

Agency Budget Request

FISCAL YEAR 2025–2026



Louisiana Department of Health
306 — Medical Vendor Payments



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Signature Page

BUDGET REQUEST

Fiscal Year Ending June 30, 2026

NAME OF DEPARTMENT / AGENCY: Louisiana Department of Health (09) PHYSICAL ADDRESS: 628 N. Fourth 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

WE HEREBY CERTIFY THAT THE STATEMENTS AND FIGURES ON THE ACCOMPANYING FORMS ARE TRUE AND CORRECT TO THE BEST OF OUR KNOWLEDGE.

HEAD OF DEPARTMENT: <u><i>Michael Harrington</i></u> PRINTED NAME/TITLE: <u>Michael Harrington, Secretary</u> DATE: <u>10/20/24</u> EMAIL ADDRESS: <u>Michael.Harrington@la.gov</u>	HEAD OF BUDGET UNIT: <u><i>Kimberly Sullivan</i></u> PRINTED NAME/TITLE: <u>Kimberly Sullivan, Medicaid Executive Director</u> DATE: _____ EMAIL ADDRESS: <u>Kimberly.Sullivan@la.gov</u>
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PROGRAM CONTACT PERSON: <u>Anthony Shamis</u> TITLE: <u>Medicaid Program Manager 4, MVP Budget & Financing</u> TELEPHONE NUMBER: <u>225-342-9493</u> EMAIL ADDRESS: <u>Anthony.Shamis3@la.gov</u>	FINANCIAL CONTACT PERSON: <u>Kimberly Sullivan</u> TITLE: <u>Medicaid Executive Director</u> TELEPHONE NUMBER: <u>225-219-7810</u> EMAIL ADDRESS: <u>Kimberly.Sullivan@la.gov</u>
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Operational Plan

STATE OF LOUISIANA
Operational Plan Form
Department Goals

DEPARTMENT NUMBER AND NAME: MVP - MVP

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 GOALS:

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

STATE OF LOUISIANA
Operational Plan Form
Agency Goals

AGENCY NUMBER AND NAME: 306 - Medical Vendor Payments

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 GOALS:

Goal I

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 STRATEGY FOR DEVELOPMENT 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.

STATE OF LOUISIANA

Operational Plan Form

Program Goals

PROGRAM NUMBER AND NAME: 3061 - Payments to Private Providers

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 GOALS:

- 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:

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

STATE OF LOUISIANA Operational Plan Form Program Goals

PROGRAM NUMBER AND NAME: 3061 - Payments to Private Providers

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.

STATE OF LOUISIANA
Operational Plan Form
Program Goals

PROGRAM NUMBER AND NAME: 3062 - Payments to Public Providers

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 GOALS:

- 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:

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.

STATE OF LOUISIANA

Operational Plan Form

Program Goals

PROGRAM NUMBER AND NAME: 3063 - Medicare Buy-Ins & Supplements

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, which is 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. Louisiana Health Insurance Premium Payment (LaHIPP) is a program authorized under the authority of Section 1906 of the Social Security Act that may reimburse 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 GOALS:

- 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:

STATE OF LOUISIANA Operational Plan Form Program Goals

PROGRAM NUMBER AND NAME: 3063 - Medicare Buy-Ins & Supplements

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 been shown to improve 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 reinstated 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 would otherwise have to be assumed for this population 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.

STATE OF LOUISIANA
Operational Plan Form
Program Goals

PROGRAM NUMBER AND NAME: 3064 - Uncompensated Care Costs

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 GOALS:

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:

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.

STATE OF LOUISIANA
Operational Plan Form
Activities/Objectives - Performance Indicators

DEPARTMENT ID: 09 - LDH

AGENCY ID: 306 - Medical Vendor Payments

PROGRAM ID: 3061 - Payments to Private Providers

PM OBJECTIVE: 3061-01 - Through the Medicaid Managed Care activity, increase budget predictability while providing for service delivery model of high quality medically necessary health services, avoiding unnecessary duplication of services and low value care.

Children's Budget Link:

Human Resource Policies Beneficial to Women and Families Link:

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other):

Explanatory Notes:

Performance Indicator	Level	Performance Indicator Name	Unit	Performance Indicator Values						
				Year End Performance Standard 2023 - 2024	Actual Year End Performance 2023 - 2024	Performance Standard as Initially Appropriated 2024 - 2025	Existing Performance Standard 2024 - 2025	Performance at Continuation Budget Level 2025 - 2026	Performance at Executive Budget Level 2025 - 2026	Performance Standard as Initially Appropriated 2025 - 2026
25602	K	Percentage of Medicaid enrollees enrolled in a managed care model	P	85	84	84	84	84	0	0
25603	K	Percentage of Medicaid enrollee expenditures under a managed care model	P	81	81	81	81	81	0	0
Performance Indicator	Level	Performance Indicator Name	Unit	General Performance Information						
				Performance Indicator Values						
				Prior Year Actual FY2019 - 2020	Prior Year Actual FY2020 - 2021	Prior Year Actual FY2021 - 2022	Prior Year Actual FY2022 - 2023	Prior Year Actual FY2023 - 2024		
25604	G	Annual amount of premium taxes paid by Medicaid managed care plans	D	450,247,829.81	511,575,725.26	558,951,030.75	673,291,916.96	747,171,533.17		

STATE OF LOUISIANA
Operational Plan Form
Activities/Objectives - Performance Indicators

DEPARTMENT ID: 09 - LDH

AGENCY ID: 306 - Medical Vendor Payments

PROGRAM ID: 3061 - Payments to Private Providers

PM OBJECTIVE: 3061-02 - Through the Medicaid Managed Care activity, increase preventative and primary healthcare use, thereby improving quality health outcomes, and patient experience for Louisiana Medicaid members.

Children's Budget Link:

Human Resource Policies Beneficial to Women and Families Link:

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other):

Explanatory Notes:

Performance Indicator	Level	Performance Indicator Name	Unit	Performance Indicator Values						
				Year End Performance Standard 2023 - 2024	Actual Year End Performance 2023 - 2024	Performance Standard as Initially Appropriated 2024 - 2025	Existing Performance Standard 2024 - 2025	Performance at Continuation Budget Level 2025 - 2026	Performance at Executive Budget Level 2025 - 2026	Performance Standard as Initially Appropriated 2025 - 2026
3061004	K	Percentage of enrolled children under age 21 who received a comprehensive or periodic oral evaluation within the measurement year.	P	0	46	0	0	50	0	0
3061005	K	Percentage of enrolled children ages one through under age 21 who received at least two dental topical fluoride applications within the measurement year.	P	0	16	0	0	18	0	0
3061006	K	Percentage of enrolled children who have ever received a sealant on a permanent first molar tooth.	P	0	15	0	0	17	0	0
Performance Indicator	Level	Performance Indicator Name	Unit	General Performance Information						
				Performance Indicator Values						
				Prior Year Actual FY2019 - 2020	Prior Year Actual FY2020 - 2021	Prior Year Actual FY2021 - 2022	Prior Year Actual FY2022 - 2023	Prior Year Actual FY2023 - 2024		
26113	G	Percentage increase in adults' access to preventive/ambulatory health services for Medicaid Managed Care members	P	79.1	79.1	75.91	73.65	74.25		
3061001	G	Percentage of well care visits for children in the first 15 months of age	P	Not Available	Not Available	Not Available	59.52	64.44		
3061002	G	Percentage of well care visits for children 15 to 30 months of age	P	Not Available	Not Available	Not Available	63.95	70.1		
3061003	G	Percentage of child and adolescent well care visits	P	Not Available	Not Available	Not Available	48.34	51.39		

STATE OF LOUISIANA
Operational Plan Form
Activities/Objectives - Performance Indicators

DEPARTMENT ID: 09 - LDH

AGENCY ID: 306 - Medical Vendor Payments

PROGRAM ID: 3061 - Payments to Private Providers

Form Instance	Performance Indicator	Level	Footnotes
38109	3061001	G	LaPAS PI code: 26943
38109	3061003	G	LaPAS PI code: 26945
38574	3061004	K	This is a new performance measure that aligns with current CMS reporting requirements and NCQA quality standards for dental. Utilizing encounter data, the numerator and denominator are determined based on specifications for CMS performance. Calculations for the measure is determined based on percentage. The denominator is the total number of children under age 21 as of December 31 of the measurement year. The numerator shows the unduplicated number of enrolled children who received a comprehensive or periodic dental oral evaluation service during the measurement year (CDT codes: D0120, D0150, D0145).
38574	3061005	K	This is a new performance measure that aligns with current CMS reporting requirements and NCQA quality standards for dental. Utilizing encounter data, the numerator and denominator are determined based on specifications for CMS performance. Calculations for this measure is based on percentage. The denominator is the total number of child ages 1-20 as of December 31 of the measurement year. The numerator is the unduplicated number of enrolled children who receive at least two dental fluoride applications (CDT Codes D1206 or D1208) during the measurement year. Applications must be provided on two unique dates of service.

STATE OF LOUISIANA
Operational Plan Form
Activities/Objectives - Performance Indicators

DEPARTMENT ID: 09 - LDH

AGENCY ID: 306 - Medical Vendor Payments

PROGRAM ID: 3061 - Payments to Private Providers

PM OBJECTIVE: 3061-03 - 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:

Human Resource Policies Beneficial to Women and Families Link:

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other):

Explanatory Notes:

Performance Indicator	Level	Performance Indicator Name	Unit	Performance Indicator Values						
				Year End Performance Standard 2023 - 2024	Actual Year End Performance 2023 - 2024	Performance Standard as Initially Appropriated 2024 - 2025	Existing Performance Standard 2024 - 2025	Performance at Continuation Budget Level 2025 - 2026	Performance at Executive Budget Level 2025 - 2026	Performance Standard as Initially Appropriated 2025 - 2026
26589	K	Percentage of providers compliant with the State's EVV standard	P	90	92	90	90	90	0	0
26590	K	Percentage of LTSS recipients receiving Home and Community Based Services	P	45	49	45	45	50	0	0

Form Instance	Performance Indicator	Level	Footnotes
38113	26590	K	The number institutional and non-institutional recipients receiving Home and Community Based Services have grown each quarter. Due to the consistent growth, the performance standard is being increased to align with prior year actual.

STATE OF LOUISIANA
Operational Plan Form
Activities/Objectives - Performance Indicators

DEPARTMENT ID: 09 - LDH

AGENCY ID: 306 - Medical Vendor Payments

PROGRAM ID: 3062 - Payments to Public Providers

PM OBJECTIVE: 3062-01 - Through the Payment to Public Providers activity, to track utilization of services provided to 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:

Human Resource Policies Beneficial to Women and Families Link:

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other):

Explanatory Notes:

Performance Indicator	Level	Performance Indicator Name	Unit	Performance Indicator Values						
				Year End Performance Standard 2023 - 2024	Actual Year End Performance 2023 - 2024	Performance Standard as Initially Appropriated 2024 - 2025	Existing Performance Standard 2024 - 2025	Performance at Continuation Budget Level 2025 - 2026	Performance at Executive Budget Level 2025 - 2026	Performance Standard as Initially Appropriated 2025 - 2026
24092	K	Number of Local Education Agencies participating in School Nursing Services	N	99	106	99	99	99	0	0
25580	K	Number of unduplicated recipients Receiving School Nursing Services from Local Education Agencies	N	191,000	104,263	191,000	191,000	191,000	0	0
Performance Indicator	Level	Performance Indicator Name	Unit	General Performance Information						
				Performance Indicator Values						
				Prior Year Actual FY2019 - 2020	Prior Year Actual FY2020 - 2021	Prior Year Actual FY2021 - 2022	Prior Year Actual FY2022 - 2023	Prior Year Actual FY2023 - 2024		
25582	G	Number of school nurses in participating Local Education Agencies	N	622	710	865	895	893		
Form Instance	Performance Indicator	Level	Footnotes							
38200	24092	K	Local Education Agency (LEA) participation changes periodically and an increase in program participation may indicate a charter school or group opening and a decrease in program participation may indicate a charter school or group closure.							
38200	25580	K	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.							

STATE OF LOUISIANA
Operational Plan Form
Activities/Objectives - Performance Indicators

DEPARTMENT ID: 09 - LDH

AGENCY ID: 306 - Medical Vendor Payments

PROGRAM ID: 3063 - Medicare Buy-Ins & Supplements

PM OBJECTIVE: 3063-01 - The Medicare Savings Program for Low-Income Seniors & Persons with Disabilities activity will avoid more expensive costs that would otherwise be funded by Medicaid by ensuring 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:

Human Resource Policies Beneficial to Women and Families Link:

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other):

Explanatory Notes:

Performance Indicator	Level	Performance Indicator Name	Unit	Performance Indicator Values						
				Year End Performance Standard 2023 - 2024	Actual Year End Performance 2023 - 2024	Performance Standard as Initially Appropriated 2024 - 2025	Existing Performance Standard 2024 - 2025	Performance at Continuation Budget Level 2025 - 2026	Performance at Executive Budget Level 2025 - 2026	Performance Standard as Initially Appropriated 2025 - 2026
2266	K	Total savings (cost of care less premium cost) for Medicare benefits	D	1,375,000,000	856,428,641	1,375,000,000	1,375,000,000	1,253,500,000	0	0

Performance Indicator	Level	Performance Indicator Name	Unit	General Performance Information				
				Performance Indicator Values				
				Prior Year Actual FY2019 - 2020	Prior Year Actual FY2020 - 2021	Prior Year Actual FY2021 - 2022	Prior Year Actual FY2022 - 2023	Prior Year Actual FY2023 - 2024
2261	G	Total number of recipients (Part A)	N	8,612	9,774	10,036	10,737	129,190
2262	G	Total number of recipients (Part B)	N	213,456	226,267	236,420	244,823	2,768,999
2263	G	Total number of Buy-In eligibles (Part A & B) (Modified from Strategic Plan)	N	666,204	236,041	246,456	255,560	2,898,189
2264	G	Buy-In Expenditures (Part A)	D	129,184,950	53,840,382.2	53,365,720	58,968,692	60,751,709
2265	G	Buy-In Expenditures (Part B)	D	1,098,169,716	394,148,584.5	449,516,136	489,031,837	473,332,454

Form Instance	Performance Indicator	Level	Footnotes
38203	2266	K	<p>Q4 target was adjusted to 825,000,000 from the standard 1,375,000,000 due to recipients not completing renewals timely which resulted in closures and payment terminations. This caused a reduction in total savings for FY24 yearend performance.</p> <p>Medicaid Management Information Systems (MMIS) is decreasing their performance standard to 1,253,500,00 to align closer with actual performance in prior years.</p>

STATE OF LOUISIANA
Operational Plan Form
Activities/Objectives - Performance Indicators

DEPARTMENT ID: 09 - LDH

AGENCY ID: 306 - Medical Vendor Payments

PROGRAM ID: 3063 - Medicare Buy-Ins & Supplements

PM OBJECTIVE: 3063-02 - 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:

Human Resource Policies Beneficial to Women and Families Link:

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other):

Explanatory Notes:

Performance Indicator	Level	Performance Indicator Name	Unit	Performance Indicator Values						
				Year End Performance Standard 2023 - 2024	Actual Year End Performance 2023 - 2024	Performance Standard as Initially Appropriated 2024 - 2025	Existing Performance Standard 2024 - 2025	Performance at Continuation Budget Level 2025 - 2026	Performance at Executive Budget Level 2025 - 2026	Performance Standard as Initially Appropriated 2025 - 2026
22327	K	Number of cases added in LaHIPP	N	1,000	32	1,000	1,000	500	0	0
24099	K	LaHIPP Total Savings	D	4,000,000	1,842,733	4,000,000	4,000,000	2,000,000	0	0
26593	K	Number of Medicaid enrollees with private coverage paid by LaHIPP	N	2,100	706	2,100	2,100	1,050	0	0
26594	K	Number of non-Medicaid family members with private coverage paid by LaHIPP	N	1,200	328	1,200	1,200	500	0	0

Form Instance	Performance Indicator	Level	Footnotes
38206	22327	K	LaHIPP transitioned to a new Premium Identification Evaluation Reimbursement (PIER) case management system. After reviewing actual data over one year period and post PHE Unwind the number of cases is expected to be lower than previous year (FY24). Outreach initiatives are expected to be implemented to increase cases added to LaHIPP program.
38206	24099	K	PHE Unwind has been completed and Medicaid has resumed normal processing. Due to prior year having less than anticipated cases/enrollments, savings have been decreased to align with updated anticipate number of cases added.
38206	26593	K	Return to regular operations after the COVID-19 PHE exemption ended. Adjustments made to align with anticipated number of added cases.
38206	26594	K	Return to regular operations after the COVID-19 PHE exemption ended. Adjustments made to align with anticipated number of added cases.

STATE OF LOUISIANA
Operational Plan Form
Activities/Objectives - Performance Indicators

DEPARTMENT ID: 09 - LDH

AGENCY ID: 306 - Medical Vendor Payments

PROGRAM ID: 3064 - Uncompensated Care Costs

PM OBJECTIVE: 3064-01 - 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:

Human Resource Policies Beneficial to Women and Families Link:

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other):

Explanatory Notes:

Performance Indicator	Level	Performance Indicator Name	Unit	Performance Indicator Values						
				Year End Performance Standard 2023 - 2024	Actual Year End Performance 2023 - 2024	Performance Standard as Initially Appropriated 2024 - 2025	Existing Performance Standard 2024 - 2025	Performance at Continuation Budget Level 2025 - 2026	Performance at Executive Budget Level 2025 - 2026	Performance Standard as Initially Appropriated 2025 - 2026
17040	S	Total DSH funds collected in millions	D	443.3	322.9	446.1	446.1	304.1	0	0
17041	K	Total federal funds collected in millions	D	283.3	219.5	286.3	286.3	219.8	0	0
17042	S	Total State Match in millions	D	160	103.4	159.8	159.8	84.3	0	0

Form Instance	Performance Indicator	Level	Footnotes
38209	17040	S	DSH payments made to qualifying hospitals were slightly less than anticipated.
38209	17041	K	DSH payments made to qualifying hospitals were lower than projected, which resulted in a reduction in the federal match payments.
38209	17042	S	DSH payments made to qualifying hospitals were lower than projected, which resulted in a reduction in the state match payments.



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Budget Request Overview

AGENCY SUMMARY STATEMENT

Total Agency

Means of Financing

Description	FY2023-2024 Actuals	Existing Operating Budget as of 10/01/2024	FY2025-2026 Total Request	Over/Under EOB	Percent Change
STATE GENERAL FUND (Direct)	1,942,326,555	2,512,520,489	2,530,343,499	17,823,010	0.71%
STATE GENERAL FUND BY:	—	—	—	—	—
INTERAGENCY TRANSFERS	164,071,258	166,436,529	172,242,756	5,806,227	3.49%
FEES & SELF-GENERATED	601,477,616	554,334,489	525,316,681	(29,017,808)	(5.23)%
STATUTORY DEDICATIONS	1,563,369,345	1,273,135,770	1,539,138,098	266,002,328	20.89%
FEDERAL FUNDS	13,524,004,147	12,871,874,017	14,230,695,671	1,358,821,654	10.56%
TOTAL MEANS OF FINANCING	\$17,795,248,921	\$17,378,301,294	\$18,997,736,705	\$1,619,435,411	9.32%

Fees and Self-Generated

Description	FY2023-2024 Actuals	Existing Operating Budget as of 10/01/2024	FY2025-2026 Total Request	Over/Under EOB	Percent Change
Fees & Self-generated	601,477,616	554,334,489	525,316,681	(29,017,808)	(5.23)%
Total:	\$601,477,616	\$554,334,489	\$525,316,681	\$(29,017,808)	(5.23)%

Statutory Dedications

Description	FY2023-2024 Actuals	Existing Operating Budget as of 10/01/2024	FY2025-2026 Total Request	Over/Under EOB	Percent Change
Louisiana Medical Assistance Trust Fund	1,133,709,626	871,296,163	916,219,398	44,923,235	5.16%
Medicaid Trust Fund for the Elderly	12,835,609	—	—	—	—
New Opportunities Waiver (NOW) Fund	38,731,915	43,348,066	43,348,066	—	—
Hospital Stabilization Fund	326,680,690	314,552,061	531,781,250	217,229,189	69.06%
Community Options Waiver Fund	—	2,665,632	6,515,536	3,849,904	144.43%
Louisiana Fund	23,131,708	21,782,002	21,782,002	—	—
Health Excellence Fund	28,279,797	19,491,846	19,491,846	—	—
Total:	\$1,563,369,345	\$1,273,135,770	\$1,539,138,098	\$266,002,328	20.89%

Agency Expenditures

Description	FY2023-2024 Actuals	Existing Operating Budget as of 10/01/2024	FY2025-2026 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	17,464,147,668	17,029,203,201	18,648,638,612	1,619,435,411	9.51%
Debt Service	—	—	—	—	—
Interagency Transfers	331,101,253	349,098,093	349,098,093	—	—
TOTAL OTHER CHARGES	\$17,795,248,921	\$17,378,301,294	\$18,997,736,705	\$1,619,435,411	9.32%
Acquisitions	—	—	—	—	—
Major Repairs	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	—	—	—	—	—
TOTAL EXPENDITURES	\$17,795,248,921	\$17,378,301,294	\$18,997,736,705	\$1,619,435,411	9.32%

Cost Detail

Means of Financing

Description	FY2023-2024 Actuals	Existing Operating Budget as of 10/01/2024	FY2025-2026 Total Request	Over/Under EOB
State General Fund	1,942,326,555	2,512,520,489	2,530,343,499	17,823,010
Interagency Transfers	164,071,258	166,436,529	172,242,756	5,806,227
Fees & Self-generated	601,477,616	554,334,489	525,316,681	(29,017,808)
Louisiana Medical Assistance Trust Fund	1,133,709,626	871,296,163	916,219,398	44,923,235
Medicaid Trust Fund for the Elderly	12,835,609	—	—	—
New Opportunities Waiver (NOW) Fund	38,731,915	43,348,066	43,348,066	—
Hospital Stabilization Fund	326,680,690	314,552,061	531,781,250	217,229,189
Community Options Waiver Fund	—	2,665,632	6,515,536	3,849,904
Louisiana Fund	23,131,708	21,782,002	21,782,002	—
Health Excellence Fund	28,279,797	19,491,846	19,491,846	—
Federal Funds	13,524,004,147	12,871,874,017	14,230,695,671	1,358,821,654
Total:	\$17,795,248,921	\$17,378,301,294	\$18,997,736,705	\$1,619,435,411

Other Charges

Commitment Item	Name	FY2023-2024 Actuals	Existing Operating Budget as of 10/01/2024	FY2025-2026 Total Request	Over/Under EOB
5600000	TOTAL OTHER CHARGES	—	17,029,203,201	18,648,638,612	1,619,435,411
5610003	OTHER PUBLIC ASST	1,773,005	—	—	—
5610015	LOC AID-MEDICAID PMT	13,839,467,261	—	—	—
5620034	MISC-CANCELLATIONS	(2,581,986)	—	—	—
5620037	MISC-AUDT ADJ MIX-PD	4,021,033,028	—	—	—
5620038	MISC-RECOVERIES	(3,648,251)	—	—	—
5620039	MISC-REBATE-MEDICAID	(4,328,975)	—	—	—
5620041	MISC-THIRD PARTY ADJ	(5,684,934)	—	—	—
5620042	MISC-ADT ADJ MXD-REC	(2,458,729)	—	—	—
5620043	MISC-RECOUP-STINST	(261,085,908)	—	—	—
5620045	MISC-CASULTY INS-REC	(1,322,081)	—	—	—
5620047	MISC-VOLUNTARY RELAT	(1,083,560)	—	—	—

Other Charges *(continued)*

Commitment Item	Name	FY2023-2024 Actuals	Existing Operating Budget as of 10/01/2024	FY2025-2026 Total Request	Over/Under EOB
5620048	MISC-E.D.S. FED TPL	(22,389)	—	—	—
5620050	MISC-FIS TPL CLM ADJ	(5,120,361)	—	—	—
5620069	MISC-INTERAGENCY OTH	200,000	—	—	—
5620142	MISC-OC-MAJOR REPAIR	8,000,000	—	—	—
5620146	MISC-OC-RECOUPMENTS	(118,394,932)	—	—	—
5620150	MISC-OC-MEDICAID INT	(593,520)	—	—	—
Total Other Charges:		\$17,464,147,668	\$17,029,203,201	\$18,648,638,612	\$1,619,435,411

Interagency Transfers

Commitment Item	Name	FY2023-2024 Actuals	Existing Operating Budget as of 10/01/2024	FY2025-2026 Total Request	Over/Under EOB
5950000	TOTAL IAT	—	349,098,093	349,098,093	—
5950001	IAT-COMMODITY/SERV	153,464,057	—	—	—
5950033	IAT-INTER AGY TRANS	177,637,197	—	—	—
Total Interagency Transfers:		\$331,101,253	\$349,098,093	\$349,098,093	—
Total Agency Expenditures:		\$17,795,248,921	\$17,378,301,294	\$18,997,736,705	\$1,619,435,411

PROGRAM SUMMARY STATEMENT

3061 - Payments to Private Providers

Means of Financing

Description	FY2023-2024 Actuals	Existing Operating Budget as of 10/01/2024	FY2025-2026 Total Request	Over/Under EOB	Percent Change
STATE GENERAL FUND (Direct)	1,387,550,150	1,929,701,388	1,974,408,009	44,706,621	2.32%
STATE GENERAL FUND BY:	—	—	—	—	—
INTERAGENCY TRANSFERS	154,135,981	152,684,028	158,391,223	5,707,195	3.74%
FEES & SELF-GENERATED	585,828,798	530,206,266	501,014,711	(29,191,555)	(5.51)%
STATUTORY DEDICATIONS	1,558,404,483	1,263,987,904	1,529,990,232	266,002,328	21.04%
FEDERAL FUNDS	12,749,146,317	11,960,403,347	13,366,090,714	1,405,687,367	11.75%
TOTAL MEANS OF FINANCING	\$16,435,065,729	\$15,836,982,933	\$17,529,894,889	\$1,692,911,956	10.69%

Fees and Self-Generated

Description	FY2023-2024 Actuals	Existing Operating Budget as of 10/01/2024	FY2025-2026 Total Request	Over/Under EOB	Percent Change
Fees & Self-generated	585,828,798	530,206,266	501,014,711	(29,191,555)	(5.51)%
Total:	\$585,828,798	\$530,206,266	\$501,014,711	\$(29,191,555)	(5.51)%

Statutory Dedications

Description	FY2023-2024 Actuals	Existing Operating Budget as of 10/01/2024	FY2025-2026 Total Request	Over/Under EOB	Percent Change
Louisiana Medical Assistance Trust Fund	1,128,744,764	862,148,297	907,071,532	44,923,235	5.21%
Medicaid Trust Fund for the Elderly	12,835,609	—	—	—	—
New Opportunities Waiver (NOW) Fund	38,731,915	43,348,066	43,348,066	—	—
Hospital Stabilization Fund	326,680,690	314,552,061	531,781,250	217,229,189	69.06%
Community Options Waiver Fund	—	2,665,632	6,515,536	3,849,904	144.43%
Louisiana Fund	23,131,708	21,782,002	21,782,002	—	—
Health Excellence Fund	28,279,797	19,491,846	19,491,846	—	—
Total:	\$1,558,404,483	\$1,263,987,904	\$1,529,990,232	\$266,002,328	21.04%

Program Expenditures

Description	FY2023-2024 Actuals	Existing Operating Budget as of 10/01/2024	FY2025-2026 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	16,434,623,449	15,836,982,933	17,529,894,889	1,692,911,956	10.69%
Debt Service	—	—	—	—	—
Interagency Transfers	442,279	—	—	—	—
TOTAL OTHER CHARGES	\$16,435,065,729	\$15,836,982,933	\$17,529,894,889	\$1,692,911,956	10.69%
Acquisitions	—	—	—	—	—
Major Repairs	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	—	—	—	—	—
TOTAL EXPENDITURES	\$16,435,065,729	\$15,836,982,933	\$17,529,894,889	\$1,692,911,956	10.69%

Cost Detail

Means of Financing

Description	FY2023-2024 Actuals	Existing Operating Budget as of 10/01/2024	FY2025-2026 Total Request	Over/Under EOB
State General Fund	1,387,550,150	1,929,701,388	1,974,408,009	44,706,621
Interagency Transfers	154,135,981	152,684,028	158,391,223	5,707,195
Fees & Self-generated	585,828,798	530,206,266	501,014,711	(29,191,555)
Louisiana Medical Assistance Trust Fund	1,128,744,764	862,148,297	907,071,532	44,923,235
Medicaid Trust Fund for the Elderly	12,835,609	—	—	—
New Opportunities Waiver (NOW) Fund	38,731,915	43,348,066	43,348,066	—
Hospital Stabilization Fund	326,680,690	314,552,061	531,781,250	217,229,189
Community Options Waiver Fund	—	2,665,632	6,515,536	3,849,904
Louisiana Fund	23,131,708	21,782,002	21,782,002	—
Health Excellence Fund	28,279,797	19,491,846	19,491,846	—
Federal Funds	12,749,146,317	11,960,403,347	13,366,090,714	1,405,687,367
Total:	\$16,435,065,729	\$15,836,982,933	\$17,529,894,889	\$1,692,911,956

Other Charges

Commitment Item	Name	FY2023-2024 Actuals	Existing Operating Budget as of 10/01/2024	FY2025-2026 Total Request	Over/Under EOB
5600000	TOTAL OTHER CHARGES	—	15,836,982,933	17,529,894,889	1,692,911,956
5610003	OTHER PUBLIC ASST	9,671	—	—	—
5610015	LOC AID-MEDICAID PMT	13,068,332,646	—	—	—
5620034	MISC-CANCELLATIONS	(2,577,284)	—	—	—
5620037	MISC-AUDT ADJ MIX-PD	3,734,706,186	—	—	—
5620038	MISC-RECOVERIES	(1,539,733)	—	—	—
5620039	MISC-REBATE-MEDICAID	(4,328,975)	—	—	—
5620042	MISC-ADT ADJ MXD-REC	(2,458,729)	—	—	—
5620043	MISC-RECOUP-STINST	(241,800,620)	—	—	—
5620045	MISC-CASULTY INS-REC	(1,320,184)	—	—	—
5620047	MISC-VOLUNTARY RELAT	(1,081,298)	—	—	—
5620048	MISC-E.D.S. FED TPL	(22,128)	—	—	—

Other Charges *(continued)*

Commitment Item	Name	FY2023-2024 Actuals	Existing Operating Budget as of 10/01/2024	FY2025-2026 Total Request	Over/Under EOB
5620050	MISC-FIS TPL CLM ADJ	(5,105,924)	—	—	—
5620069	MISC-INTERAGENCY OTH	200,000	—	—	—
5620146	MISC-OC-RECOUPMENTS	(107,796,658)	—	—	—
5620150	MISC-OC-MEDICAID INT	(593,520)	—	—	—
Total Other Charges:		\$16,434,623,449	\$15,836,982,933	\$17,529,894,889	\$1,692,911,956

Interagency Transfers

Commitment Item	Name	FY2023-2024 Actuals	Existing Operating Budget as of 10/01/2024	FY2025-2026 Total Request	Over/Under EOB
5950001	IAT-COMMODITY/SERV	442,279	—	—	—
Total Interagency Transfers:		\$442,279	—	—	—
Total Expenditures for Program 3061		\$16,435,065,729	\$15,836,982,933	\$17,529,894,889	\$1,692,911,956

3062 - Payments to Public Providers

Means of Financing

Description	FY2023-2024 Actuals	Existing Operating Budget as of 10/01/2024	FY2025-2026 Total Request	Over/Under EOB	Percent Change
STATE GENERAL FUND (Direct)	57,245,750	58,633,486	58,781,572	148,086	0.25%
STATE GENERAL FUND BY:	—	—	—	—	—
INTERAGENCY TRANSFERS	—	—	—	—	—
FEES & SELF-GENERATED	—	—	—	—	—
STATUTORY DEDICATIONS	4,964,862	9,147,866	9,147,866	—	—
FEDERAL FUNDS	184,362,631	194,213,532	194,065,446	(148,086)	(0.08)%
TOTAL MEANS OF FINANCING	\$246,573,243	\$261,994,884	\$261,994,884	—	—

Statutory Dedications

Description	FY2023-2024 Actuals	Existing Operating Budget as of 10/01/2024	FY2025-2026 Total Request	Over/Under EOB	Percent Change
Louisiana Medical Assistance Trust Fund	4,964,862	9,147,866	9,147,866	—	—
Total:	\$4,964,862	\$9,147,866	\$9,147,866	—	—

Program Expenditures

Description	FY2023-2024 Actuals	Existing Operating Budget as of 10/01/2024	FY2025-2026 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	42,128,240	50,442,600	50,442,600	—	—
Debt Service	—	—	—	—	—
Interagency Transfers	204,445,002	211,552,284	211,552,284	—	—
TOTAL OTHER CHARGES	\$246,573,243	\$261,994,884	\$261,994,884	—	—
Acquisitions	—	—	—	—	—
Major Repairs	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	—	—	—	—	—
TOTAL EXPENDITURES	\$246,573,243	\$261,994,884	\$261,994,884	—	—

Cost Detail

Means of Financing

Description	FY2023-2024 Actuals	Existing Operating Budget as of 10/01/2024	FY2025-2026 Total Request	Over/Under EOB
State General Fund	57,245,750	58,633,486	58,781,572	148,086
Louisiana Medical Assistance Trust Fund	4,964,862	9,147,866	9,147,866	—
Federal Funds	184,362,631	194,213,532	194,065,446	(148,086)
Total:	\$246,573,243	\$261,994,884	\$261,994,884	—

Other Charges

Commitment Item	Name	FY2023-2024 Actuals	Existing Operating Budget as of 10/01/2024	FY2025-2026 Total Request	Over/Under EOB
5600000	TOTAL OTHER CHARGES	—	50,442,600	50,442,600	—
5610015	LOC AID-MEDICAID PMT	44,751,546	—	—	—
5620034	MISC-CANCELLATIONS	(4,703)	—	—	—
5620038	MISC-RECOVERIES	(2,722)	—	—	—
5620045	MISC-CASULTY INS-REC	(1,896)	—	—	—
5620047	MISC-VOLUNTARY RELAT	(2,262)	—	—	—
5620048	MISC-E.D.S. FED TPL	(261)	—	—	—
5620050	MISC-FIS TPL CLM ADJ	(14,017)	—	—	—
5620142	MISC-OC-MAJOR REPAIR	8,000,000	—	—	—
5620146	MISC-OC-RECOUPMENTS	(10,597,445)	—	—	—
Total Other Charges:		\$42,128,240	\$50,442,600	\$50,442,600	—

Interagency Transfers

Commitment Item	Name	FY2023-2024 Actuals	Existing Operating Budget as of 10/01/2024	FY2025-2026 Total Request	Over/Under EOB
5950000	TOTAL IAT	—	211,552,284	211,552,284	—
5950001	IAT-COMMODITY/SERV	153,018,786	—	—	—

Interagency Transfers *(continued)*

Commitment Item	Name	FY2023-2024 Actuals	Existing Operating Budget as of 10/01/2024	FY2025-2026 Total Request	Over/Under EOB
5950033	IAT-INTER AGY TRANS	51,426,216	—	—	—
Total Interagency Transfers:		\$204,445,002	\$211,552,284	\$211,552,284	—
Total Expenditures for Program 3062		\$246,573,243	\$261,994,884	\$261,994,884	—

3063 - Medicare Buy-Ins & Supplements

Means of Financing

Description	FY2023-2024 Actuals	Existing Operating Budget as of 10/01/2024	FY2025-2026 Total Request	Over/Under EOB	Percent Change
STATE GENERAL FUND (Direct)	375,627,270	402,292,462	437,464,800	35,172,338	8.74%
STATE GENERAL FUND BY:	—	—	—	—	—
INTERAGENCY TRANSFERS	—	—	—	—	—
FEES & SELF-GENERATED	—	—	—	—	—
STATUTORY DEDICATIONS	—	—	—	—	—
FEDERAL FUNDS	343,155,973	430,947,504	464,239,700	33,292,196	7.73%
TOTAL MEANS OF FINANCING	\$718,783,243	\$833,239,966	\$901,704,500	\$68,464,534	8.22%

Program Expenditures

Description	FY2023-2024 Actuals	Existing Operating Budget as of 10/01/2024	FY2025-2026 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	718,780,252	833,239,966	901,704,500	68,464,534	8.22%
Debt Service	—	—	—	—	—
Interagency Transfers	2,991	—	—	—	—
TOTAL OTHER CHARGES	\$718,783,243	\$833,239,966	\$901,704,500	\$68,464,534	8.22%
Acquisitions	—	—	—	—	—
Major Repairs	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	—	—	—	—	—
TOTAL EXPENDITURES	\$718,783,243	\$833,239,966	\$901,704,500	\$68,464,534	8.22%

Cost Detail

Means of Financing

Description	FY2023-2024 Actuals	Existing Operating Budget as of 10/01/2024	FY2025-2026 Total Request	Over/Under EOB
State General Fund	375,627,270	402,292,462	437,464,800	35,172,338
Federal Funds	343,155,973	430,947,504	464,239,700	33,292,196
Total:	\$718,783,243	\$833,239,966	\$901,704,500	\$68,464,534

Other Charges

Commitment Item	Name	FY2023-2024 Actuals	Existing Operating Budget as of 10/01/2024	FY2025-2026 Total Request	Over/Under EOB
5600000	TOTAL OTHER CHARGES	—	833,239,966	901,704,500	68,464,534
5610003	OTHER PUBLIC ASST	1,763,335	—	—	—
5610015	LOC AID-MEDICAID PMT	724,808,896	—	—	—
5620038	MISC-RECOVERIES	(2,105,796)	—	—	—
5620041	MISC-THIRD PARTY ADJ	(5,684,934)	—	—	—
5620050	MISC-FIS TPL CLM ADJ	(420)	—	—	—
5620146	MISC-OC-RECOUPMENTS	(830)	—	—	—
Total Other Charges:		\$718,780,252	\$833,239,966	\$901,704,500	\$68,464,534

Interagency Transfers

Commitment Item	Name	FY2023-2024 Actuals	Existing Operating Budget as of 10/01/2024	FY2025-2026 Total Request	Over/Under EOB
5950001	IAT-COMMODITY/SERV	2,991	—	—	—
Total Interagency Transfers:		\$2,991	—	—	—
Total Expenditures for Program 3063		\$718,783,243	\$833,239,966	\$901,704,500	\$68,464,534

3064 - Uncompensated Care Costs

Means of Financing

Description	FY2023-2024 Actuals	Existing Operating Budget as of 10/01/2024	FY2025-2026 Total Request	Over/Under EOB	Percent Change
STATE GENERAL FUND (Direct)	121,903,385	121,893,153	59,689,118	(62,204,035)	(51.03)%
STATE GENERAL FUND BY:	—	—	—	—	—
INTERAGENCY TRANSFERS	9,935,277	13,752,501	13,851,533	99,032	0.72%
FEES & SELF-GENERATED	15,648,818	24,128,223	24,301,970	173,747	0.72%
STATUTORY DEDICATIONS	—	—	—	—	—
FEDERAL FUNDS	247,339,226	286,309,634	206,299,811	(80,009,823)	(27.95)%
TOTAL MEANS OF FINANCING	\$394,826,707	\$446,083,511	\$304,142,432	\$(141,941,079)	(31.82)%

Fees and Self-Generated

Description	FY2023-2024 Actuals	Existing Operating Budget as of 10/01/2024	FY2025-2026 Total Request	Over/Under EOB	Percent Change
Fees & Self-generated	15,648,818	24,128,223	24,301,970	173,747	0.72%
Total:	\$15,648,818	\$24,128,223	\$24,301,970	\$173,747	0.72%

Program Expenditures

Description	FY2023-2024 Actuals	Existing Operating Budget as of 10/01/2024	FY2025-2026 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	268,615,727	308,537,702	166,596,623	(141,941,079)	(46.00)%
Debt Service	—	—	—	—	—
Interagency Transfers	126,210,981	137,545,809	137,545,809	—	—
TOTAL OTHER CHARGES	\$394,826,707	\$446,083,511	\$304,142,432	\$(141,941,079)	(31.82)%
Acquisitions	—	—	—	—	—
Major Repairs	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	—	—	—	—	—
TOTAL EXPENDITURES	\$394,826,707	\$446,083,511	\$304,142,432	\$(141,941,079)	(31.82)%

Cost Detail

Means of Financing

Description	FY2023-2024 Actuals	Existing Operating Budget as of 10/01/2024	FY2025-2026 Total Request	Over/Under EOB
State General Fund	121,903,385	121,893,153	59,689,118	(62,204,035)
Interagency Transfers	9,935,277	13,752,501	13,851,533	99,032
Fees & Self-generated	15,648,818	24,128,223	24,301,970	173,747
Federal Funds	247,339,226	286,309,634	206,299,811	(80,009,823)
Total:	\$394,826,706	\$446,083,511	\$304,142,432	\$(141,941,079)

Other Charges

Commitment Item	Name	FY2023-2024 Actuals	Existing Operating Budget as of 10/01/2024	FY2025-2026 Total Request	Over/Under EOB
5600000	TOTAL OTHER CHARGES	—	308,537,702	166,596,623	(141,941,079)
5610015	LOC AID-MEDICAID PMT	1,574,173	—	—	—
5620037	MISC-AUDT ADJ MIX-PD	286,326,842	—	—	—
5620043	MISC-RECOUP-STINST	(19,285,289)	—	—	—
Total Other Charges:		\$268,615,727	\$308,537,702	\$166,596,623	\$(141,941,079)

Interagency Transfers

Commitment Item	Name	FY2023-2024 Actuals	Existing Operating Budget as of 10/01/2024	FY2025-2026 Total Request	Over/Under EOB
5950000	TOTAL IAT	—	137,545,809	137,545,809	—
5950033	IAT-INTER AGY TRANS	126,210,981	—	—	—
Total Interagency Transfers:		\$126,210,981	\$137,545,809	\$137,545,809	—
Total Expenditures for Program 3064		\$394,826,707	\$446,083,511	\$304,142,432	\$(141,941,079)
Total Agency Expenditures:		\$17,795,248,921	\$17,378,301,294	\$18,997,736,705	\$1,619,435,411

SOURCE OF FUNDING SUMMARY

Agency Overview

Interagency Transfers

Description	FY2023-2024 Actuals	Existing Operating Budget as of 10/01/2024	FY2025-2026 Total Request	Over/Under EOB	Form ID
LSU HOSPITALS	170,609,395	158,510,557	164,316,784	5,806,227	34575
DCFS	—	6,820,908	6,820,908	—	34576
OGB	738,360	1,105,064	1,105,064	—	34584
POOLING	(7,276,497)	—	—	—	34838
Total Interagency Transfers	\$164,071,258	\$166,436,529	\$172,242,756	\$5,806,227	

Fees & Self-generated

Description	FY2023-2024 Actuals	Existing Operating Budget as of 10/01/2024	FY2025-2026 Total Request	Over/Under EOB	Form ID
LINCC	595,140,647	545,080,667	516,062,859	(29,017,808)	34583
MEDICAL MATCH	6,336,969	9,253,822	9,253,822	—	34642
Total Fees & Self-generated	\$601,477,616	\$554,334,489	\$525,316,681	\$(29,017,808)	

Statutory Dedications

Description	FY2023-2024 Actuals	Existing Operating Budget as of 10/01/2024	FY2025-2026 Total Request	Over/Under EOB	Form ID
Z13-LOUISIANA FUND	23,131,708	21,782,002	21,782,002	—	34170
H30-NOW FUND	38,731,915	43,348,066	43,348,066	—	34571
H08-LA MATF	991,662,136	871,296,163	916,219,398	44,923,235	34577
H08PY- LA MATF-EXCESS	142,047,490	—	—	—	34578
Z17-HEALTH EXCELLENCE	28,279,797	19,491,846	19,491,846	—	34579
H19-MED TRUST ELDERLY	12,835,609	—	—	—	34580
H37-HOSPITAL STAB	326,680,690	314,552,061	531,781,250	217,229,189	34582
H47-COMM OPT WAVR	—	2,665,632	6,515,536	3,849,904	38022
Total Statutory Dedications	\$1,563,369,345	\$1,273,135,770	\$1,539,138,098	\$266,002,328	

Federal Funds

Description	FY2023-2024 Actuals	Existing Operating Budget as of 10/01/2024	FY2025-2026 Total Request	Over/Under EOB	Form ID
US HHS	13,546,047,848	12,871,874,017	14,230,695,671	1,358,821,654	34573
Total Federal Funds	\$13,546,047,848	\$12,871,874,017	\$14,230,695,671	\$1,358,821,654	
Total Sources of Funding:	\$15,874,966,067	\$14,865,780,805	\$16,467,393,206	\$1,601,612,401	

SOURCE OF FUNDING DETAIL

Interagency Transfers

Form 34575 — 306 - LSU Hospitals/ LDH IAT

Expenditures	Existing Operating Budget as of 10/01/2024			FY2025-2026 Total Request			FY2026-2027 Projected		
	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	158,510,557	—	—	164,316,784	—	—	164,316,784	—	—
Debt Service	—	—	—	—	—	—	—	—	—
Interagency Transfers	—	—	—	—	—	—	—	—	—
TOTAL OTHER CHARGES	\$158,510,557	—	—	\$164,316,784	—	—	\$164,316,784	—	—
Acquisitions	—	—	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	—	—	—	—	—	—	—	—	—
TOTAL EXPENDITURES	\$158,510,557	—	—	\$164,316,784	—	—	\$164,316,784	—	—

Form 34575 — 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 4 of the 2024 Regular Session based the Medicaid Vendor Payments budget on a blended FMAP (Federal Medical Assistance Percentage) of 67.96%. The preliminary/estimated match rates for FY26 are as follows: the Title XIX blended rate is 32.11% state and 67.89% federal; the LaCHIP blended rate is 22.48% state and 77.52% federal, and the Title XIX Federal Fiscal Year 2026 rate is 32.17% state and 67.83% 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, 2025, and therefore will not be available for carry forward into fiscal year 2025-2026.
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 34576 — 306 -DCFS for CSOC

Expenditures	Existing Operating Budget as of 10/01/2024			FY2025-2026 Total Request			FY2026-2027 Projected		
	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 34576 — 306 -DCFS for CSOC

Question	Narrative Response
State the purpose, source and legal citation.	These funds represent revenue that will be received from the Department of Children and Family Services (DCFS) for Coordinated System of Care (CSOC) 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 4 of the 2024 Regular Session based the Medicaid Vendor Payments budget on a blended FMAP (Federal Medical Assistance Percentage) of 67.96%. The preliminary/estimated match rates for FY26 are as follows: the Title XIX blended rate is 32.11% state and 67.89% federal; the LaCHIP blended rate is 22.48% state and 77.52% federal, and the Title XIX Federal Fiscal Year 2026 rate is 32.17% state and 67.83% 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, 2025, and therefore will not be available for carry forward into fiscal year 2025-2026.
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 34584 — 306 - CHIP Phase V Affordable Plan Premiums

Expenditures	Existing Operating Budget as of 10/01/2024			FY2025-2026 Total Request			FY2026-2027 Projected		
	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 34584 — 306 - CHIP Phase V Affordable Plan Premiums

Question	Narrative Response
State the purpose, source and legal citation.	The Louisiana Children's Health Insurance Program (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 4 of the 2024 Regular Session based the Medicaid Vendor Payments budget on a blended FMAP (Federal Medical Assistance Percentage) of 67.96%. The preliminary/estimated match rates for FY26 are as follows: the Title XIX blended rate is 32.11% state and 67.89% federal; the LaCHIP blended rate is 22.48% state and 77.52% federal, and the Title XIX Federal Fiscal Year 2026 rate is 32.17% state and 67.83% 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, 2025, and therefore will not be available for carry forward into fiscal year 2025-2026.
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 34838 — 306 - Pooling

Expenditures	Existing Operating Budget as of 10/01/2024			FY2025-2026 Total Request			FY2026-2027 Projected		
	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 34838 — 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 34170 — 306 - Louisiana Fund - Tobacco Settlement

Expenditures	Existing Operating Budget as of 10/01/2024			FY2025-2026 Total Request			FY2026-2027 Projected		
	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	21,782,002	—	—	21,782,002	—	—	21,782,002	—	—
Debt Service	—	—	—	—	—	—	—	—	—
Interagency Transfers	—	—	—	—	—	—	—	—	—
TOTAL OTHER CHARGES	\$21,782,002	—	—	\$21,782,002	—	—	\$21,782,002	—	—
Acquisitions	—	—	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	—	—	—	—	—	—	—	—	—
TOTAL EXPENDITURES	\$21,782,002	—	—	\$21,782,002	—	—	\$21,782,002	—	—

Form 34170 — 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 4 of the 2024 Regular Session based the Medicaid Vendor Payments budget on a blended FMAP (Federal Medical Assistance Percentage) of 67.96%. The preliminary/estimated match rates for FY26 are as follows: the Title XIX blended rate is 32.11% state and 67.89% federal; the LaCHIP blended rate is 22.48% state and 77.52% federal, and the Title XIX Federal Fiscal Year 2026 rate is 32.17% state and 67.83% 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, 2025, and therefore will not be available for carry forward into fiscal year 2025-2026.
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 34571 — 306 - New Opportunities Waiver (NOW) Fund

Expenditures	Existing Operating Budget as of 10/01/2024			FY2025-2026 Total Request			FY2026-2027 Projected		
	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	43,348,066	—	—	43,348,066	—	—	43,348,066	—	—
Debt Service	—	—	—	—	—	—	—	—	—
Interagency Transfers	—	—	—	—	—	—	—	—	—
TOTAL OTHER CHARGES	\$43,348,066	—	—	\$43,348,066	—	—	\$43,348,066	—	—
Acquisitions	—	—	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	—	—	—	—	—	—	—	—	—
TOTAL EXPENDITURES	\$43,348,066	—	—	\$43,348,066	—	—	\$43,348,066	—	—

Form 34571 — 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 4 of the 2024 Regular Session based the Medicaid Vendor Payments budget on a blended FMAP (Federal Medical Assistance Percentage) of 67.96%. The preliminary/estimated match rates for FY26 are as follows: the Title XIX blended rate is 32.11% state and 67.89% federal; the LaCHIP blended rate is 22.48% state and 77.52% federal, and the Title XIX Federal Fiscal Year 2026 rate is 32.17% state and 67.83% 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, 2025, and therefore will not be available for carry forward into fiscal year 2025-2026.
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 34577 — 306 - LA Medical Assistance Trust Fund - Prem Tax & Prov Fee

Expenditures	Existing Operating Budget as of 10/01/2024			FY2025-2026 Total Request			FY2026-2027 Projected		
	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	862,148,297	—	—	907,071,532	—	—	906,923,666	—	—
Debt Service	—	—	—	—	—	—	—	—	—
Interagency Transfers	9,147,866	—	—	9,147,866	—	—	9,147,866	—	—
TOTAL OTHER CHARGES	\$871,296,163	—	—	\$916,219,398	—	—	\$916,071,532	—	—
Acquisitions	—	—	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	—	—	—	—	—	—	—	—	—
TOTAL EXPENDITURES	\$871,296,163	—	—	\$916,219,398	—	—	\$916,071,532	—	—

Form 34577 — 306 - LA Medical Assistance Trust Fund - Prem Tax & Prov Fee

Question	Narrative Response
<p>State the purpose, source and legal citation.</p>	<p>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.</p>
<p>Agency discretion or Federal requirement?</p>	<p>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 Louisiana Department of Health, 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. This BR form is only for the separate accounts for the provider fees.</p>
<p>Describe any budgetary peculiarities.</p>	<p>Premium Tax - These funds are used to match Federal Funds. Act 4 of the 2024 Regular Session based the Medicaid Vendor Payments budget on a blended FMAP (Federal Medical Assistance Percentage) of 67.96%. The preliminary/estimated match rates for FY26 are as follows: the Title XIX blended rate is 32.11% state and 67.89% federal; the LaCHIP blended rate is 22.48% state and 77.52% federal, and the Title XIX Federal Fiscal Year 2026 rate is 32.17% state and 67.83% 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 4 of the 2024 Regular Session based the Medicaid Vendor Payments budget on a blended FMAP (Federal Medical Assistance Percentage) of 67.96%. The preliminary/estimated match rates for FY26 are as follows: the Title XIX blended rate is 32.11% state and 67.89% federal; the LaCHIP blended rate is 22.48% state and 77.52% federal, and the Title XIX Federal Fiscal Year 2026 rate is 32.17% state and 67.83% federal.</p>
<p>Is the Total Request amount for multiple years?</p>	<p>All funds budgeted in the Existing Operating Budget are anticipated to be expended as of June 30, 2025, and therefore will not be available for carry forward into fiscal year 2025-2026.</p>
<p>Additional information or comments.</p>	<p>N/A</p>
<p>Provide the amount of any indirect costs.</p>	<p>N/A</p>

Form 34577 — 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 34578 — 306 - LA Medical Assistance Trust Fund - Carryforward

Expenditures	Existing Operating Budget as of 10/01/2024			FY2025-2026 Total Request			FY2026-2027 Projected		
	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 34578 — 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, Intermediate Care Facilities for Individuals with Mental Retardation facilities (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 4 of the 2024 Regular Session based the Medicaid Vendor Payments budget on a blended FMAP (Federal Medical Assistance Percentage) of 67.96%. The preliminary/estimated match rates for FY26 are as follows: the Title XIX blended rate is 32.11% state and 67.89% federal; the LaCHIP blended rate is 22.48% state and 77.52% federal, and the Title XIX Federal Fiscal Year 2026 rate is 32.17% state and 67.83% 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, 2025, and therefore will not be available for carry forward into fiscal year 2025-2026.
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 34579 — 306 - Health Excellence Fund

Expenditures	Existing Operating Budget as of 10/01/2024			FY2025-2026 Total Request			FY2026-2027 Projected		
	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	19,491,846	—	—	19,491,846	—	—	19,491,846	—	—
Debt Service	—	—	—	—	—	—	—	—	—
Interagency Transfers	—	—	—	—	—	—	—	—	—
TOTAL OTHER CHARGES	\$19,491,846	—	—	\$19,491,846	—	—	\$19,491,846	—	—
Acquisitions	—	—	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	—	—	—	—	—	—	—	—	—
TOTAL EXPENDITURES	\$19,491,846	—	—	\$19,491,846	—	—	\$19,491,846	—	—

Form 34579 — 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 4 of the 2024 Regular Session based the Medicaid Vendor Payments budget on a blended FMAP (Federal Medical Assistance Percentage) of 67.96%. The preliminary/estimated match rates for FY26 are as follows: the Title XIX blended rate is 32.11% state and 67.89% federal; the LaCHIP blended rate is 22.48% state and 77.52% federal, and the Title XIX Federal Fiscal Year 2026 rate is 32.17% state and 67.83% 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, 2025, and therefore will not be available for carry forward into fiscal year 2025-2026.
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 34580 — 306 - Medicaid Trust Fund for the Elderly

Expenditures	Existing Operating Budget as of 10/01/2024			FY2025-2026 Total Request			FY2026-2027 Projected		
	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 34580 — 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 4 of the 2024 Regular Session based the Medicaid Vendor Payments budget on a blended FMAP (Federal Medical Assistance Percentage) of 67.96%. The preliminary/estimated match rates for FY26 are as follows: the Title XIX blended rate is 32.11% state and 67.89% federal; the LaCHIP blended rate is 22.48% state and 77.52% federal, and the Title XIX Federal Fiscal Year 2026 rate is 32.17% state and 67.83% 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, 2025, and therefore will not be available for carry forward into fiscal year 2025-2026.
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 34582 — 306 - Hospital Stabilization Fund

Expenditures	Existing Operating Budget as of 10/01/2024			FY2025-2026 Total Request			FY2026-2027 Projected		
	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	—	—	531,781,250	—	—	531,781,251	—	—
Debt Service	—	—	—	—	—	—	—	—	—
Interagency Transfers	—	—	—	—	—	—	—	—	—
TOTAL OTHER CHARGES	\$314,552,061	—	—	\$531,781,250	—	—	\$531,781,251	—	—
Acquisitions	—	—	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	—	—	—	—	—	—	—	—	—
TOTAL EXPENDITURES	\$314,552,061	—	—	\$531,781,250	—	—	\$531,781,251	—	—

Form 34582 — 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 25 Hospital Stabilization Fund appropriation is based on HCR 3 of the 2024 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 offsetting the cost of hospital related costs of expansion. The premium assessment revenue will be deposited into the Hospital Stabilization Fund statutory dedication.
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 4 of the 2024 Regular Session based the Medicaid Vendor Payments budget on a blended FMAP (Federal Medical Assistance Percentage) of 67.96%. The preliminary/estimated match rates for FY26 are as follows: the Title XIX blended rate is 32.11% state and 67.89% federal; the LaCHIP blended rate is 22.48% state and 77.52% federal, and the Title XIX Federal Fiscal Year 2026 rate is 32.17% state and 67.83% 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, 2025, and therefore will not be available for carry forward into fiscal year 2025-2026.
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 38022 — 306 - Community Options Waiver

Expenditures	Existing Operating Budget as of 10/01/2024			FY2025-2026 Total Request			FY2026-2027 Projected		
	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	2,665,632	—	—	6,515,536	—	—	6,515,536	—	—
Debt Service	—	—	—	—	—	—	—	—	—
Interagency Transfers	—	—	—	—	—	—	—	—	—
TOTAL OTHER CHARGES	\$2,665,632	—	—	\$6,515,536	—	—	\$6,515,536	—	—
Acquisitions	—	—	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	—	—	—	—	—	—	—	—	—
TOTAL EXPENDITURES	\$2,665,632	—	—	\$6,515,536	—	—	\$6,515,536	—	—

Form 38022 — 306 - Community Options Waiver

Question	Narrative Response
State the purpose, source and legal citation.	Act 4 of the 2024 Regular Legislative Session created, as a special fund, the Community Options Waiver Fund. This fund shall be used solely to fund Medicaid services provided under the Community Choices Waiver or the Adult Day Health Care Waiver or any other Medicaid home and community-based service for persons with adult-onset disabilities as promulgated by rule by the Louisiana Department of Health. The department shall consult with stakeholders representing persons with adult-onset disabilities to develop a plan for appropriations out of the fund.
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 4 of the 2024 Regular Session based the Medicaid Vendor Payments budget on a blended FMAP (Federal Medical Assistance Percentage) of 67.96%. The preliminary/estimated match rates for FY26 are as follows: the Title XIX blended rate is 32.11% state and 67.89% federal; the LaCHIP blended rate is 22.48% state and 77.52% federal, and the Title XIX Federal Fiscal Year 2026 rate is 32.17% state and 67.83% 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, 2025, and therefore will not be available for carry forward into fiscal year 2025-2026.
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

Federal Funds

Form 34573 — 306 - Medical Assistance Grant

Expenditures	Existing Operating Budget as of 10/01/2024			FY2025-2026 Total Request			FY2026-2027 Projected		
	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	12,635,319,023	—	—	13,994,288,763	—	—	13,994,288,763	—	—
Debt Service	—	—	—	—	—	—	—	—	—
Interagency Transfers	236,554,994	—	—	236,406,908	—	—	236,406,908	—	—
TOTAL OTHER CHARGES	\$12,871,874,017	—	—	\$14,230,695,671	—	—	\$14,230,695,671	—	—
Acquisitions	—	—	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	—	—	—	—	—	—	—	—	—
TOTAL EXPENDITURES	\$12,871,874,017	—	—	\$14,230,695,671	—	—	\$14,230,695,671	—	—

Form 34573 — 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 4 of the 2024 Regular Session based the Medicaid Vendor Payments budget on a blended FMAP (Federal Medical Assistance Percentage) of 67.96%. The preliminary/estimated match rates for FY26 are as follows: the Title XIX blended rate is 32.11% state and 67.89% federal; the LaCHIP blended rate is 22.48% state and 77.52% federal, and the Title XIX Federal Fiscal Year 2026 rate is 32.17% state and 67.83% 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, 2025, and therefore will not be available for carry forward into fiscal year 2025-2026.
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 34583 — 306 - Low Income & Needy Care Collaboration SGR

Expenditures	Existing Operating Budget as of 10/01/2024			FY2025-2026 Total Request			FY2026-2027 Projected		
	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	545,080,667	—	—	516,062,859	—	—	516,062,859	—	—
Debt Service	—	—	—	—	—	—	—	—	—
Interagency Transfers	—	—	—	—	—	—	—	—	—
TOTAL OTHER CHARGES	\$545,080,667	—	—	\$516,062,859	—	—	\$516,062,859	—	—
Acquisitions	—	—	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	—	—	—	—	—	—	—	—	—
TOTAL EXPENDITURES	\$545,080,667	—	—	\$516,062,859	—	—	\$516,062,859	—	—

Form 34583 — 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 4 of the 2024 Regular Session based the Medicaid Vendor Payments budget on a blended FMAP (Federal Medical Assistance Percentage) of 67.96%. The preliminary/estimated match rates for FY26 are as follows: the Title XIX blended rate is 32.11% state and 67.89% federal; the LaCHIP blended rate is 22.48% state and 77.52% federal, and the Title XIX Federal Fiscal Year 2026 rate is 32.17% state and 67.83% 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, 2025, and therefore will not be available for carry forward into fiscal year 2025-2026.
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 34642 — 306 - Medical Match

Expenditures	Existing Operating Budget as of 10/01/2024			FY2025-2026 Total Request			FY2026-2027 Projected		
	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	9,253,822	—	—	9,253,822	—	—	9,253,822	—	—
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 34642 — 306 - Medical Match

Question	Narrative Response
State the purpose, source and legal citation.	Act 4 (HB-1) of the 2024 Regular Session states: 'Revenues from refunds and recoveries in the Medical Vendor Program are authorized to be expended in Fiscal Year 2024-2025.' 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, 2025, and therefore will not be available for carry forward into fiscal year 2025-2026.
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	Used as a Cash Match	Total Means of Financing By Expenditure	Total State General Fund	Interagency Transfers Form ID 34575 LSU HOSPITALS	Interagency Transfers Form ID 34576 DCFS	Interagency Transfers Form ID 34584 OGB
Salaries	—	—	—	—	—	—
Other Compensation	—	—	—	—	—	—
Related Benefits	—	—	—	—	—	—
TOTAL PERSONAL SERVICES	—	—	—	—	—	—
Travel	—	—	—	—	—	—
Operating Services	—	—	—	—	—	—
Supplies	—	—	—	—	—	—
TOTAL OPERATING EXPENSES	—	—	—	—	—	—
PROFESSIONAL SERVICES	—	—	—	—	—	—
Other Charges	—	17,029,203,201	2,409,125,256	158,510,557	6,820,908	1,105,064
Debt Service	—	—	—	—	—	—
Interagency Transfers	—	349,098,093	103,395,233	—	—	—
TOTAL OTHER CHARGES	—	\$17,378,301,294	\$2,512,520,489	\$158,510,557	\$6,820,908	\$1,105,064
Acquisitions	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	—	—	—	—	—	—
TOTAL EXPENDITURES	—	\$17,378,301,294	\$2,512,520,489	\$158,510,557	\$6,820,908	\$1,105,064

Expenditures by Means of Financing

Existing Operating Budget

Expenditures	Fees & Self-generated Form ID 34583 LINCC	Fees & Self-generated Form ID 34642 MEDICAL MATCH	Statutory Dedications Form ID 34170 Z13-LOUISIANA FUND	Statutory Dedications Form ID 34571 H30-NOW FUND	Statutory Dedications Form ID 34577 H08-LA MATF	Statutory Dedications Form ID 34579 Z17-HEALTH EXCELLENCE
Salaries	—	—	—	—	—	—
Other Compensation	—	—	—	—	—	—
Related Benefits	—	—	—	—	—	—
TOTAL PERSONAL SERVICES	—	—	—	—	—	—
Travel	—	—	—	—	—	—
Operating Services	—	—	—	—	—	—
Supplies	—	—	—	—	—	—
TOTAL OPERATING EXPENSES	—	—	—	—	—	—
PROFESSIONAL SERVICES	—	—	—	—	—	—
Other Charges	545,080,667	9,253,822	21,782,002	43,348,066	862,148,297	19,491,846
Debt Service	—	—	—	—	—	—
Interagency Transfers	—	—	—	—	9,147,866	—
TOTAL OTHER CHARGES	\$545,080,667	\$9,253,822	\$21,782,002	\$43,348,066	\$871,296,163	\$19,491,846
Acquisitions	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	—	—	—	—	—	—
TOTAL EXPENDITURES	\$545,080,667	\$9,253,822	\$21,782,002	\$43,348,066	\$871,296,163	\$19,491,846

Expenditures by Means of Financing

Existing Operating Budget

Expenditures	Statutory Dedications Form ID 34582 H37-HOSPITAL STAB	Statutory Dedications Form ID 38022 H47-COMM OPT WAVR	Federal Funds Form ID 34573 US HHS
Salaries	—	—	—
Other Compensation	—	—	—
Related Benefits	—	—	—
TOTAL PERSONAL SERVICES	—	—	—
Travel	—	—	—
Operating Services	—	—	—
Supplies	—	—	—
TOTAL OPERATING EXPENSES	—	—	—
PROFESSIONAL SERVICES	—	—	—
Other Charges	314,552,061	2,665,632	12,635,319,023
Debt Service	—	—	—
Interagency Transfers	—	—	236,554,994
TOTAL OTHER CHARGES	\$314,552,061	\$2,665,632	\$12,871,874,017
Acquisitions	—	—	—
Major Repairs	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	—	—	—
TOTAL EXPENDITURES	\$314,552,061	\$2,665,632	\$12,871,874,017

Total Request

Expenditures	Used as a Cash Match	Total Means of Financing By Expenditure	Total State General Fund	Interagency Transfers Form ID 34575 LSU HOSPITALS	Interagency Transfers Form ID 34576 DCFS	Interagency Transfers Form ID 34584 OGB
Salaries	—	—	—	—	—	—
Other Compensation	—	—	—	—	—	—
Related Benefits	—	—	—	—	—	—
TOTAL PERSONAL SERVICES	—	—	—	—	—	—
Travel	—	—	—	—	—	—
Operating Services	—	—	—	—	—	—
Supplies	—	—	—	—	—	—
TOTAL OPERATING EXPENSES	—	—	—	—	—	—
PROFESSIONAL SERVICES	—	—	—	—	—	—
Other Charges	—	18,648,638,612	2,426,800,180	164,316,784	6,820,908	1,105,064
Debt Service	—	—	—	—	—	—
Interagency Transfers	—	349,098,093	103,543,319	—	—	—
TOTAL OTHER CHARGES	—	\$18,997,736,705	\$2,530,343,499	\$164,316,784	\$6,820,908	\$1,105,064
Acquisitions	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	—	—	—	—	—	—
TOTAL EXPENDITURES	—	\$18,997,736,705	\$2,530,343,499	\$164,316,784	\$6,820,908	\$1,105,064

Expenditures by Means of Financing

Total Request

Expenditures	Statutory Dedications Form ID 34170 Z13-LOUISIANA FUND	Statutory Dedications Form ID 34571 H30-NOW FUND	Statutory Dedications Form ID 34577 H08-LA MATF	Statutory Dedications Form ID 34579 Z17-HEALTH EXCELLENCE	Statutory Dedications Form ID 34582 H37-HOSPITAL STAB	Statutory Dedications Form ID 38022 H47-COMM OPT WAVR
Salaries	—	—	—	—	—	—
Other Compensation	—	—	—	—	—	—
Related Benefits	—	—	—	—	—	—
TOTAL PERSONAL SERVICES	—	—	—	—	—	—
Travel	—	—	—	—	—	—
Operating Services	—	—	—	—	—	—
Supplies	—	—	—	—	—	—
TOTAL OPERATING EXPENSES	—	—	—	—	—	—
PROFESSIONAL SERVICES	—	—	—	—	—	—
Other Charges	21,782,002	43,348,066	907,071,532	19,491,846	531,781,250	6,515,536
Debt Service	—	—	—	—	—	—
Interagency Transfers	—	—	9,147,866	—	—	—
TOTAL OTHER CHARGES	\$21,782,002	\$43,348,066	\$916,219,398	\$19,491,846	\$531,781,250	\$6,515,536
Acquisitions	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	—	—	—	—	—	—
TOTAL EXPENDITURES	\$21,782,002	\$43,348,066	\$916,219,398	\$19,491,846	\$531,781,250	\$6,515,536

Expenditures by Means of Financing

Total Request

Expenditures	Federal Funds Form ID 34573 US HHS	Fees & Self-generated Form ID 34583 LINCC	Fees & Self-generated Form ID 34642 MEDICAL MATCH
Salaries	—	—	—
Other Compensation	—	—	—
Related Benefits	—	—	—
TOTAL PERSONAL SERVICES	—	—	—
Travel	—	—	—
Operating Services	—	—	—
Supplies	—	—	—
TOTAL OPERATING EXPENSES	—	—	—
PROFESSIONAL SERVICES	—	—	—
Other Charges	13,994,288,763	516,062,859	9,253,822
Debt Service	—	—	—
Interagency Transfers	236,406,908	—	—
TOTAL OTHER CHARGES	\$14,230,695,671	\$516,062,859	\$9,253,822
Acquisitions	—	—	—
Major Repairs	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	—	—	—
TOTAL EXPENDITURES	\$14,230,695,671	\$516,062,859	\$9,253,822

REVENUE COLLECTIONS/INCOME

Interagency Transfers

003 - Interagency Transfers

Source	Commitment Item	Commitment Item Name	FY2023-2024 Actuals	FY-2025 Estimate	FY2025-2026 Projected	Over/Under Current Year Estimate
SOURCE						
LSU HOSPITALS	4710059	MR-FROM STATE AGENCY	170,598,120	158,510,557	164,316,784	5,806,227
OGB	4710059	MR-FROM STATE AGENCY	749,635	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	(7,276,497)	—	—	—
Total Collections/Income			\$164,071,258	\$166,436,529	\$172,242,756	\$5,806,227
TYPE						
Expenditures Source of Funding Form (BR-6)			164,071,258	166,436,529	172,242,756	5,806,227
Total Expenditures, Transfers and Carry Forwards to Next FY			\$164,071,258	\$166,436,529	\$172,242,756	\$5,806,227
Difference in Total Collections/Income and Total Expenditures, Transfers and Carry Forwards to Next FY			—	—	—	—

Fees & Self-generated

002 - Fees & Self-generated

Source	Commitment Item	Commitment Item Name	FY2023-2024 Actuals	FY-2025 Estimate	FY2025-2026 Projected	Over/Under Current Year Estimate
SOURCE						
MEDICAL MATCH	4710029	MR-PRIVATE SOURCES	4,412,000	9,253,822	9,253,822	—
UPL IGT	4710029	MR-PRIVATE SOURCES	577,959,634	480,181,275	450,989,720	(29,191,555)
LINCC	4710029	MR-PRIVATE SOURCES	3,457,164	40,771,169	40,771,169	—
UPL IGT	4710029	MR-PRIVATE SOURCES	15,648,818	24,128,223	24,301,970	173,747
Total Collections/Income			\$601,477,616	\$554,334,489	\$525,316,681	\$(29,017,808)
TYPE						
Expenditures Source of Funding Form (BR-6)			601,477,616	554,334,489	525,316,681	(29,017,808)
Total Expenditures, Transfers and Carry Forwards to Next FY			\$601,477,616	\$554,334,489	\$525,316,681	\$(29,017,808)
Difference in Total Collections/Income and Total Expenditures, Transfers and Carry Forwards to Next FY			—	—	—	—

Statutory Dedications

H08 - Louisiana Medical Assistance Trust Fund

Source	Commitment Item	Commitment Item Name	FY2023-2024 Actuals	FY-2025 Estimate	FY2025-2026 Projected	Over/Under Current Year Estimate
SOURCE						
H08-LA MATF	4830014	INTRAFUND TRANSFER	991,662,136	871,296,163	916,219,398	44,923,235
H08PY- LA MATF-EXCESS	4830014	INTRAFUND TRANSFER	142,047,490	—	—	—
Total Collections/Income			\$1,133,709,626	\$871,296,163	\$916,219,398	\$44,923,235
TYPE						
Expenditures Source of Funding Form (BR-6)			1,133,709,626	871,296,163	916,219,398	44,923,235
Total Expenditures, Transfers and Carry Forwards to Next FY			\$1,133,709,626	\$871,296,163	\$916,219,398	\$44,923,235
Difference in Total Collections/Income and Total Expenditures, Transfers and Carry Forwards to Next FY			—	—	—	—

H19 - Medicaid Trust Fund for the Elderly

Source	Commitment Item	Commitment Item Name	FY2023-2024 Actuals	FY-2025 Estimate	FY2025-2026 Projected	Over/Under Current Year Estimate
SOURCE						
H19-MED TRUST ELDERLY	4830014	INTRAFUND TRANSFER	12,835,609	—	—	—
Total Collections/Income			\$12,835,609	—	—	—
TYPE						
Expenditures Source of Funding Form (BR-6)			12,835,609	—	—	—
Total Expenditures, Transfers and Carry Forwards to Next FY			\$12,835,609	—	—	—
Difference in Total Collections/Income and Total Expenditures, Transfers and Carry Forwards to Next FY			—	—	—	—

H30 - New Opportunities Waiver (NOW) Fund

Source	Commitment Item	Commitment Item Name	FY2023-2024 Actuals	FY-2025 Estimate	FY2025-2026 Projected	Over/Under Current Year Estimate
SOURCE						
H30-NOW FUND	4830014	INTRAFUND TRANSFER	38,731,915	43,348,066	43,348,066	—
Total Collections/Income			\$38,731,915	\$43,348,066	\$43,348,066	—
TYPE						
Expenditures Source of Funding Form (BR-6)			38,731,915	43,348,066	43,348,066	—
Total Expenditures, Transfers and Carry Forwards to Next FY			\$38,731,915	\$43,348,066	\$43,348,066	—
Difference in Total Collections/Income and Total Expenditures, Transfers and Carry Forwards to Next FY			—	—	—	—

H37 - Hospital Stabilization Fund

Source	Commitment Item	Commitment Item Name	FY2023-2024 Actuals	FY-2025 Estimate	FY2025-2026 Projected	Over/Under Current Year Estimate
SOURCE						
H37-HOSPITAL STAB	4830014	INTRAFUND TRANSFER	326,680,690	314,552,061	531,781,250	217,229,189
Total Collections/Income			\$326,680,690	\$314,552,061	\$531,781,250	\$217,229,189
TYPE						
Expenditures Source of Funding Form (BR-6)			326,680,690	314,552,061	531,781,250	217,229,189
Total Expenditures, Transfers and Carry Forwards to Next FY			\$326,680,690	\$314,552,061	\$531,781,250	\$217,229,189
Difference in Total Collections/Income and Total Expenditures, Transfers and Carry Forwards to Next FY			—	—	—	—

H47 - Community Options Waiver Fund

Source	Commitment Item	Commitment Item Name	FY2023-2024 Actuals	FY-2025 Estimate	FY2025-2026 Projected	Over/Under Current Year Estimate
SOURCE						
H47-COMM OPT WAVR	4830014	INTRAFUND TRANSFER	—	2,665,632	6,515,536	3,849,904
Total Collections/Income			—	\$2,665,632	\$6,515,536	\$3,849,904
TYPE						
Expenditures Source of Funding Form (BR-6)			—	2,665,632	6,515,536	3,849,904
Total Expenditures, Transfers and Carry Forwards to Next FY			—	\$2,665,632	\$6,515,536	\$3,849,904
Difference in Total Collections/Income and Total Expenditures, Transfers and Carry Forwards to Next FY			—	—	—	—

Z13 - Louisiana Fund

Source	Commitment Item	Commitment Item Name	FY2023-2024 Actuals	FY-2025 Estimate	FY2025-2026 Projected	Over/Under Current Year Estimate
SOURCE						
Z13-LOUISIANA FUND	4830014	INTRAFUND TRANSFER	23,131,708	21,782,002	21,782,002	—
Total Collections/Income			\$23,131,708	\$21,782,002	\$21,782,002	—
TYPE						
Expenditures Source of Funding Form (BR-6)			23,131,708	21,782,002	21,782,002	—
Total Expenditures, Transfers and Carry Forwards to Next FY			\$23,131,708	\$21,782,002	\$21,782,002	—
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	FY2023-2024 Actuals	FY-2025 Estimate	FY2025-2026 Projected	Over/Under Current Year Estimate
SOURCE						
Z17-HEALTH EXCELLENCE	4830014	INTRAFUND TRANSFER	28,279,797	19,491,846	19,491,846	—
Total Collections/Income			\$28,279,797	\$19,491,846	\$19,491,846	—
TYPE						
Expenditures Source of Funding Form (BR-6)			28,279,797	19,491,846	19,491,846	—
Total Expenditures, Transfers and Carry Forwards to Next FY			\$28,279,797	\$19,491,846	\$19,491,846	—
Difference in Total Collections/Income and Total Expenditures, Transfers and Carry Forwards to Next FY			—	—	—	—

Federal Funds

006 - Federal Funds

Source	Commitment Item	Commitment Item Name	FY2023-2024 Actuals	FY-2025 Estimate	FY2025-2026 Projected	Over/Under Current Year Estimate
SOURCE						
MEDICAID	4060035	FR-OTHER	13,546,047,848	12,871,874,017	14,230,695,671	1,358,821,654
Total Collections/Income			\$13,546,047,848	\$12,871,874,017	\$14,230,695,671	\$1,358,821,654
TYPE						
Expenditures Source of Funding Form (BR-6)			13,546,047,848	12,871,874,017	14,230,695,671	1,358,821,654
Total Expenditures, Transfers and Carry Forwards to Next FY			\$13,546,047,848	\$12,871,874,017	\$14,230,695,671	\$1,358,821,654
Difference in Total Collections/Income and Total Expenditures, Transfers and Carry Forwards to Next FY			—	—	—	—

Justification of Differences

Form 35478 — 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 35479 — 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 35481 — 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 35482 — 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 35483 — 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 35484 — 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 35485 — 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 35486 — 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 35487 — 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 35488 — 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 35489 — 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 35490 — 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 35491 — 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 35492 — 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 35494 — 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 35576 — 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

Form 37358 — 306 - Community Options Waiver

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

FY2025-2026 Request	Means of Financing	Description
6,515,536	Community Options Waiver Fund	
13,366,090,714	Federal Funds	
501,014,711	Fees & Self-generated	
19,491,846	Health Excellence Fund	
531,781,250	Hospital Stabilization Fund	
158,391,223	Interagency Transfers	
21,782,002	Louisiana Fund	
907,071,532	Louisiana Medical Assistance Trust Fund	
43,348,066	New Opportunities Waiver (NOW) Fund	
1,974,408,009	State General Fund	
\$17,529,894,889		Payments to Private Providers
\$17,529,894,889	Total Other Charges	

3062 - Payments to Public Providers

Other Charges

FY2025-2026 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

FY2025-2026 Request	Means of Financing	Receiving Agency	Description
57,707	Federal Funds		
3,676	Louisiana Medical Assistance Trust Fund		
23,617	State General Fund		
\$85,000		ACADIANA AREA HUMAN SRVC DIST	Acadiana Area Human Services District
852,859	Federal Funds		
54,322	Louisiana Medical Assistance Trust Fund		
349,056	State General Fund		
\$1,256,237		LSUHCS - LSU HEALTH CARE SRVS	LSU HCSD
10,108,167	Federal Funds		
643,826	Louisiana Medical Assistance Trust Fund		
4,137,044	State General Fund		
\$14,889,037		LSU BOARD OF SUPERVISORS	LSU Physicians
108,367,952	Federal Funds		
6,902,351	Louisiana Medical Assistance Trust Fund		
44,352,545	State General Fund		
\$159,622,848		OFF FOR CITIZENS DEV DISABLIT.	Office for Citizens with Developmental Disabilities
2,336,013	Federal Funds		
148,789	Louisiana Medical Assistance Trust Fund		
956,077	State General Fund		
\$3,440,879		OFFICE OF BEHAVIORAL HEALTH	Office of Behavioral Health (free-standing psychiatric units)

Interagency Transfers *(continued)*

FY2025-2026 Request	Means of Financing	Receiving Agency	Description
1,331,349	Federal Funds		
84,799	Louisiana Medical Assistance Trust Fund		
544,891	State General Fund		
\$1,961,039		OFFICE OF PUBLIC HEALTH	Office of Public Health
3,231,514	Federal Funds		
205,827	Louisiana Medical Assistance Trust Fund		
1,322,585	State General Fund		
\$4,759,926		SPECIAL SCHOOL DISTRICTS	Special School District #1
97,523	Federal Funds		
6,212	Louisiana Medical Assistance Trust Fund		
39,914	State General Fund		
\$143,649		THRIVE ACADEMY	Thrive Academy
17,239,762	Federal Funds		
1,098,064	Louisiana Medical Assistance Trust Fund		
7,055,843	State General Fund		
\$25,393,669		DHH-VILLA FELICIANA MEDCOMPLX	Villa Feliciano Medical Complex
\$211,552,284	Total Interagency Transfers		

3063 - Medicare Buy-Ins & Supplements

Other Charges

FY2025-2026 Request	Means of Financing	Description
242,253,023	State General Fund	
\$242,253,023		Clawback Payments
3,906,870	Federal Funds	
1,248,223	State General Fund	
\$5,155,093		LaHIPP
460,332,830	Federal Funds	
193,963,554	State General Fund	
\$654,296,384		Medicare Premiums & Supplements
\$901,704,500	Total Other Charges	

3064 - Uncompensated Care Costs

Other Charges

FY2025-2026 Request	Means of Financing	Description
21,234,287	Federal Funds	
24,301,970	Fees & Self-generated	
13,851,533	Interagency Transfers	
14,796,909	State General Fund	
\$74,184,699		DSH - Hospital Directed Payment Model
1,356,600	Federal Funds	
643,400	State General Fund	
\$2,000,000		Louisiana Behavioral
80,446,133	Federal Funds	
\$80,446,133		Low Income and Needy Care Collaboration
678	Federal Funds	
322	State General Fund	
\$1,000		Non-rural Hospitals - High Medicaid DSH Pool
9,964,791	Federal Funds	
\$9,964,791		OBH Public/Private CEA Agreements
\$166,596,623	Total Other Charges	

Interagency Transfers

FY2025-2026 Request	Means of Financing	Receiving Agency	Description
10,072,799	Federal Funds		
4,777,266	State General Fund		
\$14,850,065		LSUHCS - LSU HEALTH CARE SRVS	LSU - Health Care Services District (Lallie Kemp)
83,224,523	Federal Funds		
39,471,221	State General Fund		
\$122,695,744		OFFICE OF BEHAVIORAL HEALTH	Office of Behavioral Health (free-standing psychiatric units)
\$137,545,809	Total Interagency Transfers		



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Continuation Budget Adjustments

AGENCY SUMMARY STATEMENT

Total Agency

Means of Financing

Description	Existing Operating Budget as of 10/01/2024	Non-Recurring	Inflation	Compulsory	Workload	Other	FY2025-2026 Requested Continuation Level
STATE GENERAL FUND (Direct)	2,512,520,489	—	—	42,061,821	13,159,498	(5,741,859)	2,561,999,949
STATE GENERAL FUND BY:	—	—	—	—	—	—	—
INTERAGENCY TRANSFERS	166,436,529	—	—	—	5,579,011	227,216	172,242,756
FEES & SELF-GENERATED	554,334,489	—	—	—	(30,081,094)	1,063,286	525,316,681
STATUTORY DEDICATIONS	1,273,135,770	—	—	6,515,536	228,400,755	31,086,037	1,539,138,098
FEDERAL FUNDS	12,871,874,017	—	—	102,706,844	1,134,197,866	121,916,944	14,230,695,671
TOTAL MEANS OF FINANCING	\$17,378,301,294	—	—	\$151,284,201	\$1,351,256,036	\$148,551,624	\$19,029,393,155

Fees and Self-Generated

Description	Existing Operating Budget as of 10/01/2024	Non-Recurring	Inflation	Compulsory	Workload	Other	FY2025-2026 Requested Continuation Level
Fees & Self-generated	554,334,489	—	—	—	(30,081,094)	1,063,286	525,316,681
Total:	\$554,334,489	—	—	—	\$(30,081,094)	\$1,063,286	\$525,316,681

Statutory Dedications

Description	Existing Operating Budget as of 10/01/2024	Non-Recurring	Inflation	Compulsory	Workload	Other	FY2025-2026 Requested Continuation Level
Community Options Waiver Fund	2,665,632	—	—	6,515,536	—	(2,665,632)	6,515,536
Health Excellence Fund	19,491,846	—	—	—	—	—	19,491,846
Hospital Stabilization Fund	314,552,061	—	—	—	188,763,400	28,465,789	531,781,250
Louisiana Fund	21,782,002	—	—	—	—	—	21,782,002
Louisiana Medical Assistance Trust Fund	871,296,163	—	—	—	39,637,355	5,285,880	916,219,398
New Opportunities Waiver (NOW) Fund	43,348,066	—	—	—	—	—	43,348,066
Total:	\$1,273,135,770	—	—	\$6,515,536	\$228,400,755	\$31,086,037	\$1,539,138,098

Expenditures and Positions

Description	Existing Operating Budget as of 10/01/2024	Non-Recurring	Inflation	Compulsory	Workload	Other	FY2025-2026 Requested Continuation Level
Salaries	—	—	—	—	—	—	—
Other Compensation	—	—	—	—	—	—	—
Related Benefits	—	—	—	—	—	—	—
TOTAL PERSONAL SERVICES	—	—	—	—	—	—	—
Travel	—	—	—	—	—	—	—
Operating Services	—	—	—	—	—	—	—
Supplies	—	—	—	—	—	—	—
TOTAL OPERATING EXPENSES	—	—	—	—	—	—	—
PROFESSIONAL SERVICES	—	—	—	—	—	—	—
Other Charges	17,029,203,201	—	—	151,284,201	1,351,256,036	148,551,624	18,680,295,062
Debt Service	—	—	—	—	—	—	—
Interagency Transfers	349,098,093	—	—	—	—	—	349,098,093
TOTAL OTHER CHARGES	\$17,378,301,294	—	—	\$151,284,201	\$1,351,256,036	\$148,551,624	\$19,029,393,155
Acquisitions	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	—	—	—	—	—	—	—
TOTAL EXPENDITURES	\$17,378,301,294	—	—	\$151,284,201	\$1,351,256,036	\$148,551,624	\$19,029,393,155
Classified	—	—	—	—	—	—	—
Unclassified	—	—	—	—	—	—	—
TOTAL AUTHORIZED T.O. POSITIONS	—	—	—	—	—	—	—
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	—	—	—	—	—	—	—
TOTAL NON-T.O. FTE POSITIONS	—	—	—	—	—	—	—

CONTINUATION BUDGET ADJUSTMENTS - SUMMARIZED

Form 41085 — 3061 -Non-Recur Fees and Self Gen Revenue from Physician FMP

Means of Financing

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

Positions

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

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	—

Continuation Budget Adjustments - Summarized

Total Agency
Request Type: COMPULSORY

Form 38424 — 3061 - Nursing Home Rebase

Means of Financing

	Amount
STATE GENERAL FUND (Direct)	33,835,682
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	71,538,600
TOTAL MEANS OF FINANCING	\$105,374,282

Expenditures

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	—
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	—
PROFESSIONAL SERVICES	—
Other Charges	105,374,282
Debt Service	—
Interagency Transfers	—
TOTAL OTHER CHARGES	\$105,374,282
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	—
TOTAL EXPENDITURES	\$105,374,282

Positions

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

Continuation Budget Adjustments - Summarized

Total Agency
Request Type: COMPULSORY

**Form 38425 — 3061 - Federally Qualified Health Clinics Annualization
Means of Financing**

	Amount
STATE GENERAL FUND (Direct)	45,817
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	96,871
TOTAL MEANS OF FINANCING	\$142,688

Expenditures

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	—
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	—
PROFESSIONAL SERVICES	—
Other Charges	142,688
Debt Service	—
Interagency Transfers	—
TOTAL OTHER CHARGES	\$142,688
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	—
TOTAL EXPENDITURES	\$142,688

Positions

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

Continuation Budget Adjustments - Summarized

Total Agency
Request Type: COMPULSORY

Form 38429 — 3061 - Rural Health Clinics Annualization
Means of Financing

	Amount
STATE GENERAL FUND (Direct)	774,835
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	1,638,229
TOTAL MEANS OF FINANCING	\$2,413,064

Expenditures

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	—
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	—
PROFESSIONAL SERVICES	—
Other Charges	2,413,064
Debt Service	—
Interagency Transfers	—
TOTAL OTHER CHARGES	\$2,413,064
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	—
TOTAL EXPENDITURES	\$2,413,064

Positions

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

**Form 38430 — 3061 - Rural Hospital Inflation Inpatient Per Diems
Means of Financing**

	Amount
STATE GENERAL FUND (Direct)	545,693
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	1,153,755
TOTAL MEANS OF FINANCING	\$1,699,448

Expenditures

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	—
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	—
PROFESSIONAL SERVICES	—
Other Charges	1,699,448
Debt Service	—
Interagency Transfers	—
TOTAL OTHER CHARGES	\$1,699,448
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	—
TOTAL EXPENDITURES	\$1,699,448

Positions

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

Form 38532 — 3061 - Annualization of 750 Community Choices Waiver Slots

Means of Financing

	Amount
STATE GENERAL FUND (Direct)	—
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	6,515,536
FEDERAL FUNDS	13,775,764
TOTAL MEANS OF FINANCING	\$20,291,300

Positions

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

Expenditures

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	—
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	—
PROFESSIONAL SERVICES	—
Other Charges	20,291,300
Debt Service	—
Interagency Transfers	—
TOTAL OTHER CHARGES	\$20,291,300
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	—
TOTAL EXPENDITURES	\$20,291,300

Continuation Budget Adjustments - Summarized

Total Agency
Request Type: COMPULSORY

Form 38586 — 3061 - PACE Expansion - Alexandria

Means of Financing

	Amount
STATE GENERAL FUND (Direct)	396,976
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	839,324
TOTAL MEANS OF FINANCING	\$1,236,300

Expenditures

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	—
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	—
PROFESSIONAL SERVICES	—
Other Charges	1,236,300
Debt Service	—
Interagency Transfers	—
TOTAL OTHER CHARGES	\$1,236,300
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	—
TOTAL EXPENDITURES	\$1,236,300

Positions

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

Form 39972 — 3061 - Nursing Home Staffing Requirements

Means of Financing

	Amount
STATE GENERAL FUND (Direct)	6,462,818
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	13,664,301
TOTAL MEANS OF FINANCING	\$20,127,119

Expenditures

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	—
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	—
PROFESSIONAL SERVICES	—
Other Charges	20,127,119
Debt Service	—
Interagency Transfers	—
TOTAL OTHER CHARGES	\$20,127,119
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	—
TOTAL EXPENDITURES	\$20,127,119

Positions

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

Form 38426 — 3063 - Clawback

Means of Financing

	Amount
STATE GENERAL FUND (Direct)	17,574,623
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	—
TOTAL MEANS OF FINANCING	\$17,574,623

Expenditures

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	—
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	—
PROFESSIONAL SERVICES	—
Other Charges	17,574,623
Debt Service	—
Interagency Transfers	—
TOTAL OTHER CHARGES	\$17,574,623
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	—
TOTAL EXPENDITURES	\$17,574,623

Positions

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

Form 38428 — 3061 - Healthy LA Managed Care Organization (MCO) Adjustment

Means of Financing

	Amount
STATE GENERAL FUND (Direct)	(21,414,659)
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	6,435,970
FEES & SELF-GENERATED	(38,423,677)
STATUTORY DEDICATIONS	228,054,756
FEDERAL FUNDS	1,042,844,458
TOTAL MEANS OF FINANCING	\$1,217,496,848

Positions

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

Expenditures

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	—
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	—
PROFESSIONAL SERVICES	—
Other Charges	1,217,496,848
Debt Service	—
Interagency Transfers	—
TOTAL OTHER CHARGES	\$1,217,496,848
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	—
TOTAL EXPENDITURES	\$1,217,496,848

Form 38432 — 3061 - Dental Managed Care Adjustment

Means of Financing

	Amount
STATE GENERAL FUND (Direct)	(125,957)
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	116,421
FEDERAL FUNDS	4,131,573
TOTAL MEANS OF FINANCING	\$4,122,037

Expenditures

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	—
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	—
PROFESSIONAL SERVICES	—
Other Charges	4,122,037
Debt Service	—
Interagency Transfers	—
TOTAL OTHER CHARGES	\$4,122,037
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	—
TOTAL EXPENDITURES	\$4,122,037

Positions

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

Form 38433 — 3061 - Managed Care Incentive Payment (MCIP) Adjustment

Means of Financing

	Amount
STATE GENERAL FUND (Direct)	—
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	(856,959)
FEES & SELF-GENERATED	8,342,583
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	45,338,689
TOTAL MEANS OF FINANCING	\$52,824,313

Positions

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

Expenditures

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	—
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	—
PROFESSIONAL SERVICES	—
Other Charges	52,824,313
Debt Service	—
Interagency Transfers	—
TOTAL OTHER CHARGES	\$52,824,313
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	—
TOTAL EXPENDITURES	\$52,824,313

Continuation Budget Adjustments - Summarized

Total Agency
Request Type: WORKLOAD

**Form 38434 — 3063 - Medicare Part A & B
Means of Financing**

	Amount
STATE GENERAL FUND (Direct)	16,340,750
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	34,549,161
TOTAL MEANS OF FINANCING	\$50,889,911

Expenditures

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	—
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	—
PROFESSIONAL SERVICES	—
Other Charges	50,889,911
Debt Service	—
Interagency Transfers	—
TOTAL OTHER CHARGES	\$50,889,911
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	—
TOTAL EXPENDITURES	\$50,889,911

Positions

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

**Form 38576 — 3061 - 1115 Reentry Waiver Service Cost
Means of Financing**

	Amount
STATE GENERAL FUND (Direct)	784,741
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	229,578
FEDERAL FUNDS	7,333,985
TOTAL MEANS OF FINANCING	\$8,348,304

Expenditures

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	—
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	—
PROFESSIONAL SERVICES	—
Other Charges	8,348,304
Debt Service	—
Interagency Transfers	—
TOTAL OTHER CHARGES	\$8,348,304
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	—
TOTAL EXPENDITURES	\$8,348,304

Positions

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

Form 38667 — 3061 - HLA MCO/Hospital & LPR Directed Payments Adjustment

Means of Financing

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

Positions

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

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	—

Form 39740 — 3061 - HLA MCO/Physician Directed Payments Adjustment

Means of Financing

	Amount
STATE GENERAL FUND (Direct)	—
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
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	—

Positions

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

Form 38435 — 3061 - MOF Swap due to FMAP Change - Privates

Means of Financing

	Amount
STATE GENERAL FUND (Direct)	(3,534,969)
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	128,184
FEES & SELF-GENERATED	889,539
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	2,517,246
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	—

Positions

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

Form 38436 — 3062 - MOF Swap due to FMAP Change - Publics

Means of Financing

	Amount
STATE GENERAL FUND (Direct)	148,086
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	(148,086)
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	—

Positions

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

Form 38437 — 3063 - MOF Swap due to FMAP Change - Buy Ins & Suppements

Means of Financing

	Amount
STATE GENERAL FUND (Direct)	1,256,965
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	(1,256,965)
TOTAL MEANS OF FINANCING	—

Positions

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

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	—

Form 38438 — 3064 - MOF Swap due to FMAP Change -Uncompensated Care Costs

Means of Financing

	Amount
STATE GENERAL FUND (Direct)	4,930,980
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	99,032
FEES & SELF-GENERATED	173,747
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	(5,203,759)
TOTAL MEANS OF FINANCING	—

Positions

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

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	—

Continuation Budget Adjustments - Summarized

Total Agency
Request Type: OTHER

Form 38560 — 3061 - Justice Involved Youth
Means of Financing

	Amount
STATE GENERAL FUND (Direct)	128,084
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	11,997
FEDERAL FUNDS	296,172
TOTAL MEANS OF FINANCING	\$436,253

Expenditures

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	—
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	—
PROFESSIONAL SERVICES	—
Other Charges	436,253
Debt Service	—
Interagency Transfers	—
TOTAL OTHER CHARGES	\$436,253
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	—
TOTAL EXPENDITURES	\$436,253

Positions

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

Form 38817 — 3064 - University Medical Center Funding Shift

Means of Financing

	Amount
STATE GENERAL FUND (Direct)	(49,021,271)
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	(103,360,671)
TOTAL MEANS OF FINANCING	\$(152,381,942)

Expenditures

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	—
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	—
PROFESSIONAL SERVICES	—
Other Charges	(152,381,942)
Debt Service	—
Interagency Transfers	—
TOTAL OTHER CHARGES	\$(152,381,942)
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	—
TOTAL EXPENDITURES	\$(152,381,942)

Positions

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

Form 38820 — 3061 - Replacement Revenue MATF Provider Fee & COW Fund

Means of Financing

	Amount
STATE GENERAL FUND (Direct)	4,497,749
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	(4,497,749)
FEDERAL FUNDS	—
TOTAL MEANS OF FINANCING	—

Positions

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

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	—

Continuation Budget Adjustments - Summarized

Total Agency
Request Type: OTHER

**Form 39755 — 3061 - Senate Bill 190 - Reimbursement Rate Increase
Means of Financing**

	Amount
STATE GENERAL FUND (Direct)	22,309,811
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	35,571,789
FEDERAL FUNDS	200,518,400
TOTAL MEANS OF FINANCING	\$258,400,000

Expenditures

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	—
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	—
PROFESSIONAL SERVICES	—
Other Charges	258,400,000
Debt Service	—
Interagency Transfers	—
TOTAL OTHER CHARGES	\$258,400,000
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	—
TOTAL EXPENDITURES	\$258,400,000

Positions

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

**Form 41094 — 3064 - Uncompensated Care Costs - Budget Alignment
Means of Financing**

	Amount
STATE GENERAL FUND (Direct)	13,542,706
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	28,554,607
TOTAL MEANS OF FINANCING	\$42,097,313

Expenditures

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	—
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	—
PROFESSIONAL SERVICES	—
Other Charges	42,097,313
Debt Service	—
Interagency Transfers	—
TOTAL OTHER CHARGES	\$42,097,313
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	—
TOTAL EXPENDITURES	\$42,097,313

Positions

	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

Description	Existing Operating Budget as of 10/01/2024	Non-Recurring	Inflation	Compulsory	Workload	Other	FY2025-2026 Requested Continuation Level
STATE GENERAL FUND (Direct)	1,929,701,388	—	—	42,061,821	(20,755,875)	23,400,675	1,974,408,009
STATE GENERAL FUND BY:	—	—	—	—	—	—	—
INTERAGENCY TRANSFERS	152,684,028	—	—	—	5,579,011	128,184	158,391,223
FEES & SELF-GENERATED	530,206,266	—	—	—	(30,081,094)	889,539	501,014,711
STATUTORY DEDICATIONS	1,263,987,904	—	—	6,515,536	228,400,755	31,086,037	1,529,990,232
FEDERAL FUNDS	11,960,403,347	—	—	102,706,844	1,099,648,705	203,331,818	13,366,090,714
TOTAL MEANS OF FINANCING	\$15,836,982,933	—	—	\$151,284,201	\$1,282,791,502	\$258,836,253	\$17,529,894,889

Fees and Self-Generated

Description	Existing Operating Budget as of 10/01/2024	Non-Recurring	Inflation	Compulsory	Workload	Other	FY2025-2026 Requested Continuation Level
Fees & Self-generated	530,206,266	—	—	—	(30,081,094)	889,539	501,014,711
Total:	\$530,206,266	—	—	—	\$(30,081,094)	\$889,539	\$501,014,711

Statutory Dedications

Description	Existing Operating Budget as of 10/01/2024	Non-Recurring	Inflation	Compulsory	Workload	Other	FY2025-2026 Requested Continuation Level
Community Options Waiver Fund	2,665,632	—	—	6,515,536	—	(2,665,632)	6,515,536
Health Excellence Fund	19,491,846	—	—	—	—	—	19,491,846
Hospital Stabilization Fund	314,552,061	—	—	—	188,763,400	28,465,789	531,781,250
Louisiana Fund	21,782,002	—	—	—	—	—	21,782,002
Louisiana Medical Assistance Trust Fund	862,148,297	—	—	—	39,637,355	5,285,880	907,071,532
New Opportunities Waiver (NOW) Fund	43,348,066	—	—	—	—	—	43,348,066
Total:	\$1,263,987,904	—	—	\$6,515,536	\$228,400,755	\$31,086,037	\$1,529,990,232

Expenditures and Positions

Description	Existing Operating Budget as of 10/01/2024	Non-Recurring	Inflation	Compulsory	Workload	Other	FY2025-2026 Requested Continuation Level
Salaries	—	—	—	—	—	—	—
Other Compensation	—	—	—	—	—	—	—
Related Benefits	—	—	—	—	—	—	—
TOTAL PERSONAL SERVICES	—	—	—	—	—	—	—
Travel	—	—	—	—	—	—	—
Operating Services	—	—	—	—	—	—	—
Supplies	—	—	—	—	—	—	—
TOTAL OPERATING EXPENSES	—	—	—	—	—	—	—
PROFESSIONAL SERVICES	—	—	—	—	—	—	—
Other Charges	15,836,982,933	—	—	151,284,201	1,282,791,502	258,836,253	17,529,894,889
Debt Service	—	—	—	—	—	—	—
Interagency Transfers	—	—	—	—	—	—	—
TOTAL OTHER CHARGES	\$15,836,982,933	—	—	\$151,284,201	\$1,282,791,502	\$258,836,253	\$17,529,894,889
Acquisitions	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	—	—	—	—	—	—	—
TOTAL EXPENDITURES	\$15,836,982,933	—	—	\$151,284,201	\$1,282,791,502	\$258,836,253	\$17,529,894,889
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	Existing Operating Budget as of 10/01/2024	Non-Recurring	Inflation	Compulsory	Workload	Other	FY2025-2026 Requested Continuation Level
STATE GENERAL FUND (Direct)	58,633,486	—	—	—	—	148,086	58,781,572
STATE GENERAL FUND BY:	—	—	—	—	—	—	—
INTERAGENCY TRANSFERS	—	—	—	—	—	—	—
FEES & SELF-GENERATED	—	—	—	—	—	—	—
STATUTORY DEDICATIONS	9,147,866	—	—	—	—	—	9,147,866
FEDERAL FUNDS	194,213,532	—	—	—	—	(148,086)	194,065,446
TOTAL MEANS OF FINANCING	\$261,994,884	—	—	—	—	—	\$261,994,884

Statutory Dedications

Description	Existing Operating Budget as of 10/01/2024	Non-Recurring	Inflation	Compulsory	Workload	Other	FY2025-2026 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 10/01/2024	Non-Recurring	Inflation	Compulsory	Workload	Other	FY2025-2026 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	211,552,284	—	—	—	—	—	211,552,284
TOTAL OTHER CHARGES	\$261,994,884	—	—	—	—	—	\$261,994,884
Acquisitions	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	—	—	—	—	—	—	—
TOTAL EXPENDITURES	\$261,994,884	—	—	—	—	—	\$261,994,884
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	Existing Operating Budget as of 10/01/2024	Non-Recurring	Inflation	Compulsory	Workload	Other	FY2025-2026 Requested Continuation Level
STATE GENERAL FUND (Direct)	402,292,462	—	—	—	33,915,373	1,256,965	437,464,800
STATE GENERAL FUND BY:	—	—	—	—	—	—	—
INTERAGENCY TRANSFERS	—	—	—	—	—	—	—
FEES & SELF-GENERATED	—	—	—	—	—	—	—
STATUTORY DEDICATIONS	—	—	—	—	—	—	—
FEDERAL FUNDS	430,947,504	—	—	—	34,549,161	(1,256,965)	464,239,700
TOTAL MEANS OF FINANCING	\$833,239,966	—	—	—	\$68,464,534	—	\$901,704,500

Expenditures and Positions

Description	Existing Operating Budget as of 10/01/2024	Non-Recurring	Inflation	Compulsory	Workload	Other	FY2025-2026 Requested Continuation Level
Salaries	—	—	—	—	—	—	—
Other Compensation	—	—	—	—	—	—	—
Related Benefits	—	—	—	—	—	—	—
TOTAL PERSONAL SERVICES	—	—	—	—	—	—	—
Travel	—	—	—	—	—	—	—
Operating Services	—	—	—	—	—	—	—
Supplies	—	—	—	—	—	—	—
TOTAL OPERATING EXPENSES	—	—	—	—	—	—	—
PROFESSIONAL SERVICES	—	—	—	—	—	—	—
Other Charges	833,239,966	—	—	—	68,464,534	—	901,704,500
Debt Service	—	—	—	—	—	—	—
Interagency Transfers	—	—	—	—	—	—	—
TOTAL OTHER CHARGES	\$833,239,966	—	—	—	\$68,464,534	—	\$901,704,500
Acquisitions	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	—	—	—	—	—	—	—
TOTAL EXPENDITURES	\$833,239,966	—	—	—	\$68,464,534	—	\$901,704,500
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

Description	Existing Operating Budget as of 10/01/2024	Non-Recurring	Inflation	Compulsory	Workload	Other	FY2025-2026 Requested Continuation Level
STATE GENERAL FUND (Direct)	121,893,153	—	—	—	—	(30,547,585)	91,345,568
STATE GENERAL FUND BY:	—	—	—	—	—	—	—
INTERAGENCY TRANSFERS	13,752,501	—	—	—	—	99,032	13,851,533
FEES & SELF-GENERATED	24,128,223	—	—	—	—	173,747	24,301,970
STATUTORY DEDICATIONS	—	—	—	—	—	—	—
FEDERAL FUNDS	286,309,634	—	—	—	—	(80,009,823)	206,299,811
TOTAL MEANS OF FINANCING	\$446,083,511	—	—	—	—	\$(110,284,629)	\$335,798,882

Fees and Self-Generated

Description	Existing Operating Budget as of 10/01/2024	Non-Recurring	Inflation	Compulsory	Workload	Other	FY2025-2026 Requested Continuation Level
Fees & Self-generated	24,128,223	—	—	—	—	173,747	24,301,970
Total:	\$24,128,223	—	—	—	—	\$173,747	\$24,301,970

Expenditures and Positions

Description	Existing Operating Budget as of 10/01/2024	Non-Recurring	Inflation	Compulsory	Workload	Other	FY2025-2026 Requested Continuation Level
Salaries	—	—	—	—	—	—	—
Other Compensation	—	—	—	—	—	—	—
Related Benefits	—	—	—	—	—	—	—
TOTAL PERSONAL SERVICES	—	—	—	—	—	—	—
Travel	—	—	—	—	—	—	—
Operating Services	—	—	—	—	—	—	—
Supplies	—	—	—	—	—	—	—
TOTAL OPERATING EXPENSES	—	—	—	—	—	—	—
PROFESSIONAL SERVICES	—	—	—	—	—	—	—
Other Charges	308,537,702	—	—	—	—	(110,284,629)	198,253,073
Debt Service	—	—	—	—	—	—	—
Interagency Transfers	137,545,809	—	—	—	—	—	137,545,809
TOTAL OTHER CHARGES	\$446,083,511	—	—	—	—	\$(110,284,629)	\$335,798,882
Acquisitions	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	—	—	—	—	—	—	—
TOTAL EXPENDITURES	\$446,083,511	—	—	—	—	\$(110,284,629)	\$335,798,882
Classified	—	—	—	—	—	—	—
Unclassified	—	—	—	—	—	—	—
TOTAL AUTHORIZED T.O. POSITIONS	—	—	—	—	—	—	—
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	—	—	—	—	—	—	—
TOTAL NON-T.O. FTE POSITIONS	—	—	—	—	—	—	—

CONTINUATION BUDGET ADJUSTMENTS - BY PROGRAM

Form 41085 — 3061 -Non-Recur Fees and Self Gen Revenue from Physician FMP

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	—
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	—

Statutory Dedications

	Amount
Total:	—

Question	Narrative Response
Explain the need for this request.	To non-recur budget authority in the Fees and Self-Generated Revenue means of financing associated with Physician FMP.
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 38424 — 3061 - Nursing Home Rebase

3061 - Payments to Private Providers

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	33,835,682
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	71,538,600
TOTAL MEANS OF FINANCING	\$105,374,282

EXPENDITURES

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	—
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	—
PROFESSIONAL SERVICES	—
Other Charges	105,374,282
Debt Service	—
Interagency Transfers	—
TOTAL OTHER CHARGES	\$105,374,282
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	—
TOTAL EXPENDITURES	\$105,374,282

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.	The nursing homes will be rebased in FY 26 as a new case mix methodology will be put in place. This number includes Medicaid days count that is trending down per Myers. The current recommendation is for a Patient Driven Payment Model (PDPM) from Myers and Stauffer of a case mix using 100% nursing. Administrative rule and Medicaid State Plan allow for a rebase every other year and inflationary adjustments on non-rebase years. 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 months 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.
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 38425 — 3061 - Federally Qualified Health Clinics Annualization

3061 - Payments to Private Providers

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	45,817
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	96,871
TOTAL MEANS OF FINANCING	\$142,688

AUTHORIZED POSITIONS

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

EXPENDITURES

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	—
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	—
PROFESSIONAL SERVICES	—
Other Charges	142,688
Debt Service	—
Interagency Transfers	—
TOTAL OTHER CHARGES	\$142,688
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	—
TOTAL EXPENDITURES	\$142,688

Question	Narrative Response
Explain the need for this request.	This request is for the annualization of 43 FQHCs added in SFY25, the addition of 54 new FQHCs in SFY26, and the federally mandated annual Medical Economic Index (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 the Benefits Improvement Act (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 38429 — 3061 - Rural Health Clinics Annualization

3061 - Payments to Private Providers

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	774,835
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	1,638,229
TOTAL MEANS OF FINANCING	\$2,413,064

AUTHORIZED POSITIONS

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

EXPENDITURES

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	—
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	—
PROFESSIONAL SERVICES	—
Other Charges	2,413,064
Debt Service	—
Interagency Transfers	—
TOTAL OTHER CHARGES	\$2,413,064
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	—
TOTAL EXPENDITURES	\$2,413,064

Question	Narrative Response
Explain the need for this request.	This request is for the annualization of 17 RHCs added in SFY25, the addition of new 15 RHCs in SFY26 and the federally mandated annual Medical Economic Index (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 the Benefits Improvement Act (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 38430 — 3061 - Rural Hospital Inflation Inpatient Per Diems

3061 - Payments to Private Providers

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	545,693
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	1,153,755
TOTAL MEANS OF FINANCING	\$1,699,448

AUTHORIZED POSITIONS

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

EXPENDITURES

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	—
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	—
PROFESSIONAL SERVICES	—
Other Charges	1,699,448
Debt Service	—
Interagency Transfers	—
TOTAL OTHER CHARGES	\$1,699,448
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	—
TOTAL EXPENDITURES	\$1,699,448

Question	Narrative Response
Explain the need for this request.	This request is to inflate the small rural hospitals inpatient per diem rates for all of SFY26. 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 effective 7/1/24. Therefore, funding will be needed to cover an inflationary adjustment for the beginning of the new rate year effective 7/1/25. The amount was estimated using the average increase from previous years.
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 38532 — 3061 - Annualization of 750 Community Choices Waiver Slots

3061 - Payments to Private Providers

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	—
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	6,515,536
FEDERAL FUNDS	13,775,764
TOTAL MEANS OF FINANCING	\$20,291,300

EXPENDITURES

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	—
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	—
PROFESSIONAL SERVICES	—
Other Charges	20,291,300
Debt Service	—
Interagency Transfers	—
TOTAL OTHER CHARGES	\$20,291,300
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	—
TOTAL EXPENDITURES	\$20,291,300

AUTHORIZED POSITIONS

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

Statutory Dedications

	Amount
Community Options Waiver Fund	6,515,536
Total:	\$6,515,536

Question	Narrative Response
Explain the need for this request.	This annualization is for 750 Community Choices waiver slots phased in during SFY 2024-2025 at an average cost of \$3,179 per month. This program serves older adults and individuals with adult onset physical disabilities. As of 6/30/24 there were 10,394 individuals on the registry for services, 5,732 of these individuals are waiting with no other HCBS services.
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. 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 times 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 38586 — 3061 - PACE Expansion - Alexandria

3061 - Payments to Private Providers

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	396,976
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	839,324
TOTAL MEANS OF FINANCING	\$1,236,300

EXPENDITURES

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	—
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	—
PROFESSIONAL SERVICES	—
Other Charges	1,236,300
Debt Service	—
Interagency Transfers	—
TOTAL OTHER CHARGES	\$1,236,300
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	—
TOTAL EXPENDITURES	\$1,236,300

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.	Program of All Inclusive Care for the Elderly (PACE) is a successful model for providing truly integrated care for frail elders who meet nursing facility level of care. PACE receives a capitated payment for both Medicaid and Medicare covered services and is therefore able to coordinate medical, social, and behavioral health services across all payer sources. PACE Alexandria opened in June of 2024 and has capacity to serve up to 200 individuals. As of 8/1/2024, there were 27 individuals enrolled. This funding is to annualize costs of 77 individuals enrolled during FY25 and new enrollment of 20 individuals during FY26. Average monthly cost of a PACE participant is approximately \$4,121.
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?	The PACE program serves frail elders who meet nursing facility level of care in a community-based, integrated care model. Not funding this service would negatively impact both participants and their families who utilize these services, and would likely lead to increased poor health outcomes, and increased nursing facility admissions, which are more costly to the state.
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 39972 — 3061 - Nursing Home Staffing Requirements

3061 - Payments to Private Providers

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	6,462,818
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	13,664,301
TOTAL MEANS OF FINANCING	\$20,127,119

AUTHORIZED POSITIONS

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

EXPENDITURES

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	—
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	—
PROFESSIONAL SERVICES	—
Other Charges	20,127,119
Debt Service	—
Interagency Transfers	—
TOTAL OTHER CHARGES	\$20,127,119
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	—
TOTAL EXPENDITURES	\$20,127,119

Question	Narrative Response
Explain the need for this request.	<p>This request is to fund a partial year of the minimum staffing requirements implemented by CMS for long term care facilities. The minimum staffing standards for Long Term Care facilities went into effect on June 21, 2024. Implementation Costs Associated with Nursing Home Staffing Rule Phase 1-Facility Assessment: must be implemented by August 8, 2024, for all facilities Phase 2- Requires nursing facilities to have a registered nurse on duty 24/7 and at least 3.48 hours per resident day of nursing care.: Must be implemented by May 11, 2026, for non-rural facilities and May 10, 2027, for rural facilities Phase 3- Requires nursing facilities to have a minimum of 0.55 registered nurse (RN) and 2.45 nurse aide hours per resident day in addition to the overall 3.48 hours per resident day requirement: must be implemented by May 10, 2027, for non-rural facilities and May 10, 2029, for rural facilities. Direct Care Staffing Needs: Myers and Stauffer created a spreadsheet of the 268 facilities and the current nursing ratios of each facility while indicating what each facility will need to implement the mandate. An estimated 91.42% of facilities will have to hire to meet the minimum staffing needs in the rule: - 240 facilities will require additional Registered Nurses (RNs) - 184 facilities will require additional nurse aides - 245 facilities will require additional Certified Nursing Assistants (CNAs)</p>
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?	With no state funding support, facilities will be unable to fulfill their federally mandated obligation to provide the specified staff. This will lead to potential non-compliance and possibly penalties.
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 38426 — 3063 - Clawback

3063 - Medicare Buy-Ins & Supplements

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	17,574,623
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	—
TOTAL MEANS OF FINANCING	\$17,574,623

EXPENDITURES

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	—
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	—
PROFESSIONAL SERVICES	—
Other Charges	17,574,623
Debt Service	—
Interagency Transfers	—
TOTAL OTHER CHARGES	\$17,574,623
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	—
TOTAL EXPENDITURES	\$17,574,623

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 adjustment is for Medicare Part D payments to CMS to defray a portion of the Medicare drug expenditures for individuals whose projected Medicaid pharmacy coverage is 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 38428 — 3061 - Healthy LA Managed Care Organization (MCO) Adjustment

3061 - Payments to Private Providers

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	(21,414,659)
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	6,435,970
FEES & SELF-GENERATED	(38,423,677)
STATUTORY DEDICATIONS	228,054,756
FEDERAL FUNDS	1,042,844,458
TOTAL MEANS OF FINANCING	\$1,217,496,848

EXPENDITURES

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	—
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	—
PROFESSIONAL SERVICES	—
Other Charges	1,217,496,848
Debt Service	—
Interagency Transfers	—
TOTAL OTHER CHARGES	\$1,217,496,848
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	—
TOTAL EXPENDITURES	\$1,217,496,848

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	(38,423,677)
Total:	\$(38,423,677)

Statutory Dedications

	Amount
Hospital Stabilization Fund	188,763,400
Louisiana Medical Assistance Trust Fund	39,291,356
Total:	\$228,054,756

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 and Directed Payments are 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 shortage in the budget authority for projected Healthy Louisiana payments in SFY26.
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?	N/A
Additional information or comments.	N/A

Form 38432 — 3061 - Dental Managed Care Adjustment

3061 - Payments to Private Providers

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	(125,957)
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	116,421
FEDERAL FUNDS	4,131,573
TOTAL MEANS OF FINANCING	\$4,122,037

EXPENDITURES

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	—
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	—
PROFESSIONAL SERVICES	—
Other Charges	4,122,037
Debt Service	—
Interagency Transfers	—
TOTAL OTHER CHARGES	\$4,122,037
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	—
TOTAL EXPENDITURES	\$4,122,037

AUTHORIZED POSITIONS

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

Statutory Dedications

	Amount
Louisiana Medical Assistance Trust Fund	116,421
Total:	\$116,421

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 shortage in the budget authority for projected Dental payments in SFY26.
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?	N/A
Additional information or comments.	N/A

Form 38433 — 3061 - 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	(856,959)
FEES & SELF-GENERATED	8,342,583
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	45,338,689
TOTAL MEANS OF FINANCING	\$52,824,313

EXPENDITURES

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	—
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	—
PROFESSIONAL SERVICES	—
Other Charges	52,824,313
Debt Service	—
Interagency Transfers	—
TOTAL OTHER CHARGES	\$52,824,313
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	—
TOTAL EXPENDITURES	\$52,824,313

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	8,342,583
Total:	\$8,342,583

Statutory Dedications

	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 SFY26 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 shortage in the budget authority for projected MCIP payments in SFY26.
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 HLA MCO in a program year.
Is the expenditure of these revenues restricted?	Expenditures are based upon HLA MCOs achievement of LDH-approved performance/quality milestones in that same program year.
Additional information or comments.	N/A

Form 38434 — 3063 - Medicare Part A & B

3063 - Medicare Buy-Ins & Supplements

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	16,340,750
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	34,549,161
TOTAL MEANS OF FINANCING	\$50,889,911

EXPENDITURES

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	—
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	—
PROFESSIONAL SERVICES	—
Other Charges	50,889,911
Debt Service	—
Interagency Transfers	—
TOTAL OTHER CHARGES	\$50,889,911
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	—
TOTAL EXPENDITURES	\$50,889,911

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 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 \$510.00 on January 1, 2025 and increase to \$530.00 on January 1, 2026. Part B actual premium rates are projected to be \$185.00 on January 1, 2025 and increase to \$186.90 on January 1, 2026.
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 38576 — 3061 - 1115 Reentry Waiver Service Cost

3061 - Payments to Private Providers

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	784,741
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	229,578
FEDERAL FUNDS	7,333,985
TOTAL MEANS OF FINANCING	\$8,348,304

EXPENDITURES

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	—
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	—
PROFESSIONAL SERVICES	—
Other Charges	8,348,304
Debt Service	—
Interagency Transfers	—
TOTAL OTHER CHARGES	\$8,348,304
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	—
TOTAL EXPENDITURES	\$8,348,304

AUTHORIZED POSITIONS

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

Statutory Dedications

	Amount
Louisiana Medical Assistance Trust Fund	229,578
Total:	\$229,578

Question	Narrative Response
Explain the need for this request.	The Louisiana Department of Health has submitted an application to CMS for an 1115 demonstration waiver to improve care transitions for Medicaid-eligible individuals who are incarcerated and to provide certain covered services during the 90-day pre-release period. LDH is partnering with the Department of Public Safety and Corrections on this demonstration. Those participating in the demonstration will have access to services including but not limited to case management, medication-assisted treatment and counseling for substance use disorders, and a 30-day supply of all prescription medications. Eligible carceral settings will include all state prison facilities and up to 13 parish jails.
Cite performance indicators for the adjustment.	There are no performance indicators associated with this adjustment.
What would the impact be if this is not funded?	If the request is not funded, the LDH would not be able to implement the 1115 Reentry waiver to facilitate successful reentry transitions for Medicaid-eligible individuals being released from jails and prisons and returning to the community.
Is revenue a fixed amount or can it be adjusted?	The requested revenue can be adjusted based upon the level of expenditures.
Is the expenditure of these revenues restricted?	N/A
Additional information or comments.	N/A

Form 38667 — 3061 - HLA MCO/Hospital & LPR Directed Payments Adjustment

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	—
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	—

Statutory Dedications

	Amount
Hospital Stabilization Fund	—
Louisiana Medical Assistance Trust Fund	—
Total:	—

Question	Narrative Response
Explain the need for this request.	This request is for changes in funding for the Louisiana Medicaid Hospital Directed Payments and Long term Acute Care, Psychiatric, Rehabilitation (LPR) Directed Payments. It reflects four quarterly directed payments for 1) Hospitals and 2) LPR (Long-Term Acute Care, Freestanding Psychiatric, and Freestanding Rehabilitation Hospitals).
Cite performance indicators for the adjustment.	The MCO program impacts the following performance indicators: 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 shortage in the budget authority for projected Healthy Louisiana payments in SFY26.
Is revenue a fixed amount or can it be adjusted?	Qualifying providers will receive interim lump-sum quarterly directed payments from MCOs, as directed by LDH. The amount for the year is a set amount but will be reconciled within 12 months after the end of the MCO contract rating period. The reconciliation will impact the following SFY once LDH conducts the reconciliation process based on actual utilization during the MCO contract rating period and the MCOs will make payment adjustments, as directed by LDH.
Is the expenditure of these revenues restricted?	N/A
Additional information or comments.	N/A

Form 39740 — 3061 - HLA MCO/Physician Directed Payments Adjustment

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	—
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	—

Statutory Dedications

	Amount
Louisiana Medical Assistance Trust Fund	—
Total:	—

Question	Narrative Response
Explain the need for this request.	This request is for changes in funding for the Louisiana Medicaid Physician Directed Payments. It reflects four quarterly directed payments for Physicians.
Cite performance indicators for the adjustment.	The MCO program impacts the following performance indicators: 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 shortage in the budget authority for projected Healthy Louisiana payments in SFY26.
Is revenue a fixed amount or can it be adjusted?	Qualifying providers will receive interim lump-sum quarterly directed payments from MCOs, as directed by LDH. The amount for the year is a set amount but will be reconciled after the end of the MCO contract rating period.
Is the expenditure of these revenues restricted?	N/A
Additional information or comments.	N/A

Form 38435 — 3061 - MOF Swap due to FMAP Change - Privates

3061 - Payments to Private Providers

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	(3,534,969)
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	128,184
FEES & SELF-GENERATED	889,539
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	2,517,246
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	889,539
Total:	\$889,539

Statutory Dedications

	Amount
Total:	—

Question	Narrative Response
Explain the need for this request.	This request is to refinance the FY25 existing operating budget based on the annual change in FMAP (Federal Medical Assistance Percentage) so that the FY26 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 FY26 are as follows: The Title XIX blended rate is 32.11% state and 67.89% federal; the LaCHIP blended rate is 22.48% state and 77.52% federal; and the Title XIX Federal Fiscal Year 26 rate is 32.17% state and 67.83% federal. 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 38436 — 3062 - MOF Swap due to FMAP Change - Publics

3062 - Payments to Public Providers

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	148,086
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	(148,086)
TOTAL MEANS OF FINANCING	—

AUTHORIZED POSITIONS

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

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	—

Question	Narrative Response
Explain the need for this request.	This request is to refinance the FY25 existing operating budget based on the annual change in FMAP (Federal Medical Assistance Percentage) so that the FY26 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 FY26 are as follows: The Title XIX blended rate is 32.11% state and 67.89% federal; the LaCHIP blended rate is 22.48% state and 77.52% federal; and the Title XIX Federal Fiscal Year 26 rate is 32.17% state and 67.83% federal. 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 38437 — 3063 - MOF Swap due to FMAP Change - Buy Ins & Suppements

3063 - Medicare Buy-Ins & Suppements

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	1,256,965
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	(1,256,965)
TOTAL MEANS OF FINANCING	—

AUTHORIZED POSITIONS

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

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	—

Question	Narrative Response
Explain the need for this request.	This request is to refinance the FY25 existing operating budget based on the annual change in FMAP (Federal Medical Assistance Percentage) so that the FY26 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 FY26 are as follows: The Title XIX blended rate is 32.11% state and 67.89% federal; the LaCHIP blended rate is 22.48% state and 77.52% federal; and the Title XIX Federal Fiscal Year 26 rate is 32.17% state and 67.83% federal. 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 38438 — 3064 - MOF Swap due to FMAP Change -Uncompensated Care Costs

3064 - Uncompensated Care Costs

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	4,930,980
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	99,032
FEES & SELF-GENERATED	173,747
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	(5,203,759)
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	173,747
Total:	\$173,747

Statutory Dedications

	Amount
Total:	—

Question	Narrative Response
Explain the need for this request.	This request is to refinance the FY25 existing operating budget based on the annual change in FMAP (Federal Medical Assistance Percentage) so that the FY26 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 FY26 are as follows: The Title XIX blended rate is 32.11% state and 67.89% federal; the LaCHIP blended rate is 22.48% state and 77.52% federal; and the Title XIX Federal Fiscal Year 26 rate is 32.17% state and 67.83% federal. 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 38560 — 3061 - Justice Involved Youth

3061 - Payments to Private Providers

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	128,084
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	11,997
FEDERAL FUNDS	296,172
TOTAL MEANS OF FINANCING	\$436,253

EXPENDITURES

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	—
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	—
PROFESSIONAL SERVICES	—
Other Charges	436,253
Debt Service	—
Interagency Transfers	—
TOTAL OTHER CHARGES	\$436,253
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	—
TOTAL EXPENDITURES	\$436,253

AUTHORIZED POSITIONS

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

Statutory Dedications

	Amount
Louisiana Medical Assistance Trust Fund	11,997
Total:	\$11,997

Question	Narrative Response
Explain the need for this request.	Section 5121 of the Consolidated Appropriations Act (CAA) requires Medical Vendor Payments to provide targeted case management in the 30 days prior to release and for at least 30 days following release, for children in any correctional institution.
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 initiative is not funded, the State will be not in compliance with CMS statutory requirements.
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 38817 — 3064 - University Medical Center Funding Shift

3064 - Uncompensated Care Costs

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	(49,021,271)
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	(103,360,671)
TOTAL MEANS OF FINANCING	\$(152,381,942)

AUTHORIZED POSITIONS

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

EXPENDITURES

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	—
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	—
PROFESSIONAL SERVICES	—
Other Charges	(152,381,942)
Debt Service	—
Interagency Transfers	—
TOTAL OTHER CHARGES	\$(152,381,942)
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	—
TOTAL EXPENDITURES	\$(152,381,942)

Question	Narrative Response
Explain the need for this request.	This adjustment transfers funding from the Uncompensated Care Costs program (UCC) to the Payments to Private Providers program to realign the budget authority and financing for University Medical Center (UMC) shifting to Hospital Directed Payments. This adjustment increases the Private Providers Program and is reflected in the Hospital Directed Payments Adjustment.
Cite performance indicators for the adjustment.	This adjustment impacts the following performance indicators: 17040 Total DSH funds collected in millions, 17041 Total federal funds collected in millions, and 17042 Total state match in millions.
What would the impact be if this is not funded?	If this request is not funded, Medical Vendor Payments will not have the adequate authority in the Payments to Private Providers Program to properly fund the Hospital Directed Payment Model for the hospital.
Is revenue a fixed amount or can it be adjusted?	The requested revenue is based on the payment methodology associated with the Hospital Directed Payment Model. Revenue can be adjusted based on the recommended level of expenditures associated with the new hospital payment methodology.
Is the expenditure of these revenues restricted?	N/A
Additional information or comments.	N/A

Form 38820 — 3061 - Replacement Revenue MATF Provider Fee & COW Fund

3061 - Payments to Private Providers

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	4,497,749
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	(4,497,749)
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	—

Statutory Dedications

	Amount
Community Options Waiver Fund	(2,665,632)
Louisiana Medical Assistance Trust Fund	(1,832,117)
Total:	\$(4,497,749)

Question	Narrative Response
Explain the need for this request.	This request removes one-time and non-recurring revenue from the FY25 base budget. The FY25 existing budget contains revenue from sources that will not materialize or will be reduced in FY26 that is used to match recurring expenditures. The request replaces statutory dedications with State General Fund. This swap includes Medical Assistance Trust Fund - Provider Fee (\$1,832,117). This amount is based on updated provider fee projections. It also swaps Community Options Waiver Fund base (\$2,665,632).
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 39755 — 3061 - Senate Bill 190 - Reimbursement Rate Increase

3061 - Payments to Private Providers

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	22,309,811
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	35,571,789
FEDERAL FUNDS	200,518,400
TOTAL MEANS OF FINANCING	\$258,400,000

EXPENDITURES

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	—
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	—
PROFESSIONAL SERVICES	—
Other Charges	258,400,000
Debt Service	—
Interagency Transfers	—
TOTAL OTHER CHARGES	\$258,400,000
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	—
TOTAL EXPENDITURES	\$258,400,000

AUTHORIZED POSITIONS

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

Statutory Dedications

	Amount
Hospital Stabilization Fund	28,465,789
Louisiana Medical Assistance Trust Fund	7,106,000
Total:	\$35,571,789

Question	Narrative Response
Explain the need for this request.	Senate Bill 190 of the 2024 Regular Legislative Session requires the Louisiana Department of Health (LDH) to develop a plan to increase Medicaid reimbursement to certain providers to 100% of Medicare. The plan shall be implemented starting with State Fiscal Year (SFY) 2026. In addition, the bill directs the implementation plan to prioritize physician-provided primary care, obstetric care, non-specialty mental health, substance use disorder, and women's health services. The Louisiana Department of Health (LDH) will increase the professional fee schedule up to 100% of Medicare over a two-year period. LDH plans to increase Medicaid reimbursement to 85% of Medicare in Year 1 (SFY 2025-2026) and 100% of Medicare in year 2 (SFY 2026-2027).
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 initiative is not funded, LDH will be not be able to increase reimbursement rates to 100% of Medicare.
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 41094 — 3064 - Uncompensated Care Costs - Budget Alignment

3064 - Uncompensated Care Costs

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	13,542,706
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	28,554,607
TOTAL MEANS OF FINANCING	\$42,097,313

AUTHORIZED POSITIONS

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

EXPENDITURES

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	—
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	—
PROFESSIONAL SERVICES	—
Other Charges	42,097,313
Debt Service	—
Interagency Transfers	—
TOTAL OTHER CHARGES	\$42,097,313
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	—
TOTAL EXPENDITURES	\$42,097,313

Question	Narrative Response
Explain the need for this request.	This request is for additional budget authority to align means of financing with projected expenditures in the Uncompensated Care Costs (UCC) program.
Cite performance indicators for the adjustment.	17040 - Total DSH funds collected in millions 17041 - Total federal funds collected in millions
What would the impact be if this is not funded?	If not funded, there would not be adequate budget authority to cover expenditures in UCC program.
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

Technical and Other Adjustments

AGENCY SUMMARY STATEMENT

Total Agency

Means of Financing	Existing Operating Budget as of 10/01/2024	FY2025-2026 Requested Continuation Adjustment	FY2025-2026 Requested in this Adjustment Package	FY2025-2026 Requested Realignment
STATE GENERAL FUND (Direct)	2,512,520,489	49,479,460	(31,656,450)	2,530,343,499
STATE GENERAL FUND BY:	—	—	—	—
INTERAGENCY TRANSFERS	166,436,529	5,806,227	—	172,242,756
FEES & SELF-GENERATED	554,334,489	(29,017,808)	—	525,316,681
STATUTORY DEDICATIONS	1,273,135,770	266,002,328	—	1,539,138,098
FEDERAL FUNDS	12,871,874,017	1,358,821,654	—	14,230,695,671
TOTAL MEANS OF FINANCING	\$17,378,301,294	\$1,651,091,861	\$(31,656,450)	\$18,997,736,705
Salaries	—	—	—	—
Other Compensation	—	—	—	—
Related Benefits	—	—	—	—
TOTAL PERSONAL SERVICES	—	—	—	—
Travel	—	—	—	—
Operating Services	—	—	—	—
Supplies	—	—	—	—
TOTAL OPERATING EXPENSES	—	—	—	—
PROFESSIONAL SERVICES	—	—	—	—
Other Charges	17,029,203,201	1,651,091,861	(31,656,450)	18,648,638,612
Debt Service	—	—	—	—
Interagency Transfers	349,098,093	—	—	349,098,093
TOTAL OTHER CHARGES	\$17,378,301,294	\$1,651,091,861	\$(31,656,450)	\$18,997,736,705
Acquisitions	—	—	—	—
Major Repairs	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	—	—	—	—
TOTAL EXPENDITURES	\$17,378,301,294	\$1,651,091,861	\$(31,656,450)	\$18,997,736,705
Classified	—	—	—	—
Unclassified	—	—	—	—
TOTAL AUTHORIZED T.O. POSITIONS	—	—	—	—
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	—	—	—	—
TOTAL NON-T.O. FTE POSITIONS	—	—	—	—

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)	(31,656,450)	—	—	—	(31,656,450)
STATE GENERAL FUND BY:	—	—	—	—	—
INTERAGENCY TRANSFERS	—	—	—	—	—
FEES & SELF-GENERATED	—	—	—	—	—
STATUTORY DEDICATIONS	—	—	—	—	—
FEDERAL FUNDS	—	—	—	—	—
TOTAL MEANS OF FINANCING	\$(31,656,450)	—	—	—	\$(31,656,450)
Salaries	—	—	—	—	—
Other Compensation	—	—	—	—	—
Related Benefits	—	—	—	—	—
TOTAL SALARIES	—	—	—	—	—
Travel	—	—	—	—	—
Operating Services	—	—	—	—	—
Supplies	—	—	—	—	—
TOTAL OPERATING EXPENSES	—	—	—	—	—
PROFESSIONAL SERVICES	—	—	—	—	—
Other Charges	(31,656,450)	—	—	—	(31,656,450)
Debt Service	—	—	—	—	—
Interagency Transfers	—	—	—	—	—
TOTAL OTHER CHARGES	\$(31,656,450)	—	—	—	\$(31,656,450)
Acquisitions	—	—	—	—	—
Major Repairs	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	—	—	—	—	—
TOTAL EXPENDITURES & REQUEST	\$(31,656,450)	—	—	—	\$(31,656,450)
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 10/01/2024	FY2025-2026 Requested Continuation Adjustment	FY2025-2026 Requested in this Adjustment Package	FY2025-2026 Requested Realignment
STATE GENERAL FUND (Direct)	1,929,701,388	44,706,621	—	1,974,408,009
STATE GENERAL FUND BY:	—	—	—	—
INTERAGENCY TRANSFERS	152,684,028	5,707,195	—	158,391,223
FEES & SELF-GENERATED	530,206,266	(29,191,555)	—	501,014,711
STATUTORY DEDICATIONS	1,263,987,904	266,002,328	—	1,529,990,232
FEDERAL FUNDS	11,960,403,347	1,405,687,367	—	13,366,090,714
TOTAL MEANS OF FINANCING	\$15,836,982,933	\$1,692,911,956	—	\$17,529,894,889
Salaries	—	—	—	—
Other Compensation	—	—	—	—
Related Benefits	—	—	—	—
TOTAL PERSONAL SERVICES	—	—	—	—
Travel	—	—	—	—
Operating Services	—	—	—	—
Supplies	—	—	—	—
TOTAL OPERATING EXPENSES	—	—	—	—
PROFESSIONAL SERVICES	—	—	—	—
Other Charges	15,836,982,933	1,692,911,956	—	17,529,894,889
Debt Service	—	—	—	—
Interagency Transfers	—	—	—	—
TOTAL OTHER CHARGES	\$15,836,982,933	\$1,692,911,956	—	\$17,529,894,889
Acquisitions	—	—	—	—
Major Repairs	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	—	—	—	—
TOTAL EXPENDITURES	\$15,836,982,933	\$1,692,911,956	—	\$17,529,894,889
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 10/01/2024	FY2025-2026 Requested Continuation Adjustment	FY2025-2026 Requested in this Adjustment Package	FY2025-2026 Requested Realignment
STATE GENERAL FUND (Direct)	58,633,486	148,086	—	58,781,572
STATE GENERAL FUND BY:	—	—	—	—
INTERAGENCY TRANSFERS	—	—	—	—
FEES & SELF-GENERATED	—	—	—	—
STATUTORY DEDICATIONS	9,147,866	—	—	9,147,866
FEDERAL FUNDS	194,213,532	(148,086)	—	194,065,446
TOTAL MEANS OF FINANCING	\$261,994,884	—	—	\$261,994,884
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	211,552,284	—	—	211,552,284
TOTAL OTHER CHARGES	\$261,994,884	—	—	\$261,994,884
Acquisitions	—	—	—	—
Major Repairs	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	—	—	—	—
TOTAL EXPENDITURES	\$261,994,884	—	—	\$261,994,884
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	Existing Operating Budget as of 10/01/2024	FY2025-2026 Requested Continuation Adjustment	FY2025-2026 Requested in this Adjustment Package	FY2025-2026 Requested Realignment
STATE GENERAL FUND (Direct)	402,292,462	35,172,338	—	437,464,800
STATE GENERAL FUND BY:	—	—	—	—
INTERAGENCY TRANSFERS	—	—	—	—
FEES & SELF-GENERATED	—	—	—	—
STATUTORY DEDICATIONS	—	—	—	—
FEDERAL FUNDS	430,947,504	33,292,196	—	464,239,700
TOTAL MEANS OF FINANCING	\$833,239,966	\$68,464,534	—	\$901,704,500
Salaries	—	—	—	—
Other Compensation	—	—	—	—
Related Benefits	—	—	—	—
TOTAL PERSONAL SERVICES	—	—	—	—
Travel	—	—	—	—
Operating Services	—	—	—	—
Supplies	—	—	—	—
TOTAL OPERATING EXPENSES	—	—	—	—
PROFESSIONAL SERVICES	—	—	—	—
Other Charges	833,239,966	68,464,534	—	901,704,500
Debt Service	—	—	—	—
Interagency Transfers	—	—	—	—
TOTAL OTHER CHARGES	\$833,239,966	\$68,464,534	—	\$901,704,500
Acquisitions	—	—	—	—
Major Repairs	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	—	—	—	—
TOTAL EXPENDITURES	\$833,239,966	\$68,464,534	—	\$901,704,500
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	Existing Operating Budget as of 10/01/2024	FY2025-2026 Requested Continuation Adjustment	FY2025-2026 Requested in this Adjustment Package	FY2025-2026 Requested Realignment
STATE GENERAL FUND (Direct)	121,893,153	(30,547,585)	(31,656,450)	59,689,118
STATE GENERAL FUND BY:	—	—	—	—
INTERAGENCY TRANSFERS	13,752,501	99,032	—	13,851,533
FEES & SELF-GENERATED	24,128,223	173,747	—	24,301,970
STATUTORY DEDICATIONS	—	—	—	—
FEDERAL FUNDS	286,309,634	(80,009,823)	—	206,299,811
TOTAL MEANS OF FINANCING	\$446,083,511	\$(110,284,629)	\$(31,656,450)	\$304,142,432
Salaries	—	—	—	—
Other Compensation	—	—	—	—
Related Benefits	—	—	—	—
TOTAL PERSONAL SERVICES	—	—	—	—
Travel	—	—	—	—
Operating Services	—	—	—	—
Supplies	—	—	—	—
TOTAL OPERATING EXPENSES	—	—	—	—
PROFESSIONAL SERVICES	—	—	—	—
Other Charges	308,537,702	(110,284,629)	(31,656,450)	166,596,623
Debt Service	—	—	—	—
Interagency Transfers	137,545,809	—	—	137,545,809
TOTAL OTHER CHARGES	\$446,083,511	\$(110,284,629)	\$(31,656,450)	\$304,142,432
Acquisitions	—	—	—	—
Major Repairs	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	—	—	—	—
TOTAL EXPENDITURES	\$446,083,511	\$(110,284,629)	\$(31,656,450)	\$304,142,432
Classified	—	—	—	—
Unclassified	—	—	—	—
TOTAL AUTHORIZED T.O. POSITIONS	—	—	—	—
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	—	—	—	—
TOTAL NON-T.O. FTE POSITIONS	—	—	—	—

TECHNICAL AND OTHER ADJUSTMENTS

Form 37174 — 3064 - T/OAP - OBH Companion - 118 Civil Beds

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	—
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	—

Statutory Dedications

	Amount
Total:	—

3064 - Uncompensated Care Costs

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	(31,656,450)
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	—
TOTAL MEANS OF FINANCING	\$(31,656,450)

EXPENDITURES

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	—
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	—
PROFESSIONAL SERVICES	—
Other Charges	(31,656,450)
Debt Service	—
Interagency Transfers	—
TOTAL OTHER CHARGES	\$(31,656,450)
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	—
TOTAL EXPENDITURES	\$(31,656,450)

AUTHORIZED POSITIONS

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

Statutory Dedications

	Amount
Total:	—

Question	Narrative Response
Explain the need for this request.	<p>This request provides for a technical adjustment (TOAP) to move the SGF budget for the 118 648B beds that was appropriated to Medical Vendor Payments (MVP) to OBH ELMHS. In FY23, OBH ELMHS received \$19.3 million in IAT budget authority to create 118 inpatient civil intermediate beds, which were necessary due to continue and competing increases in demand to admit clients of all legal status types (NGBRI, pretrial (PT), Judicial Civil (JC), and Unable to be Restored to Competence (648B) and the subsequent negative impact on ELMHS ability to timely admit NGBRI clients. Additional beds were needed to regain compliance with the Cooper/Jackson Settlement Agreement. MVP held both the SGF match (\$6,323,794) and the federal funds, as it was initially thought that the beds could be supported by Medicaid UCC. In FY24, MVP was appropriated \$25,332,656 in SGF to annualize the funding. It was determined that since the patients were part of the forensic population, Medicaid UCC could not be used to support them. The total amount of SGF that MVP received for the initiative in FY23 and FY24 was \$31,656,450. In FY25, one of three 648B 60-bed facilities will go live beginning in October, with the subsequent opening of the remaining two in January and April, respectively. The total estimated cost for 180 beds will be \$25,296,000 in FY25, and will be paid by MVP from the 118-bed SGF appropriation. In FY26, OBH will be responsible for all three contracts which will require OPB and legislative approval of this TOAP.</p>
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?	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.	

New or Expanded Requests

AGENCY SUMMARY STATEMENT

Total Agency

Means of Financing and Expenditures	Existing Operating Budget as of 10/01/2024	FY2025-2026 Requested Continuation Adjustment	FY2025-2026 Requested in Technical/Other Package	FY2025-2026 Requested New/Expanded	FY2025-2026 Requested Realignment
STATE GENERAL FUND (Direct)	2,512,520,489	49,479,460	(31,656,450)	—	2,530,343,499
STATE GENERAL FUND BY:	—	—	—	—	—
INTERAGENCY TRANSFERS	166,436,529	5,806,227	—	—	172,242,756
FEES & SELF-GENERATED	554,334,489	(29,017,808)	—	—	525,316,681
STATUTORY DEDICATIONS	1,273,135,770	266,002,328	—	—	1,539,138,098
FEDERAL FUNDS	12,871,874,017	1,358,821,654	—	—	14,230,695,671
TOTAL MEANS OF FINANCING	\$17,378,301,294	\$1,651,091,861	\$(31,656,450)	—	\$18,997,736,705
Salaries	—	—	—	—	—
Other Compensation	—	—	—	—	—
Related Benefits	—	—	—	—	—
TOTAL PERSONAL SERVICES	—	—	—	—	—
Travel	—	—	—	—	—
Operating Services	—	—	—	—	—
Supplies	—	—	—	—	—
TOTAL OPERATING EXPENSES	—	—	—	—	—
PROFESSIONAL SERVICES	—	—	—	—	—
Other Charges	17,029,203,201	1,651,091,861	(31,656,450)	—	18,648,638,612
Debt Service	—	—	—	—	—
Interagency Transfers	349,098,093	—	—	—	349,098,093
TOTAL OTHER CHARGES	\$17,378,301,294	\$1,651,091,861	\$(31,656,450)	—	\$18,997,736,705
Acquisitions	—	—	—	—	—
Major Repairs	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	—	—	—	—	—
TOTAL EXPENDITURES	\$17,378,301,294	\$1,651,091,861	\$(31,656,450)	—	\$18,997,736,705
Classified	—	—	—	—	—
Unclassified	—	—	—	—	—
TOTAL AUTHORIZED T.O. POSITIONS	—	—	—	—	—
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	—	—	—	—	—
TOTAL NON-T.O. FTE POSITIONS	—	—	—	—	—

Fees and Self-Generated

Description	Existing Operating Budget as of 10/01/2024	FY2025-2026 Requested Continuation Adjustment	FY2025-2026 Requested in Technical/Other Package	FY2025-2026 Requested New/Expanded	FY2025-2026 Requested Realignment
Fees & Self-generated	554,334,489	(29,017,808)	—	—	525,316,681
Total:	\$554,334,489	\$(29,017,808)	—	—	\$525,316,681

Statutory Dedications

Description	Existing Operating Budget as of 10/01/2024	FY2025-2026 Requested Continuation Adjustment	FY2025-2026 Requested in Technical/Other Package	FY2025-2026 Requested New/Expanded	FY2025-2026 Requested Realignment
Community Options Waiver Fund	2,665,632	3,849,904	—	—	6,515,536
Health Excellence Fund	19,491,846	—	—	—	19,491,846
Hospital Stabilization Fund	314,552,061	217,229,189	—	—	531,781,250
Louisiana Fund	21,782,002	—	—	—	21,782,002
Louisiana Medical Assistance Trust Fund	871,296,163	44,923,235	—	—	916,219,398
New Opportunities Waiver (NOW) Fund	43,348,066	—	—	—	43,348,066
Total:	\$1,273,135,770	\$266,002,328	—	—	\$1,539,138,098

PROGRAM SUMMARY STATEMENT

3061 - Payments to Private Providers

Means of Financing and Expenditures	Existing Operating Budget as of 10/01/2024	FY2025-2026 Requested Continuation Adjustment	FY2025-2026 Requested in Technical/Other Package	FY2025-2026 Requested New/Expanded	FY2025-2026 Requested Realignment
STATE GENERAL FUND (Direct)	1,929,701,388	44,706,621	—	—	1,974,408,009
STATE GENERAL FUND BY:	—	—	—	—	—
INTERAGENCY TRANSFERS	152,684,028	5,707,195	—	—	158,391,223
FEES & SELF-GENERATED	530,206,266	(29,191,555)	—	—	501,014,711
STATUTORY DEDICATIONS	1,263,987,904	266,002,328	—	—	1,529,990,232
FEDERAL FUNDS	11,960,403,347	1,405,687,367	—	—	13,366,090,714
TOTAL MEANS OF FINANCING	\$15,836,982,933	\$1,692,911,956	—	—	\$17,529,894,889
Salaries	—	—	—	—	—
Other Compensation	—	—	—	—	—
Related Benefits	—	—	—	—	—
TOTAL PERSONAL SERVICES	—	—	—	—	—
Travel	—	—	—	—	—
Operating Services	—	—	—	—	—
Supplies	—	—	—	—	—
TOTAL OPERATING EXPENSES	—	—	—	—	—
PROFESSIONAL SERVICES	—	—	—	—	—
Other Charges	15,836,982,933	1,692,911,956	—	—	17,529,894,889
Debt Service	—	—	—	—	—
Interagency Transfers	—	—	—	—	—
TOTAL OTHER CHARGES	\$15,836,982,933	\$1,692,911,956	—	—	\$17,529,894,889
Acquisitions	—	—	—	—	—
Major Repairs	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	—	—	—	—	—
TOTAL EXPENDITURES	\$15,836,982,933	\$1,692,911,956	—	—	\$17,529,894,889
Classified	—	—	—	—	—
Unclassified	—	—	—	—	—
TOTAL AUTHORIZED T.O. POSITIONS	—	—	—	—	—
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	—	—	—	—	—
TOTAL NON-T.O. FTE POSITIONS	—	—	—	—	—

Fees and Self-Generated

Description	Existing Operating Budget as of 10/01/2024	FY2025-2026 Requested Continuation Adjustment	FY2025-2026 Requested in Technical/Other Package	FY2025-2026 Requested New/Expanded	FY2025-2026 Requested Realignment
Fees & Self-generated	530,206,266	(29,191,555)	—	—	501,014,711
Total:	\$530,206,266	\$(29,191,555)	—	—	\$501,014,711

Statutory Dedications

Description	Existing Operating Budget as of 10/01/2024	FY2025-2026 Requested Continuation Adjustment	FY2025-2026 Requested in Technical/Other Package	FY2025-2026 Requested New/Expanded	FY2025-2026 Requested Realignment
Community Options Waiver Fund	2,665,632	3,849,904	—	—	6,515,536
Health Excellence Fund	19,491,846	—	—	—	19,491,846
Hospital Stabilization Fund	314,552,061	217,229,189	—	—	531,781,250
Louisiana Fund	21,782,002	—	—	—	21,782,002
Louisiana Medical Assistance Trust Fund	862,148,297	44,923,235	—	—	907,071,532
New Opportunities Waiver (NOW) Fund	43,348,066	—	—	—	43,348,066
Total:	\$1,263,987,904	\$266,002,328	—	—	\$1,529,990,232

3062 - Payments to Public Providers

Means of Financing and Expenditures	Existing Operating Budget as of 10/01/2024	FY2025-2026 Requested Continuation Adjustment	FY2025-2026 Requested in Technical/Other Package	FY2025-2026 Requested New/Expanded	FY2025-2026 Requested Realignment
STATE GENERAL FUND (Direct)	58,633,486	148,086	—	—	58,781,572
STATE GENERAL FUND BY:	—	—	—	—	—
INTERAGENCY TRANSFERS	—	—	—	—	—
FEES & SELF-GENERATED	—	—	—	—	—
STATUTORY DEDICATIONS	9,147,866	—	—	—	9,147,866
FEDERAL FUNDS	194,213,532	(148,086)	—	—	194,065,446
TOTAL MEANS OF FINANCING	\$261,994,884	—	—	—	\$261,994,884
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	211,552,284	—	—	—	211,552,284
TOTAL OTHER CHARGES	\$261,994,884	—	—	—	\$261,994,884
Acquisitions	—	—	—	—	—
Major Repairs	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	—	—	—	—	—
TOTAL EXPENDITURES	\$261,994,884	—	—	—	\$261,994,884
Classified	—	—	—	—	—
Unclassified	—	—	—	—	—
TOTAL AUTHORIZED T.O. POSITIONS	—	—	—	—	—
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	—	—	—	—	—
TOTAL NON-T.O. FTE POSITIONS	—	—	—	—	—

Statutory Dedications

Description	Existing Operating Budget as of 10/01/2024	FY2025-2026 Requested Continuation Adjustment	FY2025-2026 Requested in Technical/Other Package	FY2025-2026 Requested New/Expanded	FY2025-2026 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 10/01/2024	FY2025-2026 Requested Continuation Adjustment	FY2025-2026 Requested in Technical/Other Package	FY2025-2026 Requested New/Expanded	FY2025-2026 Requested Realignment
STATE GENERAL FUND (Direct)	402,292,462	35,172,338	—	—	437,464,800
STATE GENERAL FUND BY:	—	—	—	—	—
INTERAGENCY TRANSFERS	—	—	—	—	—
FEES & SELF-GENERATED	—	—	—	—	—
STATUTORY DEDICATIONS	—	—	—	—	—
FEDERAL FUNDS	430,947,504	33,292,196	—	—	464,239,700
TOTAL MEANS OF FINANCING	\$833,239,966	\$68,464,534	—	—	\$901,704,500
Salaries	—	—	—	—	—
Other Compensation	—	—	—	—	—
Related Benefits	—	—	—	—	—
TOTAL PERSONAL SERVICES	—	—	—	—	—
Travel	—	—	—	—	—
Operating Services	—	—	—	—	—
Supplies	—	—	—	—	—
TOTAL OPERATING EXPENSES	—	—	—	—	—
PROFESSIONAL SERVICES	—	—	—	—	—
Other Charges	833,239,966	68,464,534	—	—	901,704,500
Debt Service	—	—	—	—	—
Interagency Transfers	—	—	—	—	—
TOTAL OTHER CHARGES	\$833,239,966	\$68,464,534	—	—	\$901,704,500
Acquisitions	—	—	—	—	—
Major Repairs	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	—	—	—	—	—
TOTAL EXPENDITURES	\$833,239,966	\$68,464,534	—	—	\$901,704,500
Classified	—	—	—	—	—
Unclassified	—	—	—	—	—
TOTAL AUTHORIZED T.O. POSITIONS	—	—	—	—	—
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	—	—	—	—	—
TOTAL NON-T.O. FTE POSITIONS	—	—	—	—	—

Statutory Dedications

Description	Existing Operating Budget as of 10/01/2024	FY2025-2026 Requested Continuation Adjustment	FY2025-2026 Requested in Technical/Other Package	FY2025-2026 Requested New/Expanded	FY2025-2026 Requested Realignment
Total:	—	—	—	—	—

3064 - Uncompensated Care Costs

Means of Financing and Expenditures	Existing Operating Budget as of 10/01/2024	FY2025-2026 Requested Continuation Adjustment	FY2025-2026 Requested in Technical/Other Package	FY2025-2026 Requested New/Expanded	FY2025-2026 Requested Realignment
STATE GENERAL FUND (Direct)	121,893,153	(30,547,585)	(31,656,450)	—	59,689,118
STATE GENERAL FUND BY:	—	—	—	—	—
INTERAGENCY TRANSFERS	13,752,501	99,032	—	—	13,851,533
FEES & SELF-GENERATED	24,128,223	173,747	—	—	24,301,970
STATUTORY DEDICATIONS	—	—	—	—	—
FEDERAL FUNDS	286,309,634	(80,009,823)	—	—	206,299,811
TOTAL MEANS OF FINANCING	\$446,083,511	\$(110,284,629)	\$(31,656,450)	—	\$304,142,432
Salaries	—	—	—	—	—
Other Compensation	—	—	—	—	—
Related Benefits	—	—	—	—	—
TOTAL PERSONAL SERVICES	—	—	—	—	—
Travel	—	—	—	—	—
Operating Services	—	—	—	—	—
Supplies	—	—	—	—	—
TOTAL OPERATING EXPENSES	—	—	—	—	—
PROFESSIONAL SERVICES	—	—	—	—	—
Other Charges	308,537,702	(110,284,629)	(31,656,450)	—	166,596,623
Debt Service	—	—	—	—	—
Interagency Transfers	137,545,809	—	—	—	137,545,809
TOTAL OTHER CHARGES	\$446,083,511	\$(110,284,629)	\$(31,656,450)	—	\$304,142,432
Acquisitions	—	—	—	—	—
Major Repairs	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	—	—	—	—	—
TOTAL EXPENDITURES	\$446,083,511	\$(110,284,629)	\$(31,656,450)	—	\$304,142,432
Classified	—	—	—	—	—
Unclassified	—	—	—	—	—
TOTAL AUTHORIZED T.O. POSITIONS	—	—	—	—	—
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	—	—	—	—	—
TOTAL NON-T.O. FTE POSITIONS	—	—	—	—	—

Fees and Self-Generated

Description	Existing Operating Budget as of 10/01/2024	FY2025-2026 Requested Continuation Adjustment	FY2025-2026 Requested in Technical/Other Package	FY2025-2026 Requested New/Expanded	FY2025-2026 Requested Realignment
Fees & Self-generated	24,128,223	173,747	—	—	24,301,970
Total:	\$24,128,223	\$173,747	—	—	\$24,301,970

Statutory Dedications

Description	Existing Operating Budget as of 10/01/2024	FY2025-2026 Requested Continuation Adjustment	FY2025-2026 Requested in Technical/Other Package	FY2025-2026 Requested New/Expanded	FY2025-2026 Requested Realignment
Total:	—	—	—	—	—



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Total Request Summary

AGENCY SUMMARY STATEMENT

Total Agency

Means of Financing

Description	FY2023-2024 Actuals	Existing Operating Budget as of 10/01/2024	FY2025-2026 Requested Continuation Adjustments	FY2025-2026 Requested in Technical/Other Adjustments	FY2025-2026 Requested New or Expanded Adjustments	FY2025-2026 Total Request	Over/Under EOB
STATE GENERAL FUND (Direct)	1,942,326,555	2,512,520,489	49,479,460	(31,656,450)	—	2,530,343,499	17,823,010
STATE GENERAL FUND BY:	—	—	—	—	—	—	—
INTERAGENCY TRANSFERS	164,071,258	166,436,529	5,806,227	—	—	172,242,756	5,806,227
FEES & SELF-GENERATED	601,477,616	554,334,489	(29,017,808)	—	—	525,316,681	(29,017,808)
STATUTORY DEDICATIONS	1,563,369,345	1,273,135,770	266,002,328	—	—	1,539,138,098	266,002,328
FEDERAL FUNDS	13,524,004,147	12,871,874,017	1,358,821,654	—	—	14,230,695,671	1,358,821,654
TOTAL MEANS OF FINANCING	\$17,795,248,921	\$17,378,301,294	\$1,651,091,861	\$(31,656,450)	—	\$18,997,736,705	\$1,619,435,411

Statutory Dedications

Description	FY2023-2024 Actuals	Existing Operating Budget as of 10/01/2024	FY2025-2026 Requested Continuation Adjustments	FY2025-2026 Requested in Technical/Other Adjustments	FY2025-2026 Requested New or Expanded Adjustments	FY2025-2026 Total Request	Over/Under EOB
Community Options Waiver Fund	—	2,665,632	3,849,904	—	—	6,515,536	3,849,904
Health Excellence Fund	28,279,797	19,491,846	—	—	—	19,491,846	—
Hospital Stabilization Fund	326,680,690	314,552,061	217,229,189	—	—	531,781,250	217,229,189
Louisiana Fund	23,131,708	21,782,002	—	—	—	21,782,002	—
Louisiana Medical Assistance Trust Fund	1,133,709,626	871,296,163	44,923,235	—	—	916,219,398	44,923,235
Medicaid Trust Fund for the Elderly	12,835,609	—	—	—	—	—	—
New Opportunities Waiver (NOW) Fund	38,731,915	43,348,066	—	—	—	43,348,066	—
Total:	\$1,563,369,345	\$1,273,135,770	\$266,002,328	—	—	\$1,539,138,098	\$266,002,328

Expenditures and Positions

Description	FY2023-2024 Actuals	Existing Operating Budget as of 10/01/2024	FY2025-2026 Requested Continuation Adjustments	FY2025-2026 Requested in Technical/Other Adjustments	FY2025-2026 Requested New or Expanded Adjustments	FY2025-2026 Total Request	Over/Under EOB
Salaries	—	—	—	—	—	—	—
Other Compensation	—	—	—	—	—	—	—
Related Benefits	—	—	—	—	—	—	—
TOTAL PERSONAL SERVICES	—	—	—	—	—	—	—
Travel	—	—	—	—	—	—	—
Operating Services	—	—	—	—	—	—	—
Supplies	—	—	—	—	—	—	—
TOTAL OPERATING EXPENSES	—	—	—	—	—	—	—
PROFESSIONAL SERVICES	—	—	—	—	—	—	—
Other Charges	17,464,147,668	17,029,203,201	1,651,091,861	(31,656,450)	—	18,648,638,612	1,619,435,411
Debt Service	—	—	—	—	—	—	—
Interagency Transfers	331,101,253	349,098,093	—	—	—	349,098,093	—
TOTAL OTHER CHARGES	\$17,795,248,921	\$17,378,301,294	\$1,651,091,861	\$(31,656,450)	—	\$18,997,736,705	\$1,619,435,411
Acquisitions	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	—	—	—	—	—	—	—
TOTAL EXPENDITURES	\$17,795,248,921	\$17,378,301,294	\$1,651,091,861	\$(31,656,450)	—	\$18,997,736,705	\$1,619,435,411
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

Description	FY2023-2024 Actuals	Existing Operating Budget as of 10/01/2024	FY2025-2026 Requested Continuation Adjustments	FY2025-2026 Requested in Technical/Other Adjustments	FY2025-2026 Requested New or Expanded Adjustments	FY2025-2026 Total Request	Over/Under EOB
STATE GENERAL FUND (Direct)	1,387,550,150	1,929,701,388	44,706,621	—	—	1,974,408,009	44,706,621
STATE GENERAL FUND BY:	—	—	—	—	—	—	—
INTERAGENCY TRANSFERS	154,135,981	152,684,028	5,707,195	—	—	158,391,223	5,707,195
FEES & SELF-GENERATED	585,828,798	530,206,266	(29,191,555)	—	—	501,014,711	(29,191,555)
STATUTORY DEDICATIONS	1,558,404,483	1,263,987,904	266,002,328	—	—	1,529,990,232	266,002,328
FEDERAL FUNDS	12,749,146,317	11,960,403,347	1,405,687,367	—	—	13,366,090,714	1,405,687,367
TOTAL MEANS OF FINANCING	\$16,435,065,729	\$15,836,982,933	\$1,692,911,956	—	—	\$17,529,894,889	\$1,692,911,956

Statutory Dedications

Description	FY2023-2024 Actuals	Existing Operating Budget as of 10/01/2024	FY2025-2026 Requested Continuation Adjustments	FY2025-2026 Requested in Technical/Other Adjustments	FY2025-2026 Requested New or Expanded Adjustments	FY2025-2026 Total Request	Over/Under EOB
Community Options Waiver Fund	—	2,665,632	3,849,904	—	—	6,515,536	3,849,904
Health Excellence Fund	28,279,797	19,491,846	—	—	—	19,491,846	—
Hospital Stabilization Fund	326,680,690	314,552,061	217,229,189	—	—	531,781,250	217,229,189
Louisiana Fund	23,131,708	21,782,002	—	—	—	21,782,002	—
Louisiana Medical Assistance Trust Fund	1,128,744,764	862,148,297	44,923,235	—	—	907,071,532	44,923,235
Medicaid Trust Fund for the Elderly	12,835,609	—	—	—	—	—	—
New Opportunities Waiver (NOW) Fund	38,731,915	43,348,066	—	—	—	43,348,066	—
Total:	\$1,558,404,483	\$1,263,987,904	\$266,002,328	—	—	\$1,529,990,232	\$266,002,328

Expenditures and Positions

Description	FY2023-2024 Actuals	Existing Operating Budget as of 10/01/2024	FY2025-2026 Requested Continuation Adjustments	FY2025-2026 Requested in Technical/Other Adjustments	FY2025-2026 Requested New or Expanded Adjustments	FY2025-2026 Total Request	Over/Under EOB
Salaries	—	—	—	—	—	—	—
Other Compensation	—	—	—	—	—	—	—
Related Benefits	—	—	—	—	—	—	—
TOTAL PERSONAL SERVICES	—	—	—	—	—	—	—
Travel	—	—	—	—	—	—	—
Operating Services	—	—	—	—	—	—	—
Supplies	—	—	—	—	—	—	—
TOTAL OPERATING EXPENSES	—	—	—	—	—	—	—
PROFESSIONAL SERVICES	—	—	—	—	—	—	—
Other Charges	16,434,623,449	15,836,982,933	1,692,911,956	—	—	17,529,894,889	1,692,911,956
Debt Service	—	—	—	—	—	—	—
Interagency Transfers	442,279	—	—	—	—	—	—
TOTAL OTHER CHARGES	\$16,435,065,729	\$15,836,982,933	\$1,692,911,956	—	—	\$17,529,894,889	\$1,692,911,956
Acquisitions	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	—	—	—	—	—	—	—
TOTAL EXPENDITURES	\$16,435,065,729	\$15,836,982,933	\$1,692,911,956	—	—	\$17,529,894,889	\$1,692,911,956
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	FY2023-2024 Actuals	Existing Operating Budget as of 10/01/2024	FY2025-2026 Requested Continuation Adjustments	FY2025-2026 Requested in Technical/Other Adjustments	FY2025-2026 Requested New or Expanded Adjustments	FY2025-2026 Total Request	Over/Under EOB
STATE GENERAL FUND (Direct)	57,245,750	58,633,486	148,086	—	—	58,781,572	148,086
STATE GENERAL FUND BY:	—	—	—	—	—	—	—
INTERAGENCY TRANSFERS	—	—	—	—	—	—	—
FEES & SELF-GENERATED	—	—	—	—	—	—	—
STATUTORY DEDICATIONS	4,964,862	9,147,866	—	—	—	9,147,866	—
FEDERAL FUNDS	184,362,631	194,213,532	(148,086)	—	—	194,065,446	(148,086)
TOTAL MEANS OF FINANCING	\$246,573,243	\$261,994,884	—	—	—	\$261,994,884	—

Statutory Dedications

Description	FY2023-2024 Actuals	Existing Operating Budget as of 10/01/2024	FY2025-2026 Requested Continuation Adjustments	FY2025-2026 Requested in Technical/Other Adjustments	FY2025-2026 Requested New or Expanded Adjustments	FY2025-2026 Total Request	Over/Under EOB
Louisiana Medical Assistance Trust Fund	4,964,862	9,147,866	—	—	—	9,147,866	—
Total:	\$4,964,862	\$9,147,866	—	—	—	\$9,147,866	—

Expenditures and Positions

Description	FY2023-2024 Actuals	Existing Operating Budget as of 10/01/2024	FY2025-2026 Requested Continuation Adjustments	FY2025-2026 Requested in Technical/Other Adjustments	FY2025-2026 Requested New or Expanded Adjustments	FY2025-2026 Total Request	Over/Under EOB
Salaries	—	—	—	—	—	—	—
Other Compensation	—	—	—	—	—	—	—
Related Benefits	—	—	—	—	—	—	—
TOTAL PERSONAL SERVICES	—	—	—	—	—	—	—
Travel	—	—	—	—	—	—	—
Operating Services	—	—	—	—	—	—	—
Supplies	—	—	—	—	—	—	—
TOTAL OPERATING EXPENSES	—	—	—	—	—	—	—
PROFESSIONAL SERVICES	—	—	—	—	—	—	—
Other Charges	42,128,240	50,442,600	—	—	—	50,442,600	—
Debt Service	—	—	—	—	—	—	—
Interagency Transfers	204,445,002	211,552,284	—	—	—	211,552,284	—
TOTAL OTHER CHARGES	\$246,573,243	\$261,994,884	—	—	—	\$261,994,884	—
Acquisitions	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	—	—	—	—	—	—	—
TOTAL EXPENDITURES	\$246,573,243	\$261,994,884	—	—	—	\$261,994,884	—
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	FY2023-2024 Actuals	Existing Operating Budget as of 10/01/2024	FY2025-2026 Requested Continuation Adjustments	FY2025-2026 Requested in Technical/Other Adjustments	FY2025-2026 Requested New or Expanded Adjustments	FY2025-2026 Total Request	Over/Under EOB
STATE GENERAL FUND (Direct)	375,627,270	402,292,462	35,172,338	—	—	437,464,800	35,172,338
STATE GENERAL FUND BY:	—	—	—	—	—	—	—
INTERAGENCY TRANSFERS	—	—	—	—	—	—	—
FEES & SELF-GENERATED	—	—	—	—	—	—	—
STATUTORY DEDICATIONS	—	—	—	—	—	—	—
FEDERAL FUNDS	343,155,973	430,947,504	33,292,196	—	—	464,239,700	33,292,196
TOTAL MEANS OF FINANCING	\$718,783,243	\$833,239,966	\$68,464,534	—	—	\$901,704,500	\$68,464,534

Expenditures and Positions

Description	FY2023-2024 Actuals	Existing Operating Budget as of 10/01/2024	FY2025-2026 Requested Continuation Adjustments	FY2025-2026 Requested in Technical/Other Adjustments	FY2025-2026 Requested New or Expanded Adjustments	FY2025-2026 Total Request	Over/Under EOB
Salaries	—	—	—	—	—	—	—
Other Compensation	—	—	—	—	—	—	—
Related Benefits	—	—	—	—	—	—	—
TOTAL PERSONAL SERVICES	—	—	—	—	—	—	—
Travel	—	—	—	—	—	—	—
Operating Services	—	—	—	—	—	—	—
Supplies	—	—	—	—	—	—	—
TOTAL OPERATING EXPENSES	—	—	—	—	—	—	—
PROFESSIONAL SERVICES	—	—	—	—	—	—	—
Other Charges	718,780,252	833,239,966	68,464,534	—	—	901,704,500	68,464,534
Debt Service	—	—	—	—	—	—	—
Interagency Transfers	2,991	—	—	—	—	—	—
TOTAL OTHER CHARGES	\$718,783,243	\$833,239,966	\$68,464,534	—	—	\$901,704,500	\$68,464,534
Acquisitions	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	—	—	—	—	—	—	—
TOTAL EXPENDITURES	\$718,783,243	\$833,239,966	\$68,464,534	—	—	\$901,704,500	\$68,464,534
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

Description	FY2023-2024 Actuals	Existing Operating Budget as of 10/01/2024	FY2025-2026 Requested Continuation Adjustments	FY2025-2026 Requested in Technical/Other Adjustments	FY2025-2026 Requested New or Expanded Adjustments	FY2025-2026 Total Request	Over/Under EOB
STATE GENERAL FUND (Direct)	121,903,385	121,893,153	(30,547,585)	(31,656,450)	—	59,689,118	(62,204,035)
STATE GENERAL FUND BY:	—	—	—	—	—	—	—
INTERAGENCY TRANSFERS	9,935,277	13,752,501	99,032	—	—	13,851,533	99,032
FEES & SELF-GENERATED	15,648,818	24,128,223	173,747	—	—	24,301,970	173,747
STATUTORY DEDICATIONS	—	—	—	—	—	—	—
FEDERAL FUNDS	247,339,226	286,309,634	(80,009,823)	—	—	206,299,811	(80,009,823)
TOTAL MEANS OF FINANCING	\$394,826,707	\$446,083,511	\$(110,284,629)	\$(31,656,450)	—	\$304,142,432	\$(141,941,079)

Expenditures and Positions

Description	FY2023-2024 Actuals	Existing Operating Budget as of 10/01/2024	FY2025-2026 Requested Continuation Adjustments	FY2025-2026 Requested in Technical/Other Adjustments	FY2025-2026 Requested New or Expanded Adjustments	FY2025-2026 Total Request	Over/Under EOB
Salaries	—	—	—	—	—	—	—
Other Compensation	—	—	—	—	—	—	—
Related Benefits	—	—	—	—	—	—	—
TOTAL PERSONAL SERVICES	—	—	—	—	—	—	—
Travel	—	—	—	—	—	—	—
Operating Services	—	—	—	—	—	—	—
Supplies	—	—	—	—	—	—	—
TOTAL OPERATING EXPENSES	—	—	—	—	—	—	—
PROFESSIONAL SERVICES	—	—	—	—	—	—	—
Other Charges	268,615,727	308,537,702	(110,284,629)	(31,656,450)	—	166,596,623	(141,941,079)
Debt Service	—	—	—	—	—	—	—
Interagency Transfers	126,210,981	137,545,809	—	—	—	137,545,809	—
TOTAL OTHER CHARGES	\$394,826,707	\$446,083,511	\$(110,284,629)	\$(31,656,450)	—	\$304,142,432	\$(141,941,079)
Acquisitions	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	—	—	—	—	—	—	—
TOTAL EXPENDITURES	\$394,826,707	\$446,083,511	\$(110,284,629)	\$(31,656,450)	—	\$304,142,432	\$(141,941,079)
Classified	—	—	—	—	—	—	—
Unclassified	—	—	—	—	—	—	—
TOTAL AUTHORIZED T.O. POSITIONS	—	—	—	—	—	—	—
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	—	—	—	—	—	—	—
TOTAL NON-T.O. FTE POSITIONS	—	—	—	—	—	—	—

Addenda

INTERAGENCY TRANSFERS

Docusign Envelope ID: 9D191B48-C78C-413C-9CB1-5396A03F979E

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 2025 - 2026, 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.

Anthony Shumist
Recipient Agency Fiscal Officer
Debra Lamotte

10/3/24
Date
10/9/2024

Sending Agency Fiscal Officer

Date

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).

Department: 09A - LDH Agency: 306 MEDICAL VENDOR PAYMENTS	STATE OF LOUISIANA Childrens Budget Department Summary	CHILD - DS Fiscal Year 2025 - 2026 Report Date: 11/8/24
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Service Number	Service Name	Agency Number	Agency Name	General Fund	IAT	Self Generated	Stat Deds	Federal Funds	Total Funds	Positions
MVP01	Medical Services for Medicaid Eligible Children	306	Medical Vendor Payments	\$772,566,191	\$49,525,875	\$160,937,706	\$392,450,500	\$3,027,519,076	\$4,402,999,348	0
			Total:	\$772,566,191	\$49,525,875	\$160,937,706	\$392,450,500	#####	#####	0

Department: 09A - LDH Agency: 306 MEDICAL VENDOR PAYMENTS	STATE OF LOUISIANA Childrens Budget by Department	CHILD - DC Fiscal Year 2025 - 2026 Report Date: 11/8/24
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Means of Financing:	Existing Operating Budget	Requested Continuation	Requested NE	Total Requested	Total Recommended
STATE GENERAL FUND (Direct)	\$776,930,468	(\$4,364,277)	\$0	\$772,566,191	\$0
STATE GENERAL FUND BY:					
INTERAGENCY TRANSFERS	\$48,004,973	\$1,520,902	\$0	\$49,525,875	\$0
FEES & SELF-GENERATED	\$131,709,437	\$29,228,269	\$0	\$160,937,706	\$0
STATUTORY DEDICATIONS	\$368,561,914	\$23,888,586	\$0	\$392,450,500	\$0
FEDERAL FUNDS	\$2,907,972,493	\$119,546,583	\$0	\$3,027,519,076	\$0
TOTAL MEANS OF FINANCING	\$4,233,179,285	\$169,820,063	\$0	\$4,402,999,348	\$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	\$4,136,521,508	\$169,820,063	\$0	\$4,306,341,571	\$0
Debt Service	\$0	\$0	\$0	\$0	\$0
Interagency Transfers	\$96,657,777	\$0	\$0	\$96,657,777	\$0
TOTAL OTHER CHARGES	\$4,233,179,285	\$169,820,063	\$0	\$4,402,999,348	\$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 - LDH		STATE OF LOUISIANA			CHILD - DC	
Agency: 306 MEDICAL VENDOR PAYMENTS		Childrens Budget by Department			Fiscal Year 2025 - 2026 Report Date: 11/8/24	
TOTAL EXPENDITURES	\$4,233,179,285	\$169,820,063	\$0	\$4,402,999,348	\$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	

Department: 09A - LDH Agency: 306 MEDICAL VENDOR PAYMENTS	STATE OF LOUISIANA Childrens Budget Agency Summary	CHILD - AS Fiscal Year 2025 - 2026 Report Date: 11/8/24
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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	\$722,279,394	\$44,426,105	\$151,990,360	\$389,082,496	#####	#####	0
MVP01	Medical Services for Medicaid Eligible Children	3062	Payments to Public Providers	\$21,641,829	\$0	\$0	\$3,368,004	\$71,449,794	\$96,459,627	0
MVP01	Medical Services for Medicaid Eligible Children	3064	Uncompensated Care Costs	\$28,644,968	\$5,099,770	\$8,947,346	\$0	\$65,441,110	\$108,133,194	0
			Total:	\$772,566,191	\$49,525,875	\$160,937,706	\$392,450,500	#####	#####	0

Department: 09A - LDH
 Agency: 306 MEDICAL VENDOR PAYMENTS

STATE OF LOUISIANA
Childrens Budget
by Agency

CHILD - AC
 Fiscal Year 2025 - 2026
 Report Date: 11/8/24

306 - Medical Vendor Payments

Means of Financing:	Existing Operating Budget	Requested Continuation	Requested NE	Total Requested	Total Recommended
STATE GENERAL FUND (Direct)	\$776,930,468	(\$4,364,277)	\$0	\$772,566,191	\$0
STATE GENERAL FUND BY:					
INTERAGENCY TRANSFERS	\$48,004,973	\$1,520,902	\$0	\$49,525,875	\$0
FEES & SELF-GENERATED	\$131,709,437	\$29,228,269	\$0	\$160,937,706	\$0
STATUTORY DEDICATIONS	\$368,561,914	\$23,888,586	\$0	\$392,450,500	\$0
FEDERAL FUNDS	\$2,907,972,493	\$119,546,583	\$0	\$3,027,519,076	\$0
TOTAL MEANS OF FINANCING	\$4,233,179,285	\$169,820,063	\$0	\$4,402,999,348	\$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	\$4,136,521,508	\$169,820,063	\$0	\$4,306,341,571	\$0
Debt Service	\$0	\$0	\$0	\$0	\$0
Interagency Transfers	\$96,657,777	\$0	\$0	\$96,657,777	\$0
TOTAL OTHER CHARGES	\$4,233,179,285	\$169,820,063	\$0	\$4,402,999,348	\$0
Acquisitions	\$0	\$0	\$0	\$0	\$0
Major Repairs	\$0	\$0	\$0	\$0	\$0

Department: 09A - LDH		STATE OF LOUISIANA				CHILD - AC
Agency: 306 MEDICAL VENDOR PAYMENTS		Childrens Budget by Agency				Fiscal Year 2025 - 2026 Report Date: 11/8/24
TOTAL ACQ. & MAJOR REPAIRS	\$0	\$0	\$0	\$0	\$0	\$0
TOTAL EXPENDITURES	\$4,233,179,285	\$169,820,063	\$0	\$4,402,999,348	\$0	\$0
Classified	0	0	0	0	0	0
Unclassified	0	0	0	0	0	0
TOTAL AUTHORIZED T.O. POSITIONS	0	0	0	0	0	0
TOTAL AUTHORIZED OTHER CHARGES POSITION	0	0	0	0	0	0
TOTAL NON-T.O. FTE POSITIONS	0	0	0	0	0	0
TOTAL POSITIONS	0	0	0	0	0	0

Department: 09A - LDH
 Agency: 306 MEDICAL VENDOR PAYMENTS

STATE OF LOUISIANA
Childrens Budget
 by Agency/Program and Service

CHILD1
 Fiscal Year 2025 - 2026
 Report Date: 11/8/24

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)	\$710,465,306	\$11,814,088	\$0	\$722,279,394	\$0
STATE GENERAL FUND BY:					
INTERAGENCY TRANSFERS	\$42,941,664	\$1,484,441	\$0	\$44,426,105	\$0
FEES & SELF-GENERATED	\$122,826,060	\$29,164,300	\$0	\$151,990,360	\$0
STATUTORY DEDICATIONS	\$365,193,910	\$23,888,586	\$0	\$389,082,496	\$0
FEDERAL FUNDS	\$2,731,056,500	\$159,571,672	\$0	\$2,890,628,172	\$0
TOTAL MEANS OF FINANCING	\$3,972,483,440	\$225,923,087	\$0	\$4,198,406,527	\$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	\$3,972,483,440	\$225,923,087	\$0	\$4,198,406,527	\$0
Debt Service	\$0	\$0	\$0	\$0	\$0
Interagency Transfers	\$0	\$0	\$0	\$0	\$0
TOTAL OTHER CHARGES	\$3,972,483,440	\$225,923,087	\$0	\$4,198,406,527	\$0

Department: 09A - LDH Agency: 306 MEDICAL VENDOR PAYMENTS	STATE OF LOUISIANA Childrens Budget by Agency/Program and Service	CHILD1 Fiscal Year 2025 - 2026 Report Date: 11/8/24
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Acquisitions	\$0	\$0	\$0	\$0	\$0
Major Repairs	\$0	\$0	\$0	\$0	\$0
TOTAL ACQ. & MAJOR REPAIRS	\$0	\$0	\$0	\$0	\$0
TOTAL EXPENDITURES	\$3,972,483,440	\$225,923,087	\$0	\$4,198,406,527	\$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 POSITION	0	0	0	0	0
TOTAL NON-T.O. FTE POSITIONS	0	0	0	0	0
TOTAL POSITIONS	0	0	0	0	0

Department: 09A - LDH
 Agency: 306 MEDICAL VENDOR PAYMENTS

STATE OF LOUISIANA
Childrens Budget
by Agency/Program and Service

CHILD1
 Fiscal Year 2025 - 2026
 Report Date: 11/8/24

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)	\$21,587,308	\$54,521	\$0	\$21,641,829	\$0
STATE GENERAL FUND BY:					
INTERAGENCY TRANSFERS	\$0	\$0	\$0	\$0	\$0
FEES & SELF-GENERATED	\$0	\$0	\$0	\$0	\$0
STATUTORY DEDICATIONS	\$3,368,004	\$0	\$0	\$3,368,004	\$0
FEDERAL FUNDS	\$71,504,315	(\$54,521)	\$0	\$71,449,794	\$0
TOTAL MEANS OF FINANCING	\$96,459,627	\$0	\$0	\$96,459,627	\$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	\$46,017,027	\$0	\$0	\$46,017,027	\$0
TOTAL OTHER CHARGES	\$96,459,627	\$0	\$0	\$96,459,627	\$0
Acquisitions	\$0	\$0	\$0	\$0	\$0

Department: 09A - LDH Agency: 306 MEDICAL VENDOR PAYMENTS	STATE OF LOUISIANA Childrens Budget by Agency/Program and Service	CHILD1 Fiscal Year 2025 - 2026 Report Date: 11/8/24
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Major Repairs	\$0	\$0	\$0	\$0	\$0
TOTAL ACQ. & MAJOR REPAIRS	\$0	\$0	\$0	\$0	\$0
TOTAL EXPENDITURES	\$96,459,627	\$0	\$0	\$96,459,627	\$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 POSITION	0	0	0	0	0
TOTAL NON-T.O. FTE POSITIONS	0	0	0	0	0
TOTAL POSITIONS	0	0	0	0	0

Department: 09A - LDH
 Agency: 306 MEDICAL VENDOR PAYMENTS

STATE OF LOUISIANA
Childrens Budget
by Agency/Program and Service

CHILD1
 Fiscal Year 2025 - 2026
 Report Date: 11/8/24

3064 - Uncompensated Care Costs

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)	\$44,877,854	(\$16,232,886)	\$0	\$28,644,968	\$0
STATE GENERAL FUND BY:					
INTERAGENCY TRANSFERS	\$5,063,309	\$36,461	\$0	\$5,099,770	\$0
FEES & SELF-GENERATED	\$8,883,377	\$63,969	\$0	\$8,947,346	\$0
STATUTORY DEDICATIONS	\$0	\$0	\$0	\$0	\$0
FEDERAL FUNDS	\$105,411,678	(\$39,970,568)	\$0	\$65,441,110	\$0
TOTAL MEANS OF FINANCING	\$164,236,218	(\$56,103,024)	\$0	\$108,133,194	\$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	\$113,595,468	(\$56,103,024)	\$0	\$57,492,444	\$0
Debt Service	\$0	\$0	\$0	\$0	\$0
Interagency Transfers	\$50,640,750	\$0	\$0	\$50,640,750	\$0
TOTAL OTHER CHARGES	\$164,236,218	(\$56,103,024)	\$0	\$108,133,194	\$0
Acquisitions	\$0	\$0	\$0	\$0	\$0

Department: 09A - LDH		STATE OF LOUISIANA				CHILD1
Agency: 306 MEDICAL VENDOR PAYMENTS		Childrens Budget				Fiscal Year 2025 - 2026
		by Agency/Program and Service				Report Date: 11/8/24
Major Repairs	\$0	\$0	\$0	\$0	\$0	\$0
TOTAL ACQ. & MAJOR REPAIRS	\$0	\$0	\$0	\$0	\$0	\$0
TOTAL EXPENDITURES	\$164,236,218	(\$56,103,024)	\$0	\$108,133,194	\$0	\$0
Classified	0	0	0	0	0	0
Unclassified	0	0	0	0	0	0
TOTAL AUTHORIZED T.O. POSITIONS	0	0	0	0	0	0
TOTAL AUTHORIZED OTHER CHARGES POSITION	0	0	0	0	0	0
TOTAL NON-T.O. FTE POSITIONS	0	0	0	0	0	0
TOTAL POSITIONS	0	0	0	0	0	0

Department: 09A - LDH	STATE OF LOUISIANA	CHILD2
Agency: 306 MEDICAL VENDOR PAYMENTS	Childrens Budget	Fiscal Year 2025 - 2026
	Narrative	Report Date: 11/8/24

Form ID:	36064
Form Description:	306 - Private Providers 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% FPL.
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:

<p>Department: 09A - LDH Agency: 306 MEDICAL VENDOR PAYMENTS</p>	<p>STATE OF LOUISIANA Childrens Budget Narrative</p>	<p>CHILD2 Fiscal Year 2025 - 2026 Report Date: 11/8/24</p>
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Question and Narrative Response

- Objective 3061-02: Through the Medicaid Managed Care Activity, increase preventive and primary healthcare use, thereby improving quality health outcomes, and patient experience for Louisiana Medicaid members.
- 3061004 - Percentage of enrolled children under age 21 who received a comprehensive or periodic oral evaluation within the measurement year;
- 3061005 - Percentage of enrolled children ages one through under age 21 who received at least two dental topical fluoride applications within the measurement year;
- 3061006 - Percentage of enrolled children who have ever received sealants on permanent first molar teeth. Two rates are reported: (1) at least one sealant and (2) all four molars sealed by the 10th birthdate;
- 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 3061-03: 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.

Department: 09A - LDH	STATE OF LOUISIANA	CHILD2
Agency: 306 MEDICAL VENDOR PAYMENTS	Childrens Budget	Fiscal Year 2025 - 2026
	Narrative	Report Date: 11/8/24

Form ID:	36065
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% FPL.

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 3062-01: 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.

Department: 09A - LDH	STATE OF LOUISIANA	CHILD2
Agency: 306 MEDICAL VENDOR PAYMENTS	Childrens Budget	Fiscal Year 2025 - 2026
	Narrative	Report Date: 11/8/24

Form ID:	36066
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% FPL.
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.

Agency: 306 MEDICAL VENDOR PAYMENTS

STATE OF LOUISIANA
Sunset Review

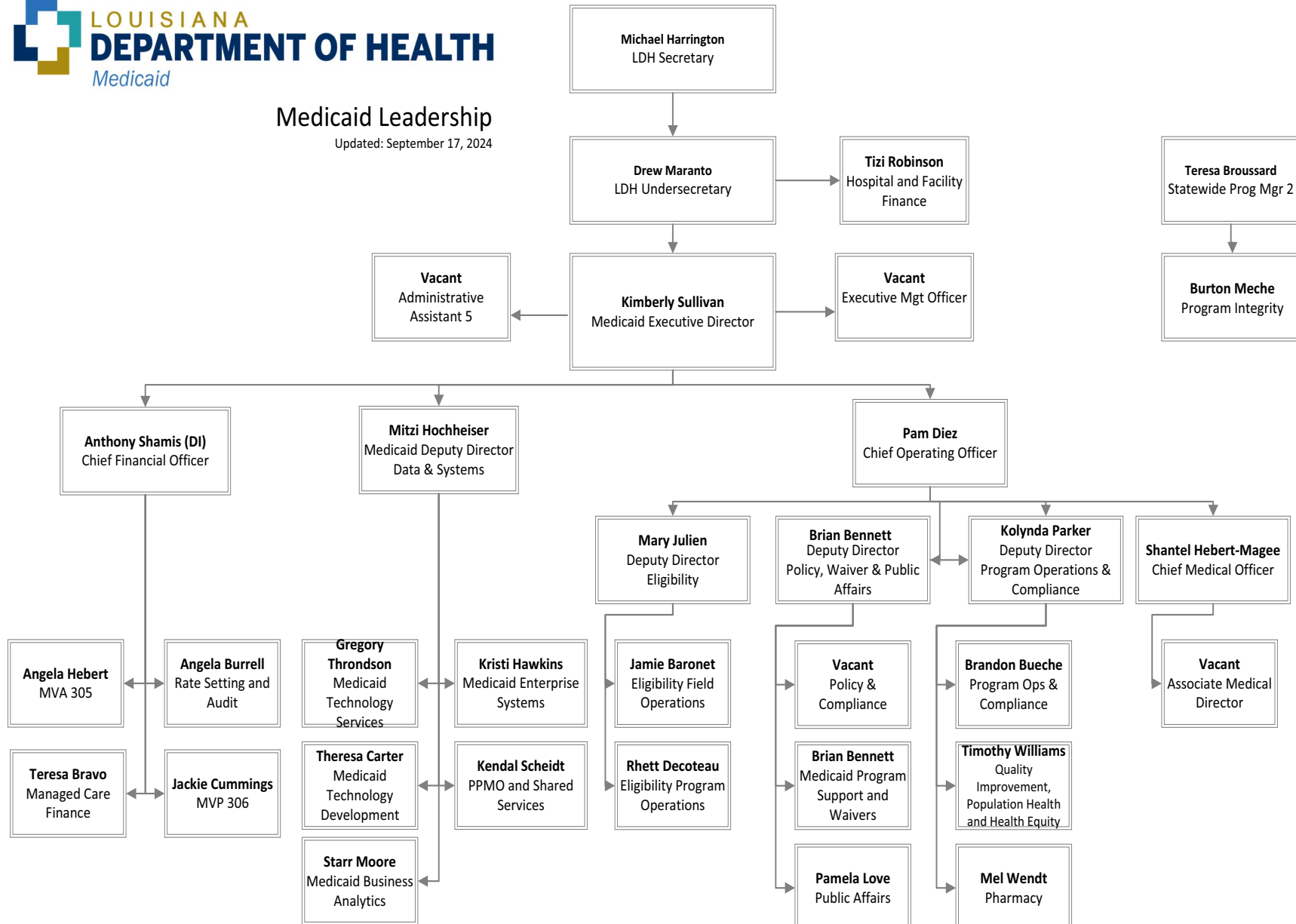
SUNSET1
Fiscal Year 2025 - 2026
Report Date: 11/8/24

GENERAL ADDENDA



Medicaid Leadership

Updated: September 17, 2024





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