

**SFY 2019 Reductions for Inclusion in Executive Budget
1/19/2018**

	Adjustments to 2019 Recommended Budget at SIOT (Items are in Priority Order Bottom to Top)							Program	Object Category	
	A	B	C	D	E	F	G			
	SGF \$	IAT \$	FED \$	SELF GEN \$	STAT DED \$	Total \$	TO			
1	Medical Vendor Administration -Delayed Implementation for the Medicaid Modernization Project (PMAJ 996)	(\$1,300,000)		(\$12,200,000)		(\$13,500,000)		200	IAT	
2	Eliminate Nursing Home Bed Holds	(\$1,050,292)		(\$1,922,513)		(\$2,972,805)		100	Other Charges	
3	Eliminate Nursing Home Release in FY19	(\$3,890,066)		(\$8,875,057)		(\$12,765,123)		100	Other Charges	
4	Reduce UPL/FMP Payments This reduction equals 20.8% of the FMP Payments at Expansion FFP. This reduction affects the following facilities: PPP - Adelphi, PPP-CC, PPP-Memphis, PPP-New Orleans, PPP-Silverthorn, UDU-Lille Kemp, PPP-Lake Charles, PPP-CA, Conway, Lafayette, Thru-Sterre-les-Prairies, and Baton Rouge Eliminate DSH Payments This reduction will eliminate funding to hospitals for their uncompensated care costs which are to cover their Medicaid shortfall and care for the uninsured. This will reduce the availability of preventive treatment for the state's Medicaid and uninsured population. This elimination affects the following facilities: PPP - Adelphi, PPP-CC, PPP-Memphis, PPP-New Orleans, PPP-Silverthorn, UDU-Lille Kemp, PPP-Lake Charles, PPP-CA, Conway, Lafayette, Thru-Sterre-les-Prairies, and Baton Rouge Eliminate Pediatric Day Healthcare (PDHC) Services The Pediatric Day Health Care program is designed to provide an array of services to meet the medical, social and developmental needs of children from birth up to 21 years of age who have a complex medical condition which requires skilled nursing care and therapeutic interventions on an ongoing basis to preserve and maintain health status, prevent disability, restore disease, maintain disability or other adverse health conditions and/or prolong life. This elimination will impact approximately \$91,499,914.	(\$4,049,647)	(\$16,549,692)	(\$88,252,615)	(\$51,060,614)	(\$12,155,208)	(\$197,062,282)		100	Other Charges
5	Reallocate Star Ded associated with this reduction - \$12,155,208						\$0	100	Other Charges	
6	Eliminate Pediatric Day Healthcare (PDHC) Services The Pediatric Day Health Care program is designed to provide an array of services to meet the medical, social and developmental needs of children from birth up to 21 years of age who have a complex medical condition which requires skilled nursing care and therapeutic interventions on an ongoing basis to preserve and maintain health status, prevent disability, restore disease, maintain disability or other adverse health conditions and/or prolong life. This elimination will impact approximately \$91,499,914.	(\$11,877,713)		(\$19,448,295)		(\$30,326,012)		100	Other Charges	
7	Near Elimination of Mental Health Rehabilitation Services -Eliminate Psychosocial Rehabilitation services for recipients aged 21 and over, Non-Expansion Population. Elimination will impact 32,021 recipients and 35 providers. -Eliminate Community Psychiatric Support and Treatment Services for recipients aged 21 and over, Non-Expansion Population. Elimination will impact 13,799 recipients and 232 providers. -Eliminate Crisis Intervention for recipients aged 21 and over, Non-Expansion Population. Elimination will impact 608 recipients and 53 providers. -Eliminate Services provided by Licensed Mental Health Professionals for recipients aged 21 and over, Non-Expansion Population. Elimination will impact 4,973 recipients and 210 providers. -Reduce Inpatient Psychiatric	(\$17,618,668)		(\$32,415,805)		(\$50,034,473)		100	Other Charges	
8	Substance Use Services -Eliminate or Outsource services for recipients aged 21 and over, Non-Expansion Population. Elimination will impact 4,688 recipients and 113 providers. -Elimination of Residential Services for recipients aged 21 and over, Non-Expansion Population. Elimination will impact 2,504 recipients and 28 providers	(\$26,044,341)		(\$47,677,422)		(\$73,721,763)		100	Other Charges	
7/8a	Agency 330-Office of Behavioral Health Staff Reduction Reduction of Staff used to Monitor and Manage the program in adjustment 7v and 8	(\$172,009)		(\$172,009)		(\$344,018)	(4)	2000	Salaries - \$128,418; Related Benefits - \$46,591	
9	Eliminate Provisional Medicaid The Provisional Medicaid program that provides Medicaid coverage to individuals who meet eligibility requirements in the Supplemental Security Income (SSI) program but have an optional pending decision for SSI from the Social Security Administration (SSA). This program is currently funded through the state's General Fund. The program is currently funded through the state's General Fund. The program is currently funded through the state's General Fund. Medical is unavailable for incarcerated persons, with the exception of inpatient hospital services which remain Medicaid reimbursable. For residents in Residential Medicaid who receive inpatient hospital services while incarcerated, the associated costs will now become the responsibility of the Department of Corrections (DOC) once the Provisional Medicaid program is eliminated. Hospital costs will be paid with 100% SGF by DOC without the benefit of Federal Medicaid match, thereby reducing the net state reduction by an estimated \$14.3 million total MOF (before \$5 million SGF).	(\$38,229,293)		(\$68,350,280)		(\$106,579,573)		100	Other Charges	
10	Eliminate Long Term Care Special Income Level Program The medicaid population that must be covered by Medicaid are recipients of Supplemental Security Income (SSI) who are aged, blind, or disabled. The Long Term Care Special Income Level (SIL) program provides Medicaid coverage for aged, blind and disabled recipients who medicaid qualify for residential level of care but do not meet the SIL program requirements. The program is currently funded through the state's General Fund. The program is currently funded through the state's General Fund. The program is currently funded through the state's General Fund. The program is currently funded through the state's General Fund. The program is currently funded through the state's General Fund. The program is currently funded through the state's General Fund. The program is currently funded through the state's General Fund. The program is currently funded through the state's General Fund. The program is currently funded through the state's General Fund.	(\$231,079,104)		(\$628,390,017)		(\$859,469,121)		100	Other Charges	

Item #	Description	Cost	Benefit	Net Cost	Net Benefit	Net Savings	Net Cost	Net Benefit	Net Savings	Net Cost	Net Benefit	Net Savings
	Reallocate Staff Deed associated with LTC Special Income Level elimination											
11	Ambulatory Surgical Center An Ambulatory Surgical Center (ASC) is defined in 42 CFR 413.23 as "an establishment with an organized medical staff of physicians, with permanent facilities that are equipped and operated primarily for the purpose of performing surgical procedures, with continuous physician services and required professional nursing services available whenever a patient is in the facility, which does not provide services or other accommodations for patients to stay overnight."	(\$39,489,557)										
12	Medically Needy Regular The Medical Needy Program (MNP) which provides Medicaid coverage for up to 6 months for individuals who meet categorical requirements and do not meet the Medicaid income bar under the Medical Needy Income Guidelines.	(\$10,508,763)										
13	Medically Needy Spenddown The Spenddown Assistance Program (SPAP) is a Medicaid program for individuals residing in an LTC facility. The SPAP provides assistance for the cost of long-term care services. The SPAP is spent down using allowable personal medical expenses. Insurance premiums and the projected Medical Facility Fee. Of the excess income can be spent down using a combination of the actual income, daily private facility fee and a portion of the projected Medicaid facility fee.	(\$1,231,569)										
14	DSH - OBH PPP - Community Care & Northlake payments	(\$5,141,791)										
14a	Agency 330-OBH PPP Reduction Reduction of staff used to monitor and manage the program in adjustment #14	(\$134,271)										
15	Eliminate Long Term Personal Care Services Program Long Term Personal Care Services (LTPCS) is a Medicaid state plan service that provides hands-on assistance with basic self-care tasks such as eating, bathing, dressing, grooming, and walking to low income elderly and persons with additional disabilities who cannot perform these activities independently. Elimination of the LTPCS program will result in temporary remaining order and intervention by the Agency Center and possibly the Federal Department of Justice. Elimination of LTPCS will result in short-lived savings as it will lead to increased nursing facility utilization at a much higher cost to the state. This elimination will impact approximately 14,000 recipients and 428 providers.	(\$55,962,600)										
15a	Agency 320-OAAS LTPCS Staff Reduction Reduction of staff used to monitor and manage the program in adjustment #15	(\$406,351)										
16	Eliminate Supports Waiver The elimination of the Supports Waiver program will impact 1,000 individuals currently receiving services at well as 230 providers. These supports allow individuals with moderate and severe disabilities (IDD) to be able to work and/or participate in necessary daily activities, so that they can remain in the community. Instead of receiving care in a residential facility setting. Many individuals with IDD reside at home with their families and utilize this waiver as a means of receiving the care and/or supports they need, allowing their families to also work. Without this waiver, individuals are at increased risk of institutionalization if families are unable to continue working due to the necessity of remaining home with the individuals who lose the supports provided through this waiver.	(\$4,754,892)										
16a	Agency 340-OCDD Supports Waiver Staff Reduction Reduction of staff associated with adjustment #16	(\$42,807)										
17	Eliminate Children's Choice Waiver The elimination of the Children's Choice Waiver program will impact 1,275 individuals (from birth through age of 8) currently receiving services as well as 284 providers. This waiver provides supports for eligible individuals with developmental disabilities and/or intellectual disabilities who require individualized services (such as therapy, habilitation, and care) to maintain their ability to live and learn in the community with their families and friends, and to help them reach their maximum potential. Without this waiver, individuals are at increased risk of institutionalization if families are unable to continue working due to the necessity of remaining home with the individuals who lose the supports provided through this waiver.	(\$4,687,288)										
17a	Agency 340-OCDD Children's Choice Waiver Staff Reduction Reduction of staff associated with adjustment #17	(\$50,070)										
18	Reduce NOW Waiver Services Reduce Support Coordination Rate. Support Coordination is the arrangement of, rather than the delivery of, direct services that are needed by the participant. Using a person-centered planning approach, support coordination, assist the participant in gaining access to needed medical, social, educational, and other services.	(\$4,824,952)										
18a	Evaluate Suspended Independent Living . Elimination will impact 429 individuals and 254 providers. Six services are only provided to individuals living in their homes, and the State Supervisor takes the place of natural supports that would otherwise be provided by an individual's family if they were living at home. Recipients will be at increased risk of physical harm and their quality of life will be degraded.	(\$8,663,709)										
Total Reductions		(\$656,612,820)										