

# Agency Budget Request

FISCAL YEAR 2024–2025



Louisiana Department of Health  
305 — Medical Vendor Administration



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BUDGET REQUEST

Fiscal Year Ending June 30,2025

NAME OF DEPARTMENT / AGENCY: Louisiana Department of Health      PHYSICAL ADDRESS: 628 North 4th Street  
BUDGET UNIT: Medical Vendor Administration (MVA)      P.O. Box 91030, Baton Rouge, Louisiana  
SCHEDULE NUMBER: 09-305      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: _____ PRINTED NAME/TITLE: <u>Stephen F. Russo, JD, Secretary</u> DATE: <u>10.24.2023</u> EMAIL ADDRESS: <u>Stephen.Russo@la.gov</u>	HEAD OF BUDGET UNIT: _____ PRINTED NAME/TITLE: <u>Kim Sullivan, Interim Medicaid Exec Dir</u> DATE: <u>10.24.23</u> EMAIL ADDRESS: <u>Kimberly.Sullivan@la.gov</u>
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PROGRAM CONTACT PERSON: <u>DeEdra Lamotte</u> TITLE: <u>Medicaid Program Mgr 4, Financial Mgmt. &amp; Operations</u> TELEPHONE NUMBER: <u>(225) 342-4312</u> EMAIL ADDRESS: <u>DeEdra.Lamotte@la.gov</u>	FINANCIAL CONTACT PERSON: <u>Rachel Newman</u> TITLE: <u>Medicaid Deputy Director &amp; CFO</u> TELEPHONE NUMBER: <u>(225) 219-3455</u> EMAIL ADDRESS: <u>Rachel.Newman2@la.gov</u>
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# Operational Plan

**OPERATIONAL PLAN FORM  
DEPARTMENT DESCRIPTION**

DEPARTMENT NUMBER AND NAME: 09 - LOUISIANA DEPARTMENT OF HEALTH

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

DEPARTMENT GOAL(S):

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

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

**OPERATIONAL PLAN FORM  
AGENCY (BUDGET UNIT) DESCRIPTION**

AGENCY NUMBER AND NAME: 09-305 MEDICAL VENDOR ADMINISTRATION (MVA)

**AGENCY MISSION:**

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

**AGENCY GOAL(S):**

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

MVA 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.

**OPERATIONAL PLAN FORM  
PROGRAM DESCRIPTION**

PROGRAM NAME: MEDICAL VENDOR ADMINISTRATION (PROGRAM A - 305-2000)

**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 Medical Vendor Administration is to administer an efficient and effective Medicaid program in compliance with state and federal requirements.

**PROGRAM GOAL(S):**

- I. To provide exceptional customer service
- II. To demonstrate good stewardship of public resources

#### PROGRAM ACTIVITY 1: MEDICAID ELIGIBILITY DETERMINATION AND ENROLLMENT

The Medicaid Eligibility Determination and Enrollment activity serves to identify, engage, enroll, and retain eligible individuals in the Louisiana Medicaid program, applying modern technology and customer service functions. This activity advances the agency’s Triple Aim philosophy, as access to quality health care is essential to everyone's ability to achieve and maintain good health and is not possible without comprehensive, continuous health insurance coverage.

The eligibility process begins with the completion of a Medicaid application. Either the prospective beneficiary or an authorized representative may apply online, by mail, at a local Medicaid office or at a Medicaid Application Center. Individuals who apply for Medicaid must meet the eligibility requirements of the program. Eligibility determination is a federally approved process operated in a uniform manner throughout the state. In Louisiana, caseworkers in each of the nine regions of the Department of Health determine an individual’s eligibility for Medicaid in accordance with standardized policy. Processing times for applications vary depending on the coverage group and program under consideration, the amount of information the person is able to provide, and how quickly all necessary information is available to Medicaid staff. Eligible individuals and families enrolled in the Louisiana Medicaid Program receive a Medicaid identification card.

In November 2018, LDH replaced its decades old Medicaid eligibility and enrollment system with modern technology. The new system improves customer service to applicants and enrollees. A “self-service” web portal provides applicants and enrollees with the convenience of updating their own information – addresses, employment, household characteristics – 24 hours a day, seven days a week. Eligibility decisions are faster – within minutes for online applications and renewals when additional information or documentation is not required. In addition to real-time eligibility decisions, automated checks of 20 state and federal databases provide greater assurance that benefits go only to those who meet eligibility requirements, increasing program integrity. Likewise, the use of an automated business rules engine provides for consistent application of a complex and dynamic set of rules governing Medicaid eligibility and regulatory compliance.

With this new, highly automated system and technology-reliant customer service functions, Medicaid strives to strike the right balance between streamlining enrollment and continuing coverage of people who meet eligibility requirements and preventing enrollment or ending coverage of people who do not. Understanding that normal life events — such as getting married or divorced, having children or taking a second job — can change a person’s income and Medicaid eligibility, the agency seeks to implement policy and work processes that minimize “churn” – moving in and out of health insurance coverage, which can disrupt access to care, lead to poor health outcomes, and increase administrative burden for the Medicaid agency and the people it serves.

**PROGRAM ACTIVITY 2: MEDICAID ENTERPRISE SYSTEMS (MES)**

Louisiana's Medicaid providers deliver essential health care and long-term care supports and services to Medicaid recipients, and their continued participation is key to access to care and improved health outcomes. Medicaid Enterprise Systems (MES) handles most Medicaid provider relations functions, including the processing of provider claims and issuing payments for the fee for service (FFS) program, the processing of encounters (claims paid by managed care entities) for the managed care program, credentialing and enrolling providers in the Medicaid network, and combating fraud, waste, and abuse in the Medicaid program.

Aligned with MVA goal of providing exceptional customer service, the provider enrollment and credentialing activity is to improve provider experience with the Medicaid program. In 2020, Louisiana Medicaid will fully implement a new, centralized provider management system and become responsible for credentialing and enrollment of all providers, including managed care and fee-for service.

Providers will no longer need to complete numerous, different applications to enroll, become re-credentialed, or updated information in FFS or with the managed care organizations (MCOs), leading to improved provider satisfaction. This new system will bring LDH in compliance with the Affordable Care Act's managed care screening requirements. Provider management will also be the first MES function to comply with federal modularity requirements and integrate into the statewide enterprise architecture. A primary focus of future MES Activity will be the development and execution of a multi-year strategy for the procurement, design, development and deployment of information technology services and software to further modernize the legacy MES, advancing state strategic objectives and in compliance with federal modularity requirements for MES functions.

### PROGRAM ACTIVITY 3: FINANCIAL MANAGEMENT

The federal government and the state jointly fund the Louisiana Medicaid program. States must ensure they can fund their share of Medicaid expenditures for the care and services available under their state plan and are responsible for safeguarding Medicaid funds by making proper payments to providers, recovering misspent funds, and accurately reporting costs for federal reimbursement. Sufficient financial controls, monitoring and reporting functions are necessary to enable program transparency and demonstrate accountability of public resources to Louisiana taxpayers, lawmakers, and other constituents. Financial management supports the agency's broader goals of ensuring cost effectiveness in the delivery of health care services by using efficient management practices and implementing measures that will constrain the growth in Medicaid expenditures.

Medicaid rate setting and audit functions decrease avoidable public expenditures in the Medicaid program and ensure that limited resources are for health care initiatives that have proven to be the most responsive to the needs of Medicaid members. These functions also ensure that funding allocated to institutional services, such as Nursing Homes and Intermediate Care Facilities (ICF) have proper expenditures. It also ensures that the development of Medicaid cost reports and analysis and audit of hospital records, as required by federal regulations assure that hospitals receive reimbursements in accordance with the provisions of state and federal law, rules, and regulations. Additionally, these functions include monitoring of Local Education Authorities (LEAs) participating in Medicaid for school-based health services to ensure access to Early Periodic Screening Diagnostic and Treatment (EPSDT) and other Medicaid allowable services for children and that reimbursement for these services through certified public expenditures are tracked and audited.

The purpose of establishing and maintaining an effective collections/recovery and cost avoidance program is to reduce Medicaid expenditures and improve program integrity. Monitoring of third party liability (TPL) claims processing enables the Department to enforce that Medicaid is the payer of last resort. Maximizing recoveries will result in the most efficient use of Medicaid funds.

#### Collections:

**TPL Collections** - Third parties are legally liable individuals, institutions, corporations (including insurers), and public or private agencies who are or may be responsible for paying medical claims of Medicaid enrollees. Medicaid pays only after a known third party has met its legal obligation to pay, with the exception of claims for prenatal, preventive pediatrics, and medical support enforcement, where Medicaid pays first and then pursues the third party payment, referred to as "pay and chase." Liable third parties include other health insurers and parties liable for accidents and injuries to Medicaid enrollees.

#### Recovery:

**Estate Recovery** - As required by federal regulations, the State must seek recovery of Medicaid payments for long-term care facility services, home and community-based services, and related hospital and prescription drug services from the estate of an individual who was age 55 or older when he or she received such services.

**Recipient Recovery** - Payments made to Medicaid providers on behalf of a Medicaid beneficiary are subject to recovery from an offender as restitution. This is pursuant to a court order or as part of an agreement with a prosecutorial agency and, upon the death of the beneficiary, from funds remaining in annuities naming the State as the remainder beneficiary and from assets remaining in Special Needs Trusts (SNTs) that include a Medicaid payback provision.

#### Cost Avoidance:

**Cost Avoidance** - Cost Avoidance is the main goal of the TPL program. Once other insurance information is in MES, the system will begin cost-avoiding claims by denying them back to the provider with a message that the beneficiary has other insurance on that date of service and he or she should file the claim there first. If the provider has already billed the other insurance, Medicaid will only consider making payment up to the Medicaid allowed amount.

#### PROGRAM ACTIVITY 4: PROGRAM INTEGRITY

The Department is committed to combating fraud, waste, and abuse in the Medicaid program in compliance with state and federal law and regulations. Louisiana Medicaid focuses resources on specific Medicaid activities, such as provider enrollment compliance, managed care compliance, Unified Program Integrity Contractor (UPIC), payment error rate measurement (PERM), surveillance, and utilization Review (SURS), and beneficiary fraud investigations.

**Provider Enrollment:** Louisiana Medicaid launched its new Louisiana Medicaid Provider Enrollment Portal July 26, 2021 to perform risk-based screening on new, reenrolled and revalidation fee-for-service providers. The Louisiana Medicaid Provider Enrollment Portal will bring Medicaid into compliance with The Affordable Care Act and 21st Century Cures Act. Once the portal is complete, Medicaid will enroll all Managed Care only providers performing services on Medicaid beneficiaries into the program. Medicaid will check the federal requirements and other lists on providers at enrollment, revalidation, and monthly on active providers.

**Managed Care Compliance:** Medicaid is responsible for ensuring the integrity of all Louisiana Medicaid managed care entities. Medicaid tracks contract compliance across a number of measures, including participating in quarterly program integrity/Medicaid Fraud Control Unit (MFCU) meetings, reporting all providers terminated for cause, compliance with mandatory exclusions, concurrent reporting of suspected or confirmed fraud to Medicaid, and contractually required MCO reporting. Medicaid ensures MCO adherence to contract requirements through issuance of notices of actions and assessment of monetary penalties for non-compliance.

**Unified Program Integrity Contractor (UPIC):** UPIC vendors contracted with CMS identify and prevent overpayments in Medicaid and Medicare.

**Payment Error Rate Measurement (PERM):** PERM measures state payment error rates on a 3-year cycle and determines the national error rate. Louisiana has ranked fifth, third, and eighth lowest in each of the past three PERM cycles, starting in 2008.

**Surveillance and Utilization Review System SURS:** SURS analyzes data from fee-for-service program and encounter data from Louisiana Medicaid MCOs to detect fraud and abuse by providers.

**Medicaid Beneficiary Fraud:** Medicaid Beneficiary Fraud (MBF) Unit investigates Medicaid beneficiary eligibility. MBF receives tips and referrals of Medicaid Beneficiaries and determines if there is an ineligible individual receiving benefits.



DEPARTMENT ID: LOUISIANA DEPARTMENT OF HEALTH (09)  
 AGENCY ID: MEDICAL VENDOR ADMINISTRATION (09-305)  
 PROGRAM ID: A - MEDICAL VENDOR ADMINISTRATION (305-2000)  
 PROGRAM ACTIVITY: A-1 - MEDICAID ELIGIBILITY DETERMINATION AND ENROLLMENT

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 Objective: Through the Medicaid Eligibility Determination activity, maximize the efficiency and accuracy of enrolling eligible individuals in Medicaid and CHIP by processing at least 98.5% of applications timely through continuous improvement that is technology driven, simplifies administrative processes and eliminates waste.

Children's Budget Link: In general, child/adolescent services identified in this budget unit are indirectly linked to the Children's Cabinet via the Children's Budget. The Children's Budget reflects funding and expenditures for a broad range of Medicaid services for children under 21 years of age.  
 Human Resource Policies Beneficial to Women and Families Link: This objective will support Act 1078 by insuring the provision of healthcare services to women and families.  
 Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): The Governor's Healthcare Reform Panel for improving healthcare in Louisiana.

Explanatory Note: Title XIX of the Social Security Act is a program of national health assistance funded by the federal government and the states. The program covers low-income individuals and their families who are aged, blind or disabled, and members of families with dependent children. Title XXI allows states to expand coverage of Medicaid health assistance to children who live in families with incomes up to 200% of the federal poverty level (FPL). This objective is being modified to remove reference to "living below 200% of Federal Poverty Level (FPL)," due to certain income disregards, which are allowed for the determination of eligibility. Due to these income disregards, it is sometimes possible that children living in families with incomes above 200% of FPL are determined to be eligible for coverage under Title XIX and Title XXI.

LaPAS PI CODE	L E V E L	PERFORMANCE INDICATOR NAME	PERFORMANCE INDICATOR VALUES						
			YEAREND PERFORMANCE STANDARD FY 2022-2023	ACTUAL YEAREND PERFORMANCE FY 2022-2023	PERFORMANCE STANDARD AS INITIALLY APPROPRIATED FY 2023-2024	EXISTING PERFORMANCE STANDARD FY 2023-2024	PERFORMANCE AT CONTINUATION BUDGET LEVEL FY 2024-2025	PERFORMANCE AT EXECUTIVE BUDGET LEVEL FY 2024-2025	PERFORMANCE STANDARD AS INITIALLY APPROPRIATED FY 2024-2025
25540	K	Percentage of Medicaid applications received online	65%	66%	65%	65%	68%		
25539	K	Number of children enrolled through Express Lane Eligibility (ELE)	30,000	4,237 <sup>1</sup>	30,000	30,000	8,500 <sup>2</sup>		
24036	K	Percentage of applications for Pregnant Women approved within 5 calendar days	70%	73%	70%	70%	70%		
25541	K	Percentage of applications for LaCHIP & Medicaid programs for children approved within 15 calendar days	75%	91% <sup>3</sup>	75%	75%	75%		
10013	K	Total number of children enrolled	730,000	773,000 <sup>4</sup>	730,000	730,000	750,000 <sup>5</sup>		
17038	K	Percentage of renewals processed and not closed for procedural reasons	90.0%	98.0% <sup>6</sup>	90.0%	90.0%	80.0% <sup>7</sup>		
24041	K	Percentage of calls received through the Medicaid & LaCHIP hotlines who hold for a representative less than 5 minutes	80%	91% <sup>8</sup>	80%	80%	85%		
25542	K	Number of children renewed through Express Lane Eligibility (ELE)	40,000	220,231 <sup>9</sup>	40,000	40,000	185,000 <sup>10</sup>		
2241	S	Number of children enrolled as Title XXI Eligibles (LaCHIP)	141,000	183,645 <sup>11</sup>	145,000	145,000	160,000		
2242	S	Number of children enrolled as Title XIX Eligibles (traditional Medicaid)	630,000	589,355 <sup>9</sup>	630,000	630,000	600,000		
26084	S	Percentage of applications for the New Adult program approved within 15 calendar days	75%	94% <sup>3</sup>	80%	80%	75%		
26085	K	Number of justice involved adults enrolled pre-release from incarceration	11,000	12,755	11,000	11,000	11,500		
26563	K	Percentage of Medicaid applications with a real-time eligibility decision	33%	32%	33%	33%	37%		
26564	K	Percentage of renewals streamlined	62%	54% <sup>12</sup>	62%	62%	55%		

- <sup>1</sup> The continuous enrollment provision during the Public Health Emergency (PHE) has decreased churn which reduced the number of new enrollees through the Express Lane Eligibility (ELE).
- <sup>2</sup> The previous performance standard was based on total current ELE enrollment as opposed to new enrollees added during the fiscal year. The standard has been adjusted to reflect new enrollees added during the fiscal year.
- <sup>3</sup> The continuation of the Public Health Emergency (PHE) and focus on application processing rather than renewals has contributed to the consistent positive trend above the standard.
- <sup>4</sup> Due to the continuous enrollment provision during the PHE, the number of children enrolled in Medicaid programs has been higher than normal.
- <sup>5</sup> Although the PHE ended March 31, 2023, it is anticipated the net enrollment will not return to pre-PHE levels. The standard has been adjusted to reflect this change.
- <sup>6</sup> Under continuous enrollment provisions for the PHE, only separate CHIP programs could close for procedural reasons, therefore rates for non-closure were higher than normal.
- <sup>7</sup> The closure rate is expected to rise due to the PHE ending March 31, 2023 and procedural closures are again allowed for all program. The standard has been adjusted.
- <sup>8</sup> Customer Service Unit representatives exceeded expectations in efficiently answering and handling calls to the hotline.
- <sup>9</sup> The increased enrollment of children in the Medicaid program has led to an increased overall number of children renewed via ELE.
- <sup>10</sup> Inconsistencies in the data obtained the past two fiscal years has resulted in an inaccurate performance standard. The standard has been updated.

DEPARTMENT ID: LOUISIANA DEPARTMENT OF HEALTH (09)  
 AGENCY ID: MEDICAL VENDOR ADMINISTRATION (09-305)  
 PROGRAM ID: A - MEDICAL VENDOR ADMINISTRATION (305-2000)  
 PROGRAM ACTIVITY: A-1 - MEDICAID ELIGIBILITY DETERMINATION AND ENROLLMENT

GENERAL PERFORMANCE INFORMATION:						
LaPAS PI CODE	PERFORMANCE INDICATOR NAME	PERFORMANCE INDICATOR VALUES				
		PRIOR YEAR ACTUAL FY 2018-2019	PRIOR YEAR ACTUAL FY 2019-2020	PRIOR YEAR ACTUAL FY 2020-2021	PRIOR YEAR ACTUAL FY 2021-2022	PRIOR YEAR ACTUAL FY 2022-2023
12027	Number of certified Medicaid Application Centers	398	393	291	269	304
25543	Number of individuals enrolled in all Medicaid and LaCHIP programs	1,556,584	1,721,489	1,882,486	1,974,812	2,052,605
25545	Number of applications processed annually	424,365	253,353	181,548	141,431	172,728
26764	Total number of adults enrolled (in Medicaid)	874,421 <sup>1</sup>	966,521	980,380	1,197,880	1,279,605

<sup>1</sup> The Eligibility and Enrollment System retired in FY 2017-2018 and Medicaid replaced it with a new system to start reporting this information in FY 2018-2019.

DEPARTMENT ID: LOUISIANA DEPARTMENT OF HEALTH (09)  
 AGENCY ID: MEDICAL VENDOR ADMINISTRATION (09-305)  
 PROGRAM ID: A - MEDICAL VENDOR ADMINISTRATION (305-2000)  
 PROGRAM ACTIVITY: A-2 - MEDICAID ENTERPRISE SYSTEMS (MES)

2. **K** Objective: Through the Medicaid Enterprise Systems (MES) Operations activity, to operate an efficient and effective MMIS system.

Children's Budget Link: Not Applicable

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

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

LaPAS PI CODE	L E V E L	PERFORMANCE INDICATOR NAME	PERFORMANCE INDICATOR VALUES					PERFORMANCE STANDARD AS INITIALLY APPROPRIATED FY 2024-2025
			YEAREND PERFORMANCE STANDARD FY 2022-2023	ACTUAL YEAREND PERFORMANCE FY 2022-2023	PERFORMANCE STANDARD AS INITIALLY APPROPRIATED FY 2023-2024	EXISTING PERFORMANCE STANDARD FY 2023-2024	PERFORMANCE AT CONTINUATION BUDGET LEVEL FY 2024-2025	
2219	K	Percentage of total claims processed within 30 days of receipt	98.0%	100.0%	98.0%	98.0%	98.0%	
2217	S	Average claim processing time in days	13.0	10.0 <sup>1</sup>	11.0	11.0	11.0	
26086	K	Total Number of Managed Care Encounters Processed	116,000,000.0	134,349,197.0	117,000,000.0	117,000,000.0	116,000,000.0	
26087	K	Total Number of Managed Care Capitation Payments Processed	42,000,000	55,273,483 <sup>2</sup>	50,000,000	50,000,000	50,000,000	
25556	K	Dollar value of MES contract expenditures	\$53,197,056	\$55,401,526	\$80,197,056	\$80,197,056	\$83,450,271 <sup>3</sup>	
25557	S	Percent of MES contract expenditures that are federally funded	72%	72%	72%	72%	72%	

<sup>1</sup> There was a recovery file processing delay in FY 2021-2022 that resulted in a decrease to the yearend total.

<sup>2</sup> The number of capitation payments increased while Medicaid was awaiting approval of the 2021 rates from the Centers for Medicare and Medicaid Services (CMS).

<sup>3</sup> This level includes the Gainwell contract plus 12 months of implementation for the Claim & Encounter Processing and Financial Management module, which replaces functionality provided by Gainwell.

DEPARTMENT ID: LOUISIANA DEPARTMENT OF HEALTH (09)  
 AGENCY ID: MEDICAL VENDOR ADMINISTRATION (09-305)  
 PROGRAM ID: A - MEDICAL VENDOR ADMINISTRATION (305-2000)  
 PROGRAM ACTIVITY: A-2 - MEDICAID ENTERPRISE SYSTEMS (MES)

GENERAL PERFORMANCE INFORMATION:						
LaPAS PI CODE	PERFORMANCE INDICATOR NAME	PERFORMANCE INDICATOR VALUES				
		PRIOR YEAR ACTUAL FY 2018-2019	PRIOR YEAR ACTUAL FY 2019-2020	PRIOR YEAR ACTUAL FY 2020-2021	PRIOR YEAR ACTUAL FY 2021-2022	PRIOR YEAR ACTUAL FY 2022-2023
26572	Number of competitive procurements issued for IT services and software for modular MES functions	3	2.0	2.0	0.0	0.0 <sup>1</sup>
26573	Number of contracts executed for IT services and software for modular MES functions	3	2.0	0.0	0.0	0.0 <sup>1</sup>
26574	Number of IT services and software designed, developed or deployed for modular MES functions	2	1.0	0.0	0.0	0.0 <sup>1</sup>
12020	Total number of claims processed	201,961,498	200,604,622	194,087,980	225,085,813	236,158,684

<sup>1</sup> The procurement projects that Project Portfolio Management Office (PPMO) and Shared Services executed did not meet the criteria to remove services from their existing sole source Medicaid Enterprise System (MES) vendor contract.

DEPARTMENT ID: LOUISIANA DEPARTMENT OF HEALTH (09)  
 AGENCY ID: MEDICAL VENDOR ADMINISTRATION (09-305)  
 PROGRAM ID: A - MEDICAL VENDOR ADMINISTRATION (305-2000)  
 PROGRAM ACTIVITY: A-3 - FINANCIAL MANAGEMENT

3. 

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 Objective: Through the Financial Management Activity, administer the Medicaid program and ensure that financial operations are in accordance with federal and state statutes, rules, and regulations.

Children's Budget Link: The Children's Budget reflects funding and expenditures for a broad range of Medicaid service for children under 21 years of age throughout the Medical Vendor Administration budget.

Human Resource Policies Beneficial to Women and Families Link: The Medical Vendor Administration 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.

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

LaPAS PI CODE	L E V E L	PERFORMANCE INDICATOR NAME	PERFORMANCE INDICATOR VALUES					PERFORMANCE STANDARD AS INITIALLY APPROPRIATED FY 2024-2025
			YEAREND PERFORMANCE STANDARD FY 2022-2023	ACTUAL YEAREND PERFORMANCE FY 2022-2023	PERFORMANCE STANDARD AS INITIALLY APPROPRIATED FY 2023-2024	EXISTING PERFORMANCE STANDARD FY 2023-2024	PERFORMANCE AT CONTINUATION BUDGET LEVEL FY 2024-2025	
24045	K	Administrative cost as a percentage of total cost	3%	3%	3%	3%	3%	

DEPARTMENT ID: LOUISIANA DEPARTMENT OF HEALTH (09)  
 AGENCY ID: MEDICAL VENDOR ADMINISTRATION (09-305)  
 PROGRAM ID: A - MEDICAL VENDOR ADMINISTRATION (305-2000)  
 PROGRAM ACTIVITY: A-3 - FINANCIAL MANAGEMENT

4. **K** Objective: Through the Financial Management Activity, reduce the incidence of inappropriate Medicaid expenditures and to annually perform a minimum of 95% of the planned monitoring visits to Local Education Authorities (LEA) participating in the Medicaid School-Based Administrative Claiming Program or the Early Periodic Screening Diagnostic and Treatment (EPSDT) Direct Services Program.

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

LaPAS PI CODE	L E V E L	PERFORMANCE INDICATOR NAME	PERFORMANCE INDICATOR VALUES						
			YEAREND PERFORMANCE STANDARD FY 2022-2023	ACTUAL YEAREND PERFORMANCE FY 2022-2023	PERFORMANCE STANDARD AS INITIALLY APPROPRIATED FY 2023-2024	EXISTING PERFORMANCE STANDARD FY 2023-2024	PERFORMANCE AT CONTINUATION BUDGET LEVEL FY 2024-2025	PERFORMANCE AT EXECUTIVE BUDGET LEVEL FY 2024-2025	PERFORMANCE STANDARD AS INITIALLY APPROPRIATED FY 2024-2025
13375	S	Number of Local Education Agencies targeted for monitoring	36	35	36	36	36		
13376	K	Percent of targeted local education agencies (LEAs) monitored	100.0%	105.0%	100.0%	100.0%	100.0%		
25549	S	Number of Nursing Home cost reports targeted for monitoring	125	122	125	125	125		
25550	K	Percent of Nursing Home cost reports monitored	49%	48%	47%	47%	47%		
25551	S	Number of Intermediate Care Facility (ICF) cost reports targeted for monitoring	93	64	93	93	93		
25552	S	Percent of Intermediate Care Facility (ICF) cost reports monitored	18%	12%	18%	18%	18%		
25553	S	Number of hospital cost reports reviewed and audited	350	358	375	375	360 <sup>1</sup>		

<sup>1</sup> Medicaid is projecting a decrease in planned hospital cost report audits.

DEPARTMENT ID: LOUISIANA DEPARTMENT OF HEALTH (09)  
 AGENCY ID: MEDICAL VENDOR ADMINISTRATION (09-305)  
 PROGRAM ID: A - MEDICAL VENDOR ADMINISTRATION (305-2000)  
 PROGRAM ACTIVITY: A-3 - FINANCIAL MANAGEMENT

5. **K** Objective: Through the Financial Management Activity, pursue collections from third party sources legally responsible for healthcare costs of Medicaid and CHIP enrollees.

Children's Budget Link: Not Applicable

Human Resource Policies Beneficial to Women and Families Link: This objective will support Act 1078 by ensuring the provision of healthcare services to women and families.

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

LaPAS PI CODE	L E V E L	PERFORMANCE INDICATOR NAME	PERFORMANCE INDICATOR VALUES						
			YEAREND PERFORMANCE STANDARD FY 2022-2023	ACTUAL YEAREND PERFORMANCE FY 2022-2023	PERFORMANCE STANDARD AS INITIALLY APPROPRIATED FY 2023-2024	EXISTING PERFORMANCE STANDARD FY 2023-2024	PERFORMANCE AT CONTINUATION BUDGET LEVEL FY 2024-2025	PERFORMANCE AT EXECUTIVE BUDGET LEVEL FY 2024-2025	PERFORMANCE STANDARD AS INITIALLY APPROPRIATED FY 2024-2025
2215	K	Number of TPL claims processed	5,200,000	9,306,458	5,200,000	5,200,000	5,200,000		
7957	K	Percentage of TPL claims processed through edits	92.00%	93.00%	92.00%	92.00%	92.00%		
7958	S	TPL trauma recovery amount	\$2,000,000	\$1,648,777 <sup>1</sup>	\$2,000,000	\$2,000,000	\$2,000,000		

<sup>1</sup> There were recovery-related settlement disbursements made by attorneys and third parties.



DEPARTMENT ID: LOUISIANA DEPARTMENT OF HEALTH (09)  
 AGENCY ID: MEDICAL VENDOR ADMINISTRATION (09-305)  
 PROGRAM ID: A - MEDICAL VENDOR ADMINISTRATION (305-2000)  
 PROGRAM ACTIVITY: A-3 - FINANCIAL MANAGEMENT

GENERAL PERFORMANCE INFORMATION:						
LaPAS PI CODE	PERFORMANCE INDICATOR NAME	PERFORMANCE INDICATOR VALUES				
		PRIOR YEAR ACTUAL FY 2018-2019	PRIOR YEAR ACTUAL FY 2019-2020	PRIOR YEAR ACTUAL FY 2020-2021	PRIOR YEAR ACTUAL FY 2021-2022	PRIOR YEAR ACTUAL FY 2022-2023
24046	Percentage of State Plan amendments approved <sup>1</sup>	88%	119%	100%	100%	100%
24047	Number of State Plan amendments submitted	33	21	19	21	38
16539	Number of LEA claims adjusted as a result of monitoring activities	72	26	29	43	49
13540	Amount identified as over claimed by LEAs as a result of monitoring	\$137,191	\$522,879	\$25	\$18	\$21
25554	Number of Nursing Home cost reports adjusted as a result of monitoring activities	122	124	125	123	124
25555	Number of ICF cost reports adjusted as a result of monitoring activities	103	79	99	90	57
12021	Number of claims available for TPL processing	78,654,549	67,930,658	57,918,599	411,408,159	85,640,148
12022	Percentage of TPL claims processed and cost avoided	8.6%	2.2%	8.6%	0.0%	8.5%
24044	Funds recovered from third parties with a liability for services provided by Medicaid	\$15,701,837 <sup>2</sup>	\$33,046,070	\$23,139,635	\$18,052,756	\$31,306,648

<sup>1</sup> This indicator calculates the number of State Plan amendments approved by the Centers for Medicare & Medicaid Services (CMS) in relation to the number of amendments submitted in the fiscal year. This skews the percentage, as unresolved State Plan amendments can cross over fiscal years. This indicator will calculate the number of State Plan amendments approved by CMS divided by the total number of State Plan amendments that CMS approved or denied during the fiscal year.

<sup>2</sup> Medicaid requested to change this amount from \$15,052,899 to \$15,701,837 after our FY 2018-2019 submission upon receipt of updated data in FY 2019-2020.

DEPARTMENT ID: LOUISIANA DEPARTMENT OF HEALTH (09)  
 AGENCY ID: MEDICAL VENDOR ADMINISTRATION (09-305)  
 PROGRAM ID: A - MEDICAL VENDOR ADMINISTRATION (305-2000)  
 PROGRAM ACTIVITY: A-3 - FINANCIAL MANAGEMENT

6. S Objective: Through the Financial Management Activity, increase collections through the Collections/Recovery and Cost Avoidance activity by 1% from estates of individuals who were aged 55 or older when long term care facility services, home and community-based services, and related hospital and prescription drug services.

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

LaPAS PI CODE	L E V E L	PERFORMANCE INDICATOR NAME	PERFORMANCE INDICATOR VALUES					PERFORMANCE STANDARD AS INITIALLY APPROPRIATED FY 2024-2025
			YEAREND PERFORMANCE STANDARD FY 2022-2023	ACTUAL YEAREND PERFORMANCE FY 2022-2023	PERFORMANCE STANDARD AS INITIALLY APPROPRIATED FY 2023-2024	EXISTING PERFORMANCE STANDARD FY 2023-2024	PERFORMANCE AT CONTINUATION BUDGET LEVEL FY 2024-2025	
25567	S	Estate recovery amount	\$950,000	\$921,862 <sup>1</sup>	\$950,000	\$950,000	\$950,000	

<sup>1</sup> There was a slight, unexpected decrease in the reimbursement amounts to the State after applicable offsets and a slight decrease in the sale of homes for which the department has filed its proof of claim.

DEPARTMENT ID: LOUISIANA DEPARTMENT OF HEALTH (09)  
 AGENCY ID: MEDICAL VENDOR ADMINISTRATION (09-305)  
 PROGRAM ID: A - MEDICAL VENDOR ADMINISTRATION (305-2000)  
 PROGRAM ACTIVITY: A-3 - FINANCIAL MANAGEMENT

7.  Objective: Through the Financial Management activity, increase collections through the Collections/Recovery and Cost Avoidance activity by 1% from individuals who were ineligible for Medicaid on the date(s) of service.

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

LaPAS PI E CODE	L E V E L	PERFORMANCE INDICATOR NAME	PERFORMANCE INDICATOR VALUES						
			YEAREND PERFORMANCE STANDARD FY 2022-2023	ACTUAL YEAREND PERFORMANCE FY 2022-2023	PERFORMANCE STANDARD AS INITIALLY APPROPRIATED FY 2023-2024	EXISTING PERFORMANCE STANDARD FY 2023-2024	PERFORMANCE AT CONTINUATION BUDGET LEVEL FY 2024-2025	PERFORMANCE AT EXECUTIVE BUDGET LEVEL FY 2024-2025	PERFORMANCE STANDARD AS INITIALLY APPROPRIATED FY 2024-2025
25568	S	Recipient recovery amount	\$3,000,000	\$5,587,013 <sup>1</sup>	\$2,500,000	\$2,500,000	\$2,500,000		

<sup>1</sup> The unforeseen lump sum full restitution payment from the Attorney General's Office for full restitution payment, as well as annuity and Special Needs Trust payouts, attributed to the increase in the

DEPARTMENT ID: LOUISIANA DEPARTMENT OF HEALTH (09)  
 AGENCY ID: MEDICAL VENDOR ADMINISTRATION (09-305)  
 PROGRAM ID: A - MEDICAL VENDOR ADMINISTRATION (305-2000)  
 PROGRAM ACTIVITY: A-4 - PROGRAM INTEGRITY

8. K Objective: Through the Program Integrity Activity, prevent and detect claims-based fraud and abuse through data analysis, coordination with MCOs and participation in external audit (UPIC and PERM) activities.

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

LaPAS PI CODE	L E V E L	PERFORMANCE INDICATOR NAME	PERFORMANCE INDICATOR VALUES					PERFORMANCE AT EXECUTIVE BUDGET LEVEL FY 2024-2025	PERFORMANCE STANDARD AS INITIALLY APPROPRIATED FY 2024-2025
			YEAREND PERFORMANCE STANDARD FY 2022-2023	ACTUAL YEAREND PERFORMANCE FY 2022-2023	PERFORMANCE AS INITIALLY APPROPRIATED FY 2023-2024	EXISTING PERFORMANCE STANDARD FY 2023-2024	PERFORMANCE AT CONTINUATION BUDGET LEVEL FY 2024-2025		
26580	K	Number of audits/reviews	2,000	1,741 <sup>1</sup>	2,000	2,000	2,000		

<sup>1</sup> The number of closed Managed Care Organization (MCO) audits decreased from the prior fiscal year due to a decline in complaints and tips.

DEPARTMENT ID: LOUISIANA DEPARTMENT OF HEALTH (09)  
 AGENCY ID: MEDICAL VENDOR ADMINISTRATION (09-305)  
 PROGRAM ID: A - MEDICAL VENDOR ADMINISTRATION (305-2000)  
 PROGRAM ACTIVITY: A-4 - PROGRAM INTEGRITY

GENERAL PERFORMANCE INFORMATION:						
LaPAS PI CODE	PERFORMANCE INDICATOR NAME	PERFORMANCE INDICATOR VALUES				
		PRIOR YEAR ACTUAL FY 2018-2019	PRIOR YEAR ACTUAL FY 2019-2020	PRIOR YEAR ACTUAL FY 2020-2021	PRIOR YEAR ACTUAL FY 2021-2022	PRIOR YEAR ACTUAL FY 2022-2023
26640	Amount of monetary penalties assessed for contract non-compliance	\$3,120,000	\$950,000	\$825,000	\$4,333,188	\$1,633,000
26100	Number of provider exclusions	16	36	72	128 <sup>2</sup>	137
26581	Number of notices of actions issued for contract non-compliance	42 <sup>1</sup>	55	47	36	21
26582	Amount of overpayments identified Post and Pre-Pay	\$60,418,095	\$63,174,637	\$61,463,100	\$94,534,029	\$76,545,445
26583	Number of notices and referrals sent to the Attorney General	1,026	1,036	720	1,034	913
26584	Number of referrals to law enforcement	109	1,695 <sup>1</sup>	37	26	127

<sup>1</sup> Number includes reviews and referrals from a special project involving the review of tax return data from Louisiana Department of Revenue.

<sup>2</sup> There was an increase in mandatory exclusions received from local law enforcement during FY 2021-2022.

DEPARTMENT ID: LOUISIANA DEPARTMENT OF HEALTH (09)  
 AGENCY ID: MEDICAL VENDOR ADMINISTRATION (09-305)  
 PROGRAM ID: A - MEDICAL VENDOR ADMINISTRATION (305-2000)  
 PROGRAM ACTIVITY: A-4 - PROGRAM INTEGRITY

9.  Objective: Through the Program Integrity Activity, identify and review beneficiary eligibility.

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

LaPAS PI CODE	L E V E L	PERFORMANCE INDICATOR NAME	PERFORMANCE INDICATOR VALUES					PERFORMANCE AT EXECUTIVE BUDGET LEVEL FY 2024-2025	PERFORMANCE STANDARD AS INITIALLY APPROPRIATED FY 2024-2025
			YEAREND PERFORMANCE STANDARD FY 2022-2023	ACTUAL YEAREND PERFORMANCE FY 2022-2023	PERFORMANCE STANDARD AS INITIALLY APPROPRIATED FY 2023-2024	EXISTING PERFORMANCE STANDARD FY 2023-2024	PERFORMANCE AT CONTINUATION BUDGET LEVEL FY 2024-2025		
26585	K	Number of reviews conducted	3,600	3,602	3,600	3,600	3,600		

**OPERATIONAL PLAN FORM  
OPERATIONAL PLAN ADDENDA**

ORGANIZATION AND PROGRAM STRUCTURE CHARTS CHECKLIST:

Organization Chart Attached: X\_\_\_\_\_

Program and Activity Structure Chart Attached: \_\_\_\_\_

OTHER: List any other attachments to operational plan.

- 1.
- 2.
- 3.

CONTACT PERSON(S):

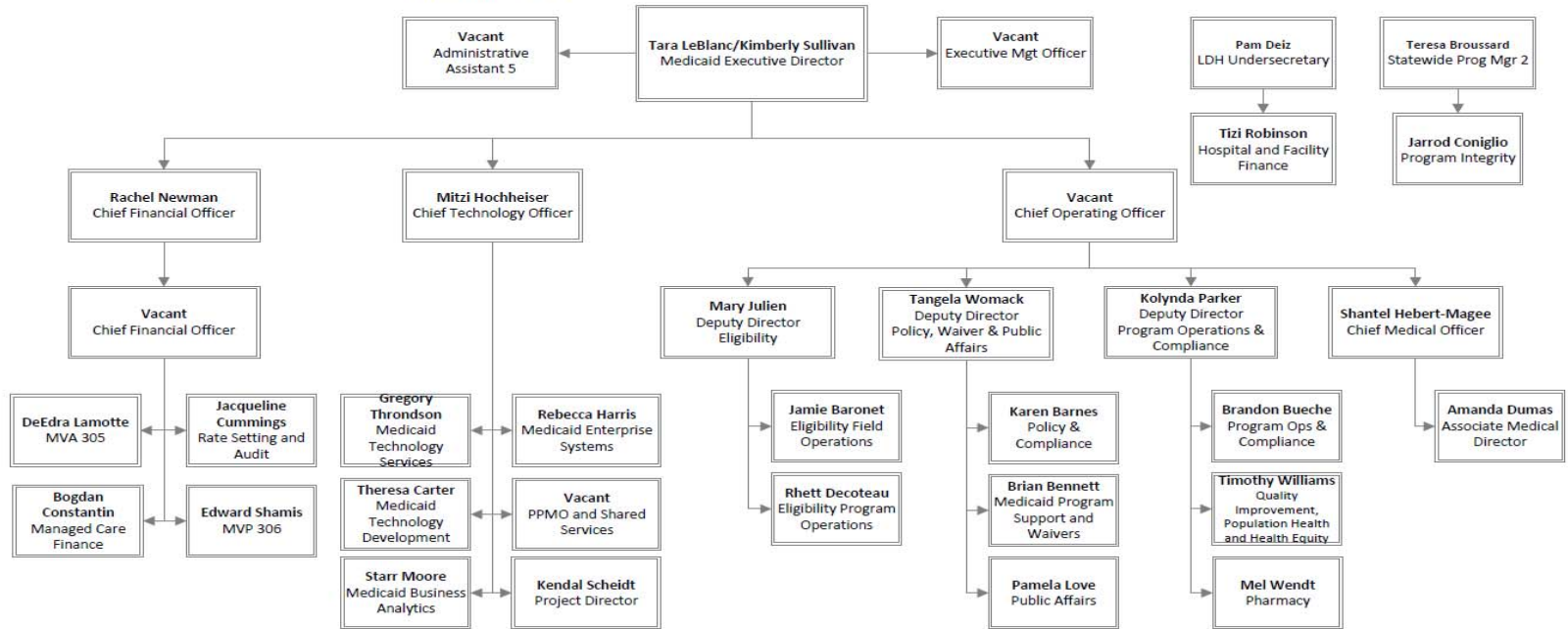
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**Medicaid Leadership**

Updated: October 3, 2023





# Budget Request Overview

## AGENCY SUMMARY STATEMENT

### Total Agency

#### Means of Financing

Description	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB	Percent Change
STATE GENERAL FUND (Direct)	118,526,794	182,219,643	135,996,780	(46,222,863)	(25.37)%
STATE GENERAL FUND BY:	—	—	—	—	—
INTERAGENCY TRANSFERS	19,317,434	27,952,896	504,237	(27,448,659)	(98.20)%
FEES & SELF-GENERATED	983,416	4,200,000	4,200,000	—	—
STATUTORY DEDICATIONS	—	711,345	711,771	426	0.06%
FEDERAL FUNDS	277,214,638	550,554,876	464,630,234	(85,924,642)	(15.61)%
<b>TOTAL MEANS OF FINANCING</b>	<b>\$416,042,282</b>	<b>\$765,638,760</b>	<b>\$606,043,022</b>	<b>\$(159,595,738)</b>	<b>(20.84)%</b>

**Fees and Self-Generated**

Description	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB	Percent Change
Fees & Self-generated	983,416	4,200,000	4,200,000	—	—
<b>Total:</b>	<b>\$983,416</b>	<b>\$4,200,000</b>	<b>\$4,200,000</b>	<b>—</b>	<b>—</b>

**Statutory Dedications**

Description	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB	Percent Change
Medical Assistance Programs Fraud Detect	—	711,345	711,771	426	0.06%
<b>Total:</b>	<b>—</b>	<b>\$711,345</b>	<b>\$711,771</b>	<b>\$426</b>	<b>0.06%</b>

**Agency Expenditures**

Description	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB	Percent Change
Salaries	55,108,514	62,074,650	60,468,854	(1,605,796)	(2.59)%
Other Compensation	2,195,787	3,508,755	3,428,487	(80,268)	(2.29)%
Related Benefits	35,223,393	41,949,119	42,175,914	226,795	0.54%
<b>TOTAL PERSONAL SERVICES</b>	<b>\$92,527,694</b>	<b>\$107,532,524</b>	<b>\$106,073,255</b>	<b>\$(1,459,269)</b>	<b>(1.36)%</b>
Travel	78,068	220,219	225,174	4,955	2.25%
Operating Services	3,938,064	33,266,487	4,839,561	(28,426,926)	(85.45)%
Supplies	127,445	263,125	269,046	5,921	2.25%
<b>TOTAL OPERATING EXPENSES</b>	<b>\$4,143,576</b>	<b>\$33,749,831</b>	<b>\$5,333,781</b>	<b>\$(28,416,050)</b>	<b>(84.20)%</b>
<b>PROFESSIONAL SERVICES</b>	<b>\$126,874,286</b>	<b>\$197,437,444</b>	<b>\$203,212,233</b>	<b>\$5,774,789</b>	<b>2.92%</b>
Other Charges	55,252,131	147,528,670	53,705,752	(93,822,918)	(63.60)%
Debt Service	—	—	—	—	—
Interagency Transfers	137,244,594	279,390,291	237,718,001	(41,672,290)	(14.92)%
<b>TOTAL OTHER CHARGES</b>	<b>\$192,496,725</b>	<b>\$426,918,961</b>	<b>\$291,423,753</b>	<b>\$(135,495,208)</b>	<b>(31.74)%</b>
Acquisitions	—	—	—	—	—
Major Repairs	—	—	—	—	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$416,042,282</b>	<b>\$765,638,760</b>	<b>\$606,043,022</b>	<b>\$(159,595,738)</b>	<b>(20.84)%</b>

**Agency Positions**

Classified	937	994	1,001	7	0.70%
Unclassified	59	2	2	—	—
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>996</b>	<b>996</b>	<b>1,003</b>	<b>7</b>	<b>0.70%</b>
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>133</b>	<b>113</b>	<b>113</b>	<b>—</b>	<b>—</b>
<b>TOTAL POSITIONS</b>	<b>1,129</b>	<b>1,109</b>	<b>1,116</b>	<b>7</b>	<b>0.63%</b>

**Cost Detail**

**Means of Financing**

Description	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB
State General Fund	118,526,794	182,219,643	135,996,780	(46,222,863)
Interagency Transfers	19,317,434	27,952,896	504,237	(27,448,659)
Fees & Self-generated	983,416	4,200,000	4,200,000	—
Medical Assistance Programs Fraud Detect	—	711,345	711,771	426
Federal Funds	277,214,638	550,554,876	464,630,234	(85,924,642)
<b>Total:</b>	<b>\$416,042,282</b>	<b>\$765,638,760</b>	<b>\$606,043,022</b>	<b>\$(159,595,738)</b>

**Salaries**

Commitment Item	Name	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB
5110010	SAL-CLASS-TO-REG	54,147,155	60,991,768	59,369,761	(1,622,007)
5110015	SAL-CLASS-TO-OT	83,767	94,356	94,356	—
5110020	SAL-CLASS-TO-TERM	392,104	441,669	441,669	—
5110025	SAL-UNCLASS-TO-REG	483,388	544,492	560,703	16,211
5110035	SAL-UNCLASS-TO-TERM	2,100	2,365	2,365	—
<b>Total Salaries:</b>		<b>\$55,108,514</b>	<b>\$62,074,650</b>	<b>\$60,468,854</b>	<b>\$(1,605,796)</b>

**Other Compensation**

Commitment Item	Name	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB
5120010	COMPENSATION/WAGES	2,163,005	3,456,372	3,376,104	(80,268)
5120035	STUDENT LABOR	29,756	47,549	47,549	—
5120105	COMP-CL-NON TO-OT	152	241	241	—
5120110	COMP-CL-NON TO-TERM	2,874	4,593	4,593	—
<b>Total Other Compensation:</b>		<b>\$2,195,787</b>	<b>\$3,508,755</b>	<b>\$3,428,487</b>	<b>\$(80,268)</b>

Related Benefits

Commitment Item	Name	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB
5130010	RET CONTR-STATE EMP	20,908,054	24,900,340	25,127,135	226,795
5130015	RET CONTR-SCHOOL EMP	17,081	20,342	20,342	—
5130020	RET CONTR-TEACHERS	147,704	175,907	175,907	—
5130050	POSTRET BENEFITS	6,592,494	7,851,297	7,851,297	—
5130055	FICA TAX (OASDI)	34,969	41,646	41,646	—
5130060	MEDICARE TAX	777,124	925,511	925,511	—
5130070	GRP INS CONTRIBUTION	6,740,336	8,027,369	8,027,369	—
5130090	TAXABLE FRINGE BEN	5,631	6,707	6,707	—
<b>Total Related Benefits:</b>		<b>\$35,223,393</b>	<b>\$41,949,119</b>	<b>\$42,175,914</b>	<b>\$226,795</b>

Travel

Commitment Item	Name	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB
5200000	TOTAL TRAVEL	—	220,219	225,174	4,955
5210010	IN-STATE TRAVEL-ADM	10,715	—	—	—
5210015	IN-STATE TRAVEL-CONF	4,078	—	—	—
5210020	IN-STATE TRAV-FIELD	22,590	—	—	—
5210030	IN-STATE TRV-IT/TRN	62	—	—	—
5210055	OUT-OF-STTRV-CONF	32,981	—	—	—
5210060	OUT-OF-STTRV-FIELD	47	—	—	—
5210105	STAFF TRAINING	750	—	—	—
5210110	CONFERENCE REG FEES	6,845	—	—	—
<b>Total Travel:</b>		<b>\$78,068</b>	<b>\$220,219</b>	<b>\$225,174</b>	<b>\$4,955</b>

Operating Services

Commitment Item	Name	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB
5300000	TOTAL OPERATING SERV	—	33,266,487	4,839,561	(28,426,926)
5310001	SERV-ADVERTISING	1,263,659	—	—	—
5310010	SERV-DUES & OTHER	21,498	—	—	—
5310011	SERV-SUBSCRIPTIONS	206	—	—	—
5310012	SERV-DATA MODEL/MAP	42,209	—	—	—
5310015	SERV-SECURITY	71,776	—	—	—
5310017	SERV-DOC DESTRUCTION	1,287	—	—	—
5310030	SERV-ADMIN FEES	22,333	—	—	—
5310048	SERV-SUBSCRIPTIONS	16,571	—	—	—
5310400	SERV-MISC	114,919	—	—	—
5330001	MAINT-BUILDINGS	1,841	—	—	—
5330005	MAINT-WSTDISP-SHRED	(20)	—	—	—
5340010	RENT-REAL ESTATE	2,149,819	—	—	—
5340020	RENT-EQUIPMENT	78,623	—	—	—
5340045	RENT-STORAGE SPACE	7,096	—	—	—
5350002	UTIL-DATA LINE/CIRCT	10,305	—	—	—
5350004	UTIL-TELEPHONE SERV	82,028	—	—	—
5350005	UTIL-OTHER COMM SERV	8,844	—	—	—
5350006	UTIL-MAIL/DEL/POST	3,779	—	—	—
5350018	UTIL-MAIL/DEL/POST	41,000	—	—	—
5350019	UTIL-MAIL/DEL/POST	290	—	—	—
<b>Total Operating Services:</b>		<b>\$3,938,064</b>	<b>\$33,266,487</b>	<b>\$4,839,561</b>	<b>\$(28,426,926)</b>

**Supplies**

Commitment Item	Name	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB
5400000	TOTAL SUPPLIES	—	263,125	269,046	5,921
5410001	SUP-OFFICE SUPPLIES	107,381	—	—	—
5410002	SUP-TELEPH & ACCESS	260	—	—	—
5410006	SUP-COMPUTER	16,580	—	—	—
5410010	SUP-TEXTBOOKS	2,214	—	—	—
5410021	SUP-ELECTRONICS/ELEC	930	—	—	—
5410053	SUP-PROT APP & EQUIP	80	—	—	—
<b>Total Supplies:</b>		<b>\$127,445</b>	<b>\$263,125</b>	<b>\$269,046</b>	<b>\$5,921</b>

**Professional Services**

Commitment Item	Name	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB
5500000	TOTAL PROF SERVICES	—	197,437,444	203,212,233	5,774,789
5510001	PROF SERV-ACCT/AUDIT	15,708,209	—	—	—
5510003	PROF SERV-MGT CONSUL	139,316	—	—	—
5510005	PROF SERV-LEGAL	14,508	—	—	—
5510006	PROF SERV-LGL-GR PRO	0	—	—	—
5510007	PROF SERV-MED/DEN	57,311,342	—	—	—
5510020	PROF SERV-BLD/CONSTR	1,411	—	—	—
5510023	PROF SERV-INDUSTCLN	(80)	—	—	—
5510027	PROF SERV-TRANS/STOR	8,373	—	—	—
5510028	PROF SERV-ADV/PRINT	21,888	—	—	—
5510400	PROF SERV-OTHER	53,669,319	—	—	—
<b>Total Professional Services:</b>		<b>\$126,874,286</b>	<b>\$197,437,444</b>	<b>\$203,212,233</b>	<b>\$5,774,789</b>



Other Charges

Commitment Item	Name	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB
5600000	TOTAL OTHER CHARGES	—	147,528,670	53,705,752	(93,822,918)
5610001	LOC AID-LOCL SCHL BD	50	—	—	—
5610015	LOC AID-MEDICAID PMT	(978,165)	—	—	—
5610020	PUBLIC ASST-HEALTH	14,727,226	—	—	—
5620018	MISC-PROJECT ACTVTY	54,949	—	—	—
5620044	MISC-RECOUP STEE PY	280	—	—	—
5620064	MISC-PROF SVCS	41,419,984	—	—	—
5620065	MISC-SUPPLIES OTHER	4,855	—	—	—
5620067	MISC-TR OUT OF STATE	80	—	—	—
5620068	MISC-ACQ/MAJ REP OTH	11,282	—	—	—
5620076	MISC-OC-WAGES	6,348	—	—	—
5620078	MISC-OC-RETIRE-STEM	1,729	—	—	—
5620082	MISC-OC-MEDICARE TAX	97	—	—	—
5620083	MISC-OC-GRP INS CONT	0	—	—	—
5620137	MISC-OC-PS-MEDICAL	3,416	—	—	—
<b>Total Other Charges:</b>		<b>\$55,252,131</b>	<b>\$147,528,670</b>	<b>\$53,705,752</b>	<b>\$(93,822,918)</b>

Interagency Transfers

Commitment Item	Name	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB
5950000	TOTAL IAT	—	279,390,291	237,718,001	(41,672,290)
5950001	IAT-COMMODITY/SERV	1,406,043	—	—	—
5950002	IAT-SALARIES	125,829	—	—	—
5950003	IAT-COMPENSATION	3,312,482	—	—	—
5950004	IAT-RELATED BENEFITS	756,071	—	—	—
5950007	IAT-PRINTING	2,625,095	—	—	—
5950008	IAT-POSTAGE	306,196	—	—	—
5950014	IAT-TELEPHONE	2,367,302	—	—	—

Interagency Transfers (continued)

Commitment Item	Name	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB
5950017	IAT-INSURANCE	509,777	—	—	—
5950026	IAT-RENTALS	1,304,520	—	—	—
5950032	IAT-ADMIN IND COST	3,602,730	—	—	—
5950033	IAT-INTER AGY TRANS	18,924,015	—	—	—
5950054	IAT-OCS	855	—	—	—
5950058	IAT-TECH SVCS	102,003,680	—	—	—
<b>Total Interagency Transfers:</b>		<b>\$137,244,594</b>	<b>\$279,390,291</b>	<b>\$237,718,001</b>	<b>\$(41,672,290)</b>
<b>Total Agency Expenditures:</b>		<b>\$416,042,282</b>	<b>\$765,638,760</b>	<b>\$606,043,022</b>	<b>\$(159,595,738)</b>

## PROGRAM SUMMARY STATEMENT

### 3052 - Medical Vendor Administration

#### Means of Financing

Description	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB	Percent Change
STATE GENERAL FUND (Direct)	118,526,794	182,219,643	135,996,780	(46,222,863)	(25.37)%
STATE GENERAL FUND BY:	—	—	—	—	—
INTERAGENCY TRANSFERS	19,317,434	27,952,896	504,237	(27,448,659)	(98.20)%
FEES & SELF-GENERATED	983,416	4,200,000	4,200,000	—	—
STATUTORY DEDICATIONS	—	711,345	711,771	426	0.06%
FEDERAL FUNDS	277,214,638	550,554,876	464,630,234	(85,924,642)	(15.61)%
<b>TOTAL MEANS OF FINANCING</b>	<b>\$416,042,282</b>	<b>\$765,638,760</b>	<b>\$606,043,022</b>	<b>\$(159,595,738)</b>	<b>(20.84)%</b>

**Fees and Self-Generated**

Description	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB	Percent Change
Fees & Self-generated	983,416	4,200,000	4,200,000	—	—
<b>Total:</b>	<b>\$983,416</b>	<b>\$4,200,000</b>	<b>\$4,200,000</b>	<b>—</b>	<b>—</b>

**Statutory Dedications**

Description	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB	Percent Change
Medical Assistance Programs Fraud Detect	—	711,345	711,771	426	0.06%
<b>Total:</b>	<b>—</b>	<b>\$711,345</b>	<b>\$711,771</b>	<b>\$426</b>	<b>0.06%</b>

**Program Expenditures**

Description	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB	Percent Change
Salaries	55,108,514	62,074,650	60,468,854	(1,605,796)	(2.59)%
Other Compensation	2,195,787	3,508,755	3,428,487	(80,268)	(2.29)%
Related Benefits	35,223,393	41,949,119	42,175,914	226,795	0.54%
<b>TOTAL PERSONAL SERVICES</b>	<b>\$92,527,694</b>	<b>\$107,532,524</b>	<b>\$106,073,255</b>	<b>\$(1,459,269)</b>	<b>(1.36)%</b>
Travel	78,068	220,219	225,174	4,955	2.25%
Operating Services	3,938,064	33,266,487	4,839,561	(28,426,926)	(85.45)%
Supplies	127,445	263,125	269,046	5,921	2.25%
<b>TOTAL OPERATING EXPENSES</b>	<b>\$4,143,576</b>	<b>\$33,749,831</b>	<b>\$5,333,781</b>	<b>\$(28,416,050)</b>	<b>(84.20)%</b>
<b>PROFESSIONAL SERVICES</b>	<b>\$126,874,286</b>	<b>\$197,437,444</b>	<b>\$203,212,233</b>	<b>\$5,774,789</b>	<b>2.92%</b>
Other Charges	55,252,131	147,528,670	53,705,752	(93,822,918)	(63.60)%
Debt Service	—	—	—	—	—
Interagency Transfers	137,244,594	279,390,291	237,718,001	(41,672,290)	(14.92)%
<b>TOTAL OTHER CHARGES</b>	<b>\$192,496,725</b>	<b>\$426,918,961</b>	<b>\$291,423,753</b>	<b>\$(135,495,208)</b>	<b>(31.74)%</b>
Acquisitions	—	—	—	—	—
Major Repairs	—	—	—	—	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$416,042,282</b>	<b>\$765,638,760</b>	<b>\$606,043,022</b>	<b>\$(159,595,738)</b>	<b>(20.84)%</b>

**Program Positions**

Classified	937	994	1,001	7	0.70%
Unclassified	59	2	2	—	—
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>996</b>	<b>996</b>	<b>1,003</b>	<b>7</b>	<b>0.70%</b>
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>133</b>	<b>113</b>	<b>113</b>	<b>—</b>	<b>—</b>
<b>TOTAL POSITIONS</b>	<b>1,129</b>	<b>1,109</b>	<b>1,116</b>	<b>7</b>	<b>0.63%</b>

**Cost Detail**

**Means of Financing**

Description	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB
State General Fund	118,526,794	182,219,643	135,996,780	(46,222,863)
Interagency Transfers	19,317,434	27,952,896	504,237	(27,448,659)
Fees & Self-generated	983,416	4,200,000	4,200,000	—
Medical Assistance Programs Fraud Detect	—	711,345	711,771	426
Federal Funds	277,214,638	550,554,876	464,630,234	(85,924,642)
<b>Total:</b>	<b>\$416,042,282</b>	<b>\$765,638,760</b>	<b>\$606,043,022</b>	<b>\$(159,595,738)</b>

**Salaries**

Commitment Item	Name	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB
5110010	SAL-CLASS-TO-REG	54,147,155	60,991,768	59,369,761	(1,622,007)
5110015	SAL-CLASS-TO-OT	83,767	94,356	94,356	—
5110020	SAL-CLASS-TO-TERM	392,104	441,669	441,669	—
5110025	SAL-UNCLASS-TO-REG	483,388	544,492	560,703	16,211
5110035	SAL-UNCLASS-TO-TERM	2,100	2,365	2,365	—
<b>Total Salaries:</b>		<b>\$55,108,514</b>	<b>\$62,074,650</b>	<b>\$60,468,854</b>	<b>\$(1,605,796)</b>

**Other Compensation**

Commitment Item	Name	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB
5120010	COMPENSATION/WAGES	2,163,005	3,456,372	3,376,104	(80,268)
5120035	STUDENT LABOR	29,756	47,549	47,549	—
5120105	COMP-CL-NON TO-OT	152	241	241	—
5120110	COMP-CL-NON TO-TERM	2,874	4,593	4,593	—
<b>Total Other Compensation:</b>		<b>\$2,195,787</b>	<b>\$3,508,755</b>	<b>\$3,428,487</b>	<b>\$(80,268)</b>

**Related Benefits**

Commitment Item	Name	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB
5130010	RET CONTR-STATE EMP	20,908,054	24,900,340	25,127,135	226,795
5130015	RET CONTR-SCHOOL EMP	17,081	20,342	20,342	—
5130020	RET CONTR-TEACHERS	147,704	175,907	175,907	—
5130050	POSTRET BENEFITS	6,592,494	7,851,297	7,851,297	—
5130055	FICA TAX (OASDI)	34,969	41,646	41,646	—
5130060	MEDICARE TAX	777,124	925,511	925,511	—
5130070	GRP INS CONTRIBUTION	6,740,336	8,027,369	8,027,369	—
5130090	TAXABLE FRINGE BEN	5,631	6,707	6,707	—
<b>Total Related Benefits:</b>		<b>\$35,223,393</b>	<b>\$41,949,119</b>	<b>\$42,175,914</b>	<b>\$226,795</b>

**Travel**

Commitment Item	Name	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB
5200000	TOTAL TRAVEL	—	220,219	225,174	4,955
5210010	IN-STATE TRAVEL-ADM	10,715	—	—	—
5210015	IN-STATE TRAVEL-CONF	4,078	—	—	—
5210020	IN-STATE TRAV-FIELD	22,590	—	—	—
5210030	IN-STATE TRV-IT/TRN	62	—	—	—
5210055	OUT-OF-STTRV-CONF	32,981	—	—	—
5210060	OUT-OF-STTRV-FIELD	47	—	—	—
5210105	STAFF TRAINING	750	—	—	—
5210110	CONFERENCE REG FEES	6,845	—	—	—
<b>Total Travel:</b>		<b>\$78,068</b>	<b>\$220,219</b>	<b>\$225,174</b>	<b>\$4,955</b>

Operating Services

Commitment Item	Name	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB
5300000	TOTAL OPERATING SERV	—	33,266,487	4,839,561	(28,426,926)
5310001	SERV-ADVERTISING	1,263,659	—	—	—
5310010	SERV-DUES & OTHER	21,498	—	—	—
5310011	SERV-SUBSCRIPTIONS	206	—	—	—
5310012	SERV-DATA MODEL/MAP	42,209	—	—	—
5310015	SERV-SECURITY	71,776	—	—	—
5310017	SERV-DOC DESTRUCTION	1,287	—	—	—
5310030	SERV-ADMIN FEES	22,333	—	—	—
5310048	SERV-SUBSCRIPTIONS	16,571	—	—	—
5310400	SERV-MISC	114,919	—	—	—
5330001	MAINT-BUILDINGS	1,841	—	—	—
5330005	MAINT-WSTDISP-SHRED	(20)	—	—	—
5340010	RENT-REAL ESTATE	2,149,819	—	—	—
5340020	RENT-EQUIPMENT	78,623	—	—	—
5340045	RENT-STORAGE SPACE	7,096	—	—	—
5350002	UTIL-DATA LINE/CIRCT	10,305	—	—	—
5350004	UTIL-TELEPHONE SERV	82,028	—	—	—
5350005	UTIL-OTHER COMM SERV	8,844	—	—	—
5350006	UTIL-MAIL/DEL/POST	3,779	—	—	—
5350018	UTIL-MAIL/DEL/POST	41,000	—	—	—
5350019	UTIL-MAIL/DEL/POST	290	—	—	—
<b>Total Operating Services:</b>		<b>\$3,938,064</b>	<b>\$33,266,487</b>	<b>\$4,839,561</b>	<b>\$(28,426,926)</b>



**Supplies**

Commitment Item	Name	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB
5400000	TOTAL SUPPLIES	—	263,125	269,046	5,921
5410001	SUP-OFFICE SUPPLIES	107,381	—	—	—
5410002	SUP-TELEPH & ACCESS	260	—	—	—
5410006	SUP-COMPUTER	16,580	—	—	—
5410010	SUP-TEXTBOOKS	2,214	—	—	—
5410021	SUP-ELECTRONICS/ELEC	930	—	—	—
5410053	SUP-PROT APP & EQUIP	80	—	—	—
<b>Total Supplies:</b>		<b>\$127,445</b>	<b>\$263,125</b>	<b>\$269,046</b>	<b>\$5,921</b>

**Professional Services**

Commitment Item	Name	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB
5500000	TOTAL PROF SERVICES	—	197,437,444	203,212,233	5,774,789
5510001	PROF SERV-ACCT/AUDIT	15,708,209	—	—	—
5510003	PROF SERV-MGT CONSUL	139,316	—	—	—
5510005	PROF SERV-LEGAL	14,508	—	—	—
5510006	PROF SERV-LGL-GR PRO	0	—	—	—
5510007	PROF SERV-MED/DEN	57,311,342	—	—	—
5510020	PROF SERV-BLD/CONSTR	1,411	—	—	—
5510023	PROF SERV-INDUSTCLN	(80)	—	—	—
5510027	PROF SERV-TRANS/STOR	8,373	—	—	—
5510028	PROF SERV-ADV/PRINT	21,888	—	—	—
5510400	PROF SERV-OTHER	53,669,319	—	—	—
<b>Total Professional Services:</b>		<b>\$126,874,286</b>	<b>\$197,437,444</b>	<b>\$203,212,233</b>	<b>\$5,774,789</b>

Other Charges

Commitment Item	Name	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB
5600000	TOTAL OTHER CHARGES	—	147,528,670	53,705,752	(93,822,918)
5610001	LOC AID-LOCL SCHL BD	50	—	—	—
5610015	LOC AID-MEDICAID PMT	(978,165)	—	—	—
5610020	PUBLIC ASST-HEALTH	14,727,226	—	—	—
5620018	MISC-PROJECT ACTVTY	54,949	—	—	—
5620044	MISC-RECOUP STEE PY	280	—	—	—
5620064	MISC-PROF SVCS	41,419,984	—	—	—
5620065	MISC-SUPPLIES OTHER	4,855	—	—	—
5620067	MISC-TR OUT OF STATE	80	—	—	—
5620068	MISC-ACQ/MAJ REP OTH	11,282	—	—	—
5620076	MISC-OC-WAGES	6,348	—	—	—
5620078	MISC-OC-RETIRE-STEM	1,729	—	—	—
5620082	MISC-OC-MEDICARE TAX	97	—	—	—
5620083	MISC-OC-GRP INS CONT	0	—	—	—
5620137	MISC-OC-PS-MEDICAL	3,416	—	—	—
<b>Total Other Charges:</b>		<b>\$55,252,131</b>	<b>\$147,528,670</b>	<b>\$53,705,752</b>	<b>\$(93,822,918)</b>

Interagency Transfers

Commitment Item	Name	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB
5950000	TOTAL IAT	—	279,390,291	237,718,001	(41,672,290)
5950001	IAT-COMMODITY/SERV	1,406,043	—	—	—
5950002	IAT-SALARIES	125,829	—	—	—
5950003	IAT-COMPENSATION	3,312,482	—	—	—
5950004	IAT-RELATED BENEFITS	756,071	—	—	—
5950007	IAT-PRINTING	2,625,095	—	—	—
5950008	IAT-POSTAGE	306,196	—	—	—
5950014	IAT-TELEPHONE	2,367,302	—	—	—

Interagency Transfers (continued)

Commitment Item	Name	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB
5950017	IAT-INSURANCE	509,777	—	—	—
5950026	IAT-RENTALS	1,304,520	—	—	—
5950032	IAT-ADMIN IND COST	3,602,730	—	—	—
5950033	IAT-INTER AGY TRANS	18,924,015	—	—	—
5950054	IAT-OCS	855	—	—	—
5950058	IAT-TECH SVCS	102,003,680	—	—	—
<b>Total Interagency Transfers:</b>		<b>\$137,244,594</b>	<b>\$279,390,291</b>	<b>\$237,718,001</b>	<b>\$(41,672,290)</b>
<b>Total Expenditures for Program 3052</b>		<b>\$416,042,282</b>	<b>\$765,638,760</b>	<b>\$606,043,022</b>	<b>\$(159,595,738)</b>
<b>Total Agency Expenditures:</b>		<b>\$416,042,282</b>	<b>\$765,638,760</b>	<b>\$606,043,022</b>	<b>\$(159,595,738)</b>

## SOURCE OF FUNDING SUMMARY

## Agency Overview

## Interagency Transfers

Description	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB	Form ID
DEPT OF CORRECTIONS	202,875	202,875	204,728	1,853	24086
DCFS	270,797	270,797	273,271	2,474	24106
LDH-OBH	—	26,000	26,238	238	24164
LDH-MVP	18,843,762	27,453,224	—	(27,453,224)	27385
<b>Total Interagency Transfers</b>	<b>\$19,317,434</b>	<b>\$27,952,896</b>	<b>\$504,237</b>	<b>\$(27,448,659)</b>	

## Fees &amp; Self-generated

Description	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB	Form ID
MISC SELF-GEN REVENUE	296,125	400,000	400,000	—	24109
MEDICAID OUTSTATIONING	616,186	3,600,000	3,600,000	—	24143
FEES & SELF GENERATED	71,105	200,000	200,000	—	24144
<b>Total Fees &amp; Self-generated</b>	<b>\$983,416</b>	<b>\$4,200,000</b>	<b>\$4,200,000</b>	<b>—</b>	

## Statutory Dedications

Description	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB	Form ID
H14-MED ASST FRAUD FUND	—	711,345	711,771	426	24110
<b>Total Statutory Dedications</b>	<b>—</b>	<b>\$711,345</b>	<b>\$711,771</b>	<b>\$426</b>	

## Federal Funds

Description	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Total Request	Over/Under EOB	Form ID
ARRA LAHIT ADMIN IMPL	418,708	—	—	—	24137
CHIP	4,916,766	16,800,000	16,800,000	—	24139
MAP REFUGEE	35,893	50,000	50,000	—	24140
MONEY FOLLOWS THE PERSON	909,680	2,200,000	2,200,000	—	24141
SCHOOL BASED ADMIN	2,847,333	3,000,000	3,000,000	—	24142
MEDICAID	268,086,258	528,504,876	442,580,234	(85,924,642)	24145
<b>Total Federal Funds</b>	<b>\$277,214,638</b>	<b>\$550,554,876</b>	<b>\$464,630,234</b>	<b>\$(85,924,642)</b>	
<b>Total Sources of Funding:</b>	<b>\$297,515,488</b>	<b>\$583,419,117</b>	<b>\$470,046,242</b>	<b>\$(113,372,875)</b>	

**SOURCE OF FUNDING DETAIL**

**Interagency Transfers**

**Form 24086 — 305 - IAT Reinstate Disability Medicaid Program**

Expenditures	Existing Operating Budget as of 10/01/2023			FY2024-2025 Total Request			FY2025-2026 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	—	—	—	—	—	—	—	—	—
<b>TOTAL PERSONAL SERVICES</b>	—	—	—	—	—	—	—	—	—
Travel	—	—	—	—	—	—	—	—	—
Operating Services	—	—	—	—	—	—	—	—	—
Supplies	—	—	—	—	—	—	—	—	—
<b>TOTAL OPERATING EXPENSES</b>	—	—	—	—	—	—	—	—	—
<b>PROFESSIONAL SERVICES</b>	<b>\$202,875</b>	—	—	<b>\$204,728</b>	—	—	<b>\$202,875</b>	—	—
Other Charges	—	—	—	—	—	—	—	—	—
Debt Service	—	—	—	—	—	—	—	—	—
Interagency Transfers	—	—	—	—	—	—	—	—	—
<b>TOTAL OTHER CHARGES</b>	—	—	—	—	—	—	—	—	—
Acquisitions	—	—	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—	—	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	—	—	—	—	—	—	—	—	—
<b>TOTAL EXPENDITURES</b>	<b>\$202,875</b>	—	—	<b>\$204,728</b>	—	—	<b>\$202,875</b>	—	—

**Form 24086 — 305 - IAT Reinstate Disability Medicaid Program**

Question	Narrative Response
<b>State the purpose, source and legal citation.</b>	This funding is received from the Department of Corrections to provide funding assistance for the payment of Medicaid Eligibility Determination Team (MEDT) contracts. These contracts utilize physicians to review medical records and other required information to determine if offenders meet the disability related program requirements for Medicaid eligibility.
<b>Agency discretion or Federal requirement?</b>	Agency discretion
<b>Describe any budgetary peculiarities.</b>	None
<b>Is the Total Request amount for multiple years?</b>	No, it is anticipated that the total requested amount will be available for expenditures from July 1, 2024 - June 30, 2025.
<b>Additional information or comments.</b>	
<b>Provide the amount of any indirect costs.</b>	None
<b>Any indirect costs funded with other MOF?</b>	None
<b>Objectives and indicators in the Operational Plan.</b>	None
<b>Additional information or comments.</b>	

Form 24106 — 305 - IAT Coordinated System of Care (CSoC)

Expenditures	Existing Operating Budget as of 10/01/2023			FY2024-2025 Total Request			FY2025-2026 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	—	—	—	—	—	—	—	—	—
<b>TOTAL PERSONAL SERVICES</b>	—	—	—	—	—	—	—	—	—
Travel	—	—	—	—	—	—	—	—	—
Operating Services	—	—	—	—	—	—	—	—	—
Supplies	—	—	—	—	—	—	—	—	—
<b>TOTAL OPERATING EXPENSES</b>	—	—	—	—	—	—	—	—	—
<b>PROFESSIONAL SERVICES</b>	—	—	—	<b>\$2,474</b>	—	—	—	—	—
Other Charges	—	—	—	—	—	—	—	—	—
Debt Service	—	—	—	—	—	—	—	—	—
Interagency Transfers	270,797	—	—	270,797	—	—	270,797	—	—
<b>TOTAL OTHER CHARGES</b>	<b>\$270,797</b>	—	—	<b>\$270,797</b>	—	—	<b>\$270,797</b>	—	—
Acquisitions	—	—	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—	—	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	—	—	—	—	—	—	—	—	—
<b>TOTAL EXPENDITURES</b>	<b>\$270,797</b>	—	—	<b>\$273,271</b>	—	—	<b>\$270,797</b>	—	—

**Form 24106 — 305 - IAT Coordinated System of Care (CSoC)**

Question	Narrative Response
<b>State the purpose, source and legal citation.</b>	This is an inter-governmental transfer from the Department of Children and Family Services (DCFS) which will be used as state match for the Medicaid program's Coordinated System of Care administrative activities. The funds are used to match federal funds. Act 12 is based on the Medical Vendor Administrative program's Federal Medical Assistance Percentage (FMAP) of 50% federal and 50% state funds. There are enhanced funding available for specific activities as defined by federal regulations.
<b>Agency discretion or Federal requirement?</b>	Agency discretion
<b>Describe any budgetary peculiarities.</b>	None
<b>Is the Total Request amount for multiple years?</b>	No, it is anticipated that the total requested amount will be available for expenditures from July 1, 2024 - June 30, 2025.
<b>Additional information or comments.</b>	
<b>Provide the amount of any indirect costs.</b>	None
<b>Any indirect costs funded with other MOF?</b>	None
<b>Objectives and indicators in the Operational Plan.</b>	None
<b>Additional information or comments.</b>	



Form 24164 — 305 - IAT from OBH

Expenditures	Existing Operating Budget as of 10/01/2023			FY2024-2025 Total Request			FY2025-2026 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	—	—	—	—	—	—	—	—	—
<b>TOTAL PERSONAL SERVICES</b>	—	—	—	—	—	—	—	—	—
Travel	—	—	—	—	—	—	—	—	—
Operating Services	—	—	—	—	—	—	—	—	—
Supplies	—	—	—	—	—	—	—	—	—
<b>TOTAL OPERATING EXPENSES</b>	—	—	—	—	—	—	—	—	—
<b>PROFESSIONAL SERVICES</b>	—	—	—	<b>\$238</b>	—	—	—	—	—
Other Charges	—	—	—	—	—	—	—	—	—
Debt Service	—	—	—	—	—	—	—	—	—
Interagency Transfers	26,000	—	—	26,000	—	—	26,000	—	—
<b>TOTAL OTHER CHARGES</b>	<b>\$26,000</b>	—	—	<b>\$26,000</b>	—	—	<b>\$26,000</b>	—	—
Acquisitions	—	—	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—	—	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	—	—	—	—	—	—	—	—	—
<b>TOTAL EXPENDITURES</b>	<b>\$26,000</b>	—	—	<b>\$26,238</b>	—	—	<b>\$26,000</b>	—	—

Form 24164 — 305 - IAT from OBH

Question	Narrative Response
<b>State the purpose, source and legal citation.</b>	Represents state match from the Office of Behavioral Health to provide Preadmission Screening and Resident Review (PASRR) Level II Evaluations for the non-Medicaid population exiting psychiatric hospitals.
<b>Agency discretion or Federal requirement?</b>	Agency discretion
<b>Describe any budgetary peculiarities.</b>	None
<b>Is the Total Request amount for multiple years?</b>	No, it is anticipated that the total requested amount will be available for expenditures from July 1, 2024 - June 30, 2025.
<b>Additional information or comments.</b>	None
<b>Provide the amount of any indirect costs.</b>	None
<b>Any indirect costs funded with other MOF?</b>	None
<b>Objectives and indicators in the Operational Plan.</b>	None
<b>Additional information or comments.</b>	

Form 27385 — 305 - PHE Unwind Outreach

Expenditures	Existing Operating Budget as of 10/01/2023			FY2024-2025 Total Request			FY2025-2026 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	—	—	—	—	—	—	—	—	—
<b>TOTAL PERSONAL SERVICES</b>	—	—	—	—	—	—	—	—	—
Travel	—	—	—	—	—	—	—	—	—
Operating Services	87,304	—	—	—	—	—	—	—	—
Supplies	—	—	—	—	—	—	—	—	—
<b>TOTAL OPERATING EXPENSES</b>	<b>\$87,304</b>	—	—	—	—	—	—	—	—
<b>PROFESSIONAL SERVICES</b>	—	—	—	—	—	—	—	—	—
Other Charges	27,363,682	—	—	—	—	—	—	—	—
Debt Service	—	—	—	—	—	—	—	—	—
Interagency Transfers	2,238	—	—	—	—	—	—	—	—
<b>TOTAL OTHER CHARGES</b>	<b>\$27,365,920</b>	—	—	—	—	—	—	—	—
Acquisitions	—	—	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—	—	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	—	—	—	—	—	—	—	—	—
<b>TOTAL EXPENDITURES</b>	<b>\$27,453,224</b>	—	—	—	—	—	—	—	—

**Form 27385 — 305 - PHE Unwind Outreach**

Question	Narrative Response
<b>State the purpose, source and legal citation.</b>	This is an interagency transfer from Medical Vendor Payments (MVP) to Medical Vendor Administration (MVA) to use as state match to support additional costs incurred in MVA for the Public Health Emergency (PHE) unwind efforts. The state funds are available due to the enhanced FMAP provided to state Medicaid programs in response to the COVID-19 PHE for this purpose.
<b>Agency discretion or Federal requirement?</b>	Agency discretion
<b>Describe any budgetary peculiarities.</b>	None
<b>Is the Total Request amount for multiple years?</b>	No, this narrative is for reference only due to a prior year actual. The agency's total requested amount for expenditures from July 1, 2024 - June 30, 2025 does not include funding from this source.
<b>Additional information or comments.</b>	
<b>Provide the amount of any indirect costs.</b>	None
<b>Any indirect costs funded with other MOF?</b>	None
<b>Objectives and indicators in the Operational Plan.</b>	None
<b>Additional information or comments.</b>	

Statutory Dedications

Form 24110 — 305 - Medical Assistance Program Fraud Detection Fund

Expenditures	Existing Operating Budget as of 10/01/2023			FY2024-2025 Total Request			FY2025-2026 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	403,839	—	—	403,839	—	—	403,839	—	—
Other Compensation	49,470	—	—	49,470	—	—	49,470	—	—
Related Benefits	238,034	—	—	238,034	—	—	238,034	—	—
<b>TOTAL PERSONAL SERVICES</b>	<b>\$691,343</b>	<b>—</b>	<b>—</b>	<b>\$691,343</b>	<b>—</b>	<b>—</b>	<b>\$691,343</b>	<b>—</b>	<b>—</b>
Travel	2,868	—	—	2,933	—	—	2,868	—	—
Operating Services	4,300	—	—	4,397	—	—	4,300	—	—
Supplies	—	—	—	—	—	—	—	—	—
<b>TOTAL OPERATING EXPENSES</b>	<b>\$7,168</b>	<b>—</b>	<b>—</b>	<b>\$7,330</b>	<b>—</b>	<b>—</b>	<b>\$7,168</b>	<b>—</b>	<b>—</b>
<b>PROFESSIONAL SERVICES</b>	<b>\$11,734</b>	<b>—</b>	<b>—</b>	<b>\$11,998</b>	<b>—</b>	<b>—</b>	<b>\$11,734</b>	<b>—</b>	<b>—</b>
Other Charges	—	—	—	—	—	—	—	—	—
Debt Service	—	—	—	—	—	—	—	—	—
Interagency Transfers	1,100	—	—	1,100	—	—	1,100	—	—
<b>TOTAL OTHER CHARGES</b>	<b>\$1,100</b>	<b>—</b>	<b>—</b>	<b>\$1,100</b>	<b>—</b>	<b>—</b>	<b>\$1,100</b>	<b>—</b>	<b>—</b>
Acquisitions	—	—	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—	—	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$711,345</b>	<b>—</b>	<b>—</b>	<b>\$711,771</b>	<b>—</b>	<b>—</b>	<b>\$711,345</b>	<b>—</b>	<b>—</b>

**Form 24110 — 305 - Medical Assistance Program Fraud Detection Fund**

Question	Narrative Response
<b>State the purpose, source and legal citation.</b>	Under Louisiana Revised Statute 440.1, the Medical Assistance Programs Fraud Detection Fund is created in the state treasury as a special fund. The monies in the fund shall be invested by the state treasurer in the same manner as monies in the state general fund and interest earned on the investment of monies in the fund shall be credited to the fund. All unexpended and unencumbered monies in the fund at the end of each fiscal year shall remain in the fund. After compliance with the requirements of Article VII, Section 9(B) of the Constitution of Louisiana relative to the Bond Security and Redemption Fund, and prior to monies being placed in the state general fund, all monies received by the state pursuant to a civil award granted or settlement under the provisions of this Part, except for the amount to make the medical assistance programs whole, shall be deposited into the fund. Of the monies collected and deposited into the fund, 50% shall be allocated to the Medicaid Fraud Control Unit within the office of the attorney general and 50% shall be allocated to the Department of Health and Hospitals to be used solely for Medicaid fraud detection and for the following purposes: (1) To pay costs or expenses incurred by the department or the attorney general relative to an action instituted pursuant to this Part. (2) To enhance fraud and abuse detection and prevention activities related to the medical assistance programs. (3) To pay rewards for information concerning fraud and abuse as provided in Subpart B of this Part. (4) To provide a source of revenue for the Medical Assistance Program in the event of a change in federal policy which results in an increase in state participation or a shortfall in state general fund due to a decrease in the official forecast, as defined in R.S. 39:2(30), during a fiscal year. The monies in the fund shall not be used to replace, displace, or supplant state general funds appropriated for the daily operation of the department or the medical assistance programs.
<b>Agency discretion or Federal requirement?</b>	Agency discretion
<b>Describe any budgetary peculiarities.</b>	None
<b>Is the Total Request amount for multiple years?</b>	No, it is anticipated that the total requested amount will be available for expenditures from July 1, 2024 - June 30, 2025.
<b>Additional information or comments.</b>	
<b>Provide the amount of any indirect costs.</b>	None
<b>Any indirect costs funded with other MOF?</b>	None
<b>Objectives and indicators in the Operational Plan.</b>	None
<b>Additional information or comments.</b>	

Federal Funds

Form 24137 — 305 - ARRA LAHIT ADMIN

Expenditures	Existing Operating Budget as of 10/01/2023			FY2024-2025 Total Request			FY2025-2026 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	—	—	—	—	—	—	—	—	—
<b>TOTAL PERSONAL SERVICES</b>	—	—	—	—	—	—	—	—	—
Travel	—	—	—	—	—	—	—	—	—
Operating Services	—	—	—	—	—	—	—	—	—
Supplies	—	—	—	—	—	—	—	—	—
<b>TOTAL OPERATING EXPENSES</b>	—	—	—	—	—	—	—	—	—
<b>PROFESSIONAL SERVICES</b>	—	—	—	—	—	—	—	—	—
Other Charges	—	—	—	—	—	—	—	—	—
Debt Service	—	—	—	—	—	—	—	—	—
Interagency Transfers	—	—	—	—	—	—	—	—	—
<b>TOTAL OTHER CHARGES</b>	—	—	—	—	—	—	—	—	—
Acquisitions	—	—	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—	—	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	—	—	—	—	—	—	—	—	—
<b>TOTAL EXPENDITURES</b>	—	—	—	—	—	—	—	—	—

Form 24137 — 305 - ARRA LAHIT ADMIN

Question	Narrative Response
<b>State the purpose, source and legal citation.</b>	These are funds provided under the American Recovery and Reinvestment Act of 2009 (ARRA) to plan and implement strategies and methodology for Electronic Health Record files and systems. The goal of the grant is to provide better health care outcomes with the availability of a coordinated system of health care that allow patient medical histories to be accessed on-line.
<b>Agency discretion or Federal requirement?</b>	Agency discretion
<b>Describe any budgetary peculiarities.</b>	None
<b>Is the Total Request amount for multiple years?</b>	No, this narrative is for reference only due to a prior year actual. The agency's total requested amount for expenditures from July 1, 2024 - June 30, 2025 does not include funding from this source.
<b>Additional information or comments.</b>	
<b>Provide the amount of any indirect costs.</b>	None
<b>Any indirect costs funded with other MOF?</b>	None
<b>Objectives and indicators in the Operational Plan.</b>	None
<b>Additional information or comments.</b>	



Form 24139 — 305 - FEDA CHIP

Expenditures	Existing Operating Budget as of 10/01/2023			FY2024-2025 Total Request			FY2025-2026 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	1,585,110	—	—	1,585,110	—	—	1,585,110	—	—
Other Compensation	57,134	—	—	57,134	—	—	57,134	—	—
Related Benefits	1,042,778	—	—	1,042,778	—	—	1,042,778	—	—
<b>TOTAL PERSONAL SERVICES</b>	<b>\$2,685,022</b>	<b>—</b>	<b>—</b>	<b>\$2,685,022</b>	<b>—</b>	<b>—</b>	<b>\$2,685,022</b>	<b>—</b>	<b>—</b>
Travel	6,218	—	—	6,218	—	—	6,218	—	—
Operating Services	115,537	—	—	115,537	—	—	115,537	—	—
Supplies	7,429	—	—	7,429	—	—	7,429	—	—
<b>TOTAL OPERATING EXPENSES</b>	<b>\$129,184</b>	<b>—</b>	<b>—</b>	<b>\$129,184</b>	<b>—</b>	<b>—</b>	<b>\$129,184</b>	<b>—</b>	<b>—</b>
<b>PROFESSIONAL SERVICES</b>	<b>\$5,502,038</b>	<b>—</b>	<b>—</b>	<b>\$5,502,038</b>	<b>—</b>	<b>—</b>	<b>\$5,502,038</b>	<b>—</b>	<b>—</b>
Other Charges	1,662,476	—	—	1,662,476	—	—	1,662,476	—	—
Debt Service	—	—	—	—	—	—	—	—	—
Interagency Transfers	6,821,280	—	—	6,821,280	—	—	6,821,280	—	—
<b>TOTAL OTHER CHARGES</b>	<b>\$8,483,756</b>	<b>—</b>	<b>—</b>	<b>\$8,483,756</b>	<b>—</b>	<b>—</b>	<b>\$8,483,756</b>	<b>—</b>	<b>—</b>
Acquisitions	—	—	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—	—	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$16,800,000</b>	<b>—</b>	<b>—</b>	<b>\$16,800,000</b>	<b>—</b>	<b>—</b>	<b>\$16,800,000</b>	<b>—</b>	<b>—</b>

Form 24139 — 305 - FEDA CHIP

Question	Narrative Response
<b>State the purpose, source and legal citation.</b>	The Children's Health Insurance Program (CHIP) provides health coverage to eight million children in families with incomes too high to qualify for Medicaid, but can't afford private coverage. Signed into law in 1997, CHIP provides federal matching funds to states to provide this coverage. Like Medicaid, CHIP is administered by the states, but is jointly funded by the federal government and states. Every state administers its own CHIP program with broad guidance from CMS. The CHIP match rate for Louisiana for SFY25 is 22.43% State and 77.57% Federal.
<b>Agency discretion or Federal requirement?</b>	Agency discretion
<b>Describe any budgetary peculiarities.</b>	None
<b>Is the Total Request amount for multiple years?</b>	No, it is anticipated that the total requested amount will be available for expenditures from July 1, 2024 - June 30, 2025.
<b>Additional information or comments.</b>	
<b>Provide the amount of any indirect costs.</b>	None
<b>Any indirect costs funded with other MOF?</b>	None
<b>Objectives and indicators in the Operational Plan.</b>	None
<b>Additional information or comments.</b>	

Form 24140 — 305 - MAP REFUGEE

Expenditures	Existing Operating Budget as of 10/01/2023			FY2024-2025 Total Request			FY2025-2026 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	—	—	—	—	—	—	—	—	—
<b>TOTAL PERSONAL SERVICES</b>	—	—	—	—	—	—	—	—	—
Travel	—	—	—	—	—	—	—	—	—
Operating Services	—	—	—	—	—	—	—	—	—
Supplies	—	—	—	—	—	—	—	—	—
<b>TOTAL OPERATING EXPENSES</b>	—	—	—	—	—	—	—	—	—
<b>PROFESSIONAL SERVICES</b>	<b>\$50,000</b>	—	—	<b>\$50,000</b>	—	—	<b>\$50,000</b>	—	—
Other Charges	—	—	—	—	—	—	—	—	—
Debt Service	—	—	—	—	—	—	—	—	—
Interagency Transfers	—	—	—	—	—	—	—	—	—
<b>TOTAL OTHER CHARGES</b>	—	—	—	—	—	—	—	—	—
Acquisitions	—	—	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—	—	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	—	—	—	—	—	—	—	—	—
<b>TOTAL EXPENDITURES</b>	<b>\$50,000</b>	—	—	<b>\$50,000</b>	—	—	<b>\$50,000</b>	—	—

**Form 24140 — 305 - MAP REFUGEE**

Question	Narrative Response
<b>State the purpose, source and legal citation.</b>	The Refugee Medical Assistance (RMA) program is mandated by 45 CFR 400.90 as agreed upon with the Louisiana Department of Social Services. This program is designed for non-citizens who meet refugee criteria a defined by USCIS, are in need of medical care, and are not eligible for any other Medical program. RMA is 100% federally funded.
<b>Agency discretion or Federal requirement?</b>	Agency discretion
<b>Describe any budgetary peculiarities.</b>	None
<b>Is the Total Request amount for multiple years?</b>	No, it is anticipated that the total requested amount will be available for expenditures from July 1, 2024 - June 30, 2025.
<b>Additional information or comments.</b>	
<b>Provide the amount of any indirect costs.</b>	None
<b>Any indirect costs funded with other MOF?</b>	None
<b>Objectives and indicators in the Operational Plan.</b>	None
<b>Additional information or comments.</b>	

**Form 24141 — 305 - MONEY FOLLOWS THE PERSON**

Expenditures	Existing Operating Budget as of 10/01/2023			FY2024-2025 Total Request			FY2025-2026 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	—	—	—	—	—	—	—	—	—
<b>TOTAL PERSONAL SERVICES</b>	—	—	—	—	—	—	—	—	—
Travel	—	—	—	—	—	—	—	—	—
Operating Services	—	—	—	—	—	—	—	—	—
Supplies	—	—	—	—	—	—	—	—	—
<b>TOTAL OPERATING EXPENSES</b>	—	—	—	—	—	—	—	—	—
<b>PROFESSIONAL SERVICES</b>	—	—	—	—	—	—	—	—	—
Other Charges	—	—	—	—	—	—	—	—	—
Debt Service	—	—	—	—	—	—	—	—	—
Interagency Transfers	2,200,000	—	—	2,200,000	—	—	2,200,000	—	—
<b>TOTAL OTHER CHARGES</b>	<b>\$2,200,000</b>	—	—	<b>\$2,200,000</b>	—	—	<b>\$2,200,000</b>	—	—
Acquisitions	—	—	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—	—	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	—	—	—	—	—	—	—	—	—
<b>TOTAL EXPENDITURES</b>	<b>\$2,200,000</b>	—	—	<b>\$2,200,000</b>	—	—	<b>\$2,200,000</b>	—	—

**Form 24141 — 305 - MONEY FOLLOWS THE PERSON**

Question	Narrative Response
<b>State the purpose, source and legal citation.</b>	The Money Follows the Person (MFP) Rebalancing Demonstration, created by the U.S. Deficit Reduction Act of 2005, assist states to try new ways of delivering medical services. The Demonstration assists states to utilize MFP methodology to transition people from institutions to home and community-based services. The Louisiana Medicaid Office is working with the Office for Citizens with Developmental Disabilities (OCDD) and the Office of Aging and Adult Services (OAAS) to implement the demonstration.
<b>Agency discretion or Federal requirement?</b>	Agency discretion
<b>Describe any budgetary peculiarities.</b>	None
<b>Is the Total Request amount for multiple years?</b>	No, it is anticipated that the total requested amount will be available for expenditures from July 1, 2024 - June 30, 2025.
<b>Additional information or comments.</b>	
<b>Provide the amount of any indirect costs.</b>	None
<b>Any indirect costs funded with other MOF?</b>	None
<b>Objectives and indicators in the Operational Plan.</b>	None
<b>Additional information or comments.</b>	

Form 24142 — 305 - SCHOOL BASED ADMIN

Expenditures	Existing Operating Budget as of 10/01/2023			FY2024-2025 Total Request			FY2025-2026 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	—	—	—	—	—	—	—	—	—
<b>TOTAL PERSONAL SERVICES</b>	—	—	—	—	—	—	—	—	—
Travel	—	—	—	—	—	—	—	—	—
Operating Services	—	—	—	—	—	—	—	—	—
Supplies	—	—	—	—	—	—	—	—	—
<b>TOTAL OPERATING EXPENSES</b>	—	—	—	—	—	—	—	—	—
<b>PROFESSIONAL SERVICES</b>	—	—	—	—	—	—	—	—	—
Other Charges	3,000,000	—	—	3,000,000	—	—	3,000,000	—	—
Debt Service	—	—	—	—	—	—	—	—	—
Interagency Transfers	—	—	—	—	—	—	—	—	—
<b>TOTAL OTHER CHARGES</b>	<b>\$3,000,000</b>	—	—	<b>\$3,000,000</b>	—	—	<b>\$3,000,000</b>	—	—
Acquisitions	—	—	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—	—	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	—	—	—	—	—	—	—	—	—
<b>TOTAL EXPENDITURES</b>	<b>\$3,000,000</b>	—	—	<b>\$3,000,000</b>	—	—	<b>\$3,000,000</b>	—	—

Form 24142 — 305 - SCHOOL BASED ADMIN

Question	Narrative Response
<b>State the purpose, source and legal citation.</b>	To enact Chapter 55 of Title 46 of the Louisiana Revised Status of 1950 to be comprised 46:2721 , relative to funding of Medicaid school-based administrative claiming; to create the Medicaid School-Based Administrative Claiming Trust Fund within the Treasury; to provide for investment and uses of monies in the fund; to provide for the intergovernmental transfer program; to provide for an effective date; and to provide for related matter. This is a program in which the local school board districts will use local dollars spent on Medicaid related activities to draw down federal Medicaid dollars. The local school board districts are certifying the state match which is 50% of total expenditures. These are services performed by an individual with special medical knowledge such as a nurse or physical therapies.
<b>Agency discretion or Federal requirement?</b>	Agency discretion
<b>Describe any budgetary peculiarities.</b>	None
<b>Is the Total Request amount for multiple years?</b>	No, it is anticipated that the total requested amount will be available for expenditures from July 1, 2024 - June 30, 2025.
<b>Additional information or comments.</b>	
<b>Provide the amount of any indirect costs.</b>	None
<b>Any indirect costs funded with other MOF?</b>	None
<b>Objectives and indicators in the Operational Plan.</b>	None
<b>Additional information or comments.</b>	



Form 24145 — 305 - MEDICAID TITLE 19

Expenditures	Existing Operating Budget as of 10/01/2023			FY2024-2025 Total Request			FY2025-2026 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	49,701,959	—	10,383,742	49,020,262	—	9,459,642	46,608,723	—	9,459,642
Other Compensation	1,801,695	—	1,600,456	1,667,244	—	1,654,639	1,690,218	—	1,654,639
Related Benefits	33,857,536	—	6,810,771	33,985,003	—	6,910,100	31,824,481	—	6,910,100
<b>TOTAL PERSONAL SERVICES</b>	<b>\$85,361,190</b>	<b>—</b>	<b>\$18,794,969</b>	<b>\$84,672,509</b>	<b>—</b>	<b>\$18,024,381</b>	<b>\$80,123,422</b>	<b>—</b>	<b>\$18,024,381</b>
Travel	107,000	—	104,133	109,547	—	106,476	92,178	—	104,133
Operating Services	16,575,475	—	16,571,175	2,363,312	—	2,356,315	15,997,153	—	1,985,428
Supplies	127,848	—	127,848	130,892	—	130,725	110,139	—	127,848
<b>TOTAL OPERATING EXPENSES</b>	<b>\$16,810,323</b>	<b>—</b>	<b>\$16,803,156</b>	<b>\$2,603,751</b>	<b>—</b>	<b>\$2,593,516</b>	<b>\$16,199,470</b>	<b>—</b>	<b>\$2,217,409</b>
<b>PROFESSIONAL SERVICES</b>	<b>\$132,291,013</b>	<b>—</b>	<b>\$59,379,784</b>	<b>\$136,152,879</b>	<b>—</b>	<b>\$61,287,879</b>	<b>\$118,418,514</b>	<b>—</b>	<b>\$60,031,530</b>
Other Charges	83,306,561	—	27,906,409	35,466,652	—	9,376,624	74,107,435	—	9,376,624
Debt Service	—	—	—	—	—	—	—	—	—
Interagency Transfers	210,735,789	—	59,335,325	183,684,443	—	44,714,380	193,015,959	—	44,714,380
<b>TOTAL OTHER CHARGES</b>	<b>\$294,042,350</b>	<b>—</b>	<b>\$87,241,734</b>	<b>\$219,151,095</b>	<b>—</b>	<b>\$54,091,004</b>	<b>\$267,123,394</b>	<b>—</b>	<b>\$54,091,004</b>
Acquisitions	—	—	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—	—	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$528,504,876</b>	<b>—</b>	<b>\$182,219,643</b>	<b>\$442,580,234</b>	<b>—</b>	<b>\$135,996,780</b>	<b>\$481,864,800</b>	<b>—</b>	<b>\$134,364,324</b>

Form 24145 — 305 - MEDICAID TITLE 19

Question	Narrative Response
<b>State the purpose, source and legal citation.</b>	Social Security Act, Title XIX, as amended provides financial assistance to States for payments of medical assistance on behalf of cash assistance recipients, children, pregnant women, and the aged who meet income and resource requirements and other categorically-eligible groups. In certain states that elect to provide coverage, other medically needy persons who except for income and resources, would be eligible for cash assistance, may be eligible for medical assistance payments under this program. Financial assistance is also provided to States to pay for Medicare premiums, co-payments and deductibles of qualified Medicare beneficiaries meeting certain income requirements. Additionally, the United States Congress enacted the Children Health Insurance Program (CHIP). Effective November, 1998, Louisiana enacted the LaCHIP eligibility program, which fees are paid through the Medical Administration grant. The SFY25 Federal Match for Title XIX 'Medicaid' is 32.04% for State and 67.96% for Federal. The SFY25 Federal Match for Title XXI 'LaCHIP' is 22.43% for State and 77.57% for Federal. Generally, Medical Vendor Administration has a match rate of Federal 50% and State 50% for providing services related to the administration of the Medicaid program. Exceptions to this match rate are for specific activities such as the installation of mechanized claims processing and information retrieval systems.
<b>Agency discretion or Federal requirement?</b>	For the categorically needy, States must provide in-and-out patient hospital services; rural health clinic services; other laboratory and x-ray services; skilled nursing home services home health services for persons over age 21; family planning services, physician services, early and periodic screening, diagnosis, treatment for individuals under age 21; and services furnished by a nurse-midwife as licensed by the states. For medically needy, states are required to provide any seven of these services for which federal financial participation is available.
<b>Describe any budgetary peculiarities.</b>	State and local welfare agencies must operate under an HHS approved Medicaid State Plan and comply with all federal regulations governing aid and medical assistance to the needy Under the Act, the federal share for medical services may range from 50% to 90.43% percent. The statistical factors used for fund allocation are 1) medical assistance expenditures by State and) per capita income by State based on a 3 year average (Source: 'Personal Income, 'Department of Commerce, Bureau of Economic Analysis'). This program has maintenance of effort (MOE) requirements.
<b>Is the Total Request amount for multiple years?</b>	No, it is anticipated that the total requested amount will be available for expenditures from July 1, 2024 - June 30, 2025.
<b>Additional information or comments.</b>	
<b>Provide the amount of any indirect costs.</b>	N/A
<b>Any indirect costs funded with other MOF?</b>	N/A
<b>Objectives and indicators in the Operational Plan.</b>	N/A
<b>Additional information or comments.</b>	

**Fees & Self-generated**

**Form 24109 — 305 - RECOVERY FROM 3RD PARTIES**

Expenditures	Existing Operating Budget as of 10/01/2023			FY2024-2025 Total Request			FY2025-2026 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	—	—	—	—	—	—	—	—	—
<b>TOTAL PERSONAL SERVICES</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>
Travel	—	—	—	—	—	—	—	—	—
Operating Services	—	—	—	—	—	—	—	—	—
Supplies	—	—	—	—	—	—	—	—	—
<b>TOTAL OPERATING EXPENSES</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>
<b>PROFESSIONAL SERVICES</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>
Other Charges	400,000	—	—	400,000	—	—	400,000	—	—
Debt Service	—	—	—	—	—	—	—	—	—
Interagency Transfers	—	—	—	—	—	—	—	—	—
<b>TOTAL OTHER CHARGES</b>	<b>\$400,000</b>	<b>—</b>	<b>—</b>	<b>\$400,000</b>	<b>—</b>	<b>—</b>	<b>\$400,000</b>	<b>—</b>	<b>—</b>
Acquisitions	—	—	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—	—	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$400,000</b>	<b>—</b>	<b>—</b>	<b>\$400,000</b>	<b>—</b>	<b>—</b>	<b>\$400,000</b>	<b>—</b>	<b>—</b>

**Form 24109 — 305 - RECOVERY FROM 3RD PARTIES**

Question	Narrative Response
<b>State the purpose, source and legal citation.</b>	<p>The Recipients Recovery and Reimbursement activity is responsible for reimbursing recipients for out-of-pocket expenses prior to their retroactive Medicaid eligibility. While the Recovery activity is responsible for developing a recovery process that maximizes collections related to the identification of Medicaid recipients with TP or other required recoveries. Timely recovery of such funds is mandated by Federal Regulation 42 CFR, CH. IV, 433.139 which mandates that the State recover funds from liable third parties and shall initiate pursuit from liable third parties within 60 days from the end of the month in which the identification is established. Medicaid is the payer of last resort per Federal statute (42 U.S.C. 1396a (a) (25) and 42 C.F.R sections 433.135-433.139 (2005) (Subpart D-Third Party Liability). LA Revised Statute 46:446 further establishes the State's right to collect third party payments whenever Medicaid recipients are in an accident or injured through subrogation rights. Estate Recovery is mandated by Section 1917b of the Social Security Act, and LSA R.S. 46:153.4, which mandates that the state seek recovery of the amount that Medicaid paid for nursing home services, home and community based services, and related hospital and prescription services from the estates of deceased Medicaid recipients age 55 or older. These activities support the agency's mission to maximize recoveries for the state as required by both federal and state statute. R.S. 46:446: Recovery of assistance and medical payments: notices; pleadings; worker's compensation benefits excepted; prescriptions; and allows third party liability percentage of collections of collection contracts. There is no matching requirement for these 100% self-generated funds.</p>
<b>Agency discretion or Federal requirement?</b>	Agency discretion
<b>Describe any budgetary peculiarities.</b>	None
<b>Is the Total Request amount for multiple years?</b>	No, it is anticipated that the total requested amount will be available for expenditures from July 1, 2024 - June 30, 2025.
<b>Additional information or comments.</b>	
<b>Provide the amount of any indirect costs.</b>	None
<b>Any indirect costs funded with other MOF?</b>	None
<b>Objectives and indicators in the Operational Plan.</b>	None
<b>Additional information or comments.</b>	

**Form 24143 — 305 - MEDICAID OUTSTATIONING**

Expenditures	Existing Operating Budget as of 10/01/2023			FY2024-2025 Total Request			FY2025-2026 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	—	—	—	—	—	—	—	—	—
<b>TOTAL PERSONAL SERVICES</b>	—	—	—	—	—	—	—	—	—
Travel	—	—	—	—	—	—	—	—	—
Operating Services	—	—	—	—	—	—	—	—	—
Supplies	—	—	—	—	—	—	—	—	—
<b>TOTAL OPERATING EXPENSES</b>	—	—	—	—	—	—	—	—	—
<b>PROFESSIONAL SERVICES</b>	—	—	—	—	—	—	—	—	—
Other Charges	3,600,000	—	—	3,600,000	—	—	3,600,000	—	—
Debt Service	—	—	—	—	—	—	—	—	—
Interagency Transfers	—	—	—	—	—	—	—	—	—
<b>TOTAL OTHER CHARGES</b>	<b>\$3,600,000</b>	—	—	<b>\$3,600,000</b>	—	—	<b>\$3,600,000</b>	—	—
Acquisitions	—	—	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—	—	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	—	—	—	—	—	—	—	—	—
<b>TOTAL EXPENDITURES</b>	<b>\$3,600,000</b>	—	—	<b>\$3,600,000</b>	—	—	<b>\$3,600,000</b>	—	—

**Form 24143 — 305 - MEDICAID OUTSTATIONING**

Question	Narrative Response
<b>State the purpose, source and legal citation.</b>	The Eligibility Determination activity supports the agency's mission by providing access to health care services for Louisiana's residents through the efficient and timely determination of Medicaid eligibility in compliance with federal and state laws. As provided for in Act 14 of the 2016 Second Extraordinary Session, this funding represents self-generated revenues as recognized by the Revenue Estimating Conference consisting of grants and bona fide donations. There is no matching requirement for these 100% self-generated funds.
<b>Agency discretion or Federal requirement?</b>	Agency discretion
<b>Describe any budgetary peculiarities.</b>	None
<b>Is the Total Request amount for multiple years?</b>	No, it is anticipated that the total requested amount will be available for expenditures from July 1, 2024 - June 30, 2025.
<b>Additional information or comments.</b>	
<b>Provide the amount of any indirect costs.</b>	None
<b>Any indirect costs funded with other MOF?</b>	None
<b>Objectives and indicators in the Operational Plan.</b>	None
<b>Additional information or comments.</b>	

**Form 24144 — 305 - Application, Licensing, and Certification Fees**

Expenditures	Existing Operating Budget as of 10/01/2023			FY2024-2025 Total Request			FY2025-2026 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	—	—	—	—	—	—	—	—	—
<b>TOTAL PERSONAL SERVICES</b>	—	—	—	—	—	—	—	—	—
Travel	—	—	—	—	—	—	—	—	—
Operating Services	—	—	—	—	—	—	—	—	—
Supplies	—	—	—	—	—	—	—	—	—
<b>TOTAL OPERATING EXPENSES</b>	—	—	—	—	—	—	—	—	—
<b>PROFESSIONAL SERVICES</b>	—	—	—	—	—	—	—	—	—
Other Charges	200,000	—	—	200,000	—	—	200,000	—	—
Debt Service	—	—	—	—	—	—	—	—	—
Interagency Transfers	—	—	—	—	—	—	—	—	—
<b>TOTAL OTHER CHARGES</b>	<b>\$200,000</b>	—	—	<b>\$200,000</b>	—	—	<b>\$200,000</b>	—	—
Acquisitions	—	—	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—	—	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	—	—	—	—	—	—	—	—	—
<b>TOTAL EXPENDITURES</b>	<b>\$200,000</b>	—	—	<b>\$200,000</b>	—	—	<b>\$200,000</b>	—	—

**Form 24144 — 305 - Application, Licensing, and Certification Fees**

Question	Narrative Response
<b>State the purpose, source and legal citation.</b>	The LDH Office of Public Health STD Program activity supports the agency's mission by ensuring that the State operates a formal, comprehensive system to lead the effort to build a holistic, integrated and innovative system of STD and HIV prevention, care and education that eliminates health inequities by utilizing quality data and technology to inform and direct policy and programs around sexual health. Major prevention activities include HIV Counseling, Testing, and Linkage to Care Services, Prevention Materials Distribution, Partner Services, Community Planning, the Louisiana Statewide STD/HIV Infoline, and training and education. The STD Program administers statewide and regional programs designed to prevent the transmission of STDs and HIV, to ensure the availability of quality medical and social services for those diagnosed with an STD or HIV, and to track the impact of the STD and HIV epidemics in Louisiana. The screening application fees will be generated by Medicaid providers paying for screening services. As mandated by the provisions set forth in the Application Fee 42 CFR 455.460 and the Medicaid Provider Screening Application Fee LAC 50:1.1501, States must collect the applicable fee prior to executing a provider agreement from a prospective or re-enrolling provider. The application fee amount is set by CMS and may be adjusted annually. The fee, which is assessed at the point of initial enrollment and at enrollment revalidation, is to be charged individually and in full for each service location.
<b>Agency discretion or Federal requirement?</b>	Agency discretion
<b>Describe any budgetary peculiarities.</b>	None
<b>Is the Total Request amount for multiple years?</b>	No, it is anticipated that the total requested amount will be available for expenditures from July 1, 2024 - June 30, 2025.
<b>Additional information or comments.</b>	
<b>Provide the amount of any indirect costs.</b>	None
<b>Any indirect costs funded with other MOF?</b>	None
<b>Objectives and indicators in the Operational Plan.</b>	None
<b>Additional information or comments.</b>	



**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 24086 DEPT OF CORRECTIONS	Interagency Transfers Form ID 24106 DCFS	Interagency Transfers Form ID 24164 LDH-OBH
Salaries	10,383,742	62,074,650	10,383,742	—	—	—
Other Compensation	1,600,456	3,508,755	1,600,456	—	—	—
Related Benefits	6,810,771	41,949,119	6,810,771	—	—	—
<b>TOTAL PERSONAL SERVICES</b>	<b>\$18,794,969</b>	<b>\$107,532,524</b>	<b>\$18,794,969</b>	—	—	—
Travel	104,133	220,219	104,133	—	—	—
Operating Services	16,571,175	33,266,487	16,483,871	—	—	—
Supplies	127,848	263,125	127,848	—	—	—
<b>TOTAL OPERATING EXPENSES</b>	<b>\$16,803,156</b>	<b>\$33,749,831</b>	<b>\$16,715,852</b>	—	—	—
<b>PROFESSIONAL SERVICES</b>	<b>\$59,379,784</b>	<b>\$197,437,444</b>	<b>\$59,379,784</b>	<b>\$202,875</b>	—	—
Other Charges	27,906,409	147,528,670	27,995,951	—	—	—
Debt Service	—	—	—	—	—	—
Interagency Transfers	59,335,325	279,390,291	59,333,087	—	270,797	26,000
<b>TOTAL OTHER CHARGES</b>	<b>\$87,241,734</b>	<b>\$426,918,961</b>	<b>\$87,329,038</b>	—	<b>\$270,797</b>	<b>\$26,000</b>
Acquisitions	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	—	—	—	—	—	—
<b>TOTAL EXPENDITURES</b>	<b>\$182,219,643</b>	<b>\$765,638,760</b>	<b>\$182,219,643</b>	<b>\$202,875</b>	<b>\$270,797</b>	<b>\$26,000</b>

**Expenditures by Means of Financing**

**Existing Operating Budget**

<b>Expenditures</b>	<b>Interagency Transfers Form ID 27385 LDH-MVP</b>	<b>Fees &amp; Self-generated Form ID 24109 MISC SELF-GEN REVENUE</b>	<b>Fees &amp; Self-generated Form ID 24143 MEDICAID OUTSTATIONING</b>	<b>Fees &amp; Self-generated Form ID 24144 FEES &amp; SELF GENERATED</b>	<b>Statutory Dedications Form ID 24110 H14-MED ASST FRAUD FUND</b>	<b>Federal Funds Form ID 24139 CHIP</b>
Salaries	—	—	—	—	403,839	1,585,110
Other Compensation	—	—	—	—	49,470	57,134
Related Benefits	—	—	—	—	238,034	1,042,778
<b>TOTAL PERSONAL SERVICES</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>\$691,343</b>	<b>\$2,685,022</b>
Travel	—	—	—	—	2,868	6,218
Operating Services	87,304	—	—	—	4,300	115,537
Supplies	—	—	—	—	—	7,429
<b>TOTAL OPERATING EXPENSES</b>	<b>\$87,304</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>\$7,168</b>	<b>\$129,184</b>
<b>PROFESSIONAL SERVICES</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>\$11,734</b>	<b>\$5,502,038</b>
Other Charges	27,363,682	400,000	3,600,000	200,000	—	1,662,476
Debt Service	—	—	—	—	—	—
Interagency Transfers	2,238	—	—	—	1,100	6,821,280
<b>TOTAL OTHER CHARGES</b>	<b>\$27,365,920</b>	<b>\$400,000</b>	<b>\$3,600,000</b>	<b>\$200,000</b>	<b>\$1,100</b>	<b>\$8,483,756</b>
Acquisitions	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$27,453,224</b>	<b>\$400,000</b>	<b>\$3,600,000</b>	<b>\$200,000</b>	<b>\$711,345</b>	<b>\$16,800,000</b>

**Expenditures by Means of Financing**

**Existing Operating Budget**

<b>Expenditures</b>	<b>Federal Funds Form ID 24140 MAP REFUGEE</b>	<b>Federal Funds Form ID 24141 MONEY FOLLOWS THE PERSON</b>	<b>Federal Funds Form ID 24142 SCHOOL BASED ADMIN</b>	<b>Federal Funds Form ID 24145 MEDICAID</b>
Salaries	—	—	—	49,701,959
Other Compensation	—	—	—	1,801,695
Related Benefits	—	—	—	33,857,536
<b>TOTAL PERSONAL SERVICES</b>	—	—	—	<b>\$85,361,190</b>
Travel	—	—	—	107,000
Operating Services	—	—	—	16,575,475
Supplies	—	—	—	127,848
<b>TOTAL OPERATING EXPENSES</b>	—	—	—	<b>\$16,810,323</b>
<b>PROFESSIONAL SERVICES</b>	<b>\$50,000</b>	—	—	<b>\$132,291,013</b>
Other Charges	—	—	3,000,000	83,306,561
Debt Service	—	—	—	—
Interagency Transfers	—	2,200,000	—	210,735,789
<b>TOTAL OTHER CHARGES</b>	—	<b>\$2,200,000</b>	<b>\$3,000,000</b>	<b>\$294,042,350</b>
Acquisitions	—	—	—	—
Major Repairs	—	—	—	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	—	—	—	—
<b>TOTAL EXPENDITURES</b>	<b>\$50,000</b>	<b>\$2,200,000</b>	<b>\$3,000,000</b>	<b>\$528,504,876</b>

Total Request

Expenditures	Used as a Cash Match	Total Means of Financing By Expenditure	Total State General Fund	Interagency Transfers Form ID 24086 DEPT OF CORRECTIONS	Interagency Transfers Form ID 24106 DCFS	Interagency Transfers Form ID 24164 LDH-OBH
Salaries	9,459,642	60,468,854	9,459,643	—	—	—
Other Compensation	1,654,639	3,428,487	1,654,639	—	—	—
Related Benefits	6,910,100	42,175,914	6,910,099	—	—	—
<b>TOTAL PERSONAL SERVICES</b>	<b>\$18,024,381</b>	<b>\$106,073,255</b>	<b>\$18,024,381</b>	—	—	—
Travel	106,476	225,174	106,476	—	—	—
Operating Services	2,356,315	4,839,561	2,356,315	—	—	—
Supplies	130,725	269,046	130,725	—	—	—
<b>TOTAL OPERATING EXPENSES</b>	<b>\$2,593,516</b>	<b>\$5,333,781</b>	<b>\$2,593,516</b>	—	—	—
<b>PROFESSIONAL SERVICES</b>	<b>\$61,287,879</b>	<b>\$203,212,233</b>	<b>\$61,287,878</b>	<b>\$204,728</b>	<b>\$2,474</b>	<b>\$238</b>
Other Charges	9,376,624	53,705,752	9,376,624	—	—	—
Debt Service	—	—	—	—	—	—
Interagency Transfers	44,714,380	237,718,001	44,714,381	—	270,797	26,000
<b>TOTAL OTHER CHARGES</b>	<b>\$54,091,004</b>	<b>\$291,423,753</b>	<b>\$54,091,005</b>	—	<b>\$270,797</b>	<b>\$26,000</b>
Acquisitions	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	—	—	—	—	—	—
<b>TOTAL EXPENDITURES</b>	<b>\$135,996,780</b>	<b>\$606,043,022</b>	<b>\$135,996,780</b>	<b>\$204,728</b>	<b>\$273,271</b>	<b>\$26,238</b>

**Expenditures by Means of Financing**

**Total Request**

<b>Expenditures</b>	<b>Statutory Dedications Form ID 24110 H14-MED ASST FRAUD FUND</b>	<b>Federal Funds Form ID 24139 CHIP</b>	<b>Federal Funds Form ID 24140 MAP REFUGEE</b>	<b>Federal Funds Form ID 24141 MONEY FOLLOWS THE PERSON</b>	<b>Federal Funds Form ID 24142 SCHOOL BASED ADMIN</b>	<b>Federal Funds Form ID 24145 MEDICAID</b>
Salaries	403,839	1,585,110	—	—	—	49,020,262
Other Compensation	49,470	57,134	—	—	—	1,667,244
Related Benefits	238,034	1,042,778	—	—	—	33,985,003
<b>TOTAL PERSONAL SERVICES</b>	<b>\$691,343</b>	<b>\$2,685,022</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>\$84,672,509</b>
Travel	2,933	6,218	—	—	—	109,547
Operating Services	4,397	115,537	—	—	—	2,363,312
Supplies	—	7,429	—	—	—	130,892
<b>TOTAL OPERATING EXPENSES</b>	<b>\$7,330</b>	<b>\$129,184</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>\$2,603,751</b>
<b>PROFESSIONAL SERVICES</b>	<b>\$11,998</b>	<b>\$5,502,038</b>	<b>\$50,000</b>	<b>—</b>	<b>—</b>	<b>\$136,152,879</b>
Other Charges	—	1,662,476	—	—	3,000,000	35,466,652
Debt Service	—	—	—	—	—	—
Interagency Transfers	1,100	6,821,280	—	2,200,000	—	183,684,443
<b>TOTAL OTHER CHARGES</b>	<b>\$1,100</b>	<b>\$8,483,756</b>	<b>—</b>	<b>\$2,200,000</b>	<b>\$3,000,000</b>	<b>\$219,151,095</b>
Acquisitions	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$711,771</b>	<b>\$16,800,000</b>	<b>\$50,000</b>	<b>\$2,200,000</b>	<b>\$3,000,000</b>	<b>\$442,580,234</b>

**Expenditures by Means of Financing**

**Total Request**

<b>Expenditures</b>	<b>Fees &amp; Self-generated Form ID 24109 MISC SELF-GEN REVENUE</b>	<b>Fees &amp; Self-generated Form ID 24143 MEDICAID OUTSTATIONING</b>	<b>Fees &amp; Self-generated Form ID 24144 FEES &amp; SELF GENERATED</b>
Salaries	—	—	—
Other Compensation	—	—	—
Related Benefits	—	—	—
<b>TOTAL PERSONAL SERVICES</b>	<b>—</b>	<b>—</b>	<b>—</b>
Travel	—	—	—
Operating Services	—	—	—
Supplies	—	—	—
<b>TOTAL OPERATING EXPENSES</b>	<b>—</b>	<b>—</b>	<b>—</b>
<b>PROFESSIONAL SERVICES</b>	<b>—</b>	<b>—</b>	<b>—</b>
Other Charges	400,000	3,600,000	200,000
Debt Service	—	—	—
Interagency Transfers	—	—	—
<b>TOTAL OTHER CHARGES</b>	<b>\$400,000</b>	<b>\$3,600,000</b>	<b>\$200,000</b>
Acquisitions	—	—	—
Major Repairs	—	—	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>	<b>—</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$400,000</b>	<b>\$3,600,000</b>	<b>\$200,000</b>

**REVENUE COLLECTIONS/INCOME**

**Interagency Transfers**

**003 - Interagency Transfers**

Source	Commitment Item	Commitment Item Name	FY2022-2023 Actuals	FY-2024 Estimate	FY2024-2025 Projected	Over/Under Current Year Estimate
<b>SOURCE</b>						
DCFS	4710059	MR-FROM STATE AGENCY	270,797	270,797	273,271	2,474
DEPT OF CORRECTIONS	4710059	MR-FROM STATE AGENCY	202,875	202,875	204,728	1,853
LDH-OBH	4710059	MR-FROM STATE AGENCY	—	26,000	26,238	238
LDH-MVP	4710059	MR-FROM STATE AGENCY	18,843,762	27,453,224	—	(27,453,224)
<b>Total Collections/Income</b>			<b>\$19,317,434</b>	<b>\$27,952,896</b>	<b>\$504,237</b>	<b>\$(27,448,659)</b>
<b>TYPE</b>						
Expenditures Source of Funding Form (BR-6)			19,317,434	27,952,896	504,237	(27,448,659)
<b>Total Expenditures, Transfers and Carry Forwards to Next FY</b>			<b>\$19,317,434</b>	<b>\$27,952,896</b>	<b>\$504,237</b>	<b>\$(27,448,659)</b>
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	FY2022-2023 Actuals	FY-2024 Estimate	FY2024-2025 Projected	Over/Under Current Year Estimate
<b>SOURCE</b>						
FEES & SELF GENERATED	4710029	MR-PRIVATE SOURCES	71,105	200,000	200,000	—
THIRD PARTY PAYMENTS	4710029	MR-PRIVATE SOURCES	296,125	400,000	400,000	—
DONATIONS	4710029	MR-PRIVATE SOURCES	616,186	3,600,000	3,600,000	—
<b>Total Collections/Income</b>			<b>\$983,416</b>	<b>\$4,200,000</b>	<b>\$4,200,000</b>	<b>—</b>
<b>TYPE</b>						
Expenditures Source of Funding Form (BR-6)			983,416	4,200,000	4,200,000	—
<b>Total Expenditures, Transfers and Carry Forwards to Next FY</b>			<b>\$983,416</b>	<b>\$4,200,000</b>	<b>\$4,200,000</b>	<b>—</b>
<b>Difference in Total Collections/Income and Total Expenditures, Transfers and Carry Forwards to Next FY</b>			<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>



**Statutory Dedications**

**H14 - Medical Assistance Programs Fraud Detect**

Source	Commitment Item	Commitment Item Name	FY2022-2023 Actuals	FY-2024 Estimate	FY2024-2025 Projected	Over/Under Current Year Estimate
<b>SOURCE</b>						
H14-MED ASST FRAUD FUND	4830014	INTRAFUND TRANSFER	—	711,345	711,771	426
<b>Total Collections/Income</b>			<b>—</b>	<b>\$711,345</b>	<b>\$711,771</b>	<b>\$426</b>
<b>TYPE</b>						
Expenditures Source of Funding Form (BR-6)			—	711,345	711,771	426
<b>Total Expenditures, Transfers and Carry Forwards to Next FY</b>			<b>—</b>	<b>\$711,345</b>	<b>\$711,771</b>	<b>\$426</b>
<b>Difference in Total Collections/Income and Total Expenditures, Transfers and Carry Forwards to Next FY</b>			<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>

Federal Funds

006 - Federal Funds

Source	Commitment Item	Commitment Item Name	FY2022-2023 Actuals	FY-2024 Estimate	FY2024-2025 Projected	Over/Under Current Year Estimate
<b>SOURCE</b>						
MAP REFUGEE	4060035	FR-OTHER	35,893	50,000	50,000	—
ARRA LAHIT ADMIN IMPL	4060035	FR-OTHER	418,708	—	—	—
CHIP	4060035	FR-OTHER	4,916,766	16,800,000	16,800,000	—
MONEY FOLLOWS THE PERSON	4060035	FR-OTHER	909,680	2,200,000	2,200,000	—
SCHOOL BASED ADMIN	4060035	FR-OTHER	2,847,333	3,000,000	3,000,000	—
MEDICAID	4060035	FR-OTHER	268,086,258	528,504,876	442,580,234	(85,924,642)
<b>Total Collections/Income</b>			<b>\$277,214,638</b>	<b>\$550,554,876</b>	<b>\$464,630,234</b>	<b>\$(85,924,642)</b>
<b>TYPE</b>						
Expenditures Source of Funding Form (BR-6)			277,214,638	550,554,876	464,630,234	(85,924,642)
<b>Total Expenditures, Transfers and Carry Forwards to Next FY</b>			<b>\$277,214,638</b>	<b>\$550,554,876</b>	<b>\$464,630,234</b>	<b>\$(85,924,642)</b>
<b>Difference in Total Collections/Income and Total Expenditures, Transfers and Carry Forwards to Next FY</b>			<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>

**Justification of Differences**

**Form 25385 — 305 - IAT DCFS CSOC**

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

**Form 25386 — 305 - IAT DOC Reinstatement of Disability Medicaid**

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

**Form 25387 — 305 - Application, Licensing, & Certification 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.	

**Form 25388 — 305 - Recovery from 3rd Parties**

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

**Form 25389 — 305 - Outstationing**

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

**Form 25390 — 305 - Med. Asst. Programs Fraud Det. 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.	

**Form 25391 — 305 - MAP Refugee**

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

**Form 25392 — 305 - ARRA LAHIT Admin**

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

**Form 25393 — 305 - ARRA-LAHIT EHR INCENTIVE**

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

**Form 25394 — 305 - FEDA CHIP**

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

**Form 25395 — 305 - Money Follows the Person**

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

**Form 25396 — 305 - School-based Admin**

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

**Form 25397 — 305 - Medicaid Title 19**

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

**Form 25398 — 305 - Maternal Opioid Misuse (MOM) Grant**

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

**Form 25444 — 305 - IAT from OBH for PASRR**

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

**Form 28474 — 305 - IAT MVP Unwind**

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

## SCHEDULE OF REQUESTED EXPENDITURES

### 3052 - Medical Vendor Administration

#### Travel

FY2024-2025 Request	Description
4,020	Includes, but not limited to, conference registrations and certificate fees
180,852	Includes, but not limited to, field travel between state and regional offices for professional development trainings, compliance audits, and ad hoc meeting
12,578	Includes, but not limited to, in-state professional development conferences, conventions, and face to face meetings
27,724	Includes, but not limited to, out of state professional development conferences and conventions
<b>\$225,174</b>	<b>Total Travel</b>

#### Operating Services

FY2024-2025 Request	Description
1,059,753	Includes, but not limited to, advertising expenses to support and promote Medicaid eligibility and enrollment initiatives, outreach to communities, and compliance with federal and state regulations requiring public notice of proposed changes to Medicaid program policy.
60,410	Includes, but not limited to, annual membership dues and subscriptions to various professional organizations and publications
93,865	Includes, but not limited to, equipment rentals and the maintenance of equipment in local and regional offices such as copiers, postage meters, and security systems.
310,377	Includes, but not limited to, non-OTM telephone and communications services
3,142,456	Includes, but not limited to, office space for local and regional staff
100,000	Includes, but not limited to, printing expenses to support and promote Medicaid program initiatives, outreach materials, notices, global communications, and member announcements.
72,700	Includes, but not limited to, US Postal Services mailings and post office boxes for the mailing, delivery, and receipt of requests for proposals (RFPs) and outreach, responses to letters of inquiry from the general public, state and federal officials, correspondence with contractors/vendors, etc.
<b>\$4,839,561</b>	<b>Total Operating Services</b>

**Supplies**

FY2024-2025 Request	Description
269,046	Includes, but not limited to, general consumable office supplies for use in conducting the day-to-day activities of the Medicaid program such as paper, pens, folders, binders, staples, printer toner, etc.
<b>\$269,046</b>	<b>Total Supplies</b>

**Professional Services**

FY2024-2025 Request	Means of Financing	Description
18,995,939	Federal Funds	
13,173,170	State General Fund	
<b>\$32,169,109</b>		<b>Accounting, auditing, and related contracts for the administration of the Medicaid program</b>
77,228,336	Federal Funds	
58,065	Fees & Self-generated	
204,728	Interagency Transfers	
11,741	Medical Assistance Programs Fraud Detect	
29,981,838	State General Fund	
<b>\$107,484,708</b>		<b>Contracts for administrative services associated with providing medical and dental services for the Medicaid program</b>
44,607,880	Federal Funds	
17,175,890	State General Fund	
<b>\$61,783,770</b>		<b>Fiscal Intermediary contract</b>
125,000	Federal Funds	
125,000	State General Fund	
<b>\$250,000</b>		<b>Legal contract for the administration of the Medicaid program</b>
692,665	Federal Funds	
831,981	State General Fund	
<b>\$1,524,646</b>		<b>Management consulting contracts for the administration of the Medicaid program</b>
<b>\$203,212,233</b>		<b>Total Professional Services</b>



**Other Charges**

FY2024-2025 Request	Means of Financing	Description
34,553,288	Federal Funds	
4,275,840	Fees & Self-generated	
9,376,624	State General Fund	
<b>\$48,205,752</b>		<b>Administrative costs associated with Medicaid program initiatives, including but not limited to, staff augmentation</b>
5,500,000	Federal Funds	
<b>\$5,500,000</b>		<b>School-based admin clearing</b>
<b>\$53,705,752</b>	<b>Total Other Charges</b>	

**Interagency Transfers**

FY2024-2025 Request	Means of Financing	Receiving Agency	Description
20,000	Federal Funds		
<b>\$20,000</b>		<b>CAPITAL AREA HUMAN SRV DSTRCT</b>	<b>CAHSD - Pre-Admission Screening and Resident Review (PASRR) services</b>
4,000,000	Federal Funds		
<b>\$4,000,000</b>		<b>DCFS-OFF FOR CHILD/FAMILY SRV</b>	<b>DCFS - Administrative activities related to Medicaid eligibility determination and other activities</b>
2,000,000	Federal Funds		
<b>\$2,000,000</b>		<b>DCFS-OFF FOR CHILD/FAMILY SRV</b>	<b>DCFS - CAF... System Integration</b>
734,024	Federal Funds		
734,024	State General Fund		
<b>\$1,468,048</b>		<b>DIVISION OF ADMINISTRATION</b>	<b>DOA - Bienville Building Rent paid by the Louisiana Department of Health (LDH) Office of the Secretary (OS to the Office of Facility Planning and Control (OFC)</b>
31,119	Federal Funds		
31,119	State General Fund		
<b>\$62,237</b>		<b>DIVISION OF ADMINISTRATION</b>	<b>DOA - Capitol Police Security</b>
27,340	Federal Funds		

Interagency Transfers (continued)

FY2024-2025 Request	Means of Financing	Receiving Agency	Description
27,340	State General Fund		
<b>\$54,680</b>		<b>DIVISION OF ADMINISTRATION</b>	<b>DOA - Louisiana Department of the Treasury</b>
205,559	Federal Funds		
45,013	State General Fund		
<b>\$250,572</b>		<b>DIVISION OF ADMINISTRATION</b>	<b>DOA - Office of Group Benefits</b>
246,491	Federal Funds		
246,491	State General Fund		
<b>\$492,981</b>		<b>DIVISION OF ADMINISTRATION</b>	<b>DOA - Office of Risk Management (ORM)</b>
101,302	State General Fund		
<b>\$101,302</b>		<b>DIVISION OF ADMINISTRATION</b>	<b>DOA - Office of State Procurement (OSP)</b>
101,302	Federal Funds		
<b>\$101,302</b>		<b>DIVISION OF ADMINISTRATION</b>	<b>DOA - Office of State Procurement - Technical product support to include but not limited to module application development, maintenance, project management, licenses, software, and enhancements.</b>
31,248	Federal Funds		
31,248	State General Fund		
<b>\$62,496</b>		<b>DIVISION OF ADMINISTRATION</b>	<b>DOA - Office of State Uniform Payroll (OSUP) Services</b>
718,522	Federal Funds		
718,522	State General Fund		
<b>\$1,437,043</b>		<b>DIVISION OF ADMINISTRATION</b>	<b>DOA - Office of Technology Services (OTS) Production Support Services (PSS)</b>
48,288,972	State General Fund		
<b>\$48,288,972</b>		<b>DIVISION OF ADMINISTRATION</b>	<b>DOA - Office of Technology Services- Technical product support to include but not limited to module application development, maintenance, project management, licenses, software, and enhancements.</b>

Interagency Transfers (continued)

FY2024-2025 Request	Means of Financing	Receiving Agency	Description
165,515,944	Federal Funds		
<b>\$165,515,944</b>		<b>DIVISION OF ADMINISTRATION</b>	<b>DOA - Office of Technology Services-Technical product support to include but not limited to module application development, maintenance, project management, licenses, software and enhancements.</b>
182,354	Federal Funds		
182,354	State General Fund		
<b>\$364,707</b>		<b>DIVISION OF ADMINISTRATION</b>	<b>DOA - State Civil Service (SCS) and Comprehensive Public Training Program (CPTP) Fees</b>
10,000	Federal Funds		
<b>\$10,000</b>		<b>FLA PAR HUMAN SERVCS AUTHORITY</b>	<b>FPHSA - Centers for Medicare and Medicaid Services (CMS) mandated Pre-Admission Screening and Resident Review (PASRR) services</b>
200,000	Federal Funds		
<b>\$200,000</b>		<b>HED-BOARD OF REGENTS</b>	<b>HED-BOR - Medical &amp; Allied Health Professional Education Scholarships and Loan Program</b>
21,099	Federal Funds		
21,099	State General Fund		
<b>\$42,197</b>		<b>WORKFORCE SUPPORT AND TRAINING</b>	<b>LWC - Louisiana Workforce Commission (LWC)</b>
1,091,140	Federal Funds		
<b>\$1,091,140</b>		<b>OFFICE OF AGING &amp; ADULT SRVS</b>	<b>OAAS - Adult Protective Services (APS)</b>
880,189	Federal Funds		
<b>\$880,189</b>		<b>OFFICE OF AGING &amp; ADULT SRVS</b>	<b>OAAS - Long-Term Personal Care Services (LT-PCS)</b>
1,624,398	Federal Funds		
<b>\$1,624,398</b>		<b>OFFICE OF AGING &amp; ADULT SRVS</b>	<b>OAAS - Money Follows the Person (MFP)</b>
1,380,508	Federal Funds		
<b>\$1,380,508</b>		<b>OFFICE OF AGING &amp; ADULT SRVS</b>	<b>OAAS - Money Follows the Person (MFP) Capacity Building Initiative (CBI) Grant</b>

Interagency Transfers (continued)

FY2024-2025 Request	Means of Financing	Receiving Agency	Description
400,000	Federal Funds		
<b>\$400,000</b>		<b>OFFICE OF AGING &amp; ADULT SRVS</b>	<b>OAAS - Nursing Home Resident Trust Fund (NHRTF)</b>
403,414	Federal Funds		
<b>\$403,414</b>		<b>OFFICE OF AGING &amp; ADULT SRVS</b>	<b>OAAS - OAAS Participant Tracking System (OPTS)</b>
1,996,389	Federal Funds		
<b>\$1,996,389</b>		<b>OFFICE OF AGING &amp; ADULT SRVS</b>	<b>OAAS - Permanent Supportive Housing (PSH)</b>
531,000	Federal Funds		
<b>\$531,000</b>		<b>OFFICE OF THE ATTORNEY GENERAL</b>	<b>OAG - Department of Justice (DOJ) Advocacy Center Ombudsman services for the Community Living Ombudsman Program (CLOP at \$456,000) and Supported Independent Living Advocacy Program (SILAP at \$75,000)</b>
104,250	Federal Funds		
<b>\$104,250</b>		<b>OFFICE OF BEHAVIORAL HEALTH</b>	<b>OBH - 2021 American Rescue Plan Act (ARPA) Workforce Training and Provider Capacity Initiatives</b>
104,000	Federal Funds		
<b>\$104,000</b>		<b>OFFICE OF BEHAVIORAL HEALTH</b>	<b>OBH - Pre-Admission Screening and Resident Review (PASRR)</b>
3,577,602	Federal Funds		
<b>\$3,577,602</b>		<b>OFFICE OF BEHAVIORAL HEALTH</b>	<b>OBH - Specialized Behavioral Health Services (SBHS), Pre-Admission Screening and Resident Review (PASRR), and Department of Justice (DOJ) Nursing Facility Transition (NFT) services</b>
130,351	Federal Funds		
<b>\$130,351</b>		<b>OFF FOR CITIZENS DEV DISABLIT.</b>	<b>OCDD - Act 421 Children's Medicaid (Tax Equity &amp; Fiscal Responsibility Act or TEFRA) Option</b>
386,678	Federal Funds		
<b>\$386,678</b>		<b>OFF FOR CITIZENS DEV DISABLIT.</b>	<b>OCDD - Assessment of Service Needs for persons on the SUN registry and to prioritize access to the Home and Community Based Services (HCBS) waiver (1915c)</b>

Interagency Transfers (continued)

FY2024-2025 Request	Means of Financing	Receiving Agency	Description
1,009,255	Federal Funds		
<b>\$1,009,255</b>		<b>OFF FOR CITIZENS DEV DISABLIT.</b>	<b>OCDD - Money Follows the Person (MFP) Rebalancing Demonstration Grant</b>
567,017	Federal Funds		
<b>\$567,017</b>		<b>OFFICE OF PUBLIC HEALTH</b>	<b>OPH - Advanced Planning Document (APD) and Health Information Technology (HIT) Implementation services</b>
608,673	Federal Funds		
<b>\$608,673</b>		<b>OFFICE OF PUBLIC HEALTH</b>	<b>OPH - Immunization Information System (IIS)/ Louisiana Immunization Network System (LINKS)</b>
227,000	Federal Funds		
<b>\$227,000</b>		<b>OFFICE OF PUBLIC HEALTH</b>	<b>OPH - Tobacco Quitline</b>
925,000	Federal Funds		
<b>\$925,000</b>		<b>HEALTH &amp; HOSP OFF OF SECRETARY</b>	<b>OS - Bureau of Legal and Internal Audit Services</b>
300,000	Federal Funds		
<b>\$300,000</b>		<b>HEALTH &amp; HOSP OFF OF SECRETARY</b>	<b>OS - Bureau of Legal Services (Medicaid Unwind)</b>
2,880,385	Federal Funds		
<b>\$2,880,385</b>		<b>HEALTH &amp; HOSP OFF OF SECRETARY</b>	<b>OS - Health Standards</b>
1,500,000	Federal Funds		
<b>\$1,500,000</b>		<b>HEALTH &amp; HOSP OFF OF SECRETARY</b>	<b>OS - Medicaid eligible legal services related to emergency preparedness and public health emergency.</b>
325,000	Federal Funds		
<b>\$325,000</b>		<b>HEALTH &amp; HOSP OFF OF SECRETARY</b>	<b>OS - Medicaid Federal Reporting cost center</b>
<b>\$245,424,729</b>	<b>Total Interagency Transfers</b>		



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# Continuation Budget Adjustments

## AGENCY SUMMARY STATEMENT

### Total Agency

#### Means of Financing

Description	Existing Operating Budget as of 10/01/2023	Non-Recurring	Inflation	Compulsory	Workload	Other	FY2024-2025 Requested Continuation Level
STATE GENERAL FUND (Direct)	182,219,643	(56,403,059)	1,632,457	4,121,607	4,426,132	—	135,996,780
STATE GENERAL FUND BY:	—	—	—	—	—	—	—
INTERAGENCY TRANSFERS	27,952,896	(27,453,224)	4,565	—	—	—	504,237
FEES & SELF-GENERATED	4,200,000	—	—	—	—	—	4,200,000
STATUTORY DEDICATIONS	711,345	—	426	—	—	—	711,771
FEDERAL FUNDS	550,554,876	(99,860,840)	3,398,248	4,121,606	6,416,344	—	464,630,234
<b>TOTAL MEANS OF FINANCING</b>	<b>\$765,638,760</b>	<b>\$(183,717,123)</b>	<b>\$5,035,696</b>	<b>\$8,243,213</b>	<b>\$10,842,476</b>	<b>—</b>	<b>\$606,043,022</b>



**Fees and Self-Generated**

Description	Existing Operating Budget as of 10/01/2023	Non-Recurring	Inflation	Compulsory	Workload	Other	FY2024-2025 Requested Continuation Level
Fees & Self-generated	4,200,000	—	—	—	—	—	4,200,000
<b>Total:</b>	<b>\$4,200,000</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>\$4,200,000</b>

**Statutory Dedications**

Description	Existing Operating Budget as of 10/01/2023	Non-Recurring	Inflation	Compulsory	Workload	Other	FY2024-2025 Requested Continuation Level
Medical Assistance Programs Fraud Detect	711,345	—	426	—	—	—	711,771
<b>Total:</b>	<b>\$711,345</b>	<b>—</b>	<b>\$426</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>\$711,771</b>

Expenditures and Positions

Description	Existing Operating Budget as of 10/01/2023	Non-Recurring	Inflation	Compulsory	Workload	Other	FY2024-2025 Requested Continuation Level
Salaries	62,074,650	(5,343,371)	—	3,194,654	354,287	188,634	60,468,854
Other Compensation	3,508,755	(1,485,278)	—	1,593,644	—	(188,634)	3,428,487
Related Benefits	41,949,119	(3,414,325)	—	3,454,915	186,205	—	42,175,914
<b>TOTAL PERSONAL SERVICES</b>	<b>\$107,532,524</b>	<b>\$(10,242,974)</b>	<b>—</b>	<b>\$8,243,213</b>	<b>\$540,492</b>	<b>—</b>	<b>\$106,073,255</b>
Travel	220,219	—	4,955	—	—	—	225,174
Operating Services	33,266,487	(29,174,607)	744,567	—	3,114	—	4,839,561
Supplies	263,125	—	5,921	—	—	—	269,046
<b>TOTAL OPERATING EXPENSES</b>	<b>\$33,749,831</b>	<b>\$(29,174,607)</b>	<b>\$755,443</b>	<b>—</b>	<b>\$3,114</b>	<b>—</b>	<b>\$5,333,781</b>
<b>PROFESSIONAL SERVICES</b>	<b>\$197,437,444</b>	<b>\$(7,204,011)</b>	<b>\$4,280,253</b>	<b>—</b>	<b>\$8,698,547</b>	<b>—</b>	<b>\$203,212,233</b>
Other Charges	147,528,670	(93,822,918)	—	—	—	—	53,705,752
Debt Service	—	—	—	—	—	—	—
Interagency Transfers	279,390,291	(43,272,613)	—	—	1,600,323	—	237,718,001
<b>TOTAL OTHER CHARGES</b>	<b>\$426,918,961</b>	<b>\$(137,095,531)</b>	<b>—</b>	<b>—</b>	<b>\$1,600,323</b>	<b>—</b>	<b>\$291,423,753</b>
Acquisitions	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$765,638,760</b>	<b>\$(183,717,123)</b>	<b>\$5,035,696</b>	<b>\$8,243,213</b>	<b>\$10,842,476</b>	<b>—</b>	<b>\$606,043,022</b>
Classified	994	—	—	—	4	3	1,001
Unclassified	2	—	—	—	—	—	2
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>996</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>4</b>	<b>3</b>	<b>1,003</b>
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>113</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>113</b>

## CONTINUATION BUDGET ADJUSTMENTS - SUMMARIZED

### Form 25991 — FY24-25 Non-recurring Carryforwards

#### Means of Financing

	Amount
STATE GENERAL FUND (Direct)	(11,786,161)
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	(27,453,224)
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	(55,243,942)
<b>TOTAL MEANS OF FINANCING</b>	<b>\$(94,483,327)</b>

#### Expenditures

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
<b>TOTAL PERSONAL SERVICES</b>	<b>—</b>
Travel	—
Operating Services	(174,607)
Supplies	—
<b>TOTAL OPERATING EXPENSES</b>	<b>\$(174,607)</b>
<b>PROFESSIONAL SERVICES</b>	<b>\$(7,204,011)</b>
Other Charges	(58,910,790)
Debt Service	—
Interagency Transfers	(28,193,919)
<b>TOTAL OTHER CHARGES</b>	<b>\$(87,104,709)</b>
Acquisitions	—
Major Repairs	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$(94,483,327)</b>

#### Positions

	FTE
Classified	—
Unclassified	—
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>—</b>
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>—</b>
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>—</b>

Continuation Budget Adjustments - Summarized

Total Agency  
Request Type: NON-RECUR

**Form 29139 — 305 - Non-Recur One-time Unwind from MVP**  
**Means of Financing**

	Amount
STATE GENERAL FUND (Direct)	(44,616,898)
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	(44,616,898)
<b>TOTAL MEANS OF FINANCING</b>	<b>\$(89,233,796)</b>

**Expenditures**

	Amount
Salaries	(5,343,371)
Other Compensation	(1,485,278)
Related Benefits	(3,414,325)
<b>TOTAL PERSONAL SERVICES</b>	<b>\$(10,242,974)</b>
Travel	—
Operating Services	(29,000,000)
Supplies	—
<b>TOTAL OPERATING EXPENSES</b>	<b>\$(29,000,000)</b>
<b>PROFESSIONAL SERVICES</b>	<b>—</b>
Other Charges	(34,912,128)
Debt Service	—
Interagency Transfers	(15,078,694)
<b>TOTAL OTHER CHARGES</b>	<b>\$(49,990,822)</b>
Acquisitions	—
Major Repairs	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$(89,233,796)</b>

**Positions**

	FTE
Classified	—
Unclassified	—
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>—</b>
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>—</b>
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>—</b>

Continuation Budget Adjustments - Summarized

Total Agency  
Request Type: INFLATION

Form 25994 — FY24-25 Standard Inflation Adjustment

Means of Financing

	Amount
STATE GENERAL FUND (Direct)	1,632,457
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	4,565
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	426
FEDERAL FUNDS	3,398,248
<b>TOTAL MEANS OF FINANCING</b>	<b>\$5,035,696</b>

Expenditures

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
<b>TOTAL PERSONAL SERVICES</b>	<b>—</b>
Travel	4,955
Operating Services	744,567
Supplies	5,921
<b>TOTAL OPERATING EXPENSES</b>	<b>\$755,443</b>
<b>PROFESSIONAL SERVICES</b>	<b>\$4,280,253</b>
Other Charges	—
Debt Service	—
Interagency Transfers	—
<b>TOTAL OTHER CHARGES</b>	<b>—</b>
Acquisitions	—
Major Repairs	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$5,035,696</b>

Positions

	FTE
Classified	—
Unclassified	—
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>—</b>
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>—</b>
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>—</b>

**Form 28160 — 305 - Annual Market Adjustment for Classified Employees**

**Means of Financing**

	Amount
STATE GENERAL FUND (Direct)	1,500,823
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	1,500,823
<b>TOTAL MEANS OF FINANCING</b>	<b>\$3,001,646</b>

**Expenditures**

	Amount
Salaries	1,974,767
Other Compensation	—
Related Benefits	1,026,879
<b>TOTAL PERSONAL SERVICES</b>	<b>\$3,001,646</b>
Travel	—
Operating Services	—
Supplies	—
<b>TOTAL OPERATING EXPENSES</b>	<b>—</b>
<b>PROFESSIONAL SERVICES</b>	<b>—</b>
Other Charges	—
Debt Service	—
Interagency Transfers	—
<b>TOTAL OTHER CHARGES</b>	<b>—</b>
Acquisitions	—
Major Repairs	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$3,001,646</b>

**Positions**

	FTE
Classified	—
Unclassified	—
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>—</b>
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>—</b>
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>—</b>

**Form 28161 — 305 - Annual Market Adjustment for Unclassified Employees**

**Means of Financing**

	Amount
STATE GENERAL FUND (Direct)	85,527
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	85,527
<b>TOTAL MEANS OF FINANCING</b>	<b>\$171,054</b>

**Positions**

	FTE
Classified	—
Unclassified	—
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>—</b>
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>—</b>
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>—</b>

**Expenditures**

	Amount
Salaries	16,211
Other Compensation	96,538
Related Benefits	58,305
<b>TOTAL PERSONAL SERVICES</b>	<b>\$171,054</b>
Travel	—
Operating Services	—
Supplies	—
<b>TOTAL OPERATING EXPENSES</b>	<b>—</b>
<b>PROFESSIONAL SERVICES</b>	<b>—</b>
Other Charges	—
Debt Service	—
Interagency Transfers	—
<b>TOTAL OTHER CHARGES</b>	<b>—</b>
Acquisitions	—
Major Repairs	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$171,054</b>

**Form 28162 — 305 - Personal Services Base Adjustments**

**Means of Financing**

	Amount
STATE GENERAL FUND (Direct)	2,535,257
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	2,535,256
<b>TOTAL MEANS OF FINANCING</b>	<b>\$5,070,513</b>

**Expenditures**

	Amount
Salaries	1,203,676
Other Compensation	1,497,106
Related Benefits	2,369,731
<b>TOTAL PERSONAL SERVICES</b>	<b>\$5,070,513</b>
Travel	—
Operating Services	—
Supplies	—
<b>TOTAL OPERATING EXPENSES</b>	<b>—</b>
<b>PROFESSIONAL SERVICES</b>	<b>—</b>
Other Charges	—
Debt Service	—
Interagency Transfers	—
<b>TOTAL OTHER CHARGES</b>	<b>—</b>
Acquisitions	—
Major Repairs	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$5,070,513</b>

**Positions**

	FTE
Classified	—
Unclassified	—
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>—</b>
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>—</b>
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>—</b>



**Form 28163 — 305 - 1115 Demonstration Waiver Start-Up Costs**

**Means of Financing**

	Amount
STATE GENERAL FUND (Direct)	2,000,000
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	2,000,000
<b>TOTAL MEANS OF FINANCING</b>	<b>\$4,000,000</b>

**Expenditures**

	Amount
Salaries	175,927
Other Compensation	—
Related Benefits	87,964
<b>TOTAL PERSONAL SERVICES</b>	<b>\$263,891</b>
Travel	—
Operating Services	3,114
Supplies	—
<b>TOTAL OPERATING EXPENSES</b>	<b>\$3,114</b>
<b>PROFESSIONAL SERVICES</b>	<b>\$3,730,775</b>
Other Charges	—
Debt Service	—
Interagency Transfers	2,220
<b>TOTAL OTHER CHARGES</b>	<b>\$2,220</b>
Acquisitions	—
Major Repairs	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$4,000,000</b>

**Positions**

	FTE
Classified	2
Unclassified	—
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>2</b>
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>—</b>
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>—</b>

**Form 28164 — 305 - External Quality Review Organization (EQRO) Contract**

**Means of Financing**

	Amount
STATE GENERAL FUND (Direct)	155,525
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	466,575
<b>TOTAL MEANS OF FINANCING</b>	<b>\$622,100</b>

**Positions**

	FTE
Classified	—
Unclassified	—
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>—</b>
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>—</b>
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>—</b>

**Expenditures**

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
<b>TOTAL PERSONAL SERVICES</b>	<b>—</b>
Travel	—
Operating Services	—
Supplies	—
<b>TOTAL OPERATING EXPENSES</b>	<b>—</b>
<b>PROFESSIONAL SERVICES</b>	<b>\$622,100</b>
Other Charges	—
Debt Service	—
Interagency Transfers	—
<b>TOTAL OTHER CHARGES</b>	<b>—</b>
Acquisitions	—
Major Repairs	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$622,100</b>

**Form 28166 — 305 - Medicaid/Hospital Cost Report Review**

**Means of Financing**

	Amount
STATE GENERAL FUND (Direct)	350,000
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	350,000
<b>TOTAL MEANS OF FINANCING</b>	<b>\$700,000</b>

**Expenditures**

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
<b>TOTAL PERSONAL SERVICES</b>	<b>—</b>
Travel	—
Operating Services	—
Supplies	—
<b>TOTAL OPERATING EXPENSES</b>	<b>—</b>
<b>PROFESSIONAL SERVICES</b>	<b>\$700,000</b>
Other Charges	—
Debt Service	—
Interagency Transfers	—
<b>TOTAL OTHER CHARGES</b>	<b>—</b>
Acquisitions	—
Major Repairs	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$700,000</b>

**Positions**

	FTE
Classified	—
Unclassified	—
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>—</b>
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>—</b>
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>—</b>

**Form 28167 — 305 - DSH Audits**

**Means of Financing**

	Amount
STATE GENERAL FUND (Direct)	43,001
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	43,001
<b>TOTAL MEANS OF FINANCING</b>	<b>\$86,002</b>

**Expenditures**

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
<b>TOTAL PERSONAL SERVICES</b>	<b>—</b>
Travel	—
Operating Services	—
Supplies	—
<b>TOTAL OPERATING EXPENSES</b>	<b>—</b>
<b>PROFESSIONAL SERVICES</b>	<b>\$86,002</b>
Other Charges	—
Debt Service	—
Interagency Transfers	—
<b>TOTAL OTHER CHARGES</b>	<b>—</b>
Acquisitions	—
Major Repairs	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$86,002</b>

**Positions**

	FTE
Classified	—
Unclassified	—
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>—</b>
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>—</b>
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>—</b>

Continuation Budget Adjustments - Summarized

Total Agency  
Request Type: WORKLOAD

Form 28169 — 305 - Nursing Home Case Mix Index

Means of Financing

	Amount
STATE GENERAL FUND (Direct)	91,680
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	91,680
<b>TOTAL MEANS OF FINANCING</b>	<b>\$183,360</b>

Expenditures

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
<b>TOTAL PERSONAL SERVICES</b>	<b>—</b>
Travel	—
Operating Services	—
Supplies	—
<b>TOTAL OPERATING EXPENSES</b>	<b>—</b>
<b>PROFESSIONAL SERVICES</b>	<b>\$183,360</b>
Other Charges	—
Debt Service	—
Interagency Transfers	—
<b>TOTAL OTHER CHARGES</b>	<b>—</b>
Acquisitions	—
Major Repairs	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$183,360</b>

Positions

	FTE
Classified	—
Unclassified	—
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>—</b>
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>—</b>
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>—</b>

Continuation Budget Adjustments - Summarized

Total Agency  
Request Type: WORKLOAD

Form 28170 — 305 - OAAS and OCDD HCBS Audits

Means of Financing

	Amount
STATE GENERAL FUND (Direct)	661,680
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	661,680
<b>TOTAL MEANS OF FINANCING</b>	<b>\$1,323,360</b>

Expenditures

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
<b>TOTAL PERSONAL SERVICES</b>	<b>—</b>
Travel	—
Operating Services	—
Supplies	—
<b>TOTAL OPERATING EXPENSES</b>	<b>—</b>
<b>PROFESSIONAL SERVICES</b>	<b>\$1,323,360</b>
Other Charges	—
Debt Service	—
Interagency Transfers	—
<b>TOTAL OTHER CHARGES</b>	<b>—</b>
Acquisitions	—
Major Repairs	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$1,323,360</b>

Positions

	FTE
Classified	—
Unclassified	—
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>—</b>
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>—</b>
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>—</b>

**Form 28171 — 305 - OAAS HCBS Provider Audit Monitoring Tool**

**Means of Financing**

	Amount
STATE GENERAL FUND (Direct)	171,595
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	171,595
<b>TOTAL MEANS OF FINANCING</b>	<b>\$343,190</b>

**Expenditures**

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
<b>TOTAL PERSONAL SERVICES</b>	<b>—</b>
Travel	—
Operating Services	—
Supplies	—
<b>TOTAL OPERATING EXPENSES</b>	<b>—</b>
<b>PROFESSIONAL SERVICES</b>	<b>\$343,190</b>
Other Charges	—
Debt Service	—
Interagency Transfers	—
<b>TOTAL OTHER CHARGES</b>	<b>—</b>
Acquisitions	—
Major Repairs	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$343,190</b>

**Positions**

	FTE
Classified	—
Unclassified	—
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>—</b>
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>—</b>
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>—</b>

**Form 28172 — 305 - UPL Calculation and ACT 540 Reporting  
Means of Financing**

	Amount
STATE GENERAL FUND (Direct)	50,000
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	50,000
<b>TOTAL MEANS OF FINANCING</b>	<b>\$100,000</b>

**Expenditures**

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
<b>TOTAL PERSONAL SERVICES</b>	<b>—</b>
Travel	—
Operating Services	—
Supplies	—
<b>TOTAL OPERATING EXPENSES</b>	<b>—</b>
<b>PROFESSIONAL SERVICES</b>	<b>\$100,000</b>
Other Charges	—
Debt Service	—
Interagency Transfers	—
<b>TOTAL OTHER CHARGES</b>	<b>—</b>
Acquisitions	—
Major Repairs	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$100,000</b>

**Positions**

	FTE
Classified	—
Unclassified	—
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>—</b>
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>—</b>
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>—</b>



Continuation Budget Adjustments - Summarized

Total Agency  
Request Type: WORKLOAD

**Form 28173 — 305 - Money Follows the Person (MFP) Supplemental Means of Financing**

	Amount
STATE GENERAL FUND (Direct)	—
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	1,092,960
<b>TOTAL MEANS OF FINANCING</b>	<b>\$1,092,960</b>

**Expenditures**

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
<b>TOTAL PERSONAL SERVICES</b>	<b>—</b>
Travel	—
Operating Services	—
Supplies	—
<b>TOTAL OPERATING EXPENSES</b>	<b>—</b>
<b>PROFESSIONAL SERVICES</b>	<b>—</b>
Other Charges	—
Debt Service	—
Interagency Transfers	1,092,960
<b>TOTAL OTHER CHARGES</b>	<b>\$1,092,960</b>
Acquisitions	—
Major Repairs	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$1,092,960</b>

**Positions**

	FTE
Classified	—
Unclassified	—
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>—</b>
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>—</b>
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>—</b>

**Form 28174 — 305 - OAAS APS Positions - Companion**

**Means of Financing**

	Amount
STATE GENERAL FUND (Direct)	—
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	44,813
<b>TOTAL MEANS OF FINANCING</b>	<b>\$44,813</b>

**Expenditures**

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
<b>TOTAL PERSONAL SERVICES</b>	<b>—</b>
Travel	—
Operating Services	—
Supplies	—
<b>TOTAL OPERATING EXPENSES</b>	<b>—</b>
<b>PROFESSIONAL SERVICES</b>	<b>—</b>
Other Charges	—
Debt Service	—
Interagency Transfers	44,813
<b>TOTAL OTHER CHARGES</b>	<b>\$44,813</b>
Acquisitions	—
Major Repairs	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$44,813</b>

**Positions**

	FTE
Classified	—
Unclassified	—
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>—</b>
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>—</b>
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>—</b>

Continuation Budget Adjustments - Summarized

Total Agency  
Request Type: WORKLOAD

Form 28175 — 305 - OAAS CAT Positions - Companion

Means of Financing

	Amount
STATE GENERAL FUND (Direct)	—
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	459,200
<b>TOTAL MEANS OF FINANCING</b>	<b>\$459,200</b>

Expenditures

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
<b>TOTAL PERSONAL SERVICES</b>	<b>—</b>
Travel	—
Operating Services	—
Supplies	—
<b>TOTAL OPERATING EXPENSES</b>	<b>—</b>
<b>PROFESSIONAL SERVICES</b>	<b>—</b>
Other Charges	—
Debt Service	—
Interagency Transfers	459,200
<b>TOTAL OTHER CHARGES</b>	<b>\$459,200</b>
Acquisitions	—
Major Repairs	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$459,200</b>

Positions

	FTE
Classified	—
Unclassified	—
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>—</b>
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>—</b>
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>—</b>

**Form 28176 — 305 - Medicaid Nursing Home, ADHC, ICF Cost Report Review**

**Means of Financing**

	Amount
STATE GENERAL FUND (Direct)	204,880
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	204,880
<b>TOTAL MEANS OF FINANCING</b>	<b>\$409,760</b>

**Positions**

	FTE
Classified	—
Unclassified	—
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>—</b>
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>—</b>
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>—</b>

**Expenditures**

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
<b>TOTAL PERSONAL SERVICES</b>	<b>—</b>
Travel	—
Operating Services	—
Supplies	—
<b>TOTAL OPERATING EXPENSES</b>	<b>—</b>
<b>PROFESSIONAL SERVICES</b>	<b>\$409,760</b>
Other Charges	—
Debt Service	—
Interagency Transfers	—
<b>TOTAL OTHER CHARGES</b>	<b>—</b>
Acquisitions	—
Major Repairs	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$409,760</b>

**Form 28177 — 305 - School Based Cost Reporting**  
**Means of Financing**

	Amount
STATE GENERAL FUND (Direct)	600,000
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	600,000
<b>TOTAL MEANS OF FINANCING</b>	<b>\$1,200,000</b>

**Expenditures**

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
<b>TOTAL PERSONAL SERVICES</b>	<b>—</b>
Travel	—
Operating Services	—
Supplies	—
<b>TOTAL OPERATING EXPENSES</b>	<b>—</b>
<b>PROFESSIONAL SERVICES</b>	<b>\$1,200,000</b>
Other Charges	—
Debt Service	—
Interagency Transfers	—
<b>TOTAL OTHER CHARGES</b>	<b>—</b>
Acquisitions	—
Major Repairs	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$1,200,000</b>

**Positions**

	FTE
Classified	—
Unclassified	—
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>—</b>
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>—</b>
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>—</b>

Continuation Budget Adjustments - Summarized

Total Agency  
Request Type: WORKLOAD

Form 28178 — 305 - 1 New T.O. (Pharmacist 3)

Means of Financing

	Amount
STATE GENERAL FUND (Direct)	41,094
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	123,283
<b>TOTAL MEANS OF FINANCING</b>	<b>\$164,377</b>

Expenditures

	Amount
Salaries	107,536
Other Compensation	—
Related Benefits	56,276
<b>TOTAL PERSONAL SERVICES</b>	<b>\$163,812</b>
Travel	—
Operating Services	—
Supplies	—
<b>TOTAL OPERATING EXPENSES</b>	<b>—</b>
<b>PROFESSIONAL SERVICES</b>	<b>—</b>
Other Charges	—
Debt Service	—
Interagency Transfers	565
<b>TOTAL OTHER CHARGES</b>	<b>\$565</b>
Acquisitions	—
Major Repairs	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$164,377</b>

Positions

	FTE
Classified	1
Unclassified	—
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>1</b>
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>—</b>
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>—</b>

Continuation Budget Adjustments - Summarized

Total Agency  
Request Type: WORKLOAD

Form 28179 — 305 - 1 New T.O. (Medicaid Program Manager 1A)

Means of Financing

	Amount
STATE GENERAL FUND (Direct)	56,677
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	56,677
<b>TOTAL MEANS OF FINANCING</b>	<b>\$113,354</b>

Expenditures

	Amount
Salaries	70,824
Other Compensation	—
Related Benefits	41,965
<b>TOTAL PERSONAL SERVICES</b>	<b>\$112,789</b>
Travel	—
Operating Services	—
Supplies	—
<b>TOTAL OPERATING EXPENSES</b>	<b>—</b>
<b>PROFESSIONAL SERVICES</b>	<b>—</b>
Other Charges	—
Debt Service	—
Interagency Transfers	565
<b>TOTAL OTHER CHARGES</b>	<b>\$565</b>
Acquisitions	—
Major Repairs	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$113,354</b>

Positions

	FTE
Classified	1
Unclassified	—
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>1</b>
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>—</b>
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>—</b>

**Form 28180 — 305 - Conversion of 3 Expiring Job Appts to Authorized T.O.**

**Means of Financing**

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

**Expenditures**

	Amount
Salaries	188,634
Other Compensation	(188,634)
Related Benefits	—
<b>TOTAL PERSONAL SERVICES</b>	<b>—</b>
Travel	—
Operating Services	—
Supplies	—
<b>TOTAL OPERATING EXPENSES</b>	<b>—</b>
<b>PROFESSIONAL SERVICES</b>	<b>—</b>
Other Charges	—
Debt Service	—
Interagency Transfers	—
<b>TOTAL OTHER CHARGES</b>	<b>—</b>
Acquisitions	—
Major Repairs	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>—</b>

**Positions**

	FTE
Classified	3
Unclassified	—
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>3</b>
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>—</b>
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>—</b>



**PROGRAM SUMMARY STATEMENT**

**3052 - Medical Vendor Administration**

**Means of Financing**

Description	Existing Operating Budget as of 10/01/2023	Non-Recurring	Inflation	Compulsory	Workload	Other	FY2024-2025 Requested Continuation Level
STATE GENERAL FUND (Direct)	182,219,643	(56,403,059)	1,632,457	4,121,607	4,426,132	—	135,996,780
STATE GENERAL FUND BY:	—	—	—	—	—	—	—
INTERAGENCY TRANSFERS	27,952,896	(27,453,224)	4,565	—	—	—	504,237
FEES & SELF-GENERATED	4,200,000	—	—	—	—	—	4,200,000
STATUTORY DEDICATIONS	711,345	—	426	—	—	—	711,771
FEDERAL FUNDS	550,554,876	(99,860,840)	3,398,248	4,121,606	6,416,344	—	464,630,234
<b>TOTAL MEANS OF FINANCING</b>	<b>\$765,638,760</b>	<b>\$(183,717,123)</b>	<b>\$5,035,696</b>	<b>\$8,243,213</b>	<b>\$10,842,476</b>	<b>—</b>	<b>\$606,043,022</b>

**Fees and Self-Generated**

Description	Existing Operating Budget as of 10/01/2023	Non-Recurring	Inflation	Compulsory	Workload	Other	FY2024-2025 Requested Continuation Level
Fees & Self-generated	4,200,000	—	—	—	—	—	4,200,000
<b>Total:</b>	<b>\$4,200,000</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>\$4,200,000</b>

**Statutory Dedications**

Description	Existing Operating Budget as of 10/01/2023	Non-Recurring	Inflation	Compulsory	Workload	Other	FY2024-2025 Requested Continuation Level
Medical Assistance Programs Fraud Detect	711,345	—	426	—	—	—	711,771
<b>Total:</b>	<b>\$711,345</b>	<b>—</b>	<b>\$426</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>\$711,771</b>

Expenditures and Positions

Description	Existing Operating Budget as of 10/01/2023	Non-Recurring	Inflation	Compulsory	Workload	Other	FY2024-2025 Requested Continuation Level
Salaries	62,074,650	(5,343,371)	—	3,194,654	354,287	188,634	60,468,854
Other Compensation	3,508,755	(1,485,278)	—	1,593,644	—	(188,634)	3,428,487
Related Benefits	41,949,119	(3,414,325)	—	3,454,915	186,205	—	42,175,914
<b>TOTAL PERSONAL SERVICES</b>	<b>\$107,532,524</b>	<b>\$(10,242,974)</b>	<b>—</b>	<b>\$8,243,213</b>	<b>\$540,492</b>	<b>—</b>	<b>\$106,073,255</b>
Travel	220,219	—	4,955	—	—	—	225,174
Operating Services	33,266,487	(29,174,607)	744,567	—	3,114	—	4,839,561
Supplies	263,125	—	5,921	—	—	—	269,046
<b>TOTAL OPERATING EXPENSES</b>	<b>\$33,749,831</b>	<b>\$(29,174,607)</b>	<b>\$755,443</b>	<b>—</b>	<b>\$3,114</b>	<b>—</b>	<b>\$5,333,781</b>
<b>PROFESSIONAL SERVICES</b>	<b>\$197,437,444</b>	<b>\$(7,204,011)</b>	<b>\$4,280,253</b>	<b>—</b>	<b>\$8,698,547</b>	<b>—</b>	<b>\$203,212,233</b>
Other Charges	147,528,670	(93,822,918)	—	—	—	—	53,705,752
Debt Service	—	—	—	—	—	—	—
Interagency Transfers	279,390,291	(43,272,613)	—	—	1,600,323	—	237,718,001
<b>TOTAL OTHER CHARGES</b>	<b>\$426,918,961</b>	<b>\$(137,095,531)</b>	<b>—</b>	<b>—</b>	<b>\$1,600,323</b>	<b>—</b>	<b>\$291,423,753</b>
Acquisitions	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$765,638,760</b>	<b>\$(183,717,123)</b>	<b>\$5,035,696</b>	<b>\$8,243,213</b>	<b>\$10,842,476</b>	<b>—</b>	<b>\$606,043,022</b>
Classified	994	—	—	—	4	3	1,001
Unclassified	2	—	—	—	—	—	2
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>996</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>4</b>	<b>3</b>	<b>1,003</b>
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>113</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>113</b>

**CONTINUATION BUDGET ADJUSTMENTS - BY PROGRAM**

**Form 25991 — FY24-25 Non-recurring Carryforwards**

**3052 - Medical Vendor Administration**

**Means of Financing**

	Amount
STATE GENERAL FUND (Direct)	(11,786,161)
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	(27,453,224)
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	(55,243,942)
<b>TOTAL MEANS OF FINANCING</b>	<b>\$(94,483,327)</b>

**Expenditures**

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
<b>TOTAL PERSONAL SERVICES</b>	<b>—</b>
Travel	—
Operating Services	(174,607)
Supplies	—
<b>TOTAL OPERATING EXPENSES</b>	<b>\$(174,607)</b>
<b>PROFESSIONAL SERVICES</b>	<b>\$(7,204,011)</b>
Other Charges	(58,910,790)
Debt Service	—
Interagency Transfers	(28,193,919)
<b>TOTAL OTHER CHARGES</b>	<b>\$(87,104,709)</b>
Acquisitions	—
Major Repairs	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$(94,483,327)</b>

**Positions**

	FTE
Classified	—
Unclassified	—
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>—</b>
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>—</b>
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>—</b>

**Statutory Dedications**

	Amount
<b>Total:</b>	<b>—</b>

**Supporting Detail**

**Means of Financing**

Description	Amount
Federal Funds	(55,243,942)
Interagency Transfers	(27,453,224)
State General Fund	(11,786,161)
<b>Total:</b>	<b>\$(94,483,327)</b>

**Operating Services**

Commitment item	Name	Amount
5300000	TOTAL OPERATING SERV	(174,607)
<b>Total:</b>		<b>\$(174,607)</b>

**Professional Services**

Commitment item	Name	Amount
5500000	TOTAL PROF SERVICES	(7,204,011)
<b>Total:</b>		<b>\$(7,204,011)</b>

**Other Charges**

Commitment item	Name	Amount
5600000	TOTAL OTHER CHARGES	(58,910,790)
<b>Total:</b>		<b>\$(58,910,790)</b>

**Interagency Transfer**

Commitment item	Name	Amount
5950000	TOTAL IAT	(28,193,919)
<b>Total:</b>		<b>\$(28,193,919)</b>

**Form 25994 — FY24-25 Standard Inflation Adjustment**

**3052 - Medical Vendor Administration**

**Means of Financing**

	Amount
STATE GENERAL FUND (Direct)	1,632,457
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	4,565
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	426
FEDERAL FUNDS	3,398,248
<b>TOTAL MEANS OF FINANCING</b>	<b>\$5,035,696</b>

**Expenditures**

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
<b>TOTAL PERSONAL SERVICES</b>	<b>—</b>
Travel	4,955
Operating Services	744,567
Supplies	5,921
<b>TOTAL OPERATING EXPENSES</b>	<b>\$755,443</b>
<b>PROFESSIONAL SERVICES</b>	<b>\$4,280,253</b>
Other Charges	—
Debt Service	—
Interagency Transfers	—
<b>TOTAL OTHER CHARGES</b>	<b>—</b>
Acquisitions	—
Major Repairs	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$5,035,696</b>

**Positions**

	FTE
Classified	—
Unclassified	—
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>—</b>
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>—</b>
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>—</b>

**Statutory Dedications**

	Amount
Medical Assistance Programs Fraud Detect	426
<b>Total:</b>	<b>\$426</b>

**Supporting Detail**

**Means of Financing**

Description	Amount
Federal Funds	3,398,248
Interagency Transfers	4,565
Medical Assistance Programs Fraud Detect	426
State General Fund	1,632,457
<b>Total:</b>	<b>\$5,035,696</b>

**Travel**

Commitment item	Name	Amount
5200000	TOTAL TRAVEL	4,955
<b>Total:</b>		<b>\$4,955</b>

**Operating Services**

Commitment item	Name	Amount
5300000	TOTAL OPERATING SERV	744,567
<b>Total:</b>		<b>\$744,567</b>

**Supplies**

Commitment item	Name	Amount
5400000	TOTAL SUPPLIES	5,921
<b>Total:</b>		<b>\$5,921</b>

**Professional Services**

Commitment item	Name	Amount
5500000	TOTAL PROF SERVICES	4,280,253
<b>Total:</b>		<b>\$4,280,253</b>

**Form 29139 — 305 - Non-Recur One-time Unwind from MVP**

**3052 - Medical Vendor Administration**

**MEANS OF FINANCING**

	Amount
STATE GENERAL FUND (Direct)	(44,616,898)
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	(44,616,898)
<b>TOTAL MEANS OF FINANCING</b>	<b>\$(89,233,796)</b>

**AUTHORIZED POSITIONS**

	FTE
Classified	—
Unclassified	—
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>—</b>
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>—</b>
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>—</b>

**EXPENDITURES**

	Amount
Salaries	(5,343,371)
Other Compensation	(1,485,278)
Related Benefits	(3,414,325)
<b>TOTAL PERSONAL SERVICES</b>	<b>\$(10,242,974)</b>
Travel	—
Operating Services	(29,000,000)
Supplies	—
<b>TOTAL OPERATING EXPENSES</b>	<b>\$(29,000,000)</b>
<b>PROFESSIONAL SERVICES</b>	<b>—</b>
Other Charges	(34,912,128)
Debt Service	—
Interagency Transfers	(15,078,694)
<b>TOTAL OTHER CHARGES</b>	<b>\$(49,990,822)</b>
Acquisitions	—
Major Repairs	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$(89,233,796)</b>



Question	Narrative Response
<b>Explain the need for this request.</b>	This request is to non-recur one-time funding from Medical Vendor Payments (306) used in Medical Vendor Administration (MVA) for Medicaid Eligibility Unwind / Public Health Emergency (PHE) Outreach efforts in SFY24.
<b>Cite performance indicators for the adjustment.</b>	None
<b>What would the impact be if this is not funded?</b>	N/A
<b>Is revenue a fixed amount or can it be adjusted?</b>	N/A
<b>Is the expenditure of these revenues restricted?</b>	N/A
<b>Additional information or comments.</b>	

**Form 28160 — 305 - Annual Market Adjustment for Classified Employees**

**3052 - Medical Vendor Administration**

**MEANS OF FINANCING**

	Amount
STATE GENERAL FUND (Direct)	1,500,823
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	1,500,823
<b>TOTAL MEANS OF FINANCING</b>	<b>\$3,001,646</b>

**AUTHORIZED POSITIONS**

	FTE
Classified	—
Unclassified	—
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>—</b>
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>—</b>
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>—</b>

**EXPENDITURES**

	Amount
Salaries	1,974,767
Other Compensation	—
Related Benefits	1,026,879
<b>TOTAL PERSONAL SERVICES</b>	<b>\$3,001,646</b>
Travel	—
Operating Services	—
Supplies	—
<b>TOTAL OPERATING EXPENSES</b>	<b>—</b>
<b>PROFESSIONAL SERVICES</b>	<b>—</b>
Other Charges	—
Debt Service	—
Interagency Transfers	—
<b>TOTAL OTHER CHARGES</b>	<b>—</b>
Acquisitions	—
Major Repairs	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$3,001,646</b>

Question	Narrative Response
<b>Explain the need for this request.</b>	This request is for funding of the annual market adjustment to salaries for classified employees per LaGOV PEP Payroll Projections Report dated 09/17/2023.
<b>Cite performance indicators for the adjustment.</b>	N/A
<b>What would the impact be if this is not funded?</b>	N/A
<b>Is revenue a fixed amount or can it be adjusted?</b>	N/A
<b>Is the expenditure of these revenues restricted?</b>	N/A
<b>Additional information or comments.</b>	

**Form 28161 — 305 - Annual Market Adjustment for Unclassified Employees**

**3052 - Medical Vendor Administration**

**MEANS OF FINANCING**

	Amount
STATE GENERAL FUND (Direct)	85,527
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	85,527
<b>TOTAL MEANS OF FINANCING</b>	<b>\$171,054</b>

**AUTHORIZED POSITIONS**

	FTE
Classified	—
Unclassified	—
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>—</b>
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>—</b>
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>—</b>

**EXPENDITURES**

	Amount
Salaries	16,211
Other Compensation	96,538
Related Benefits	58,305
<b>TOTAL PERSONAL SERVICES</b>	<b>\$171,054</b>
Travel	—
Operating Services	—
Supplies	—
<b>TOTAL OPERATING EXPENSES</b>	<b>—</b>
<b>PROFESSIONAL SERVICES</b>	<b>—</b>
Other Charges	—
Debt Service	—
Interagency Transfers	—
<b>TOTAL OTHER CHARGES</b>	<b>—</b>
Acquisitions	—
Major Repairs	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$171,054</b>

Question	Narrative Response
Explain the need for this request.	This request is to fund a 3% Market Adjustment for full-time unclassified employees.
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.	

**Form 28162 — 305 - Personal Services Base Adjustments**

**3052 - Medical Vendor Administration**

**MEANS OF FINANCING**

	Amount
STATE GENERAL FUND (Direct)	2,535,257
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	2,535,256
<b>TOTAL MEANS OF FINANCING</b>	<b>\$5,070,513</b>

**AUTHORIZED POSITIONS**

	FTE
Classified	—
Unclassified	—
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>—</b>
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>—</b>
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>—</b>

**EXPENDITURES**

	Amount
Salaries	1,203,676
Other Compensation	1,497,106
Related Benefits	2,369,731
<b>TOTAL PERSONAL SERVICES</b>	<b>\$5,070,513</b>
Travel	—
Operating Services	—
Supplies	—
<b>TOTAL OPERATING EXPENSES</b>	<b>—</b>
<b>PROFESSIONAL SERVICES</b>	<b>—</b>
Other Charges	—
Debt Service	—
Interagency Transfers	—
<b>TOTAL OTHER CHARGES</b>	<b>—</b>
Acquisitions	—
Major Repairs	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$5,070,513</b>

Question	Narrative Response
<b>Explain the need for this request.</b>	This request is for the annualization of salaries, other compensation, and related benefits per the attached LaGOV PEP Payroll Projections Report dated 09/17/2023.
<b>Cite performance indicators for the adjustment.</b>	N/A
<b>What would the impact be if this is not funded?</b>	N/A
<b>Is revenue a fixed amount or can it be adjusted?</b>	N/A
<b>Is the expenditure of these revenues restricted?</b>	N/A
<b>Additional information or comments.</b>	

**Form 28163 — 305 - 1115 Demonstration Waiver Start-Up Costs**

**3052 - Medical Vendor Administration**

**MEANS OF FINANCING**

	Amount
STATE GENERAL FUND (Direct)	2,000,000
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	2,000,000
<b>TOTAL MEANS OF FINANCING</b>	<b>\$4,000,000</b>

**AUTHORIZED POSITIONS**

	FTE
Classified	2
Unclassified	—
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>2</b>
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	—
TOTAL NON-T.O. FTE POSITIONS	—

**EXPENDITURES**

	Amount
Salaries	175,927
Other Compensation	—
Related Benefits	87,964
<b>TOTAL PERSONAL SERVICES</b>	<b>\$263,891</b>
Travel	—
Operating Services	3,114
Supplies	—
<b>TOTAL OPERATING EXPENSES</b>	<b>\$3,114</b>
<b>PROFESSIONAL SERVICES</b>	<b>\$3,730,775</b>
Other Charges	—
Debt Service	—
Interagency Transfers	2,220
<b>TOTAL OTHER CHARGES</b>	<b>\$2,220</b>
Acquisitions	—
Major Repairs	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$4,000,000</b>



Question	Narrative Response
<b>Explain the need for this request.</b>	This request is to provide funding for costs to implement a new 1115 demonstration waiver requesting to cover a package of reentry services for certain groups of incarcerated individuals 90 days prior to release. On April 17, 2023, CMS released a State Medicaid Director Letter (SMDL) that describes a section 1115 demonstration opportunity for states to receive federal financial participation (FFP) for expenditures for certain pre-release health care services for individuals who are incarcerated to support community reentry and improve care transitions. This agency initiative will require an increase in funding for operational costs including contracts and FTEs in order to implement the 1115 demonstration waiver.
<b>Cite performance indicators for the adjustment.</b>	There are no performance indicators associated with this adjustment.
<b>What would the impact be if this is not funded?</b>	If the request is not funded, the State will not be able to implement an innovative service delivery system through the 1115 demonstration to facilitate successful reentry transitions for Medicaid-eligible individuals leaving prisons and jails and returning to the community.
<b>Is revenue a fixed amount or can it be adjusted?</b>	The requested revenue can be adjusted based upon recommended level of expenditures.
<b>Is the expenditure of these revenues restricted?</b>	No.
<b>Additional information or comments.</b>	

**Form 28164 — 305 - External Quality Review Organization (EQRO) Contract**

**3052 - Medical Vendor Administration**

**MEANS OF FINANCING**

	Amount
STATE GENERAL FUND (Direct)	155,525
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	466,575
<b>TOTAL MEANS OF FINANCING</b>	<b>\$622,100</b>

**AUTHORIZED POSITIONS**

	FTE
Classified	—
Unclassified	—
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>—</b>
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>—</b>
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>—</b>

**EXPENDITURES**

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
<b>TOTAL PERSONAL SERVICES</b>	<b>—</b>
Travel	—
Operating Services	—
Supplies	—
<b>TOTAL OPERATING EXPENSES</b>	<b>—</b>
<b>PROFESSIONAL SERVICES</b>	<b>\$622,100</b>
Other Charges	—
Debt Service	—
Interagency Transfers	—
<b>TOTAL OTHER CHARGES</b>	<b>—</b>
Acquisitions	—
Major Repairs	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$622,100</b>

Question	Narrative Response
<b>Explain the need for this request.</b>	The funding adjustment is to support operational costs for the new EQRO Contract with Health Services Advisory Group, LLC. This multi-year contract serves as the State External Quality Review Organization (EQRO) for the Louisiana Department of Health to perform independent external quality review (EQR) services that consist of mandatory and optional activities as outlined in the Code of Federal Regulations (CFR) Title 42 CFR §438 Subpart. E. The Contractor will provide analysis and evaluation of aggregated data and information on the quality, accessibility, and timeliness of services provided by contracted Medicaid Managed Care Organizations (MCO), a Dental Prepaid Ambulatory Health Plan (PAHP), and a Behavioral Health Prepaid Inpatient Health Plan (PIHP) for eligible Medicaid enrollees.
<b>Cite performance indicators for the adjustment.</b>	N/A
<b>What would the impact be if this is not funded?</b>	EQRO services are a critical aspect of monitoring our managed care organizations (MCO) and ensure contract compliance. Also, EDQRO workload provides data collection for both state and federal reporting.
<b>Is revenue a fixed amount or can it be adjusted?</b>	The funding is restricted to sustain capacity for certain line items and/or activities/programs.
<b>Is the expenditure of these revenues restricted?</b>	The funding is restricted to sustain capacity for certain line items and/or activities/programs.
<b>Additional information or comments.</b>	

**Form 28166 — 305 - Medicaid/Hospital Cost Report Review**

**3052 - Medical Vendor Administration**

**MEANS OF FINANCING**

	Amount
STATE GENERAL FUND (Direct)	350,000
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	350,000
<b>TOTAL MEANS OF FINANCING</b>	<b>\$700,000</b>

**AUTHORIZED POSITIONS**

	FTE
Classified	—
Unclassified	—
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>—</b>
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>—</b>
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>—</b>

**EXPENDITURES**

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
<b>TOTAL PERSONAL SERVICES</b>	<b>—</b>
Travel	—
Operating Services	—
Supplies	—
<b>TOTAL OPERATING EXPENSES</b>	<b>—</b>
<b>PROFESSIONAL SERVICES</b>	<b>\$700,000</b>
Other Charges	—
Debt Service	—
Interagency Transfers	—
<b>TOTAL OTHER CHARGES</b>	<b>—</b>
Acquisitions	—
Major Repairs	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$700,000</b>

Question	Narrative Response
<b>Explain the need for this request.</b>	Contractor will perform reviews of Medicaid cost reports submitted by Medicaid hospital, mental health, and RHC programs and perform the calculations of ambulance and physician UPL supplemental payments. Their current contract expires 06/30/2024 and we anticipate an increase in their contract starting SFY25. The Contractor shall provide professional accounting services in the performance of test work, analysis and desk reviews of Medicaid cost reports submitted by providers in order to perform agreed upon procedures relating to the cost report. This item meets the definition of a workload adjustment as the new contract starting in FY25 will incorporate additional tasks for the contractor in the statement of work. As we continue work on updating and adjusting rates, this contractor is vital in ensuring accuracy of calculations. There are several special projects in the pipeline regarding payment modeling where this contractor will be utilized as well.
<b>Cite performance indicators for the adjustment.</b>	Number of hospital cost reports reviewed and audited; Total DSH funds collected in millions; Total federal funds collected in millions; Total State Match in millions.
<b>What would the impact be if this is not funded?</b>	The work performed under this contract aligns the work of the state with the federal funding necessary to reimburse our hospitals and draw federal funds.
<b>Is revenue a fixed amount or can it be adjusted?</b>	The revenue amount requested can be adjusted based upon the recommended level of expenditures.
<b>Is the expenditure of these revenues restricted?</b>	Expenditure of these revenues are restricted to the cost report reviews for hospitals which impact several aspects of work from DSH payments to UPL.
<b>Additional information or comments.</b>	

**Form 28167 — 305 - DSH Audits**

**3052 - Medical Vendor Administration**

**MEANS OF FINANCING**

	Amount
STATE GENERAL FUND (Direct)	43,001
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	43,001
<b>TOTAL MEANS OF FINANCING</b>	<b>\$86,002</b>

**EXPENDITURES**

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
<b>TOTAL PERSONAL SERVICES</b>	<b>—</b>
Travel	—
Operating Services	—
Supplies	—
<b>TOTAL OPERATING EXPENSES</b>	<b>—</b>
<b>PROFESSIONAL SERVICES</b>	<b>\$86,002</b>
Other Charges	—
Debt Service	—
Interagency Transfers	—
<b>TOTAL OTHER CHARGES</b>	<b>—</b>
Acquisitions	—
Major Repairs	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$86,002</b>

**AUTHORIZED POSITIONS**

	FTE
Classified	—
Unclassified	—
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>—</b>
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>—</b>
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>—</b>

Question	Narrative Response
<b>Explain the need for this request.</b>	This contractor provides independent Medicaid DSH program audits in compliance with CMS mandate. Per a CMS final rule published in 73 Federal Register 77904 pursuant to 42 U.S.C. 1923(j), the contractor updates the data collection tool to collect information needed for each DSH hospital for audit and verification of DSH payments. Contractor also verifies the information to the extent necessary to form an opinion as to whether any hospital received more in DSH payments than its hospital specific limit. This item meets the definition of a workload adjustment as additional tasks will be performed under this contract due to additional projects associated with DSH audits.
<b>Cite performance indicators for the adjustment.</b>	Number of hospital cost reports reviewed and audited; Total DSH funds collected in millions; Total federal funds collected in millions; Total State Match in millions.
<b>What would the impact be if this is not funded?</b>	DSH auditing and reporting is a CMS mandate to ensure continued draw of funds so if LDH does not fund the additional work to ensure we are aligned with the mandates of CMS.
<b>Is revenue a fixed amount or can it be adjusted?</b>	The revenue amount requested can be adjusted based upon the recommended level of expenditures.
<b>Is the expenditure of these revenues restricted?</b>	Expenditure of these revenues are restricted to the DSH auditing work performed.
<b>Additional information or comments.</b>	

**Form 28169 — 305 - Nursing Home Case Mix Index**

**3052 - Medical Vendor Administration**

**MEANS OF FINANCING**

	Amount
STATE GENERAL FUND (Direct)	91,680
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	91,680
<b>TOTAL MEANS OF FINANCING</b>	<b>\$183,360</b>

**EXPENDITURES**

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
<b>TOTAL PERSONAL SERVICES</b>	<b>—</b>
Travel	—
Operating Services	—
Supplies	—
<b>TOTAL OPERATING EXPENSES</b>	<b>—</b>
<b>PROFESSIONAL SERVICES</b>	<b>\$183,360</b>
Other Charges	—
Debt Service	—
Interagency Transfers	—
<b>TOTAL OTHER CHARGES</b>	<b>—</b>
Acquisitions	—
Major Repairs	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$183,360</b>

**AUTHORIZED POSITIONS**

	FTE
Classified	—
Unclassified	—
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>—</b>
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>—</b>
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>—</b>



Question	Narrative Response
<b>Explain the need for this request.</b>	Funding for additional hours to Myers and Stauffer as MVA prepares for case mix transition from the RUGSIII to PDPM. Additional training will be needed for providers as well as the creation of additional resources to aid in the transition. The cost accounting system for the Louisiana Medicaid case mix reimbursement methodology for nursing facilities will be based on the Resource Utilization Group (RUG)-III, V.5.20, 34 model (or equivalent). The contractor will also perform on-site Case Mix Documentation (CMDR) reviews. Statutory, regulatory, manual and other professional resources that must be utilized in the performance of the contractor duties include: 1) Louisiana Revised Statutes 46:2742 et seq, 2) Louisiana Administrative Code LAC 50:II Chapter 200. 3) Medicare and Medicaid Provider Reimbursement Manual-CMS Publication 15, and 4) Generally Accepted Accounting Principles and related professional accounting standards. CMS has mandated a change to the case mix reimbursement methodology for nursing homes payments. The contractor performing these duties will perform additional tasks to align our current methodology with the new assessment tool from CMS.
<b>Cite performance indicators for the adjustment.</b>	Number of Nursing Homes cost reports adjusted as a result of monitoring activities; Percent of nursing home cost reports monitored.
<b>What would the impact be if this is not funded?</b>	It is required that Medicaid modifies its current methodology to the the new guidance set forth by CMS. If LDH does not fund the work to comply with this effort Medicaid will be out of compliance with CMS.
<b>Is revenue a fixed amount or can it be adjusted?</b>	The revenue amount requested can be adjusted based upon the recommended level of expenditures.
<b>Is the expenditure of these revenues restricted?</b>	Expenditure of these revenues are restricted to the nursing home case mix methodology related tasks.
<b>Additional information or comments.</b>	

**Form 28170 — 305 - OAAS and OCDD HCBS Audits**

**3052 - Medical Vendor Administration**

**MEANS OF FINANCING**

	Amount
STATE GENERAL FUND (Direct)	661,680
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	661,680
<b>TOTAL MEANS OF FINANCING</b>	<b>\$1,323,360</b>

**EXPENDITURES**

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
<b>TOTAL PERSONAL SERVICES</b>	<b>—</b>
Travel	—
Operating Services	—
Supplies	—
<b>TOTAL OPERATING EXPENSES</b>	<b>—</b>
<b>PROFESSIONAL SERVICES</b>	<b>\$1,323,360</b>
Other Charges	—
Debt Service	—
Interagency Transfers	—
<b>TOTAL OTHER CHARGES</b>	<b>—</b>
Acquisitions	—
Major Repairs	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$1,323,360</b>

**AUTHORIZED POSITIONS**

	FTE
Classified	—
Unclassified	—
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>—</b>
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>—</b>
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>—</b>

Question	Narrative Response
<b>Explain the need for this request.</b>	This request is needed to perform home and community based services (HCBS) cost report oversight procedures to assist in the determination of the sufficiency of current and future reimbursement rates and to ensure HCBS providers are following wage floor guidelines. The results of these oversight procedures would be used to inform the Department about the sufficiency of current and potentially future reimbursement rates for HCBS waiver services administered by both the Office of Aging and Adult Services (OAAS) and the Office for Citizens with Developmental Disabilities (OCDD). By reconciling reported data and investigating providers whose information appears abnormal, MVA can create a reliable data-base of cost, wage, and utilization data for use in the review of waiver service rate sufficiency without extraneous data collection and analysis. The database would be used to determine that any rate increases are adequately utilized in increased direct care costs, or that providers are paying regular wage rates in excess of state set floors. This budget request would fund an audit of over 400 HCBS providers to assure compliance with Rule. LDH would contract with a CPA firm to conduct the audit.
<b>Cite performance indicators for the adjustment.</b>	N/A
<b>What would the impact be if this is not funded?</b>	It is required that Medicaid modify monitor and audit HCBS funding issued by CMS. If LDH does not fund the work to comply with this effort Medicaid will be out of compliance with CMS.
<b>Is revenue a fixed amount or can it be adjusted?</b>	The revenue amount requested can be adjusted based upon the recommended level of expenditures.
<b>Is the expenditure of these revenues restricted?</b>	Expenditure of these revenues are restricted to work related to the HCBS funding.
<b>Additional information or comments.</b>	

**Form 28171 — 305 - OAAS HCBS Provider Audit Monitoring Tool**

**3052 - Medical Vendor Administration**

**MEANS OF FINANCING**

	Amount
STATE GENERAL FUND (Direct)	171,595
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	171,595
<b>TOTAL MEANS OF FINANCING</b>	<b>\$343,190</b>

**AUTHORIZED POSITIONS**

	FTE
Classified	—
Unclassified	—
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>—</b>
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>—</b>
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>—</b>

**EXPENDITURES**

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
<b>TOTAL PERSONAL SERVICES</b>	<b>—</b>
Travel	—
Operating Services	—
Supplies	—
<b>TOTAL OPERATING EXPENSES</b>	<b>—</b>
<b>PROFESSIONAL SERVICES</b>	<b>\$343,190</b>
Other Charges	—
Debt Service	—
Interagency Transfers	—
<b>TOTAL OTHER CHARGES</b>	<b>—</b>
Acquisitions	—
Major Repairs	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$343,190</b>

Question	Narrative Response
<b>Explain the need for this request.</b>	Myers and Stauffer will develop a web-based survey tool for provider reporting; a monitoring tool for assessing compliance with the HCBS ARPA funding requirements, policies, and procedures; a sampling strategy; review a sample of providers; and develop a report of findings, including a summary and detail of individual provider results. In August 2022, LDH OAAS implemented rate increases for HCBS providers along with a \$9 per hour wage floor for direct service workers and a pass through requirement that 70% of the rate increase go towards wage and wage related benefits. In July and August 2023, LDH issued retro-active bonus payments to provider agencies for the direct service workers and support coordinators. LDH OAAS must audit providers to assure that payments are being implemented or disbursed to appropriate direct support workers and support coordinators in accordance with the Rule.
<b>Cite performance indicators for the adjustment.</b>	N/A
<b>What would the impact be if this is not funded?</b>	It is required that Medicaid modify monitor and audit HCBS funding issued by CMS. If LDH does not fund the work to comply with this effort , Medicaid will be out of compliance with CMS.
<b>Is revenue a fixed amount or can it be adjusted?</b>	LDH OAAS must audit providers to assure that payments are being implemented or disbursed to appropriate direct support workers and support coordinators in accordance with the Rule.
<b>Is the expenditure of these revenues restricted?</b>	Expenditure of these revenues are restricted to work related to the HCBS funding.
<b>Additional information or comments.</b>	

**Form 28172 — 305 - UPL Calculation and ACT 540 Reporting**

**3052 - Medical Vendor Administration**

**MEANS OF FINANCING**

	Amount
STATE GENERAL FUND (Direct)	50,000
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	50,000
<b>TOTAL MEANS OF FINANCING</b>	<b>\$100,000</b>

**AUTHORIZED POSITIONS**

	FTE
Classified	—
Unclassified	—
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>—</b>
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>—</b>
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>—</b>

**EXPENDITURES**

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
<b>TOTAL PERSONAL SERVICES</b>	<b>—</b>
Travel	—
Operating Services	—
Supplies	—
<b>TOTAL OPERATING EXPENSES</b>	<b>—</b>
<b>PROFESSIONAL SERVICES</b>	<b>\$100,000</b>
Other Charges	—
Debt Service	—
Interagency Transfers	—
<b>TOTAL OTHER CHARGES</b>	<b>—</b>
Acquisitions	—
Major Repairs	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$100,000</b>

Question	Narrative Response
<b>Explain the need for this request.</b>	Contractor will provide UPL calculations for Medicaid in compliance with CMS mandate. The current contract expires 06/30/2024 and Medicaid anticipates an increase in their contract starting SFY25. Per CMS final rule published in 73 Federal Register 77904 pursuant to 42 U.S.C. 1923(j) Contractor will update the data collection tool to collect information needed for each DSH hospital for audit and verification of DSH payments. Contractor will verify the information to the extent necessary to form an opinion as to whether any hospital received more in DSH payments than its hospital specific limit. This item meets the definition of a workload adjustment as the new contract starting in FY25 will incorporate additional tasks for the contractor in the statement of work, expanding Medicaid's UPL reporting to comply with updated CMS regulations and guidelines.
<b>Cite performance indicators for the adjustment.</b>	Number of hospital cost reports reviewed and audited; Total DSH funds collected in millions; Total federal funds collected in millions; Total State Match in millions.
<b>What would the impact be if this is not funded?</b>	UPL reporting is a CMS mandate so if LDH does not fund the work of UPL reporting Medicaid will be out of compliance with CMS.
<b>Is revenue a fixed amount or can it be adjusted?</b>	The revenue amount requested can be adjusted based upon the recommended level of expenditures.
<b>Is the expenditure of these revenues restricted?</b>	Expenditure of these revenues are restricted to the UPL contract and work associated with UPL reporting.
<b>Additional information or comments.</b>	

**Form 28173 — 305 - Money Follows the Person (MFP) Supplemental**

**3052 - Medical Vendor Administration**

**MEANS OF FINANCING**

	Amount
STATE GENERAL FUND (Direct)	—
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	1,092,960
<b>TOTAL MEANS OF FINANCING</b>	<b>\$1,092,960</b>

**AUTHORIZED POSITIONS**

	FTE
Classified	—
Unclassified	—
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>—</b>
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>—</b>
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>—</b>

**EXPENDITURES**

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
<b>TOTAL PERSONAL SERVICES</b>	<b>—</b>
Travel	—
Operating Services	—
Supplies	—
<b>TOTAL OPERATING EXPENSES</b>	<b>—</b>
<b>PROFESSIONAL SERVICES</b>	<b>—</b>
Other Charges	—
Debt Service	—
Interagency Transfers	1,092,960
<b>TOTAL OTHER CHARGES</b>	<b>\$1,092,960</b>
Acquisitions	—
Major Repairs	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$1,092,960</b>



Question	Narrative Response
<b>Explain the need for this request.</b>	The Centers for Medicare and Medicaid Services (CMS) has awarded the State additional supplemental funding for Money Follows the Person (MFP) recipients to address barriers to community transitions for eligible individuals in institutions, increase community transition rates and increase the effectiveness of the MFP demonstration. Effective 1/1/2022, the definition of supplemental services is modified from one-time services to short-term services to support an MFP participant's transition that are otherwise not allowable under the Medicaid program. Further, the definition is expanded to address critical barriers to transition for MFP participants, including the lack of affordable and accessible housing, food insecurity, and financial and administrative barriers to transitions (DRA section 6071(a)(2)). The expanded definition of supplemental services includes the following:1) Short-term housing assistance: MFP may cover up to 6-months of short-term rental assistance and associated utility expenses to bridge the gap between when an MFP participant transitions to the community and when federal, state, or local housing assistance is secured. 2) Food security: MFP may cover food pantry stocking for up to a 30-day period for MFP participants. There will be an increase in the number of services that can be provided to MFP recipients thereby increasing the number of participants that can transition from institutions and receive home and community based services.
<b>Cite performance indicators for the adjustment.</b>	Objective: Through the Long-Term Services and Supports (LTSS) Activity, ensure the HCBS program remains in compliance with state and federal requirements so that Medicaid can continue to increase access for HCBS recipients. Performance Indicator: Percentage of LTSS recipients receiving Home and Community Based Services.
<b>What would the impact be if this is not funded?</b>	The State would not be able to take advantage of the federal funding awarded to increase community transition rates and reduce barriers for individuals transitioning from institutions to the community.
<b>Is revenue a fixed amount or can it be adjusted?</b>	The amount can be adjusted based upon the recommended level of expenditures; however, this is federal funding that has been awarded to the State.
<b>Is the expenditure of these revenues restricted?</b>	See above.
<b>Additional information or comments.</b>	

**Form 28174 — 305 - OAAS APS Positions - Companion**

**3052 - Medical Vendor Administration**

**MEANS OF FINANCING**

	Amount
STATE GENERAL FUND (Direct)	—
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	44,813
<b>TOTAL MEANS OF FINANCING</b>	<b>\$44,813</b>

**EXPENDITURES**

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
<b>TOTAL PERSONAL SERVICES</b>	<b>—</b>
Travel	—
Operating Services	—
Supplies	—
<b>TOTAL OPERATING EXPENSES</b>	<b>—</b>
<b>PROFESSIONAL SERVICES</b>	<b>—</b>
Other Charges	—
Debt Service	—
Interagency Transfers	44,813
<b>TOTAL OTHER CHARGES</b>	<b>\$44,813</b>
Acquisitions	—
Major Repairs	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$44,813</b>

**AUTHORIZED POSITIONS**

	FTE
Classified	—
Unclassified	—
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>—</b>
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>—</b>
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>—</b>

Question	Narrative Response
<b>Explain the need for this request.</b>	To effectively handle the growing number of reports made to Adult Protective Services for Community Investigations, OAAS is requesting additional positions be added to the areas with higher demand. The presence of these positions will be essential in addressing both the current and anticipated growth in reports by FY25. Also, APS requires an additional position to support the Intake section due to the new online reporting option that is due to launch in FY24 and existing needs associated with managing incoming calls, voicemails, emails, and faxed reports received for APS and the Health Standards Section. The request is for (2) two additional Facility Investigations Specialists in Region 2 due to increased reporting in the state facilities and an expectation of a 118 patient expansion at ELMHS which will cause an additional increase in reporting. The new positions would provide opportunities for day and evening investigation shifts to make sure investigations are executed promptly and coordinated with facility staff on duty at the time of the incident. This will help reduce overtime costs for OAAS and ELMHS and reduce the need for on-call services by APS Facility Staff in Region 2. Currently OAAS has hired WAE staff in some of these areas to assist with the increased reports received, but their limited schedules are not sufficient to sustain long-term. Therefore OAAS is requesting funding to hire full-time staff for these positions in FY25. This request represents the portion of the total request that is Medicaid eligible (estimated at approximately 26% of the total cost).
<b>Cite performance indicators for the adjustment.</b>	None
<b>What would the impact be if this is not funded?</b>	If this workload adjustment is not funded, APS would not be able to support the growth in reports in order to ensure investigations are executed promptly to protect vulnerable adults.
<b>Is revenue a fixed amount or can it be adjusted?</b>	The requested revenue is a fixed cost based on the actual costs and is restricted to certain line items and/or activities/ programs.
<b>Is the expenditure of these revenues restricted?</b>	See above.
<b>Additional information or comments.</b>	

**Form 28175 — 305 - OAAS CAT Positions - Companion**

**3052 - Medical Vendor Administration**

**MEANS OF FINANCING**

	Amount
STATE GENERAL FUND (Direct)	—
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	459,200
<b>TOTAL MEANS OF FINANCING</b>	<b>\$459,200</b>

**EXPENDITURES**

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
<b>TOTAL PERSONAL SERVICES</b>	<b>—</b>
Travel	—
Operating Services	—
Supplies	—
<b>TOTAL OPERATING EXPENSES</b>	<b>—</b>
<b>PROFESSIONAL SERVICES</b>	<b>—</b>
Other Charges	—
Debt Service	—
Interagency Transfers	459,200
<b>TOTAL OTHER CHARGES</b>	<b>\$459,200</b>
Acquisitions	—
Major Repairs	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$459,200</b>

**AUTHORIZED POSITIONS**

	FTE
Classified	—
Unclassified	—
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>—</b>
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>—</b>
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>—</b>

Question	Narrative Response
<b>Explain the need for this request.</b>	Request for three (3) Medical Certification Specialist TO positions: The Compliance and Audit Team (CAT) was established in January, 2014 to conduct on-site field monitoring of the Long Term Personal Care Services (LTPCS) program to provide quality control and fraud prevention. The CAT team assesses cases to ensure participants meet program eligibility requirements and to detect any potential fraud. The current CAT Team staffing for the entire state is inadequate. This request will allow the team to address fraud and abuse issues in all nine (9) regions to include the regions where there are currently no team members (Regions 3 and 5, which serves approx. 1,000 participants) and provide additional help with service audit fraud reviews, risk based monitoring reviews, and quality monitoring reviews. Based on the number of recipients by region, these staff are needed to continue the measures that have been so successful. Since 2014, when the team was established, only 48 participants have received a visit by CAT in Regions 3 and 5, which does not lend to quality control and fraud prevention in these regions. With these additional staff, OAAS will have the ability to adequately monitor fraud, waste and abuse across all 9 regions. LTPCS costs were showing large increases before the CAT team was developed. Expenditures were up to \$235 million a year in 2014, and were down to \$139 million in 2020. A savings of approximately \$96 million per year. This strategy has been demonstrated to provide cost savings and program integrity.
<b>Cite performance indicators for the adjustment.</b>	None.
<b>What would the impact be if this is not funded?</b>	If this workload adjustment is not funded, OAAS will not be able to adequately monitor fraud, waste and abuse across all 9 regions which would effect quality control and fraud prevention.
<b>Is revenue a fixed amount or can it be adjusted?</b>	The requested revenue is based on actual cost for the additional staff and cannot be adjusted and is restricted to certain line items.
<b>Is the expenditure of these revenues restricted?</b>	See above.
<b>Additional information or comments.</b>	

**Form 28176 — 305 - Medicaid Nursing Home, ADHC, ICF Cost Report Review**

**3052 - Medical Vendor Administration**

**MEANS OF FINANCING**

	Amount
STATE GENERAL FUND (Direct)	204,880
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	204,880
<b>TOTAL MEANS OF FINANCING</b>	<b>\$409,760</b>

**AUTHORIZED POSITIONS**

	FTE
Classified	—
Unclassified	—
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>—</b>
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>—</b>
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>—</b>

**EXPENDITURES**

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
<b>TOTAL PERSONAL SERVICES</b>	<b>—</b>
Travel	—
Operating Services	—
Supplies	—
<b>TOTAL OPERATING EXPENSES</b>	<b>—</b>
<b>PROFESSIONAL SERVICES</b>	<b>\$409,760</b>
Other Charges	—
Debt Service	—
Interagency Transfers	—
<b>TOTAL OTHER CHARGES</b>	<b>—</b>
Acquisitions	—
Major Repairs	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$409,760</b>

Question	Narrative Response
<b>Explain the need for this request.</b>	Contractor will perform reviews of Medicaid cost reports submitted by nursing facilities, Intermediate Care Facilities for individuals with Intellectual Disabilities (ICF/IID's) and adult day health care (ADHC) facilities. The Contractor shall provide professional accounting services in the performance of test work, analysis and desk reviews of Medicaid cost reports submitted by nursing facilities, Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IIDs) and adult day health care (ADHC) facilities in order to perform agreed upon procedures relating to the cost report and residents personal funds. With upcoming changes to the nursing home case mix methodology, rebasing of private/ public facilities, and changes in ADHC reporting post PHE, there will be an increase in the workload of this contractor to review cost reports associated with these facility types.
<b>Cite performance indicators for the adjustment.</b>	Number of Intermediate Care Facility (ICF) cost reports adjusted as a result of monitoring; Percent of Intermediate Care Facility (ICF) cost reports monitored; Number of Intermediate Care Facility (ICF) cost reports targeted for monitoring, Number of Nursing Homes cost reports adjusted as a result of monitoring activities; Percent of nursing home cost reports monitored.
<b>What would the impact be if this is not funded?</b>	The work performed under this contract aligns the work of the state with the federal funding necessary to reimburse our nursing homes, ICFs, and ADHCs and draw federal funds.
<b>Is revenue a fixed amount or can it be adjusted?</b>	The revenue amount requested can be adjusted based upon the recommended level of expenditures.
<b>Is the expenditure of these revenues restricted?</b>	Expenditure of these revenues are restricted to work dealing with reviews of Medicaid cost reports submitted by nursing facilities, Intermediate Care Facilities for individuals with Intellectual Disabilities (ICF/IID's) and adult day health care (ADHC) facilities.
<b>Additional information or comments.</b>	

**Form 28177 — 305 - School Based Cost Reporting**

**3052 - Medical Vendor Administration**

**MEANS OF FINANCING**

	Amount
STATE GENERAL FUND (Direct)	600,000
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	600,000
<b>TOTAL MEANS OF FINANCING</b>	<b>\$1,200,000</b>

**EXPENDITURES**

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
<b>TOTAL PERSONAL SERVICES</b>	<b>—</b>
Travel	—
Operating Services	—
Supplies	—
<b>TOTAL OPERATING EXPENSES</b>	<b>—</b>
<b>PROFESSIONAL SERVICES</b>	<b>\$1,200,000</b>
Other Charges	—
Debt Service	—
Interagency Transfers	—
<b>TOTAL OTHER CHARGES</b>	<b>—</b>
Acquisitions	—
Major Repairs	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$1,200,000</b>

**AUTHORIZED POSITIONS**

	FTE
Classified	—
Unclassified	—
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>—</b>
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>—</b>
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>—</b>



Question	Narrative Response
<b>Explain the need for this request.</b>	Contractor will perform reviews of Medicaid cost reports submitted by local education agencies (LEAs) for the school based Medicaid program. Their current contract expires 06/30/2024 and Medicaid has received a proposal for additional services. While Medicaid is unsure if that proposal will be approved, there is an anticipate an increase in the contract starting SFY25 due to implementation of the new CMS guidance for the school based Medicaid program. The Contractor shall provide professional accounting services in the performance of test work, analysis and desk reviews of Medicaid cost reports submitted by LEAs in order to perform agreed upon procedures relating to the cost report. This item meets the definition of a workload adjustment as the new contract starting in FY25 will incorporate additional tasks for the contractor as the federal guidelines that define the School Based Medicaid program has changed. This statement of work will be expanded to include the tasks associated with the new guidance from CMS.
<b>Cite performance indicators for the adjustment.</b>	Number of Local Education Agencies targeted for monitoring; Percent of targeted Local Education Agencies monitored; Number of Local Education Agency claims adjusted as a result of monitoring activities; Amount identified as over claimed as a result of monitoring; Number of unduplicated recipients Receiving School Nursing Services from Local Education Agencies; Number of school nurses in participating Local Education Agencies.
<b>What would the impact be if this is not funded?</b>	It is required that Medicaid modifies the current school based Medicaid program to adhere to the the new guidnace set forth by CMS. If LDH does not fund the work to comply with this effort, Medicaid will be out of compliance with CMS.
<b>Is revenue a fixed amount or can it be adjusted?</b>	The revenue amount requested can be adjusted based upon the recommended level of expenditures.
<b>Is the expenditure of these revenues restricted?</b>	Expenditure of these revenues are restricted to the school based Medicaid program.
<b>Additional information or comments.</b>	

**Form 28178 — 305 - 1 New T.O. (Pharmacist 3)**

**3052 - Medical Vendor Administration**

**MEANS OF FINANCING**

	Amount
STATE GENERAL FUND (Direct)	41,094
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	123,283
<b>TOTAL MEANS OF FINANCING</b>	<b>\$164,377</b>

**EXPENDITURES**

	Amount
Salaries	107,536
Other Compensation	—
Related Benefits	56,276
<b>TOTAL PERSONAL SERVICES</b>	<b>\$163,812</b>
Travel	—
Operating Services	—
Supplies	—
<b>TOTAL OPERATING EXPENSES</b>	<b>—</b>
<b>PROFESSIONAL SERVICES</b>	<b>—</b>
Other Charges	—
Debt Service	—
Interagency Transfers	565
<b>TOTAL OTHER CHARGES</b>	<b>\$565</b>
Acquisitions	—
Major Repairs	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$164,377</b>

**AUTHORIZED POSITIONS**

	FTE
Classified	1
Unclassified	—
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>1</b>
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>—</b>
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>—</b>

Question	Narrative Response
<b>Explain the need for this request.</b>	Request to add one position (MS 524 - Pharmacist 3) to T.O. to address functions that currently are not directly assigned to or incorporated into daily functions of the pharmacy team. In order for pharmacy program team members to be able to promote the health and well being of vulnerable Medicaid populations, Medicaid must consider addressing reimbursement of drugs in venues outside of the existing outpatient retail pharmacy environment. The pharmacy program addresses pharmacy benefits, services and reimbursement for Medicaid members in accordance with Centers for Medicaid and Medicare Services(CMS) guidance, Louisiana's approved state plan, Louisiana Board of Pharmacy requirements, Louisiana legislation and Louisiana Department of Health program policies. In recent years, CMS has directed state Medicaid agencies to incorporate reimbursement methodologies for physician administered drugs on the pharmacy pages of State agencies Medicaid Plan. In addition, the clinical expertise of a Pharmacist 3 is needed to review constantly incoming policies and procedures on drugs administered in a professional services setting. Outpatient pharmacy has parameters to assure appropriateness of drug therapy, but these qualifiers do not translate into the physician administered drug clinical methodology. Clinical input is needed for the appropriate use of compound drugs in the current pharmacy arena. In Fee For Service (FFS) Medicaid, there is not a program or policy to address the complexity of reviewing policy and creating a reimbursement methodology for dispensing compound drugs. Once a procedure is established and methodology introduced, it will need to be maintained. Maintaining any drug input requires hand-on daily review. A Pharmacist 3 with a strong clinical background will be able to assist the pharmacy team in assessing the benefit or lack thereof to LDH for newly marketed drugs for value based purchasing.
<b>Cite performance indicators for the adjustment.</b>	None.
<b>What would the impact be if this is not funded?</b>	If the additional TO is not funded, this will jeopardize the efficiency and effectiveness of the State's pharmacy program.
<b>Is revenue a fixed amount or can it be adjusted?</b>	N/A
<b>Is the expenditure of these revenues restricted?</b>	N/A
<b>Additional information or comments.</b>	

**Form 28179 — 305 - 1 New T.O. (Medicaid Program Manager 1A)**

**3052 - Medical Vendor Administration**

**MEANS OF FINANCING**

	Amount
STATE GENERAL FUND (Direct)	56,677
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	56,677
<b>TOTAL MEANS OF FINANCING</b>	<b>\$113,354</b>

**AUTHORIZED POSITIONS**

	FTE
Classified	1
Unclassified	—
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>1</b>
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	—
TOTAL NON-T.O. FTE POSITIONS	—

**EXPENDITURES**

	Amount
Salaries	70,824
Other Compensation	—
Related Benefits	41,965
<b>TOTAL PERSONAL SERVICES</b>	<b>\$112,789</b>
Travel	—
Operating Services	—
Supplies	—
<b>TOTAL OPERATING EXPENSES</b>	<b>—</b>
<b>PROFESSIONAL SERVICES</b>	<b>—</b>
Other Charges	—
Debt Service	—
Interagency Transfers	565
<b>TOTAL OTHER CHARGES</b>	<b>\$565</b>
Acquisitions	—
Major Repairs	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$113,354</b>

Question	Narrative Response
<b>Explain the need for this request.</b>	Request to add one T.O. (AS 620 - Program Manager 1-A) to assist in addressing functions related to the development, implementation and administration of the federal and supplemental rebate programs, which generated nearly \$630 million in expenditure offsets in State Fiscal Year (SFY) 2021. The Medicaid Program Manager 1-A position is needed to assist in the direction of the Federal and Supplemental Rebate Programs and the contractor who supports the Rebate programs related to the Pharmacy Benefit Manager (PBM) section. The Rebate program is a partnership between the Centers for Medicare & Medicaid Services (CMS), Louisiana Medicaid, and participating drug manufacturers. Funds received through this program offset the federal and state costs of outpatient prescription drugs on the Preferred Drug List (PDL). The PDL also allows Louisiana Department of Health (LDH) to contain costs through market shifts. Market shift savings are realized by requiring a prior authorization (PA) on non-preferred products, which results in prescriptions being shifted from more expensive medications to cost-effective alternatives with similar clinical effectiveness. The Program Manager 1-A would be responsible for assisting in directing accounting and system functions of the Rebate program. Work activity in this position will require frequent interaction with LDH and Rebate contractor staff, drug manufacturers, federal representatives of CMS, Office of Inspector General (OIG), Legislative Auditors, Health Economics Division staff, LDH Undersecretary, Bureau of Health Services Financing staff and the Fiscal Intermediary.
<b>Cite performance indicators for the adjustment.</b>	None.
<b>What would the impact be if this is not funded?</b>	If the additional TO is not funded, this will jeopardize the State's pharmacy rebate programs as non-LDH employees are not allowed to have access or review confidential rebate offers, rebate invoices, or rebate payments from manufacturers.
<b>Is revenue a fixed amount or can it be adjusted?</b>	N/A
<b>Is the expenditure of these revenues restricted?</b>	N/A
<b>Additional information or comments.</b>	

**Form 28180 — 305 - Conversion of 3 Expiring Job Appts to Authorized T.O.**

**3052 - Medical Vendor Administration**

**MEANS OF FINANCING**

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

**EXPENDITURES**

	Amount
Salaries	188,634
Other Compensation	(188,634)
Related Benefits	—
<b>TOTAL PERSONAL SERVICES</b>	<b>—</b>
Travel	—
Operating Services	—
Supplies	—
<b>TOTAL OPERATING EXPENSES</b>	<b>—</b>
<b>PROFESSIONAL SERVICES</b>	<b>—</b>
Other Charges	—
Debt Service	—
Interagency Transfers	—
<b>TOTAL OTHER CHARGES</b>	<b>—</b>
Acquisitions	—
Major Repairs	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>—</b>

**AUTHORIZED POSITIONS**

	FTE
Classified	3
Unclassified	—
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>3</b>
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>—</b>
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>—</b>

Question	Narrative Response
<b>Explain the need for this request.</b>	<p>This request is for the conversion of 3 job appointments expiring in FY25 to authorized T.O. Following are the explanations as to why the current incumbents are still needed in the agency:</p> <ul style="list-style-type: none"> <li>• Position #50362362 is still needed to ensure a dedicated staff position is allocated on a permanent basis to monitor the Adult Day Health Care and Community Choices 1915c waivers which provide supports and services to the elderly and adults with physical disabilities.</li> <li>• Position #50487284 is still needed to administer exclusions, termination, oversee the State Adverse Action List, aggressively collect delinquent Medicaid provider debt/overpayments and prepare debt placement with the Office of Debt Recovery all in the prevention, detection and recovery of fraud waste and abuse in the Medicaid program.</li> <li>• Position #50393289 is still needed due to its responsibility for Managed Care Reporting. It is the point of contact for the report submission process, coordinating new reporting templates and updates, troubleshooting Salesforce and working with the SF administrator. The position maintains a log of LDH and MCE business owners. Additionally, the position has supported many ad-hoc projects over the last SFY, including Humana Readiness Review, special data requests (LLA, PRRs, lawsuits, CMS reporting, etc.) and the new MCPAR reporting. Without the position, there would be no way to manage MCE reporting, get templates revised and loaded to the system or reassign report owners as needed as this position serve as the single point of contact for MCEs. Failure to convert this position would negatively impact managed care oversight--particularly in regards to managed care reporting, which has become increasingly problematic after the rollout of ECHO. This request shifts funding from Other Compensation to Salaries based on the incumbents requested salary for a net effect of \$0 to the agency.</li> </ul>
<b>Cite performance indicators for the adjustment.</b>	N/A
<b>What would the impact be if this is not funded?</b>	If this request is not funded, the MVA program will be at risk as these position are being used to maintain mission critical agency functions.
<b>Is revenue a fixed amount or can it be adjusted?</b>	N/A
<b>Is the expenditure of these revenues restricted?</b>	N/A
<b>Additional information or comments.</b>	



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# Technical and Other Adjustments

## AGENCY SUMMARY STATEMENT

### Total Agency

Means of Financing	Existing Operating Budget as of 10/01/2023	FY2024-2025 Requested Continuation Adjustment	FY2024-2025 Requested in this Adjustment Package	FY2024-2025 Requested Realignment
STATE GENERAL FUND (Direct)	182,219,643	(46,222,863)	—	135,996,780
STATE GENERAL FUND BY:	—	—	—	—
INTERAGENCY TRANSFERS	27,952,896	(27,448,659)	—	504,237
FEES & SELF-GENERATED	4,200,000	—	—	4,200,000
STATUTORY DEDICATIONS	711,345	426	—	711,771
FEDERAL FUNDS	550,554,876	(85,924,642)	—	464,630,234
<b>TOTAL MEANS OF FINANCING</b>	<b>\$765,638,760</b>	<b>\$(159,595,738)</b>	<b>—</b>	<b>\$606,043,022</b>
Salaries	62,074,650	(1,605,796)	—	60,468,854
Other Compensation	3,508,755	(80,268)	—	3,428,487
Related Benefits	41,949,119	226,795	—	42,175,914
<b>TOTAL PERSONAL SERVICES</b>	<b>\$107,532,524</b>	<b>\$(1,459,269)</b>	<b>—</b>	<b>\$106,073,255</b>
Travel	220,219	4,955	—	225,174
Operating Services	33,266,487	(28,426,926)	—	4,839,561
Supplies	263,125	5,921	—	269,046
<b>TOTAL OPERATING EXPENSES</b>	<b>\$33,749,831</b>	<b>\$(28,416,050)</b>	<b>—</b>	<b>\$5,333,781</b>
<b>PROFESSIONAL SERVICES</b>	<b>\$197,437,444</b>	<b>\$5,774,789</b>	<b>—</b>	<b>\$203,212,233</b>
Other Charges	147,528,670	(93,822,918)	—	53,705,752
Debt Service	—	—	—	—
Interagency Transfers	279,390,291	(41,672,290)	—	237,718,001
<b>TOTAL OTHER CHARGES</b>	<b>\$426,918,961</b>	<b>\$(135,495,208)</b>	<b>—</b>	<b>\$291,423,753</b>
Acquisitions	—	—	—	—
Major Repairs	—	—	—	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$765,638,760</b>	<b>\$(159,595,738)</b>	<b>—</b>	<b>\$606,043,022</b>
Classified	994	7	—	1,001
Unclassified	2	—	—	2
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>996</b>	<b>7</b>	<b>—</b>	<b>1,003</b>
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>113</b>	<b>—</b>	<b>—</b>	<b>113</b>

**PROGRAM BREAKOUT**

<b>Means of Financing</b>	<b>Requested in this Adjustment Package</b>	<b>3052 Medical Vendor Administration</b>
STATE GENERAL FUND (Direct)	—	—
STATE GENERAL FUND BY:	—	—
INTERAGENCY TRANSFERS	—	—
FEES & SELF-GENERATED	—	—
STATUTORY DEDICATIONS	—	—
FEDERAL FUNDS	—	—
<b>TOTAL MEANS OF FINANCING</b>	<b>—</b>	<b>—</b>
Salaries	—	—
Other Compensation	—	—
Related Benefits	—	—
<b>TOTAL SALARIES</b>	<b>—</b>	<b>—</b>
Travel	—	—
Operating Services	—	—
Supplies	—	—
<b>TOTAL OPERATING EXPENSES</b>	<b>—</b>	<b>—</b>
<b>PROFESSIONAL SERVICES</b>	<b>—</b>	<b>—</b>
Other Charges	—	—
Debt Service	—	—
Interagency Transfers	—	—
<b>TOTAL OTHER CHARGES</b>	<b>—</b>	<b>—</b>
Acquisitions	—	—
Major Repairs	—	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>	<b>—</b>
<b>TOTAL EXPENDITURES &amp; REQUEST</b>	<b>—</b>	<b>—</b>
<b>Classified</b>	<b>—</b>	<b>—</b>
<b>Unclassified</b>	<b>—</b>	<b>—</b>
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>—</b>	<b>—</b>
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>—</b>	<b>—</b>
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>—</b>	<b>—</b>

**PROGRAM SUMMARY STATEMENT**

**3052 - Medical Vendor Administration**

Means of Financing	Existing Operating Budget as of 10/01/2023	FY2024-2025 Requested Continuation Adjustment	FY2024-2025 Requested in this Adjustment Package	FY2024-2025 Requested Realignment
STATE GENERAL FUND (Direct)	182,219,643	(46,222,863)	—	135,996,780
STATE GENERAL FUND BY:	—	—	—	—
INTERAGENCY TRANSFERS	27,952,896	(27,448,659)	—	504,237
FEES & SELF-GENERATED	4,200,000	—	—	4,200,000
STATUTORY DEDICATIONS	711,345	426	—	711,771
FEDERAL FUNDS	550,554,876	(85,924,642)	—	464,630,234
<b>TOTAL MEANS OF FINANCING</b>	<b>\$765,638,760</b>	<b>\$(159,595,738)</b>	<b>—</b>	<b>\$606,043,022</b>
Salaries	62,074,650	(1,605,796)	—	60,468,854
Other Compensation	3,508,755	(80,268)	—	3,428,487
Related Benefits	41,949,119	226,795	—	42,175,914
<b>TOTAL PERSONAL SERVICES</b>	<b>\$107,532,524</b>	<b>\$(1,459,269)</b>	<b>—</b>	<b>\$106,073,255</b>
Travel	220,219	4,955	—	225,174
Operating Services	33,266,487	(28,426,926)	—	4,839,561
Supplies	263,125	5,921	—	269,046
<b>TOTAL OPERATING EXPENSES</b>	<b>\$33,749,831</b>	<b>\$(28,416,050)</b>	<b>—</b>	<b>\$5,333,781</b>
<b>PROFESSIONAL SERVICES</b>	<b>\$197,437,444</b>	<b>\$5,774,789</b>	<b>—</b>	<b>\$203,212,233</b>
Other Charges	147,528,670	(93,822,918)	—	53,705,752
Debt Service	—	—	—	—
Interagency Transfers	279,390,291	(41,672,290)	—	237,718,001
<b>TOTAL OTHER CHARGES</b>	<b>\$426,918,961</b>	<b>\$(135,495,208)</b>	<b>—</b>	<b>\$291,423,753</b>
Acquisitions	—	—	—	—
Major Repairs	—	—	—	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$765,638,760</b>	<b>\$(159,595,738)</b>	<b>—</b>	<b>\$606,043,022</b>
Classified	994	7	—	1,001
Unclassified	2	—	—	2
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>996</b>	<b>7</b>	<b>—</b>	<b>1,003</b>
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>113</b>	<b>—</b>	<b>—</b>	<b>113</b>

# New or Expanded Requests

## AGENCY SUMMARY STATEMENT

### Total Agency

Means of Financing and Expenditures	Existing Operating Budget as of 10/01/2023	FY2024-2025 Requested Continuation Adjustment	FY2024-2025 Requested in Technical/Other Package	FY2024-2025 Requested New/Expanded	FY2024-2025 Requested Realignment
STATE GENERAL FUND (Direct)	182,219,643	(46,222,863)	—	—	135,996,780
STATE GENERAL FUND BY:	—	—	—	—	—
INTERAGENCY TRANSFERS	27,952,896	(27,448,659)	—	—	504,237
FEES & SELF-GENERATED	4,200,000	—	—	—	4,200,000
STATUTORY DEDICATIONS	711,345	426	—	—	711,771
FEDERAL FUNDS	550,554,876	(85,924,642)	—	—	464,630,234
<b>TOTAL MEANS OF FINANCING</b>	<b>\$765,638,760</b>	<b>\$(159,595,738)</b>	<b>—</b>	<b>—</b>	<b>\$606,043,022</b>
Salaries	62,074,650	(1,605,796)	—	—	60,468,854
Other Compensation	3,508,755	(80,268)	—	—	3,428,487
Related Benefits	41,949,119	226,795	—	—	42,175,914
<b>TOTAL PERSONAL SERVICES</b>	<b>\$107,532,524</b>	<b>\$(1,459,269)</b>	<b>—</b>	<b>—</b>	<b>\$106,073,255</b>
Travel	220,219	4,955	—	—	225,174
Operating Services	33,266,487	(28,426,926)	—	—	4,839,561
Supplies	263,125	5,921	—	—	269,046
<b>TOTAL OPERATING EXPENSES</b>	<b>\$33,749,831</b>	<b>\$(28,416,050)</b>	<b>—</b>	<b>—</b>	<b>\$5,333,781</b>
<b>PROFESSIONAL SERVICES</b>	<b>\$197,437,444</b>	<b>\$5,774,789</b>	<b>—</b>	<b>—</b>	<b>\$203,212,233</b>
Other Charges	147,528,670	(93,822,918)	—	—	53,705,752
Debt Service	—	—	—	—	—
Interagency Transfers	279,390,291	(41,672,290)	—	—	237,718,001
<b>TOTAL OTHER CHARGES</b>	<b>\$426,918,961</b>	<b>\$(135,495,208)</b>	<b>—</b>	<b>—</b>	<b>\$291,423,753</b>
Acquisitions	—	—	—	—	—
Major Repairs	—	—	—	—	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$765,638,760</b>	<b>\$(159,595,738)</b>	<b>—</b>	<b>—</b>	<b>\$606,043,022</b>
Classified	994	7	—	—	1,001
Unclassified	2	—	—	—	2
TOTAL AUTHORIZED T.O. POSITIONS	996	7	—	—	1,003
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	—	—	—	—	—
TOTAL NON-T.O. FTE POSITIONS	113	—	—	—	113

**Fees and Self-Generated**

Description	Existing Operating Budget as of 10/01/2023	FY2024-2025 Requested Continuation Adjustment	FY2024-2025 Requested in Technical/Other Package	FY2024-2025 Requested New/Expanded	FY2024-2025 Requested Realignment
Fees & Self-generated	4,200,000	—	—	—	4,200,000
<b>Total:</b>	<b>\$4,200,000</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>\$4,200,000</b>

**Statutory Dedications**

Description	Existing Operating Budget as of 10/01/2023	FY2024-2025 Requested Continuation Adjustment	FY2024-2025 Requested in Technical/Other Package	FY2024-2025 Requested New/Expanded	FY2024-2025 Requested Realignment
Medical Assistance Programs Fraud Detect	711,345	426	—	—	711,771
<b>Total:</b>	<b>\$711,345</b>	<b>\$426</b>	<b>—</b>	<b>—</b>	<b>\$711,771</b>

**PROGRAM SUMMARY STATEMENT**

**3052 - Medical Vendor Administration**

Means of Financing and Expenditures	Existing Operating Budget as of 10/01/2023	FY2024-2025 Requested Continuation Adjustment	FY2024-2025 Requested in Technical/Other Package	FY2024-2025 Requested New/Expanded	FY2024-2025 Requested Realignment
STATE GENERAL FUND (Direct)	182,219,643	(46,222,863)	—	—	135,996,780
STATE GENERAL FUND BY:	—	—	—	—	—
INTERAGENCY TRANSFERS	27,952,896	(27,448,659)	—	—	504,237
FEES & SELF-GENERATED	4,200,000	—	—	—	4,200,000
STATUTORY DEDICATIONS	711,345	426	—	—	711,771
FEDERAL FUNDS	550,554,876	(85,924,642)	—	—	464,630,234
<b>TOTAL MEANS OF FINANCING</b>	<b>\$765,638,760</b>	<b>\$(159,595,738)</b>	<b>—</b>	<b>—</b>	<b>\$606,043,022</b>
Salaries	62,074,650	(1,605,796)	—	—	60,468,854
Other Compensation	3,508,755	(80,268)	—	—	3,428,487
Related Benefits	41,949,119	226,795	—	—	42,175,914
<b>TOTAL PERSONAL SERVICES</b>	<b>\$107,532,524</b>	<b>\$(1,459,269)</b>	<b>—</b>	<b>—</b>	<b>\$106,073,255</b>
Travel	220,219	4,955	—	—	225,174
Operating Services	33,266,487	(28,426,926)	—	—	4,839,561
Supplies	263,125	5,921	—	—	269,046
<b>TOTAL OPERATING EXPENSES</b>	<b>\$33,749,831</b>	<b>\$(28,416,050)</b>	<b>—</b>	<b>—</b>	<b>\$5,333,781</b>
<b>PROFESSIONAL SERVICES</b>	<b>\$197,437,444</b>	<b>\$5,774,789</b>	<b>—</b>	<b>—</b>	<b>\$203,212,233</b>
Other Charges	147,528,670	(93,822,918)	—	—	53,705,752
Debt Service	—	—	—	—	—
Interagency Transfers	279,390,291	(41,672,290)	—	—	237,718,001
<b>TOTAL OTHER CHARGES</b>	<b>\$426,918,961</b>	<b>\$(135,495,208)</b>	<b>—</b>	<b>—</b>	<b>\$291,423,753</b>
Acquisitions	—	—	—	—	—
Major Repairs	—	—	—	—	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$765,638,760</b>	<b>\$(159,595,738)</b>	<b>—</b>	<b>—</b>	<b>\$606,043,022</b>
Classified	994	7	—	—	1,001
Unclassified	2	—	—	—	2
TOTAL AUTHORIZED T.O. POSITIONS	996	7	—	—	1,003
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	—	—	—	—	—
TOTAL NON-T.O. FTE POSITIONS	113	—	—	—	113



**Fees and Self-Generated**

Description	Existing Operating Budget as of 10/01/2023	FY2024-2025 Requested Continuation Adjustment	FY2024-2025 Requested in Technical/Other Package	FY2024-2025 Requested New/Expanded	FY2024-2025 Requested Realignment
Fees & Self-generated	4,200,000	—	—	—	4,200,000
<b>Total:</b>	<b>\$4,200,000</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>\$4,200,000</b>

**Statutory Dedications**

Description	Existing Operating Budget as of 10/01/2023	FY2024-2025 Requested Continuation Adjustment	FY2024-2025 Requested in Technical/Other Package	FY2024-2025 Requested New/Expanded	FY2024-2025 Requested Realignment
Medical Assistance Programs Fraud Detect	711,345	426	—	—	711,771
<b>Total:</b>	<b>\$711,345</b>	<b>\$426</b>	<b>—</b>	<b>—</b>	<b>\$711,771</b>



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# Total Request Summary

**AGENCY SUMMARY STATEMENT**

**Total Agency**

**Means of Financing**

Description	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Requested Continuation Adjustments	FY2024-2025 Requested in Technical/Other Adjustments	FY2024-2025 Requested New or Expanded Adjustments	FY2024-2025 Total Request	Over/Under EOB
STATE GENERAL FUND (Direct)	118,526,794	182,219,643	(46,222,863)	—	—	135,996,780	(46,222,863)
STATE GENERAL FUND BY:	—	—	—	—	—	—	—
INTERAGENCY TRANSFERS	19,317,434	27,952,896	(27,448,659)	—	—	504,237	(27,448,659)
FEES & SELF-GENERATED	983,416	4,200,000	—	—	—	4,200,000	—
STATUTORY DEDICATIONS	—	711,345	426	—	—	711,771	426
FEDERAL FUNDS	277,214,638	550,554,876	(85,924,642)	—	—	464,630,234	(85,924,642)
<b>TOTAL MEANS OF FINANCING</b>	<b>\$416,042,282</b>	<b>\$765,638,760</b>	<b>\$(159,595,738)</b>	<b>—</b>	<b>—</b>	<b>\$606,043,022</b>	<b>\$(159,595,738)</b>

**Statutory Dedications**

Description	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Requested Continuation Adjustments	FY2024-2025 Requested in Technical/Other Adjustments	FY2024-2025 Requested New or Expanded Adjustments	FY2024-2025 Total Request	Over/Under EOB
Medical Assistance Programs Fraud Detect	—	711,345	426	—	—	711,771	426
<b>Total:</b>	—	<b>\$711,345</b>	<b>\$426</b>	—	—	<b>\$711,771</b>	<b>\$426</b>

Expenditures and Positions

Description	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Requested Continuation Adjustments	FY2024-2025 Requested in Technical/Other Adjustments	FY2024-2025 Requested New or Expanded Adjustments	FY2024-2025 Total Request	Over/Under EOB
Salaries	55,108,514	62,074,650	(1,605,796)	—	—	60,468,854	(1,605,796)
Other Compensation	2,195,787	3,508,755	(80,268)	—	—	3,428,487	(80,268)
Related Benefits	35,223,393	41,949,119	226,795	—	—	42,175,914	226,795
<b>TOTAL PERSONAL SERVICES</b>	<b>\$92,527,694</b>	<b>\$107,532,524</b>	<b>\$(1,459,269)</b>	<b>—</b>	<b>—</b>	<b>\$106,073,255</b>	<b>\$(1,459,269)</b>
Travel	78,068	220,219	4,955	—	—	225,174	4,955
Operating Services	3,938,064	33,266,487	(28,426,926)	—	—	4,839,561	(28,426,926)
Supplies	127,445	263,125	5,921	—	—	269,046	5,921
<b>TOTAL OPERATING EXPENSES</b>	<b>\$4,143,576</b>	<b>\$33,749,831</b>	<b>\$(28,416,050)</b>	<b>—</b>	<b>—</b>	<b>\$5,333,781</b>	<b>\$(28,416,050)</b>
<b>PROFESSIONAL SERVICES</b>	<b>\$126,874,286</b>	<b>\$197,437,444</b>	<b>\$5,774,789</b>	<b>—</b>	<b>—</b>	<b>\$203,212,233</b>	<b>\$5,774,789</b>
Other Charges	55,252,131	147,528,670	(93,822,918)	—	—	53,705,752	(93,822,918)
Debt Service	—	—	—	—	—	—	—
Interagency Transfers	137,244,594	279,390,291	(41,672,290)	—	—	237,718,001	(41,672,290)
<b>TOTAL OTHER CHARGES</b>	<b>\$192,496,725</b>	<b>\$426,918,961</b>	<b>\$(135,495,208)</b>	<b>—</b>	<b>—</b>	<b>\$291,423,753</b>	<b>\$(135,495,208)</b>
Acquisitions	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$416,042,282</b>	<b>\$765,638,760</b>	<b>\$(159,595,738)</b>	<b>—</b>	<b>—</b>	<b>\$606,043,022</b>	<b>\$(159,595,738)</b>
Classified	937	994	7	—	—	1,001	7
Unclassified	59	2	—	—	—	2	—
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>996</b>	<b>996</b>	<b>7</b>	<b>—</b>	<b>—</b>	<b>1,003</b>	<b>7</b>
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>133</b>	<b>113</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>113</b>	<b>—</b>

**PROGRAM SUMMARY STATEMENT**

**3052 - Medical Vendor Administration**

**Means of Financing**

Description	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Requested Continuation Adjustments	FY2024-2025 Requested in Technical/Other Adjustments	FY2024-2025 Requested New or Expanded Adjustments	FY2024-2025 Total Request	Over/Under EOB
STATE GENERAL FUND (Direct)	118,526,794	182,219,643	(46,222,863)	—	—	135,996,780	(46,222,863)
STATE GENERAL FUND BY:	—	—	—	—	—	—	—
INTERAGENCY TRANSFERS	19,317,434	27,952,896	(27,448,659)	—	—	504,237	(27,448,659)
FEES & SELF-GENERATED	983,416	4,200,000	—	—	—	4,200,000	—
STATUTORY DEDICATIONS	—	711,345	426	—	—	711,771	426
FEDERAL FUNDS	277,214,638	550,554,876	(85,924,642)	—	—	464,630,234	(85,924,642)
<b>TOTAL MEANS OF FINANCING</b>	<b>\$416,042,282</b>	<b>\$765,638,760</b>	<b>\$(159,595,738)</b>	<b>—</b>	<b>—</b>	<b>\$606,043,022</b>	<b>\$(159,595,738)</b>

Statutory Dedications

Description	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Requested Continuation Adjustments	FY2024-2025 Requested in Technical/Other Adjustments	FY2024-2025 Requested New or Expanded Adjustments	FY2024-2025 Total Request	Over/Under EOB
Medical Assistance Programs Fraud Detect	—	711,345	426	—	—	711,771	426
<b>Total:</b>	—	<b>\$711,345</b>	<b>\$426</b>	—	—	<b>\$711,771</b>	<b>\$426</b>



Expenditures and Positions

Description	FY2022-2023 Actuals	Existing Operating Budget as of 10/01/2023	FY2024-2025 Requested Continuation Adjustments	FY2024-2025 Requested in Technical/Other Adjustments	FY2024-2025 Requested New or Expanded Adjustments	FY2024-2025 Total Request	Over/Under EOB
Salaries	55,108,514	62,074,650	(1,605,796)	—	—	60,468,854	(1,605,796)
Other Compensation	2,195,787	3,508,755	(80,268)	—	—	3,428,487	(80,268)
Related Benefits	35,223,393	41,949,119	226,795	—	—	42,175,914	226,795
<b>TOTAL PERSONAL SERVICES</b>	<b>\$92,527,694</b>	<b>\$107,532,524</b>	<b>\$(1,459,269)</b>	<b>—</b>	<b>—</b>	<b>\$106,073,255</b>	<b>\$(1,459,269)</b>
Travel	78,068	220,219	4,955	—	—	225,174	4,955
Operating Services	3,938,064	33,266,487	(28,426,926)	—	—	4,839,561	(28,426,926)
Supplies	127,445	263,125	5,921	—	—	269,046	5,921
<b>TOTAL OPERATING EXPENSES</b>	<b>\$4,143,576</b>	<b>\$33,749,831</b>	<b>\$(28,416,050)</b>	<b>—</b>	<b>—</b>	<b>\$5,333,781</b>	<b>\$(28,416,050)</b>
<b>PROFESSIONAL SERVICES</b>	<b>\$126,874,286</b>	<b>\$197,437,444</b>	<b>\$5,774,789</b>	<b>—</b>	<b>—</b>	<b>\$203,212,233</b>	<b>\$5,774,789</b>
Other Charges	55,252,131	147,528,670	(93,822,918)	—	—	53,705,752	(93,822,918)
Debt Service	—	—	—	—	—	—	—
Interagency Transfers	137,244,594	279,390,291	(41,672,290)	—	—	237,718,001	(41,672,290)
<b>TOTAL OTHER CHARGES</b>	<b>\$192,496,725</b>	<b>\$426,918,961</b>	<b>\$(135,495,208)</b>	<b>—</b>	<b>—</b>	<b>\$291,423,753</b>	<b>\$(135,495,208)</b>
Acquisitions	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>
<b>TOTAL EXPENDITURES</b>	<b>\$416,042,282</b>	<b>\$765,638,760</b>	<b>\$(159,595,738)</b>	<b>—</b>	<b>—</b>	<b>\$606,043,022</b>	<b>\$(159,595,738)</b>
Classified	937	994	7	—	—	1,001	7
Unclassified	59	2	—	—	—	2	—
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>996</b>	<b>996</b>	<b>7</b>	<b>—</b>	<b>—</b>	<b>1,003</b>	<b>7</b>
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>133</b>	<b>113</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>113</b>	<b>—</b>



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# Addenda

# INTERAGENCY TRANSFERS

Interagency Agreement Between LDH-Capital Area Human Services District (09-302) and LDH-Medical Vendor Administration (09-305)  
 (Recipient Agency and #) (Sending Agency and #)

For Fiscal Year 2024-2025, LDH-Capital Area Human Services District (09-302) is budgeted to receive the following revenue: \$ \$30,000  
 (Agency Name and #)

from LDH-Medical Vendor Administration (09-305) by Interagency Transfer for the following reason(s):  
 (Sending Agency Name and #)

**The reason for the Interagency Agreement is:** Based on the Memorandum of Understanding between the Bureau of Health Services, BHSF will reimburse CAHSD for all PASRR related activities at the enhanced rate of 75% FFP in accordance with CFR 433.15(b) (9). This includes but not limited to FTE devoted to PASRR, office equipment, computer software, travel expenses and any other activities that pertain to PASRR.

<p><b>Janzlean Laughinghouse</b>                  Recipient Agency Fiscal Officer</p>	<p>Digitally signed by Janzlean Laughinghouse                  Date: 2023.10.19 08:15:35 -05'00'</p>
<p><b>DeEdra Lamotte</b>                  Sending Agency Fiscal Officer</p>	<p>Digitally signed by DeEdra Lamotte                  Date: 2023.10.20 21:20:56 -05'00'</p> <p>10/20/2023</p>

INTERAGENCY AGREEMENT

BR-19B  
(09/23)

Interagency Agreement Between LDH - Central Louisiana Human Services District (09-376) and LDH-Medical Vendor Administration (09-305)  
(Recipient Agency and #) (Sending Agency and #)

For Fiscal Year 2024 - 2025 LDH - Central Louisiana Human Services District (09-376) is budgeted to receive the following revenue \$10,000  
(Agency Name and #)

from LDH-Medical Vendor Administration (09-305) by Interagency Transfer for the following reason(s):  
(Agency Name and #)

The reason for the Interagency Agreement is :  
  
Reimbursement for PASSR-related activities up to \$10,000.

<u>Amanda Stalsby</u> <small>Signor ID: 6WYUEYXD10</small>	<u>10/11/2023</u>
Recipient Agency Fiscal Officer	Date
<u>DeEdra Lamotte</u> <small>Digitally signed by DeEdra Lamotte Date: 2023.10.20 21:21:40 -0500</small>	<u>10/20/2023</u>
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).

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**INTERAGENCY AGREEMENT**

**BR-19B**  
(8/08)

Interagency Agreement Between(09-305) - LDH-Medical Vendor Administration and (Agency #10-360) DCFS-Office of Children and Family Services

For Fiscal Year 2024 - 2025, (#10-360) - Department of Children and Family Services is budgeted to receive the following revenue \$4,000,000  
(Agency Name and #)

from (09-305) LDH-Medical Vendor Administration by Interagency Transfer for the following reason(s):  
(Agency Name and #)

The reason for the Interagency Agreement is:	
Administrative activities related to Medical eligibility determination, case management and supervision, referral of medical and behavioral health related services and Medicaid Outreach.	\$4,000,000
<b>TOTAL:</b>	<b>\$4,000,000</b>

	<u>10.24.23</u>
Recipient Agency Fiscal Officer	Date
DeEdra Lamotte	<u>10/24/2023</u>
<small>Digitally signed by DeEdra Lamotte Date: 2023.10.24 14:58:55 -05'00'</small>	Date
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).

INTERAGENCY AGREEMENT

BR-19B  
(09/23)

Interagency Agreement Between Florida Parishes Human Services Authority (09-301) and LDH-Medical Vendor Administration (09-305)  
(Recipient Agency and #) (Sending Agency and #)

For Fiscal Year 2024-2025, Florida Parishes Human Services Authority is budgeted to receive the following revenue: \$ 10,000  
(Agency Name and #)

from LDH-Medical Vendor Administration (09-305) by Interagency Transfer for the following reason(s):  
(Sending Agency Name and #)

**The reason for the Interagency Agreement is:**  
Florida Parishes Human Service Authority's budget request for Fiscal Year 2025 includes \$10,000 from the Louisiana Department of Health/Medical Vendor Administration/Bureau of Health Services Financing (BHSF) for the Memorandum of Understanding (MOU) for the Pre-screening Admission and Resident Review (PASRR) process.

Kachelle Sibley 10/20/23  
Recipient Agency Fiscal Officer Date  
DeEdra Lamotte  
Digitally signed by DeEdra Lamotte  
Date: 2023.10.20 21:31:01 -0500  
10/20/2023  
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. expenses).



INTERAGENCY AGREEMENT

BR-19B  
(08/20)

Interagency Agreement Between Office of the Secretary (09-307) and LDH-Medical Vendor Administration (09-305)  
(Recipient Agency and #) (Sending Agency and #)

For Fiscal Year 2024-2025, Office of the Secretary (09-307) is budgeted to receive the following revenue: \$2,880,385  
(Agency Name and #)

from LDH-Medical Vendor Administration (09-305) by Interagency Transfer for the following reason(s):  
(Sending Agency Name and #)

**The reason for the Interagency Agreement is:**

The Bureau of Health Services Financing (BHSF) agrees to provide the federal match to OS up to \$2,880,385 to be used to carry out functions for licensing, recertification and the processing of compliant investigations of health care facilities and providers of related services in the Title XIX (Medicaid) programs regulated by the Health Standards Section.

Chris Nicholas  
Recipient Agency Fiscal Officer

9/19/2023  
Date

DeEdra Lamotte  
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Date: 2023.10.21 12:59:25 -05'00'  
Sending Agency Fiscal Officer

10/21/2023  
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. expenses).

INTERAGENCY AGREEMENT

BR-19B  
(08/20)

Interagency Agreement Between Office of the Secretary (09-307) and LDH-Medical Vendor Administration (09-305)  
(Recipient Agency and #) (Sending Agency and #)

For Fiscal Year 2024-2025, Office of the Secretary (09-307) is budgeted to receive the following revenue: \$925,000.  
(Agency Name and #)

from LDH-Medical Vendor Administration (09-305) by Interagency Transfer for the following reason(s):  
(Sending Agency Name and #)

The reason for the Interagency Agreement is:

The Bureau of Health Services Financing (BHSF) agrees to provide the federal match to OS up to \$925,000 to be used to carry out functions related to Medicaid fraud, waste, and abuse detection and prevention by the Bureau of Legal Services and Internal Audit.

Chris Nicholas  
Recipient Agency Fiscal Officer

9/19/2023  
Date

DeEdra  
Lamotte

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Lamotte  
Date: 2023.10.21 13:01:25  
-05'00'

10/21/2023  
Date

Sending Agency Fiscal Officer

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. expenses).

INTERAGENCY AGREEMENT

BR-19B  
(08/20)

Interagency Agreement Between Office of the Secretary (09-307) and LDH-Medical Vendor Administration (09-305)  
(Recipient Agency and #) (Sending Agency and #)

For Fiscal Year 2024-2025 Office of the Secretary (09-307) is budgeted to receive the following revenue: \$ 600,000  
(Agency Name and #)

from LDH-Medical Vendor Administration (09-305) by Interagency Transfer for the following reason(s):  
(Sending Agency Name and #)

The reason for the Interagency Agreement is:

The Bureau of Health Services Financing (BHSF) agrees to transfer all necessary required funding to the Bureau of Legal Services for four Attorney 4 positions, for a period of four (4) years commencing from the date of hire of the four Attorney 4's by the Bureau of Legal Services. The Office of the Secretary agrees to allocate four job appointment positions dedicated to the Bureau of Health Services Financing/Medicaid for legal duties (legal advice, counsel and litigation services) related to medicaid unwind, Medicaid financial eligibility determinations and appeals and related matters. These Attorney 4 positions will be within the Bureau of Legal Services and will report to an Attorney Supervisor within the Bureau of Legal Services.



Recipient Agency Fiscal Officer

10.18.23

Date

DeEdra Lamotte

Digitally signed by DeEdra Lamotte  
Date: 2023.10.20 21:30:22 -05'00'

10/20/2023

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. expenses).

INTERAGENCY AGREEMENT

BR-19B  
(08/20)

Interagency Agreement Between Office of the Secretary (09-307) and LDH-Medical Vendor Administration (09-305)  
(Recipient Agency and #) (Sending Agency and #)

For Fiscal Year 2024-2025, Office of the Secretary (09-307) is budgeted to receive the following revenue: \$1,500,000.  
(Agency Name and #)

from LDH-Medical Vendor Administration (09-305) by Interagency Transfer for the following reason(s):  
(Sending Agency Name and #)

**The reason for the Interagency Agreement is:**

The Bureau of Health Services Financing (BHSF) agrees to provide funding to OS, up to \$1,500,000, for all Medicaid eligible expenditures for P. O. #2000604019 with McGlinchey Stafford PLLC.

All legal services provided by P.O. #2000604019 are Medicaid eligible and include:

- a. Legal consultation, representation, and defense in any legal matter concerning the nursing facilities, the facilities' emergency preparedness plans, the facilities' evacuation of residents for Hurricane Ida, the facilities' care and services provided to residents at the sheltering location(s) for Hurricane Ida, the transition of such residents to alternate placement after Ida, and any related matters; and
- b. Legal consultation, representation, and defense in any legal matter concerning involving COVID-19 or the public health emergency involving COVID-19 (including any matters related to COVID-19 surges or variants) which involves LDH, the Secretary, the State Health Officer, or any employee/representative of LDH.



Recipient Agency Fiscal Officer

9/19/2023

Date

DeEdra  
Lamotte

Digitally signed by DeEdra  
Lamotte  
Date: 2023.10.21 13:02:17  
-0500

10/21/2023

Date

Sending Agency Fiscal Officer

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. expenses).

INTERAGENCY AGREEMENT

BR-19B  
(08/20)

Interagency Agreement Between Office of the Secretary (09-307) and LDH-Medical Vendor Administration (09-305)  
(Recipient Agency and #) (Sending Agency and #)

For Fiscal Year 2024-2025, Office of the Secretary (09-307) is budgeted to receive the following revenue: \$1,150,000  
(Agency Name and #)

from LDH-Medical Vendor Administration (09-305) by interagency Transfer for the following reason(s):  
(Sending Agency Name and #)

**The reason for the Interagency Agreement is:**

The Bureau of Health Services Financing (BHSF) agrees to provide funding to OS to cover all costs necessary to carry out functions of the Medicaid Federal Reporting cost center.

*Chris Nichols*

Recipient Agency Fiscal Officer

9/19/2023

Date

DeEdra Lamotte

Digitally signed by DeEdra  
Lamotte  
Date: 2023.10.20 21:18:19  
-05'00'

Sending Agency Fiscal Officer

10/20/2023

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. expenses).

INTERAGENCY AGREEMENT

BR-19B  
(08/20)

Interagency Agreement Between Office of the Secretary (09-307) and LDH-Medical Vendor Administration (09-305)  
(Recipient Agency and #) (Sending Agency and #)

For Fiscal Year 2024-2025, Office of the Secretary (09-307) is budgeted to receive the following revenue: \$164,149.  
(Agency Name and #)

from LDH-Medical Vendor Administration (09-305) by Interagency Transfer for the following reason(s):  
(Sending Agency Name and #)

**The reason for the Interagency Agreement is:**

The Bureau of Health Services Financing (BHSF) agrees to provide funding to OS, up to \$164,169, for all Medicaid eligible expenditures for P. O. #2000729840 with University of Louisiana at Lafayette for nursing home emergency preparedness system and for all Medicaid eligible planning costs associated with the contract.

The University of Louisiana at Lafayette will prepare an Emergency Preparedness and Response solution as well as data analytic services that can meet ever-changing programmatic needs for insights into the Emergency Preparedness Plans by implementing an electronic, all-encompassing solution to be used by all nursing homes in the State to report required Emergency Preparedness Plans. This solution will need to capture any changes to the facilities status before, during, and after disaster events.

Ches Nichols  
Recipient Agency Fiscal Officer

9/19/2023  
Date

DeEdra Lamotte Digitally signed by DeEdra Lamotte  
Date: 2023.10.20 21:31:56 -0500'  
Sending Agency Fiscal Officer

10/20/2023  
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. expenses).

INTERAGENCY AGREEMENT

BR-19B  
(9/23)

Interagency Agreement Between Higher Education-Board of Regents (19A-671) and LDH-Medical Vendor Administration (09-305)  
(Recipient Agency and #) (Sending Agency and #)

For Fiscal Year 2024-2025, Higher Education-Board of Regents (19A-671) is budgeted to receive the following revenue \$200,000  
(Agency Name and #)

from LDH-Medical Vendor Administration (09-305) by Interagency Transfer for the following reason(s):  
(Agency Name and #)

The reason for the Interagency Agreement is :  
Medical and Allied Health Professional Education Scholarships and Loan Program.

Elizabeth Bentley-Smith  
Recipient Agency Fiscal Officer (Print)

Elizabeth Bentley-Smith  
Recipient Agency Fiscal Officer (Signature)

9/28/2023  
Date

DeEdra Lamotte  
Sending Agency Fiscal Officer (Print)

DeEdra Lamotte  
Digitally signed by DeEdra Lamotte  
Date: 2023.10.19 16:41:26 -0500  
Sending Agency Fiscal Officer (Signature)

10/19/2023  
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. expenses).

INTERAGENCY AGREEMENT


BR-19B  
(09/23)

Interagency Agreement Between LDH-Office for Citizens with Developmental Disabilities (09-340) and LDH-Medical Vendor Administration (09-305)  
(Recipient Agency and #) (Sending Agency and #)

For Fiscal Year 2024-2025, LDH-Office for Citizens with Developmental Disabilities (09-340) is budgeted to receive the following revenue: \$1,009,255  
(Agency Name and #)

from LDH-Medical Vendor Administration (09-305) by Interagency Transfer for the following reason(s):  
(Sending Agency Name and #)

This agreement provides for the reimbursement of expenditures related to the Money Follows the Person (MFP) Rebalancing Demonstration Grant services provided by the Office for Citizens with Developmental Disabilities.

	<u>10/25/2023</u>
Recipient Agency Fiscal Officer	Date
DeEdra Lamotte	<u>10/25/2023</u>
<small>Digitally signed by DeEdra Lamotte Date: 2023.10.25 17:13:47 -0500</small>	Date
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. expenses).



INTERAGENCY AGREEMENT


BR-19B  
(09/23)

Interagency Agreement Between LDH-Office for Citizens with Developmental Disabilities (09-340) and LDH-Medical Vendor Administration (09-305)  
(Recipient Agency and #) (Sending Agency and #)

For Fiscal Year 2024-2025, LDH-Office for Citizens with Developmental Disabilities (09-340) is budgeted to receive the following revenue: \$ 386,678  
(Agency Name and #)

from LDH-Medical Vendor Administration (09-305) by Interagency Transfer for the following reason(s):  
(Sending Agency Name and #)

This agreement provides for the reimbursement of Medicaid administrative match funds to the Office for Citizens with Developmental Disabilities, Request for Services Registry, to determine a prioritization for access of 1915c Home and Community Based Services. This action will allow persons with more critical needs for services to more efficiently gain access to these services. The amount provided is the federal share of Medicaid-eligible expenditures.

		<u>10/20/2023</u>
Recipient Agency Fiscal Officer	Digitally signed by DeEdra Lamotte	Date
<u>DeEdra Lamotte</u>	Date: 2023.10.20 21:19:59 -05'00'	<u>10/20/2023</u>
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. expenses).

INTERAGENCY AGREEMENT


BR-19B  
(09/23)

Interagency Agreement Between LDH-Office for Citizens with Developmental Disabilities (09-340) and LDH-Medical Vendor Administration (09-305)  
(Recipient Agency and #) (Sending Agency and #)

For Fiscal Year 2024-2025, LDH-Office for Citizens with Developmental Disabilities (09-340) is budgeted to receive the following revenue: \$ 130,351  
(Agency Name and #)

from LDH-Medical Vendor Administration (09-305) by Interagency Transfer for the following reason(s):  
(Sending Agency Name and #)

This agreement provides for the reimbursement of Medicaid administrative match funds to the Office for Citizens with Developmental Disabilities for implementation of Act 421 of the 2019 Regular Session of the Louisiana Legislature. The Act established the Tax Equity and Fiscal Responsibility Act (TEFRA) option within the La. Medicaid program to serve children with intellectual and/or developmental disabilities.

	10/20/2023
Recipient Agency Fiscal Officer	Date
DeEdra Lamotte	10/20/2023
<small>Digitally signed by DeEdra Lamotte Date: 2023.10.20 21:19:12 -0500</small>	Date
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. expenses).

INTERAGENCY AGREEMENT

BR-19B  
(09/23)

Interagency Agreement Between LDH-Office of Aging and Adult Services (LDH-OAAS #09-320) and LDH-Medical Vendor Administration (09-305)  
(Recipient Agency and #) (Sending Agency and #)

For Fiscal Year 2024-2025, LDH-Office of Aging and Adult Services (LDH-OAAS #09-320) is budgeted to receive the following revenue: \$ 1,339,389  
(Agency Name and #)

from LDH-Medical Vendor Administration (09-305) by Interagency Transfer for the following reason(s):  
(Sending Agency Name and #)

The reason for the Interagency Agreement is:  
**Medicaid Vendor Administration (MVA) will provide OAAS up to \$1,339,389 with 50% funded by the Medical Assistance Program Fraud Detection Fund and 50% funded by Medicaid federal funds. These funds will cover the costs associated with duties related to LT-PCS eligibility integrity and fraud, waste, and abuse in the LT-PCS program.**

LORA BENNETT  
 Recipient Agency Fiscal Officer(Print)

Lora Bennett Digitally signed by Lora Bennett  
Date: 2023.10.19 14:14:55 -05'00'  
 Recipient Agency Officer (Signature)

10/19/2023  
 Date

DeEdra Lamotte  
 Sending Agency Fiscal Officer(Print)

DeEdra Lamotte Digitally signed by DeEdra  
Lamotte  
Date: 2023.10.20 21:25:30  
-05'00'  
 Sending Agency Fiscal Office (Signature)

10/20/2023  
 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. expenses).

INTERAGENCY AGREEMENT

BR-19B  
(08/20)

Interagency Agreement Between LDH-Office of Aging and Adult Services (LDH-OAAS #09-320) and LDH-Medical Vendor Administration (09-305)  
(Recipient Agency and #) (Sending Agency and #)

For Fiscal Year 2024-2025, LDH-Office of Aging and Adult Services (LDH-IAAS #09-320) is budgeted to receive the following revenue: \$ 1,920,967.  
(Agency Name and #)

from LDH-Medical Vendor Administration (09-305) by Interagency Transfer for the following reason(s):  
(Sending Agency Name and #)

**The reason for the Interagency Agreement is: To reimburse OAAS for expenditures related to the Money Follows the Person Rebalancing Demonstration Grant including but not limited to, staff required visits to nursing homes, completing assessments, hand delivery of waiver offers and working with participants as needed to address barriers identified that may prevent their successful transition back into the community, up to \$1,920,967.**

Lora Bennett  
Recipient Agency Fiscal Officer(Print)

Lora Bennett Digitally signed by Lora Bennett  
Date: 2023.10.23 15:03:03  
-05'00'  
Recipient Agency Officer (Signature)

10/23/2023  
Date

DeEdra Lamotte  
Sending Agency Fiscal Officer(Print)

DeEdra Lamotte Digitally signed by DeEdra Lamotte  
Date: 2023.10.23 19:41:03  
-05'00'  
Sending Agency Fiscal Office (Signature)

10/23/2023  
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. expenses).

INTERAGENCY AGREEMENT

BR-19B  
(09/23)

Interagency Agreement Between LDH-Office of Aging and Adult Services (LDH-OAAS #09-320) and LDH-Medical Vendor Administration (09-305)  
(Recipient Agency and #) (Sending Agency and #)

For Fiscal Year 2024-2025, LDH-Office of Aging and Adult Services (LDH-IAAS #09-320) is budgeted to receive the following revenue: \$ 1,380,508.  
(Agency Name and #)

from LDH-Medical Vendor Administration (09-305) by Interagency Transfer for the following reason(s):  
(Sending Agency Name and #)

**The reason for the Interagency Agreement is: To reimburse OAAS for expenditures related to the Money Follows the Person Rebalancing Demonstration Grant including but not limited to, staff required visits to nursing homes, completing assessments, hand delivery of waiver offers and working with participants as needed to address barriers identified that may prevent their successful transition back into the community, up to \$1,380,508.**

Lora Bennett  
Recipient Agency Fiscal Officer(Print)

Lora Bennett Digitally signed by Lora Bennett  
Date: 2023.10.23 15:03:47  
-05'00'  
Recipient Agency Officer (Signature)

10/23/2023  
Date

DeEdra Lamotte  
Sending Agency Fiscal Officer(Print)

DeEdra Lamotte Digitally signed by DeEdra Lamotte  
Date: 2023.10.23 19:39:01 -05'00'  
Sending Agency Fiscal Office (Signature)

10/23/2023  
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. expenses).

INTERAGENCY AGREEMENT

BR-19B  
(09/23)

Interagency Agreement Between LDH-Office of Aging and Adult Services (LDH-OAAS #09-320) and LDH-Medical Vendor Administration (09-305)  
(Recipient Agency and #) (Sending Agency and #)

For Fiscal Year 2024-2025, LDH-Office of Aging and Adult Services (LDH-OAAS #09-320) is budgeted to receive the following revenue: \$ 1,135,953  
(Agency Name and #)

from LDH-Medical Vendor Administration (09-305) by Interagency Transfer for the following reason(s):  
(Sending Agency Name and #)

The reason for the Interagency Agreement is:  
**Medicaid Vendor Administration (MVA) will provide approximately 35% of the 50% Federal match for the Adult Protective Services function that investigates allegations of abuse, neglect and exploitation of Medicaid clients in LDH nursing facilities and in the community up to \$1,135,953.**

LORA BENNETT  
 Recipient Agency Fiscal Officer(Print)

**Lora Bennett**  
Digitally signed by Lora Bennett  
 Date: 2023.10.19 14:14:01 -05'00'  
 Recipient Agency Officer (Signature)

10/19/2023  
 Date

DeEdra Lamotte  
 Sending Agency Fiscal Officer(Print)

**DeEdra Lamotte**  
Digitally signed by DeEdra Lamotte  
 Date: 2023.10.20 21:22:39 -05'00'  
 Sending Agency Fiscal Office (Signature)

10/20/2023  
 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. expenses).

INTERAGENCY AGREEMENT

BR-19B  
(08/20)

Interagency Agreement Between LDH-Office of Aging and Adult Services (LDH-OAAS #09-320) and LDH-Medical Vendor Administration (09-305)  
(Recipient Agency and #) (Sending Agency and #)

For Fiscal Year 2024-2025, LDH-Office of Aging and Adult Services (LDH-OAAS #09-320) is budgeted to receive the following revenue: \$ 400,000  
(Agency Name and #)

from LDH-Medical Vendor Administration (09-305) by Interagency Transfer for the following reason(s):  
(Sending Agency Name and #)

**The reason for the Interagency Agreement is:**  
**The Medicaid Vendor Administration (MVA) will provide a 50% Federal match for the Nursing Home Resident Trust Fund is funded by civil monetary penalties (CMP) derived from LDH Health Standards compliance activity. The projects selected will advance resident quality of care and life in Louisiana's nursing homes. This Federal match is contingent on the Division of Administration approving statutory dedication funds for the Nursing Home Resident Trust Fund within the Office of Aging and Adult Services' operating budget.**

LORA BENNETT  
 Recipient Agency Fiscal Officer(Print)

Lora Bennett  
Digitally signed by Lora Bennett  
 Date: 2023.10.19 14:15:47  
 -05'00'  
 Recipient Agency Officer (Signature)

10/19/2023  
 Date

DeEdra Lamotte  
 Sending Agency Fiscal Officer(Print)

DeEdra Lamotte  
Digitally signed by DeEdra  
 Lamotte  
 Date: 2023.10.20 21:23:45  
 -05'00'  
 Sending Agency Fiscal Office (Signature)

10/20/2023  
 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. expenses).

INTERAGENCY AGREEMENT

BR-19B  
(08/20)

Interagency Agreement Between LDH-Office of Aging and Adult Services (LDH-OAAS #09-320) and LDH-Medical Vendor Administration (09-305)  
(Recipient Agency and #) (Sending Agency and #)

For Fiscal Year 2024-2025, LDH-Office of Aging and Adult Services (LDH-OAAS #09-320) is budgeted to receive the following revenue: \$ 645,000.  
(Agency Name and #)

from LDH-Medical Vendor Administration (09-305) by Interagency Transfer for the following reason(s):  
(Sending Agency Name and #)

**The reason for the Interagency Agreement is:**  
**To reimburse OAAS for expenditures related to the software of the OAAS Participant Tracking System (OPTS) being developed by the University of Lafayette (ULL) to aide OAAS in monitoring/managing several programs/waivers for Medicaid. OAAS is paying for the software development that is eligible to be matched by Medicaid at the 90/10 match rate and at a 75/25 match rate for ongoing maintenance, not to exceed \$645,000.**

LORA BENNETT  
 Recipient Agency Fiscal Officer(Print)

Lora Bennett Digitally signed by Lora Bennett  
Date: 2023.10.19 14:14:31  
-05'00'  
 Recipient Agency Officer (Signature)

10/19/2023  
 Date

DeEdra Lamotte  
 Sending Agency Fiscal Officer(Print)

DeEdra Lamotte Digitally signed by DeEdra  
Lamotte  
Date: 2023.10.20 21:26:16  
-05'00'  
 Sending Agency Fiscal Office (Signature)

10/20/2023  
 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. expenses).



INTERAGENCY AGREEMENT

BR-19B  
(08/20)

Interagency Agreement Between LDH-Office of Aging and Adult Services (LDH-OAAS #09-320) and LDH-Medical Vendor Administration (09-305)  
(Recipient Agency and #) (Sending Agency and #)

For Fiscal Year 2024-2025, LDH-Office of Aging and Adult Services (LDH-OAAS #09-320) is budgeted to receive the following revenue: \$ 1,996,389.  
(Agency Name and #)

from LDH-Medical Vendor Administration (09-305) by Interagency Transfer for the following reason(s):  
(Sending Agency Name and #)

**The reason for the Interagency Agreement is:**  
**To reimburse OAAS for Permanent Supportive Housing (PSH) costs at the Medicaid 50/50 Administrative Match rate from 7/1/24 through 6/30/25 as part of the PSH sustainability plan. This matched funding will allow OAAS to continue the housing activities that allow clients to remain stabilized in the community. This program has been funded by CDBG dollars for over 11 years and recently ended in FY22. Over 95% of PSH clients are Medicaid recipients.**

LORA BENNETT  
 Recipient Agency Fiscal Officer(Print)

Lora Bennett Digitally signed by Lora Bennett  
Date: 2023.10.19 14:15:23  
-05'00'  
 Recipient Agency Officer (Signature)

10/19/2023  
 Date

DeEdra Lamotte  
 Sending Agency Fiscal Officer(Print)

DeEdra Lamotte Digitally signed by DeEdra  
Lamotte  
Date: 2023.10.20 21:24:41  
-05'00'  
 Sending Agency Fiscal Office (Signature)

10/20/2023  
 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. expenses).

INTERAGENCY AGREEMENT

BR-19B

Interagency Agreement Between LDH-Office of Behavioral Health (09-330) and LDH-Medical Vendor Administration (09-305)  
 (Recipient Agency and #) (Sending Agency and #)

For Fiscal Year 2024-2025, LDH-Office of Behavioral Health (09-330) is budgeted to receive the following revenue: **\$3,679,416**  
 (Agency Name and #)

from LDH-Medical Vendor Administration (09-305) by Interagency Transfer for the following reason(s):  
 (Sending Agency Name and #)

The reason for the Interagency Agreement is:

Specialized Behavioral Health Services (SBHS)	\$1,475,466
Pre-Admission Screening and Resident Review (PASRR)	\$455,552
DOJ My Choice Louisiana - Nursing Facility Transitions	\$1,748,398
<b>Total Agreement</b>	<b><u>\$3,679,416</u></b>

SBHS: Based on a Memorandum of Understanding between the Bureau of Health Services Financing (BHSF) and OBH, BHSF will maximize federal funding and cost allocation for OBH staff dedicated to Medicaid-funded program duties; cost allocation is currently based on 50% of actual costs.

PASRR: Based on a Memorandum of Understanding between the Bureau of Health Services Financing (BHSF) and OBH, BHSF will reimburse OBH for all PASRR-related activities at an enhanced rate of 75% FFP in accordance with CFR 433.15(b)(9).

DOJ My Choice: Based on a Memorandum of Understanding between the Bureau of Health Services Financing (BHSF) and OBH, BHSF will maximize federal funding and cost allocation for OBH staff dedicated to Medicaid-funded program duties; cost allocation is currently based on 50% of actual costs.

<i>Lauri Hatlelid</i>	10/19/2023
_____ Recipient Agency Fiscal Officer	_____ Date
DeEdra Lamotte Lamotte	10/21/2023
_____ Sending Agency Fiscal Officer	_____ Date

OBH Revenue Coding	
LaGov Coding	
Business Area	330
Fund	3300000300
Cost Center	3301000000
Order	Multiple
GL Account	4710059

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).

INTERAGENCY AGREEMENT

BR-19B

Interagency Agreement Between LDH-Office of Behavioral Health (09-330) and LDH-Medical Vendor Administration (09-305)  
 (Recipient Agency and #) (Sending Agency and #)

For Fiscal Year 2024-2025, LDH-Office of Behavioral Health (09-330) is budgeted to receive the following revenue \$1,429,500  
 (Agency Name and #)

from LDH-Medical Vendor Administration (09-305) by Interagency Transfer for the following reason(s):  
 (Sending Agency Name and #)

The reason for the Interagency Agreement is:

Provides up to \$1,429,500 for payments from Medical Vendor Administration for start-up costs associated with Specialized Psychiatric Residential Treatment Facilities (PRTF). PRTFs are non-hospital facilities offering intensive inpatient services to individuals younger than age 21 who have various behavioral health issues. PRTFs are required to ensure that all medical, psychological, social, behavioral and developmental aspects of the member's situation are assessed and treated, and must provide access to education services. Funding provides startup costs for a highly specialized PRTF with approximately 25 beds, with treatment focusing on co-occurring mental health and developmental disabilities.

<i>Lauri Hatlelid</i>	10/19/2023
Recipient Agency Fiscal Officer DeEdra Lamotte	Date 10/21/2023
Digitally signed by DeEdra Lamotte Date: 2023.10.21 12:54:37 -0500	
Sending Agency Fiscal Officer	Date

OBH Revenue Coding	
LaGov Coding	
Business Area	330
Fund	3300000300
Cost Center	3301000000
Order	LDHMH0000023
GL Account	4710059

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).

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INTERAGENCY AGREEMENT

BR-19B

Interagency Agreement Between LDH-Office of Behavioral Health (09-330) and LDH-Medical Vendor Administration (09-305)  
 (Recipient Agency and #) (Sending Agency and #)

For Fiscal Year 2024-2025, LDH-Office of Behavioral Health (09-330), is budgeted to receive the following revenue: **\$1,500,000**  
 (Agency Name and #)

from LDH-Medical Vendor Administration (09-305) by Interagency Transfer for the following reason(s):  
 (Sending Agency Name and #)

The reason for the Interagency Agreement is:

Provides up to \$1,500,000 for payments from MVA for start-up costs associated with community-based crisis providers. Includes funding necessary to establish an infrastructure for providers of youth crisis services. Services will include Mobile Crisis Response and Community Brief Crisis Support. Up to ten sites across the state would be eligible to benefit from this funding in an effort to develop and expand a crisis continuum of care for youth in Louisiana.

<i>Lauri Hatfield</i>	10/19/2023
Recipient Agency Fiscal Officer <b>DeEdra Lamotte</b> Sending Agency Fiscal Officer	Date 10/21/2023 Date

OBH Revenue Coding

LaGov Coding	
Business Area	330
Fund	3300000300
Cost Center	3301000000
Order	LDHMH0000022
GL Account	4710059

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).

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INTERAGENCY AGREEMENT

BR-19B  
(08/18)

Interagency Agreement Between Louisiana Department of Justice (04-141) and LDH-Medical Vendor Administration (09-305)  
(Recipient Agency and #) (Sending Agency and #)

For Fiscal Year 2024 - 2025, Louisiana Department of Justice (04-141) is budgeted to receive the following revenue \$531,000  
(Agency Name and #)

from LDH-Medical Vendor Administration (09-305) by Interagency Transfer for the following reason(s):  
(Agency Name and #)

**The reason for the Interagency Agreement is :** The purpose of the Ombudsman contract is to improve the quality of life for individuals with developmental disabilities who live in publicly-funded, privately operated ICF/DD facilities in Louisiana. The program assists these individuals to make requests, initiate complaints and bring their complaints to the appropriate parties, and seek resolution of requests/complaints at the influence level closest to the individual that has the authority to make the change.

**Community Living Ombudsman Program (CLOP) \$456,000**  
**Supported Independent Living Advocacy Program (SILAP) \$75,000**

<i>Michelle Hancock</i>	10/4/23
Recipient Agency Fiscal Officer	Date
DeEdra Lamotte	10/20/2023
<small>Digitally signed by DeEdra Lamotte Date: 2023.10.20 21:33:48 -05'00'</small>	
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).

10/4/2023

INTERAGENCY AGREEMENT

BR-19B  
(09/23)

Interagency Agreement Between LDH-Medical Vendor Administration (09-305) and Department of Childen and Family Services (#10-360)  
(Recipient Agency and #) (Sending Agency and #)

For Fiscal Year 2024-2025, LDH-Medical Vendor Administration (09-305) is budgeted to receive the following revenue: \$ 270,797  
(Agency Name and #)

from Department of Childen and Family Services (#10-360) by Interagency Transfer for the following reason(s):  
(Sending Agency Name and #)

**The reason for the Interagency Agreement is:** To support services for Coordinated System of Care expenditures in State Fiscal Year 2024-2025.

DeEdra  
Lamotte

Digitally signed by DeEdra  
Lamotte  
Date: 2023.10.19 09:36:24  
-05'00'

10/19/2023

Recipient Agency Fiscal Officer

Date

*Erc WV*

10.20.23

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. expenses).

INTERAGENCY AGREEMENT

BR-19B  
(09/23)

Interagency Agreement Between LDH-Medical Vendor Administration (09-305) and Department of Corrections-Corrections Administration (#08-400)  
(Recipient Agency and #) (Sending Agency and #)

For Fiscal Year 2024-2025, LDH-Medical Vendor Administration (09-305) is budgeted to receive the following revenue: \$ 202,875  
(Agency Name and #)

from Department of Corrections-Corrections Administration (#08-400) by Interagency Transfer for the following reason(s):  
(Sending Agency Name and #)

**The reason for the Interagency Agreement is:** The purpose of the Agreement is for the Department of Corrections - Corrections Administration to provide funding assistance for the payment of contracts needed to reinstate the Disability Medicaid Program.

DeEdra Lamotte	Digitally signed by DeEdra Lamotte Date: 2023.10.19 09:35:54 -05'00'	10/19/2023
_____ Recipient Agency Fiscal Officer		_____ Date
<u>Godi Babin</u>		<u>10-19-23</u>
_____ 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. expenses).

INTERAGENCY AGREEMENT

BR-19B  
(09/23)

Interagency Agreement Between LDH-Medical Vendor Administration (09-305) and LDH-Office of Behavioral Health (#09-330)  
(Recipient Agency and #) (Sending Agency and #)

For Fiscal Year 2024-2025, LDH-Medical Vendor Administration (09-305) is budgeted to receive the following revenue: \$ 26,000  
(Agency Name and #)

from LDH-Office of Behavioral Health (#09-330) by Interagency Transfer for the following reason(s):  
(Sending Agency Name and #)

**The reason for the Interagency Agreement is:** Office of Behavioral Health (OBH) Merakey Pennsylvania Pre-Admission Screening and Resident Review (PASRR) will reimburse MVA the state portion of the 75/25 federal match rate funding.

<p><b>DeEdra Lamotte</b></p> <p>Recipient Agency Fiscal Officer</p>	<p><small>Digitally signed by DeEdra Lamotte Date: 2023.10.19 09:35:09 -05'00'</small></p>	<p><u>10/19/2023</u></p> <p>Date</p>
<p><b>Lauri Hatlelid</b></p> <p>Sending Agency Fiscal Officer</p>	<p><small>Digitally signed by Lauri Hatlelid Date: 2023.10.19 11:46:16 -05'00'</small></p>	<p><u>10/19/2023</u></p> <p>Date</p>

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. expenses).



# CHILDREN'S BUDGET

Department: 09A - Louisiana Department of Health Agency: MEDICAL VENDOR ADMINISTRATION	<b>STATE OF LOUISIANA</b> Childrens Budget Department Summary	CHILD - DS Fiscal Year 2024 - 2025 Report Date: 10/30/23
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Service Number	Service Name	Agency Number	Agency Name	General Fund	IAT	Self Generated	Stat Deds	Federal Funds	Total Funds	Positions
MVA01	Medical Services for Medicaid Eligible Children	305	Medical Vendor Administration	\$28,911,704	\$0	\$116,772	\$25,147	\$105,653,242	\$134,706,865	1,003
			<b>Total:</b>	<b>\$28,911,704</b>	<b>\$0</b>	<b>\$116,772</b>	<b>\$25,147</b>	<b>\$105,653,242</b>	<b>\$134,706,865</b>	<b>1,003</b>

Department: 09A - Louisiana Department of Health Agency: MEDICAL VENDOR ADMINISTRATION		STATE OF LOUISIANA Childrens Budget by Department			CHILD - DC Fiscal Year 2024 - 2025 Report Date: 10/30/23	
Means of Financing:	Existing Operating Budget	Requested Continuation	Requested NE	Total Requested	Total Recommended	
STATE GENERAL FUND (Direct)	\$32,544,221	(\$3,632,517)	\$0	\$28,911,704	\$0	
STATE GENERAL FUND BY:						
INTERAGENCY TRANSFERS	\$0	\$0	\$0	\$0	\$0	
FEES & SELF-GENERATED	\$131,443	(\$14,671)	\$0	\$116,772	\$0	
STATUTORY DEDICATIONS	\$28,307	(\$3,160)	\$0	\$25,147	\$0	
FEDERAL FUNDS	\$118,927,697	(\$13,274,455)	\$0	\$105,653,242	\$0	
<b>TOTAL MEANS OF FINANCING</b>	<b>\$151,631,668</b>	<b>(\$16,924,803)</b>	<b>\$0</b>	<b>\$134,706,865</b>	<b>\$0</b>	
Salaries	\$20,665,713	(\$534,597)	\$0	\$20,131,116	\$0	
Other Compensation	\$985,595	(\$22,547)	\$0	\$963,048	\$0	
Related Benefits	\$11,104,534	\$60,036	\$0	\$11,164,570	\$0	
<b>TOTAL PERSONAL SERVICES</b>	<b>\$32,755,842</b>	<b>(\$497,108)</b>	<b>\$0</b>	<b>\$32,258,734</b>	<b>\$0</b>	
Travel	\$332,590	\$7,483	\$0	\$340,073	\$0	
Operating Services	\$15,318,808	(\$13,078,490)	\$0	\$2,240,318	\$0	
Supplies	\$271,771	\$6,116	\$0	\$277,887	\$0	
<b>TOTAL OPERATING EXPENSES</b>	<b>\$15,923,169</b>	<b>(\$13,064,891)</b>	<b>\$0</b>	<b>\$2,858,278</b>	<b>\$0</b>	
<b>PROFESSIONAL SERVICES</b>	<b>\$76,649,680</b>	<b>\$5,229,473</b>	<b>\$0</b>	<b>\$81,879,153</b>	<b>\$0</b>	
Other Charges	\$21,101,449	(\$8,313,181)	\$0	\$12,788,268	\$0	
Debt Service	\$0	\$0	\$0	\$0	\$0	
Interagency Transfers	\$5,201,528	(\$279,096)	\$0	\$4,922,432	\$0	
<b>TOTAL OTHER CHARGES</b>	<b>\$26,302,977</b>	<b>(\$8,592,277)</b>	<b>\$0</b>	<b>\$17,710,700</b>	<b>\$0</b>	
Acquisitions	\$0	\$0	\$0	\$0	\$0	
Major Repairs	\$0	\$0	\$0	\$0	\$0	
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	

Department: 09A - Louisiana Department of Health Agency: MEDICAL VENDOR ADMINISTRATION		STATE OF LOUISIANA Childrens Budget by Department			CHILD - DC Fiscal Year 2024 - 2025 Report Date: 10/30/23	
<b>TOTAL EXPENDITURES</b>	\$151,631,668	(\$16,924,803)	\$0	\$134,706,865	\$0	
Classified	994	7	0	1,001	0	
Unclassified	0	0	0	0	0	
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	994	7	0	1,001	0	
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	0	0	0	0	0	
<b>TOTAL NON-T.O. FTE POSITIONS</b>	2	0	0	2	0	
<b>TOTAL POSITIONS</b>	996	7	0	1,003	0	

Department: 09A - Louisiana Department of Health  
 Agency: MEDICAL VENDOR ADMINISTRATION

**STATE OF LOUISIANA**  
**Childrens Budget**  
**Agency Summary**

CHILD - AS  
 Fiscal Year 2024 - 2025  
 Report Date: 10/30/23

**305 - Medical Vendor Administration**

Service Number	Service Name	Program Number	Program Name	General Fund	IAT	Self Generated	Stat Deds	Federal Funds	Total Funds	Positions
MVA01	Medical Services for Medicaid Eligible Children	3052	Medical Vendor Administration	\$28,911,704	\$0	\$116,772	\$25,147	\$105,653,242	\$134,706,865	1,003
			<b>Total:</b>	<b>\$28,911,704</b>	<b>\$0</b>	<b>\$116,772</b>	<b>\$25,147</b>	<b>\$105,653,242</b>	<b>\$134,706,865</b>	<b>1,003</b>

Department: 09A - Louisiana Department of Health Agency: MEDICAL VENDOR ADMINISTRATION	<b>STATE OF LOUISIANA</b> Childrens Budget by Agency	CHILD - AC Fiscal Year 2024 - 2025 Report Date: 10/30/23
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**305 - Medical Vendor Administration**

Means of Financing:	Existing Operating Budget	Requested Continuation	Requested NE	Total Requested	Total Recommended
STATE GENERAL FUND (Direct)	\$32,544,221	(\$3,632,517)	\$0	\$28,911,704	\$0
STATE GENERAL FUND BY:					
INTERAGENCY TRANSFERS	\$0	\$0	\$0	\$0	\$0
FEES & SELF-GENERATED	\$131,443	(\$14,671)	\$0	\$116,772	\$0
STATUTORY DEDICATIONS	\$28,307	(\$3,160)	\$0	\$25,147	\$0
FEDERAL FUNDS	\$118,927,697	(\$13,274,455)	\$0	\$105,653,242	\$0
<b>TOTAL MEANS OF FINANCING</b>	<b>\$151,631,668</b>	<b>(\$16,924,803)</b>	<b>\$0</b>	<b>\$134,706,865</b>	<b>\$0</b>
Salaries	\$20,665,713	(\$534,597)	\$0	\$20,131,116	\$0
Other Compensation	\$985,595	(\$22,547)	\$0	\$963,048	\$0
Related Benefits	\$11,104,534	\$60,036	\$0	\$11,164,570	\$0
<b>TOTAL PERSONAL SERVICES</b>	<b>\$32,755,842</b>	<b>(\$497,108)</b>	<b>\$0</b>	<b>\$32,258,734</b>	<b>\$0</b>
Travel	\$332,590	\$7,483	\$0	\$340,073	\$0
Operating Services	\$15,318,808	(\$13,078,490)	\$0	\$2,240,318	\$0
Supplies	\$271,771	\$6,116	\$0	\$277,887	\$0
<b>TOTAL OPERATING EXPENSES</b>	<b>\$15,923,169</b>	<b>(\$13,064,891)</b>	<b>\$0</b>	<b>\$2,858,278</b>	<b>\$0</b>
<b>PROFESSIONAL SERVICES</b>	<b>\$76,649,680</b>	<b>\$5,229,473</b>	<b>\$0</b>	<b>\$81,879,153</b>	<b>\$0</b>
Other Charges	\$21,101,449	(\$8,313,181)	\$0	\$12,788,268	\$0
Debt Service	\$0	\$0	\$0	\$0	\$0
Interagency Transfers	\$5,201,528	(\$279,096)	\$0	\$4,922,432	\$0
<b>TOTAL OTHER CHARGES</b>	<b>\$26,302,977</b>	<b>(\$8,592,277)</b>	<b>\$0</b>	<b>\$17,710,700</b>	<b>\$0</b>
Acquisitions	\$0	\$0	\$0	\$0	\$0
Major Repairs	\$0	\$0	\$0	\$0	\$0

Department: 09A - Louisiana Department of Health Agency: MEDICAL VENDOR ADMINISTRATION		STATE OF LOUISIANA Childrens Budget by Agency			CHILD - AC Fiscal Year 2024 - 2025 Report Date: 10/30/23	
TOTAL ACQ. & MAJOR REPAIRS	\$0	\$0	\$0	\$0	\$0	
TOTAL EXPENDITURES	\$151,631,668	(\$16,924,803)	\$0	\$134,706,865	\$0	
Classified	994	7	0	1,001	0	
Unclassified	0	0	0	0	0	
TOTAL AUTHORIZED T.O. POSITIONS	994	7	0	1,001	0	
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	0	0	0	0	0	
TOTAL NON-T.O. FTE POSITIONS	2	0	0	2	0	
TOTAL POSITIONS	996	7	0	1,003	0	

Department: 09A - Louisiana Department of Health Agency: MEDICAL VENDOR ADMINISTRATION	<b>STATE OF LOUISIANA</b> Childrens Budget by Agency/Program and Service	CHILD1 Fiscal Year 2024 - 2025 Report Date: 10/30/23
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**305 - Medical Vendor Administration**

**3052 - Medical Vendor Administration**

**MVA01 - Medical Services for Medicaid Eligible Children**

Means of Financing:	Existing Operating Budget	Requested Continuation	Requested NE	Total Requested	Total Recommended
STATE GENERAL FUND (Direct)	\$32,544,221	(\$3,632,517)	\$0	\$28,911,704	\$0
STATE GENERAL FUND BY:					
INTERAGENCY TRANSFERS	\$0	\$0	\$0	\$0	\$0
FEES & SELF-GENERATED	\$131,443	(\$14,671)	\$0	\$116,772	\$0
STATUTORY DEDICATIONS	\$28,307	(\$3,160)	\$0	\$25,147	\$0
FEDERAL FUNDS	\$118,927,697	(\$13,274,455)	\$0	\$105,653,242	\$0
<b>TOTAL MEANS OF FINANCING</b>	<b>\$151,631,668</b>	<b>(\$16,924,803)</b>	<b>\$0</b>	<b>\$134,706,865</b>	<b>\$0</b>
Salaries	\$20,665,713	(\$534,597)	\$0	\$20,131,116	\$0
Other Compensation	\$985,595	(\$22,547)	\$0	\$963,048	\$0
Related Benefits	\$11,104,534	\$60,036	\$0	\$11,164,570	\$0
<b>TOTAL PERSONAL SERVICES</b>	<b>\$32,755,842</b>	<b>(\$497,108)</b>	<b>\$0</b>	<b>\$32,258,734</b>	<b>\$0</b>
Travel	\$332,590	\$7,483	\$0	\$340,073	\$0
Operating Services	\$15,318,808	(\$13,078,490)	\$0	\$2,240,318	\$0
Supplies	\$271,771	\$6,116	\$0	\$277,887	\$0
<b>TOTAL OPERATING EXPENSES</b>	<b>\$15,923,169</b>	<b>(\$13,064,891)</b>	<b>\$0</b>	<b>\$2,858,278</b>	<b>\$0</b>
<b>PROFESSIONAL SERVICES</b>	<b>\$76,649,680</b>	<b>\$5,229,473</b>	<b>\$0</b>	<b>\$81,879,153</b>	<b>\$0</b>
Other Charges	\$21,101,449	(\$8,313,181)	\$0	\$12,788,268	\$0
Debt Service	\$0	\$0	\$0	\$0	\$0
Interagency Transfers	\$5,201,528	(\$279,096)	\$0	\$4,922,432	\$0
<b>TOTAL OTHER CHARGES</b>	<b>\$26,302,977</b>	<b>(\$8,592,277)</b>	<b>\$0</b>	<b>\$17,710,700</b>	<b>\$0</b>



Department: 09A - Louisiana Department of Health		STATE OF LOUISIANA				CHILD1
Agency: MEDICAL VENDOR ADMINISTRATION		Childrens Budget				Fiscal Year 2024 - 2025
		by Agency/Program and Service				Report Date: 10/30/23
Acquisitions	\$0	\$0	\$0	\$0	\$0	
Major Repairs	\$0	\$0	\$0	\$0	\$0	
<b>TOTAL ACQ. &amp; MAJOR REPAIRS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	
<b>TOTAL EXPENDITURES</b>	<b>\$151,631,668</b>	<b>(\$16,924,803)</b>	<b>\$0</b>	<b>\$134,706,865</b>	<b>\$0</b>	
Classified	994	7	0	1,001	0	
Unclassified	0	0	0	0	0	
<b>TOTAL AUTHORIZED T.O. POSITIONS</b>	<b>994</b>	<b>7</b>	<b>0</b>	<b>1,001</b>	<b>0</b>	
<b>TOTAL AUTHORIZED OTHER CHARGES POSITIONS</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	
<b>TOTAL NON-T.O. FTE POSITIONS</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>2</b>	<b>0</b>	
<b>TOTAL POSITIONS</b>	<b>996</b>	<b>7</b>	<b>0</b>	<b>1,003</b>	<b>0</b>	

Department: 09A - Louisiana Department of Health Agency: MEDICAL VENDOR ADMINISTRATION	<b>STATE OF LOUISIANA</b> Childrens Budget Narrative	CHILD2 Fiscal Year 2024 - 2025 Report Date: 10/30/23
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Form ID: 28279
Form Description: 305 Children's Budget
Service: MVA01 - 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. 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: Inpatient and outpatient hospital services, Physician services, Laboratory and X-Ray services, Long-Term Care facilities (Nursing Homes), Family Planning, and services for Early Periodic Screening, Diagnosis and Treatment (EPSDT) of those under 19. Optional services include: Prescription drugs, Hemodialysis, Chiropractic Care, Psychiatric Rehabilitation, Community Services, Case Management, Appliances and Medical Devices and Substance Abuse Services. Congress passed Public Law 105-33 in 1997 to establish a new Title XXI under the Social Security Act called the State Children's Insurance Program (SCHIP). 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 Department of Health and Hospitals implemented the LaCHIP for uninsured children under the age of 19 with household income at or below 133% of the poverty level. Effective October 1, 1999, the income level increased to 150% of the poverty level. LaCHIP uses special income amounts and has fewer eligibility requirements than other Medicaid Programs.

**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:**

CHILD2 - Page 1 of 2

DEPARTMENT ID: LOUISIANA DEPARTMENT OF HEALTH (09)  
 AGENCY ID: MEDICAL VENDOR ADMINISTRATION (09-305)  
 PROGRAM ID: A - MEDICAL VENDOR ADMINISTRATION (305-2000)  
 PROGRAM ACTIVITY: A-1 - MEDICAID ELIGIBILITY DETERMINATION AND ENROLLMENT

- 1. **K** Objective: Through the Medicaid Eligibility Determination activity, maximize the efficiency and accuracy of enrolling eligible individuals in Medicaid and CHIP by processing at least 98.5% of applications timely through continuous improvement that is technology driven, simplifies administrative processes and eliminates waste.

Children's Budget Link: In general, child/adolescent services identified in this budget unit are indirectly linked to the Children's Cabinet via the Children's Budget. The Children's Budget reflects funding and expenditures for a broad range of Medicaid services for children under 21 years of age.

Human Resource Policies Beneficial to Women and Families Link: This objective will support Act 1078 by insuring the provision of healthcare services to women and families.

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): The Governor's Healthcare Reform Panel for improving healthcare in Louisiana.

Explanatory Note: Title XIX of the Social Security Act is a program of national health assistance funded by the federal government and the states. The program covers low-income individuals and their families who are aged, blind or disabled, and members of families with dependent children. Title XXI allows states to expand coverage of Medicaid health assistance to children who live in families with incomes up to 200% of the federal poverty level (FPL). This objective is being modified to remove reference to "living below 200% of Federal Poverty Level (FPL)," due to certain income disregards, which are allowed for the determination of eligibility. Due to these income disregards, it is sometimes possible that children living in families with incomes above 200% of FPL are determined to be eligible for coverage under Title XIX and Title XXI.

LaPAS PI CODE	L E V E L	PERFORMANCE INDICATOR NAME	PERFORMANCE INDICATOR VALUES					PERFORMANCE AT EXECUTIVE BUDGET LEVEL FY 2024-2025	PERFORMANCE STANDARD AS INITIALLY APPROPRIATED FY 2024-2025
			YEAREND PERFORMANCE STANDARD FY 2022-2023	ACTUAL YEAREND PERFORMANCE FY 2022-2023	PERFORMANCE STANDARD AS INITIALLY APPROPRIATED FY 2023-2024	EXISTING PERFORMANCE STANDARD FY 2023-2024	PERFORMANCE AT CONTINUATION BUDGET LEVEL FY 2024-2025		
25540	K	Percentage of Medicaid applications received online	65%	66%	65%	65%	68%		
25539	K	Number of children enrolled through Express Lane Eligibility (ELE)	30,000	4,237 <sup>1</sup>	30,000	30,000	8,500 <sup>2</sup>		
24036	K	Percentage of applications for Pregnant Women approved within 5 calendar days	70%	73%	70%	70%	70%		
25541	K	Percentage of applications for LaCHIP & Medicaid programs for children approved within 15 calendar days	75%	91% <sup>3</sup>	75%	75%	75%		
10013	K	Total number of children enrolled	730,000	773,000 <sup>4</sup>	730,000	730,000	750,000 <sup>5</sup>		
17038	K	Percentage of renewals processed and not closed for procedural reasons	90.0%	98.0% <sup>6</sup>	90.0%	90.0%	80.0% <sup>7</sup>		
24041	K	Percentage of calls received through the Medicaid & LaCHIP hotlines who hold for a representative less than 5 minutes	80%	91% <sup>8</sup>	80%	80%	85%		
25542	K	Number of children renewed through Express Lane Eligibility (ELE)	40,000	220,231 <sup>9</sup>	40,000	40,000	185,000 <sup>10</sup>		
2241	S	Number of children enrolled as Title XXI Eligibles (LaCHIP)	141,000	183,645 <sup>11</sup>	145,000	145,000	160,000		
2242	S	Number of children enrolled as Title XIX Eligibles (traditional Medicaid)	630,000	589,355 <sup>9</sup>	630,000	630,000	600,000		
26084	S	Percentage of applications for the New Adult program approved within 15 calendar days	75%	94% <sup>3</sup>	80%	80%	75%		
26085	K	Number of justice involved adults enrolled pre-release from incarceration	11,000	12,755	11,000	11,000	11,500		
26563	K	Percentage of Medicaid applications with a real-time eligibility decision	33%	32%	33%	33%	37%		
26564	K	Percentage of renewals streamlined	62%	54% <sup>12</sup>	62%	62%	55%		

- <sup>1</sup> The continuous enrollment provision during the Public Health Emergency (PHE) has decreased churn which reduced the number of new enrollees through the Express Lane Eligibility (ELE).
- <sup>2</sup> The previous performance standard was based on total current ELE enrollment as opposed to new enrollees added during the fiscal year. The standard has been adjusted to reflect new enrollees added during the fiscal year.
- <sup>3</sup> The continuation of the Public Health Emergency (PHE) and focus on application processing rather than renewals has contributed to the consistent positive trend above the standard.
- <sup>4</sup> Due to the continuous enrollment provision during the PHE, the number of children enrolled in Medicaid programs has been higher than normal.
- <sup>5</sup> Although the PHE ended March 31, 2023, it is anticipated the net enrollment will not return to pre-PHE levels. The standard has been adjusted to reflect this change.
- <sup>6</sup> Under continuous enrollment provisions for the PHE, only separate CHIP programs could close for procedural reasons, therefore rates for non-closure were higher than normal.
- <sup>7</sup> The closure rate is expected to rise due to the PHE ending March 31, 2023 and procedural closures are again allowed for all program. The standard has been adjusted.
- <sup>8</sup> Customer Service Unit representatives exceeded expectations in efficiently answering and handling calls to the hotline.
- <sup>9</sup> The increased enrollment of children in the Medicaid program has led to an increased overall number of children renewed via ELE.
- <sup>10</sup> Inconsistencies in the data obtained the past two fiscal years has resulted in an inaccurate performance standard. The standard has been updated.



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