FEDERAL FUNDS	\$72,339,230	(\$468,648)	\$0	\$71,870,582	\$0
TOTAL MEANS OF FINANCING	\$96,859,669	\$0	\$0	\$96,859,669	\$0
Salaries	\$0	\$0	\$0	\$0	\$0
Other Compensation	\$0	\$0	\$0	\$0	\$0
Related Benefits	\$0	\$0	\$0	\$0	\$0
TOTAL PERSONAL SERVICES	\$0	\$0	\$0	\$0	\$0
Travel	\$0	\$0	\$0	\$0	\$0
Operating Services	\$0	\$0	\$0	\$0	\$0
Supplies	\$0	\$0	\$0	\$0	\$0
TOTAL OPERATING EXPENSES	\$0	\$0	\$0	\$0	\$0
PROFESSIONAL SERVICES	\$0	\$0	\$0	\$0	\$0
Other Charges	\$50,442,600	\$0	\$0	\$50,442,600	\$0
Debt Service	\$0	\$0	\$0	\$0	\$0
Interagency Transfers	\$46,417,069	\$0	\$0	\$46,417,069	\$0
TOTAL OTHER CHARGES	\$96,859,669	\$0	\$0	\$96,859,669	\$0
Acquisitions	\$0	\$0	\$0	\$0	\$0

Department: 09A - Louisiana Department of Health Agency: MEDICAL VENDOR PAYMENTS		STATE OF LOUISIANA Childrens Budget by Agency/Program and Service			
Major Repairs	\$0	\$0	\$0	\$0	\$0
TOTAL ACQ. & MAJOR REPAIRS	\$0	\$0	\$0	\$0	\$0
TOTAL EXPENDITURES	\$96,859,669	\$0	\$0	\$96,859,669	\$0
Classified	0	0	0	0	0
Unclassified	0	0	0	0	0
TOTAL AUTHORIZED T.O. POSITIONS	0	0	0	0	0
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	0	0	0	0	0
TOTAL NON-T.O. FTE POSITIONS	0	0	0	0	0
TOTAL POSITIONS	0	0	0	0	0

STATE OF LOUISIANA

Childrens Budget by Agency/Program and Service

CHILD1 Fiscal Year 2024 - 2025 Report Date: 10/26/23

3064 - Uncompensated Care Costs

Agency: MEDICAL VENDOR PAYMENTS

MVP01 - Medical Services for Medicaid Eligible Children

Means of Financing:	Existing Operating Budget	Requested Continuation	Requested NE	Total Requested	Total Recommended
STATE GENERAL FUND (Direct)	\$45,021,263	(\$80,148)	\$0	\$44,941,115	\$0
STATE GENERAL FUND BY:					
INTERAGENCY TRANSFERS	\$5,141,080	(\$122,556)	\$0	\$5,018,524	\$0
FEES & SELF-GENERATED	\$9,019,824	(\$215,021)	\$0	\$8,804,803	\$0
STATUTORY DEDICATIONS	\$0	\$0	\$0	\$0	\$0
FEDERAL FUNDS	\$104,843,377	\$417,725	\$0	\$105,261,102	\$0
TOTAL MEANS OF FINANCING	\$164,025,544	\$0	\$0	\$164,025,544	\$0
Salaries	\$0	\$0	\$0	\$0	\$0
Other Compensation	\$0	\$0	\$0	\$0	\$0
Related Benefits	\$0	\$0	\$0	\$0	\$0
TOTAL PERSONAL SERVICES	\$0	\$0	\$0	\$0	\$0
Travel	\$0	\$0	\$0	\$0	\$0
Operating Services	\$0	\$0	\$0	\$0	\$0
Supplies	\$0	\$0	\$0	\$0	\$0
TOTAL OPERATING EXPENSES	\$0	\$0	\$0	\$0	\$0
PROFESSIONAL SERVICES	\$0	\$0	\$0	\$0	\$0
Other Charges	\$113,948,904	\$0	\$0	\$113,948,904	\$0
Debt Service	\$0	\$0	\$0	\$0	\$0
Interagency Transfers	\$50,076,640	\$0	\$0	\$50,076,640	\$0
TOTAL OTHER CHARGES	\$164,025,544	\$0	\$0	\$164,025,544	\$0
Acquisitions	\$0	\$0	\$0	\$0	\$0

Department: 09A - Louisiana Department of Health Agency: MEDICAL VENDOR PAYMENTS	Chi	STATE OF LOUISIANA Childrens Budget by Agency/Program and Service			
Major Repairs	\$0	\$0	\$0	\$0	\$0
TOTAL ACQ. & MAJOR REPAIRS	\$0	\$0	\$0	\$0	\$0
TOTAL EXPENDITURES	\$164,025,544	\$0	\$0	\$164,025,544	\$0
Classified	0	0	0	0	0
Unclassified	0	0	0	0	0
TOTAL AUTHORIZED T.O. POSITIONS	0	0	0	0	0
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	0	0	0	0	0
TOTAL NON-T.O. FTE POSITIONS	0	0	0	0	0
TOTAL POSITIONS	0	0	0	0	0

STATE OF LOUISIANA

CHILD2

Agency: MEDICAL VENDOR PAYMENTS

Childrens Budget
Narrative

Fiscal Year 2024 - 2025 Report Date: 10/26/23

Form ID: 28966

Form Description: 306 - Private Providers Children's Bude

Service: MVP01 - Medical Services for Medicaid Eligible Children

Question and Narrative Response

Describe the service:

This service consists of medical services and products provided to persons 19 years and under who are eligible for Medicaid. This includes the provision of medically necessary services as well as preventive and screening services. The principal users and primary beneficiaries are low-income and disabled children. This also includes the cost of services provided to the uninsured population in the Uncompensated Care Costs program. Medicaid is a federally sponsored public insurance system for health care services and products for low-income and disabled persons. Each state administers its own program within federal guidelines. The federal government mandates that certain healthcare services be covered by states who participate in the Medicaid program. Mandatory medical services include but are not limited to: Inpatient and outpatient hospital services, Physician services, Laboratory and X-Ray services, Prescription drugs, and services for Early Periodic Screening, Diagnosis and Treatment (EPSDT) of those under 19. Optional services include, but are not limited to: Ambulatory Surgical Centers, Home and Community Based Waivers, and Pediatric Day Healthcare Centers. Congress passed Public Law 105-33 in 1997 to establish a new Title XXI under the Social Security Act called the State Children's Health Insurance Program. Subsequently, in Louisiana the Governor issued Executive Order No. 97-37 establishing a Task Force to plan for the implementation of a Louisiana Children's Health Insurance Program (LaCHIP). In May 1998, the Louisiana Legislature passed Senate Bill 78 (Act 128) authorizing the implementation of LaCHIP. Effective November 1, 1998, the Louisiana Department of Health implemented the LaCHIP for uninsured children under the age of 19 with household income at or below 133% of the poverty level. Income levels were subsequently increased in several phases: October 1999 to 150% FPL, January 2001 to 200% FPL, and June 2008 to 250%

How does this fulfill the program's mission?

This will allow Louisiana Department of Health to fulfill its mission by achieving its goal of enrolling and providing healthcare coverage for children in accordance with the approved state plan.

Who are the principal users?

The principal users are low-income and disabled children.

Who primarily benefits from the service?

The primary beneficiaries are low-income and disabled children.

Related objectives and performance measures:

- · Objective A-1-2: Through the Medicaid Managed Care Activity, increase preventive and primary healthcare use, thereby improving quality, health outcomes, and patient experience for Louisiana Medicaid members.
- 22947 Percentage of Medicaid enrollees aged 2-21 years of age who had at least one dental visit in a year;
- 25576 Percentage of Medicaid enrollees, enrolled for at least 90 consecutive days aged 6-9, who receive a dental sealant on a permanent molar tooth;
- 25577 Number of Medicaid enrollees aged 6-9 enrolled for at least 90 consecutive days, who receive a dental sealant on a permanent tooth;
- 26943 Percentage of well care visits for children in the first 15 months of age;
- 26944 Percentage of well care visits for children 15 to 30 months of age:
- 26945 Percentage of child and adolescent well care visits.
- Objective A-1-3: Objective: Through the Long-Term Services and Supports Activity, ensure the HCBS program remains in compliance with state and federal requirements so that Medicaid can continue to increase access for HCBS recipients.
- 26589 Percentage of providers compliant with the state's EVV standard;
- 26590 Percentage of LTSS recipients receiving Home and Community Based Services.

STATE OF LOUISIANA

CHILD2

Agency: MEDICAL VENDOR PAYMENTS

Childrens Budget Narrative Fiscal Year 2024 - 2025 Report Date: 10/26/23

Form ID: 28972

Form Description: 306 - Public Providers Children's Budg

Service: MVP01 - Medical Services for Medicaid Eligible Children

Question and Narrative Response

Describe the service:

This service consists of medical services and products provided to persons 19 years and under who are eligible for Medicaid. This includes the provision of medically necessary services as well as preventive and screening services. The principal users and primary beneficiaries are low-income and disabled children. This also includes the cost of services provided to the uninsured population in the Uncompensated Care Costs program. Medicaid is a federally sponsored public insurance system for health care services and products for low-income and disabled persons. Each state administers its own program within federal guidelines. The federal government mandates that certain healthcare services be covered by states who participate in the Medicaid program. Mandatory medical services include but are not limited to: Inpatient and outpatient hospital services, Physician services, Laboratory and X-Ray services, Prescription drugs, and services for Early Periodic Screening, Diagnosis and Treatment (EPSDT) of those under 19. Optional services include, but are not limited to: Ambulatory Surgical Centers, Home and Community Based Waivers, and Pediatric Day Healthcare Centers. Congress passed Public Law 105-33 in 1997 to establish a new Title XXI under the Social Security Act called the State Children's Health Insurance Program. Subsequently, in Louisiana the Governor issued Executive Order No. 97-37 establishing a Task Force to plan for the implementation of a Louisiana Children's Health Insurance Program (LaCHIP). In May 1998, the Louisiana Legislature passed Senate Bill 78 (Act 128) authorizing the implementation of LaCHIP. Effective November 1, 1998, the Louisiana Department of Health implemented the LaCHIP for uninsured children under the age of 19 with household income at or below 133% of the poverty level. Income levels were subsequently increased in several phases: October 1999 to 150% FPL, January 2001 to 200% FPL, and June 2008 to 250%

How does this fulfill the program's mission?

This will allow Louisiana Department of Health to fulfill its mission by achieving its goal of enrolling and providing healthcare coverage for children in accordance with the approved state plan.

Who are the principal users?

The principal users are low-income and disabled children.

Who primarily benefits from the service?

The primary beneficiaries are low-income and disabled children.

Related objectives and performance measures:

- Objective B-1-1: Through the Payment to Public Providers activity, to track utilization of services provided by local school systems including nursing services, which allow for important medical screenings to be provided by these school systems with Medicaid reimbursement.
- 24092 Number of Local Education Agencies participating in School Nursing Services;
- 25580 Number of unduplicated recipients Receiving School Nursing Services from Local Education Agencies;
- 25582 Number of school nurses in participating Local Education Agencies.

STATE OF LOUISIANA

CHILD2 Fiscal Year 2024 - 2025

Agency: MEDICAL VENDOR PAYMENTS

Childrens Budget
Narrative

Report Date: 10/26/23

Form ID: 28980

Form Description: 306 UCC Children's Budget

Service: MVP01 - Medical Services for Medicaid Eligible Children

Question and Narrative Response

Describe the service:

This service consists of medical services and products provided to persons 19 years and under who are eligible for Medicaid. This includes the provision of medically necessary services as well as preventive and screening services. The principal users and primary beneficiaries are low-income and disabled children. This also includes the cost of services provided to the uninsured population in the Uncompensated Care Costs program. Medicaid is a federally sponsored public insurance system for health care services and products for low-income and disabled persons. Each state administers its own program within federal guidelines. The federal government mandates that certain healthcare services be covered by states who participate in the Medicaid program. Mandatory medical services include but are not limited to: Inpatient and outpatient hospital services, Physician services, Laboratory and X-Ray services, Prescription drugs, and services for Early Periodic Screening, Diagnosis and Treatment (EPSDT) of those under 19. Optional services include, but are not limited to: Ambulatory Surgical Centers, Home and Community Based Waivers, and Pediatric Day Healthcare Centers. Congress passed Public Law 105-33 in 1997 to establish a new Title XXI under the Social Security Act called the State Children's Health Insurance Program. Subsequently, in Louisiana the Governor issued Executive Order No. 97-37 establishing a Task Force to plan for the implementation of a Louisiana Children's Health Insurance Program (LaCHIP). In May 1998, the Louisiana Legislature passed Senate Bill 78 (Act 128) authorizing the implementation of LaCHIP. Effective November 1, 1998, the Louisiana Department of Health implemented the LaCHIP for uninsured children under the age of 19 with household income at or below 133% of the poverty level. Income levels were subsequently increased in several phases: October 1999 to 150% FPL, January 2001 to 200% FPL, and June 2008 to 250%

How does this fulfill the program's mission?

This will allow Louisiana Department of Health to fulfill its mission by achieving its goal of enrolling and providing healthcare coverage for children in accordance with the approved state plan.

Who are the principal users?

The principal users are low-income and disabled children.

Who primarily benefits from the service?

The primary beneficiaries are low-income and disabled children.

Related objectives and performance measures:

There are no specific objectives or performance measures associated with the Children's Budget in the Uncompensated Care Costs Program.



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