Agency Budget Request

FISCAL YEAR 2027–2028

Louisiana Department of Health

305 — Medical Vendor Administration



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Signature Page

BUDGET REQUEST

Fiscal Year Ending June 30,2028

NAME OF DEPARTMENT / AGENCY: Louisiana Department of Health (09)

BUDGET UNIT: Medical Vendor Administration (305)

SCHEDULE NUMBER: 09-305

TELEPHONE NUMBER: (225) 342-9500

PHYSICAL ADDRESS: 628 N. Fourth Street

P.O. Box 91030, Baton Rouge, Louisiana

ZIP CODE: 70821-9030

WEB ADDRESS: http://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:	**HEAD OF BUDGET UNIT:**
PRINTED NAME/TITLE: Bruce Greenstein, Secretary	**PRINTED NAME/TITLE:** Albert Simien, Undersecretary
DATE:	**DATE:**
EMAIL ADDRESS: Bruce.Greenstein@la.gov	**EMAIL ADDRESS:** Albert.Simien@LA.GOV

PROGRAM CONTACT PERSON: Mitchel E. Chauvin, CPA	**FINANCIAL CONTACT PERSON:** Andrew Perilloux
TITLE: Medicaid Program Manager 4, Financial Mgmt & Operations	**TITLE:** Chief Financial Officer
TELEPHONE NUMBER: (225) 219-0192	**TELEPHONE NUMBER:** (225) 342-2755
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Operational Plan

STATE OF LOUISIANA
Operational Plan Form
Department Goals

DEPARTMENT NUMBER AND NAME: 09A - LDH

DEPARTMENT MISSION:

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

DEPARTMENT GOALS:

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

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

STATE OF LOUISIANA
Operational Plan Form
Agency Goals

AGENCY NUMBER AND NAME: 305 - Medical Vendor Administration

AGENCY MISSION:

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

AGENCY GOALS:

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

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

Goal III
Improve program integrity by ensuring only those who are eligible remain enrolled in Medicaid.

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

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), the Equal Employment Opportunity Policy (8116-77) and the Lactation Support Policy (Policy Number 104.2). In addition, the allowance of flexibility in work schedules and the availability of Dependent Day Care Spending Accounts assist both women and their families.

STATE OF LOUISIANA
Operational Plan Form
Program Goals

PROGRAM NUMBER AND NAME: 3052 - Medical Vendor Administration

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 (MVA) Program A is to administer an efficient and effective Medicaid program in compliance with state and federal requirements.

PROGRAM GOALS:

I. To demonstrate good stewardship of public resources

PROGRAM ACTIVITY:

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.

STATE OF LOUISIANA
Operational Plan Form
Program Goals

PROGRAM NUMBER AND NAME: 3052 - Medical Vendor Administration

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.

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 laws 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.

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.

STATE OF LOUISIANA
Operational Plan Form
Program Goals

PROGRAM NUMBER AND NAME: 3052 - Medical Vendor Administration

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.

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

DEPARTMENT ID: 09 - LDH

AGENCY ID: 305 - Medical Vendor Administration

PROGRAM ID: 3052 - Medical Vendor Administration

PM OBJECTIVE: 3052-01 - Through the Medicaid Eligibility Determination activity, to 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:

Human Resource Policies Beneficial to Women and Families Link:

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

Explanatory Notes:

Performance Indicator	Level	Performance Indicator Name	Unit	Performance Indicator Values						
				Year End Performance Standard 2025 - 2026	Actual Year End Performance 2025 - 2026	Performance Standard as Initially Appropriated 2026 - 2027	Existing Performance Standard 2026 - 2027	Performance at Continuation Budget Level 2027 - 2028	Performance at Executive Budget Level 2027 - 2028	Performance Standard as Initially Appropriated 2027 - 2028
10013	K	Total number of children enrolled	N	710,000	619,303	710,000	710,000	620,000	0	0
2241	S	Number of children enrolled as Title XXI Eligibles (LACHIP)	N	145,000	124,750	145,000	145,000	145,000	0	0
2242	S	Number of children enrolled Title XIX Eligibles (traditional Medicaid)	N	570,000	494,553	570,000	570,000	540,000	0	0
24041	K	Percentage of calls received through the Medicaid & LaCHIP hotlines who hold for a representative less than 5 minutes	P	85	65	85	85	85	0	0
25539	K	Number of children enrolled through Express Lane Eligibility (ELE)	N	8,500	5,825	8,500	8,500	4,800	0	0
25542	K	Number of children renewed through Express Lane Eligibility (ELE)	N	335,000	202,907	335,500	335,500	160,000	0	0
26085	K	Number of justice involved adults enrolled pre-release from incarceration	N	11,500	10,965	11,500	11,500	10,000	0	0
26563	K	Percentage of Medicaid applications with real-time eligibility decision	P	30	26	30	30	25	0	0
26564	K	Percentage of renewals streamlined	P	68	43	68	68	50	0	0

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

DEPARTMENT ID: 09 - LDH

AGENCY ID: 305 - Medical Vendor Administration

PROGRAM ID: 3052 - Medical Vendor Administration

Performance Indicator	Level	Performance Indicator Name	Unit	General Performance Information				
				Performance Indicator Values				
				Prior Year Actual FY2021 - 2022	Prior Year Actual FY2022 - 2023	Prior Year Actual FY2023 - 2024	Prior Year Actual FY2024 - 2025	Prior Year Actual FY2025 - 2026
12027	G	Number of Certified Medicaid Application Centers	N	269	304	266	274	286
25543	G	Number of individuals enrolled in all Medicaid and LaCHIP programs	N	1,974,812	2,052,605	1,674,556	1,594,002	1,378,186
25545	G	Number of applications processed annually	N	141,431	172,728	285,024	52,380	49,225
26764	G	Total number of adults enrolled (in Medicaid)	N	1,197,880	1,279,605	974,096	897,516	758,883

Performance Indicator	Level	Footnotes
10013	K	The FY28 standard was adjusted to reflect the overall decline in Medicaid enrollment. The updated projection better aligns with current enrollment levels and anticipated program performance.
2242	S	The FY28 standard was adjusted to better reflect current Medicaid enrollment trends and anticipated enrollment among children eligible for traditional Medicaid.
25539	K	The FY28 standard was adjusted to reflect declining Medicaid enrollment, resulting in fewer children eligible for ELE enrollment. The adjustment better aligns with current enrollment trends and expected performance.
25542	K	The FY28 standard was adjusted to reflect declining Medicaid enrollment, resulting in fewer children eligible for ELE renewals. The adjustment better aligns with current enrollment trends and anticipated renewal activity.
26085	K	The FY28 standard was adjusted based on FY26 actual performance to better align with anticipated enrollment activity and current program operations.
26563	K	The FY28 standard was adjusted to account for declining real-time eligibility approvals resulting from SB 130 residency verification requirements. The adjustment better reflects current eligibility processes and expected performance.
26564	K	The FY28 standard was adjusted to reflect the impact of SB 130 which have contributed to a decline in ex parte renewals. The adjustment better aligns with current renewal processes and anticipated program performance.

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

DEPARTMENT ID: 09 - LDH

AGENCY ID: 305 - Medical Vendor Administration

PROGRAM ID: 3052 - Medical Vendor Administration

PM OBJECTIVE: 3052-02 - Through the Medicaid Enterprise Systems (MES) Operations activity, to operate an efficient and effective MMIS system.

Children's Budget Link:

Human Resource Policies Beneficial to Women and Families Link:

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

Explanatory Notes:

Performance Indicator	Level	Performance Indicator Name	Unit	Performance Indicator Values						
				Year End Performance Standard 2025 - 2026	Actual Year End Performance 2025 - 2026	Performance Standard as Initially Appropriated 2026 - 2027	Existing Performance Standard 2026 - 2027	Performance at Continuation Budget Level 2027 - 2028	Performance at Executive Budget Level 2027 - 2028	Performance Standard as Initially Appropriated 2027 - 2028
25556	K	Dollar value of MMIS contract expenditures	D	50,566,220	52,504,049	52,489,998	52,489,998	53,748,359.79	0	0
25557	S	Percent of MMIS contract expenditures that are federally funded	P	72	72	72	72	72	0	0

Performance Indicator	Level	Performance Indicator Name	Unit	General Performance Information				
				Performance Indicator Values				
				Prior Year Actual FY2021 - 2022	Prior Year Actual FY2022 - 2023	Prior Year Actual FY2023 - 2024	Prior Year Actual FY2024 - 2025	Prior Year Actual FY2025 - 2026
12020	G	Total number of claims processed	N	225,085,813	236,158,684	249,663,793	216,468,627	196,963,456
26572	G	Number of competitive procurements issued for IT services and software for modular MMIS functions	N	Not Available	0	0	0	0
26573	G	Number of contracts executed for IT services and software for modular MES functions	N	Not Available	0	0	0	0
26574	G	Number of IT services and software designed, developed or deployed for modular MES functions	N	Not Available	0	3	1	2

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

DEPARTMENT ID: 09 - LDH

AGENCY ID: 305 - Medical Vendor Administration

PROGRAM ID: 3052 - Medical Vendor Administration

PM OBJECTIVE: 3052-03 - 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:

Human Resource Policies Beneficial to Women and Families Link:

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

Explanatory Notes:

Performance Indicator	Level	Performance Indicator Name	Unit	Performance Indicator Values						
				Year End Performance Standard 2025 - 2026	Actual Year End Performance 2025 - 2026	Performance Standard as Initially Appropriated 2026 - 2027	Existing Performance Standard 2026 - 2027	Performance at Continuation Budget Level 2027 - 2028	Performance at Executive Budget Level 2027 - 2028	Performance Standard as Initially Appropriated 2027 - 2028
24045	K	Administrative cost as a percentage of total cost	P	3	3.1	3	3	3	0	0

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

DEPARTMENT ID: 09 - LDH

AGENCY ID: 305 - Medical Vendor Administration

PROGRAM ID: 3052 - Medical Vendor Administration

PM OBJECTIVE: 3052-04 - 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:

Human Resource Policies Beneficial to Women and Families Link:

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

Explanatory Notes:

Performance Indicator	Level	Performance Indicator Name	Unit	Performance Indicator Values						
				Year End Performance Standard 2025 - 2026	Actual Year End Performance 2025 - 2026	Performance Standard as Initially Appropriated 2026 - 2027	Existing Performance Standard 2026 - 2027	Performance at Continuation Budget Level 2027 - 2028	Performance at Executive Budget Level 2027 - 2028	Performance Standard as Initially Appropriated 2027 - 2028
13375	S	Number of Local Education Agencies targeted for monitoring	N	36	45	36	36	36	0	0
13376	K	Percent of targeted Local Education Agencies monitored	P	100	100	100	100	100	0	0
25549	S	Number of Nursing Homes cost reports targeted for monitoring	N	125	95	125	125	95	0	0
25550	K	Percent of Nursing Home cost reports monitored	P	47	38	47	47	38	0	0
25551	S	Number of Intermediate Care Facilities (ICF) cost reports targeted for monitoring	N	93	92	93	93	93	0	0
25552	S	Percent of Intermediate Care Facilities (ICF) cost reports monitored	P	18	19	18	18	19	0	0
25553	S	Number of hospital cost reports reviewed and audited	N	355	370	372	372	360	0	0

Performance Indicator	Level	Footnotes
25549	S	FY28 performance standard reduced to reflect the decrease in the number of nursing home facilities to be audited, per the most recent contract.
25550	K	FY28 performance standard reduced to reflect the decrease in the number of nursing home facilities to be audited, per the most recent contract.

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

DEPARTMENT ID: 09 - LDH

AGENCY ID: 305 - Medical Vendor Administration

PROGRAM ID: 3052 - Medical Vendor Administration

PM OBJECTIVE: 3052-05 - 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:

Human Resource Policies Beneficial to Women and Families Link:

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

Explanatory Notes:

Performance Indicator	Level	Performance Indicator Name	Unit	Performance Indicator Values						
				Year End Performance Standard 2025 - 2026	Actual Year End Performance 2025 - 2026	Performance Standard as Initially Appropriated 2026 - 2027	Existing Performance Standard 2026 - 2027	Performance at Continuation Budget Level 2027 - 2028	Performance at Executive Budget Level 2027 - 2028	Performance Standard as Initially Appropriated 2027 - 2028
2215	K	Number of TPL claims processed	N	5,000,000	4,947,320	5,000,000	5,000,000	5,000,000	0	0
7957	K	Percentage of TPL claims processed through edits	P	92	86	92	92	92	0	0
7958	S	TPL trauma recovery amount	D	1,500,000	757,605	2,000,000	2,000,000	1,500,000	0	0

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

DEPARTMENT ID: 09 - LDH

AGENCY ID: 305 - Medical Vendor Administration

PROGRAM ID: 3052 - Medical Vendor Administration

Performance Indicator	Level	Performance Indicator Name	Unit	General Performance Information				
				Performance Indicator Values				
				Prior Year Actual FY2021 - 2022	Prior Year Actual FY2022 - 2023	Prior Year Actual FY2023 - 2024	Prior Year Actual FY2024 - 2025	Prior Year Actual FY2025 - 2026
12021	G	Number of claims available for TPL processing	N	411,408,159	85,640,148	77,636,391	51,357,731	46,814,437
12022	G	Percentage of TPL claims processed and cost avoided	P		8.52	6.27	8.37	10.57
13540	G	Amount identified as over claimed as a result of monitoring	D	18	42	355,474	1,907,003	626,758
16539	G	Number of Local Education Agency claims adjusted as a result of monitoring activities	N	43	98	24	22	44
24044	G	Funds recovered from third parties with a liability for services provided by Medicaid	D	18,052,756	31,306,648	93,498,422	38,487,211	45,975,660
24046	G	Percentage of State Plan amendments approved.	P	100	200	100	22	100
24047	G	Number of State Plan amendments submitted.	N	21	76	28	30	16
25554	G	Number of Nursing Homes cost reports adjusted as a result of monitoring activities	N	123	248	127	125	120
25555	G	Number of Intermediate Care Facility (ICF) cost reports adjusted as a result of monitoring activities	N	90	114	81	148	85

Performance Indicator	Level	Footnotes
7958	S	SFY26 actual year-end performance was understated due to a reporting error. The correct actual is 1,417,628.

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

DEPARTMENT ID: 09 - LDH

AGENCY ID: 305 - Medical Vendor Administration

PROGRAM ID: 3052 - Medical Vendor Administration

PM OBJECTIVE: 3052-06 - 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 were paid by Medicaid.

Children's Budget Link:

Human Resource Policies Beneficial to Women and Families Link:

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

Explanatory Notes:

Performance Indicator	Level	Performance Indicator Name	Unit	Performance Indicator Values						
				Year End Performance Standard 2025 - 2026	Actual Year End Performance 2025 - 2026	Performance Standard as Initially Appropriated 2026 - 2027	Existing Performance Standard 2026 - 2027	Performance at Continuation Budget Level 2027 - 2028	Performance at Executive Budget Level 2027 - 2028	Performance Standard as Initially Appropriated 2027 - 2028
25567	S	Estate recovery amount	D	800,000	1,012,151	800,000	800,000	800,000	0	0

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

DEPARTMENT ID: 09 - LDH

AGENCY ID: 305 - Medical Vendor Administration

PROGRAM ID: 3052 - Medical Vendor Administration

PM OBJECTIVE: 3052-07 - 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:

Human Resource Policies Beneficial to Women and Families Link:

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

Explanatory Notes:

Performance Indicator	Level	Performance Indicator Name	Unit	Performance Indicator Values						
				Year End Performance Standard 2025 - 2026	Actual Year End Performance 2025 - 2026	Performance Standard as Initially Appropriated 2026 - 2027	Existing Performance Standard 2026 - 2027	Performance at Continuation Budget Level 2027 - 2028	Performance at Executive Budget Level 2027 - 2028	Performance Standard as Initially Appropriated 2027 - 2028
25568	S	Recipient recovery amount	D	2,500,000	2,081,163	2,500,000	2,500,000	2,500,000	0	0

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

DEPARTMENT ID: 09 - LDH

AGENCY ID: 305 - Medical Vendor Administration

PROGRAM ID: 3052 - Medical Vendor Administration

PM OBJECTIVE: 3052-08 - 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:

Human Resource Policies Beneficial to Women and Families Link:

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

Explanatory Notes:

Performance Indicator	Level	Performance Indicator Name	Unit	Performance Indicator Values						
				Year End Performance Standard 2025 - 2026	Actual Year End Performance 2025 - 2026	Performance Standard as Initially Appropriated 2026 - 2027	Existing Performance Standard 2026 - 2027	Performance at Continuation Budget Level 2027 - 2028	Performance at Executive Budget Level 2027 - 2028	Performance Standard as Initially Appropriated 2027 - 2028
26580	K	Number of audits/reviews	N	2,000	1,742	1,300	1,300	1,300	0	0

Performance Indicator	Level	Performance Indicator Name	Unit	General Performance Information				
				Performance Indicator Values				
				Prior Year Actual FY2021 - 2022	Prior Year Actual FY2022 - 2023	Prior Year Actual FY2023 - 2024	Prior Year Actual FY2024 - 2025	Prior Year Actual FY2025 - 2026
26100	G	Number of Provider Exclusions	N	128	137	159	95	99
26581	G	Number of notices of actions issued for contract non-compliance	N	36	21	40	25	19
26582	G	Amount of overpayments identified Post and Pre-Pay	D	94,534,029	76,545,445	82,546,879	23,203,881	82,434,526
26583	G	Number of notices and referrals sent to the Attorney General	N	1,034	913	1,277	1,251	753
26584	G	Number of referrals to law enforcement	N	26	127	120	89	81
26640	G	Amount of monetary penalties assessed for contract non-compliance	D	4,333,188	1,633,000	6,486,197	4,344,500	6,194,353

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

DEPARTMENT ID: 09 - LDH

AGENCY ID: 305 - Medical Vendor Administration

PROGRAM ID: 3052 - Medical Vendor Administration

PM OBJECTIVE: 3052-09 - Through the Program Integrity Activity, identify and review recipient eligibility.

Children's Budget Link:

Human Resource Policies Beneficial to Women and Families Link:

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

Explanatory Notes:

Performance Indicator	Level	Performance Indicator Name	Unit	Performance Indicator Values						
				Year End Performance Standard 2025 - 2026	Actual Year End Performance 2025 - 2026	Performance Standard as Initially Appropriated 2026 - 2027	Existing Performance Standard 2026 - 2027	Performance at Continuation Budget Level 2027 - 2028	Performance at Executive Budget Level 2027 - 2028	Performance Standard as Initially Appropriated 2027 - 2028
26585	K	Number of reviews conducted	N	3,600	2,409	2,800	2,800	2,200	0	0

Performance Indicator	Level	Footnotes
26585	K	Performance standard reduced to reflect current operating practices. Based on staffing resources, review time, and historical productivity, the previous target is unlikely to be achievable.

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

DEPARTMENT ID: 09 - LDH

AGENCY ID: 305 - Medical Vendor Administration

PROGRAM ID: 3052 - Medical Vendor Administration

PM OBJECTIVE: 3052-11 - To process Administrative Disqualification Hearings (ADH) within 90 days of scheduling the hearings, and Public Assistance (PA) claimant appeal hearing requests within 90 days of receipt, as well as Supplemental Nutrition Assistance Program (SNAP) claimant appeal hearing requests within 60 days of receipt.

Children's Budget Link:

Human Resource Policies Beneficial to Women and Families Link:

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

Explanatory Notes:

Performance Indicator	Level	Performance Indicator Name	Unit	Performance Indicator Values						
				Year End Performance Standard 2025 - 2026	Actual Year End Performance 2025 - 2026	Performance Standard as Initially Appropriated 2026 - 2027	Existing Performance Standard 2026 - 2027	Performance at Continuation Budget Level 2027 - 2028	Performance at Executive Budget Level 2027 - 2028	Performance Standard as Initially Appropriated 2027 - 2028
3052001	K	Percentage of all SNAP appeal cases processed in compliance with federal and state regulations	P	90	100	90	90	92.5	0	0
3052002	K	Percentage of all ADH and PA appeal cases processed in compliance with federal and state regulations	P	95	100	95	95	92.5	0	0

Performance Indicator	Level	Footnotes
3052001	K	
3052002	K	Goal of processing Redeterminations has been reduced slightly to be more realistically achievable and closely align with federal reporting requirements.

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

DEPARTMENT ID: 09 - LDH

AGENCY ID: 305 - Medical Vendor Administration

PROGRAM ID: 3052 - Medical Vendor Administration

PM OBJECTIVE: 3052-12 - To provide direction, coordination, and control of the diverse operations of agency programs through investigations, establishment, and collection of inaccurate payments.

Children's Budget Link:

Human Resource Policies Beneficial to Women and Families Link:

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

Explanatory Notes:

Performance Indicator	Level	Performance Indicator Name	Unit	Performance Indicator Values						
				Year End Performance Standard 2025 - 2026	Actual Year End Performance 2025 - 2026	Performance Standard as Initially Appropriated 2026 - 2027	Existing Performance Standard 2026 - 2027	Performance at Continuation Budget Level 2027 - 2028	Performance at Executive Budget Level 2027 - 2028	Performance Standard as Initially Appropriated 2027 - 2028
30520019	S	Losses established	N	0	0	0	0	3,000,000	0	0
3052003	S	The percentage of cases referred for criminal prosecution	P	10	0.03	10	10	10	0	0
3052008	K	The number of cases referred for recovery action during the fiscal year	N	850	1,109	850	850	850	0	0
3052009	K	Collections made by the Fraud and Recovery Unit	D	2,000,000	3,166,588.31	2,000,000	2,000,000	2,000,000	0	0

Performance Indicator	Level	Performance Indicator Name	Unit	General Performance Information				
				Performance Indicator Values				
				Prior Year Actual FY2021 - 2022	Prior Year Actual FY2022 - 2023	Prior Year Actual FY2023 - 2024	Prior Year Actual FY2024 - 2025	Prior Year Actual FY2025 - 2026
3052005	G	Number of program recipients disqualified due to fraud	N	271	224	369	391	241
3052007	G	Number of prosecutions completed	N	40	11	13	13	11

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

DEPARTMENT ID: 09 - LDH

AGENCY ID: 305 - Medical Vendor Administration

PROGRAM ID: 3052 - Medical Vendor Administration

PM OBJECTIVE: 3052-13 - To ensure that eligible clients receive assistance to promote self-sufficiency through the Supplemental Nutrition Assistance Program (SNAP) by processing redeterminations and applications within required timeframes, and maintaining or improving the SNAP payment accuracy rates

Children's Budget Link:

Human Resource Policies Beneficial to Women and Families Link:

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

Explanatory Notes:

Performance Indicator	Level	Performance Indicator Name	Unit	Performance Indicator Values						
				Year End Performance Standard 2025 - 2026	Actual Year End Performance 2025 - 2026	Performance Standard as Initially Appropriated 2026 - 2027	Existing Performance Standard 2026 - 2027	Performance at Continuation Budget Level 2027 - 2028	Performance at Executive Budget Level 2027 - 2028	Performance Standard as Initially Appropriated 2027 - 2028
3052010	K	SNAP recipiency rate	N	75	58.84	75	75	75	0	0
3052011	K	Percentage of recertifications processed timely in the current year	P	95	65.4	95	95	92.5	0	0
3052012	K	Percentage of applications processed timely in the current year	P	95	76.64	95	95	92.5	0	0
3052013	K	Percentage of total SNAP benefit dollars issued accurately	P	95	93.05	95	95	95	0	0
3052014	S	Total value of SNAP benefits (yearly in millions)	D	1,800	743.3	1,800	1,800	1,600	0	0

Performance Indicator	Level	Footnotes
3052011	K	Goal of issuing SNAP dollars accurately has been reduced slightly to be more realistically achievable and closely align with federal reporting requirements.
3052012	K	Goal of issuing SNAP dollars accurately has been reduced slightly to be more realistically achievable and closely align with federal reporting requirements.

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

DEPARTMENT ID: 09 - LDH

AGENCY ID: 305 - Medical Vendor Administration

PROGRAM ID: 3052 - Medical Vendor Administration

PM OBJECTIVE: 3052-14 - Provide eligible clients cash assistance to promote self-sufficiency through the Family Independence Temporary Assistance Program (FITAP) and Kinship Care Subsidy Program (KCSP) by processing redeterminations and applications within required timeframes.

Children's Budget Link:

Human Resource Policies Beneficial to Women and Families Link:

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

Explanatory Notes:

Performance Indicator	Level	Performance Indicator Name	Unit	Performance Indicator Values						
				Year End Performance Standard 2025 - 2026	Actual Year End Performance 2025 - 2026	Performance Standard as Initially Appropriated 2026 - 2027	Existing Performance Standard 2026 - 2027	Performance at Continuation Budget Level 2027 - 2028	Performance at Executive Budget Level 2027 - 2028	Performance Standard as Initially Appropriated 2027 - 2028
3052015	K	Percentage of applications completed within 30 days of application date	P	95	65.81	95	95	92.5	0	0
3052016	K	Percentage of redeterminations completed within the redetermination month	P	95	55.56	95	95	92.5	0	0

Performance Indicator	Level	Performance Indicator Name	Unit	General Performance Information				
				Performance Indicator Values				
				Prior Year Actual FY2021 - 2022	Prior Year Actual FY2022 - 2023	Prior Year Actual FY2023 - 2024	Prior Year Actual FY2024 - 2025	Prior Year Actual FY2025 - 2026
3052017	G	Average FITAP monthly payments	D	948.32	442.49	444	598.19	454.19
3052018	G	Total FITAP and Kinship Care annual payments (in millions)	D	33.68	43.1	33	33.7	13.2

Performance Indicator	Level	Footnotes
3052015	K	Total value of SNAP benefits has been reduced to align with the latest year's average of SNAP Households.
3052016	K	Total value of SNAP benefits has been reduced to align with the latest year's average of SNAP Households.



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Budget Request Overview

AGENCY SUMMARY STATEMENT

Total Agency

Means of Financing

Description	FY2025-2026 Actuals	Existing Operating Budget as of 10/01/2026	FY2027-2028 Total Request	Over/Under EOB	Percent Change
STATE GENERAL FUND (Direct)	187,332,162	289,600,336	390,056,892	100,456,556	34.69%
STATE GENERAL FUND BY:	—	—	—	—	—
INTERAGENCY TRANSFERS	3,349,728	41,665,571	41,749,966	84,395	0.20%
FEES & SELF-GENERATED	—	4,200,000	4,200,000	—	—
STATUTORY DEDICATIONS	6,523,680	1,228,748	1,228,748	—	—
FEDERAL FUNDS	404,113,290	639,550,561	574,149,764	(65,400,797)	(10.23)%
TOTAL MEANS OF FINANCING	**$601,318,860**	**$976,245,216**	**$1,011,385,370**	**$35,140,154**	**3.60%**

Fees and Self-Generated

Description	FY2025-2026 Actuals	Existing Operating Budget as of 10/01/2026	FY2027-2028 Total Request	Over/Under EOB	Percent Change
Fees & Self-generated Revenues	—	4,200,000	4,200,000	—	—
Total:	**—**	**$4,200,000**	**$4,200,000**	**—**	**—**

Statutory Dedications

Description	FY2025-2026 Actuals	Existing Operating Budget as of 10/01/2026	FY2027-2028 Total Request	Over/Under EOB	Percent Change
Medical Assistance Programs Fraud Detection Fund	1,407,500	—	—	—	—
Fraud Detection Fund	116,180	724,294	724,294	—	—
Modernization And Security Fund	5,000,000	504,454	504,454	—	—
Total:	**$6,523,680**	**$1,228,748**	**$1,228,748**	**—**	**—**

Agency Expenditures

Description	FY2025-2026 Actuals	Existing Operating Budget as of 10/01/2026	FY2027-2028 Total Request	Over/Under EOB	Percent Change
Salaries	101,249,951	130,006,436	133,278,311	3,271,875	2.52%
Other Compensation	4,411,699	1,881,082	2,017,814	136,732	7.27%
Related Benefits	55,810,563	65,327,154	68,388,951	3,061,797	4.69%
TOTAL PERSONAL SERVICES	**$161,472,213**	**$197,214,672**	**$203,685,076**	**$6,470,404**	**3.28%**
Travel	294,566	338,668	346,630	7,962	2.35%
Operating Services	7,308,906	13,187,831	11,736,822	(1,451,009)	(11.00)%
Supplies	266,553	411,862	421,650	9,788	2.38%
TOTAL OPERATING EXPENSES	**$7,870,025**	**$13,938,361**	**$12,505,102**	**$(1,433,259)**	**(10.28)%**
PROFESSIONAL SERVICES	**$154,606,722**	**$290,039,644**	**$300,969,618**	**$10,929,974**	**3.77%**
Other Charges	117,305,891	189,370,143	191,827,643	2,457,500	1.30%
Debt Service	—	—	—	—	—
Interagency Transfers	160,064,010	285,682,396	302,397,931	16,715,535	5.85%
TOTAL OTHER CHARGES	**$277,369,901**	**$475,052,539**	**$494,225,574**	**$19,173,035**	**4.04%**
Acquisitions	—	—	—	—	—
Major Repairs	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	**—**	**—**	**—**	**—**	**—**
TOTAL EXPENDITURES	**$601,318,860**	**$976,245,216**	**$1,011,385,370**	**$35,140,154**	**3.60%**

Agency Positions

Classified	2,154	2,143	2,151	8	0.37%
Unclassified	4	10	10	—	—
TOTAL AUTHORIZED T.O. POSITIONS	2,158	2,153	2,161	8	0.37%
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	—	—	—	—	—
TOTAL NON-T.O. FTE POSITIONS	118	114	106	(8)	(7.02)%
TOTAL POSITIONS	2,276	2,267	2,267	—	—

Cost Detail

Means of Financing

Description	FY2025-2026 Actuals	Existing Operating Budget as of 10/01/2026	FY2027-2028 Total Request	Over/Under EOB
State General Fund	187,332,162	289,600,336	390,056,892	100,456,556
Interagency Transfers	3,349,728	41,665,571	41,749,966	84,395
Fees & Self-generated Revenues	—	4,200,000	4,200,000	—
Medical Assistance Programs Fraud Detection Fund	1,407,500	—	—	—
Fraud Detection Fund	116,180	724,294	724,294	—
Modernization And Security Fund	5,000,000	504,454	504,454	—
Federal Funds	404,113,290	639,550,561	574,149,764	(65,400,797)
Total:	**$601,318,860**	**$976,245,216**	**$1,011,385,370**	**$35,140,154**

Salaries

Commitment Item	Name	FY2025-2026 Actuals	Existing Operating Budget as of 10/01/2026	FY2027-2028 Total Request	Over/Under EOB
5110010	SAL-CLASS-TO-REG	98,622,518	126,632,772	129,832,015	3,199,243
5110015	SAL-CLASS-TO-OT	361,168	463,746	463,746	—
5110020	SAL-CLASS-TO-TERM	1,005,207	1,290,701	1,290,701	—
5110025	SAL-UNCLASS-TO-REG	1,259,582	1,617,323	1,689,955	72,632
5110030	SAL-UNCLASS-TO-OT	918	1,180	1,180	—
5110035	SAL-UNCLASS-TO-TERM	558	714	714	—
Total Salaries:		**$101,249,951**	**$130,006,436**	**$133,278,311**	**$3,271,875**

Other Compensation

Commitment Item	Name	FY2025-2026 Actuals	Existing Operating Budget as of 10/01/2026	FY2027-2028 Total Request	Over/Under EOB
5120010	COMPENSATION/WAGES	4,381,119	1,868,043	2,004,775	136,732
5120035	STUDENT LABOR	10,320	4,402	4,402	—
5120105	COMP-CL-NON TO-OT	13,832	5,897	5,897	—
5120110	COMP-CL-NON TO-TERM	6,429	2,740	2,740	—
Total Other Compensation:		**$4,411,699**	**$1,881,082**	**$2,017,814**	**$136,732**

Related Benefits

Commitment Item	Name	FY2025-2026 Actuals	Existing Operating Budget as of 10/01/2026	FY2027-2028 Total Request	Over/Under EOB
5130000	TOTAL RELATED BENF	—	—	107,416	107,416
5130010	RET CONTR-STATE EMP	31,604,297	36,993,335	39,947,716	2,954,381
5130015	RET CONTR-SCHOOL EMP	8,138	9,525	9,525	—
5130020	RET CONTR-TEACHERS	242,923	284,346	284,346	—
5130050	POSTRET BENEFITS	7,583,057	8,876,090	8,876,090	—
5130055	FICA TAX (OASDI)	70,779	82,845	82,845	—
5130060	MEDICARE TAX	1,426,436	1,669,667	1,669,667	—
5130070	GRP INS CONTRIBUTION	14,866,890	17,401,933	17,401,933	—
5130090	TAXABLE FRINGE BEN	8,043	9,413	9,413	—
Total Related Benefits:		**$55,810,563**	**$65,327,154**	**$68,388,951**	**$3,061,797**

Travel

Commitment Item	Name	FY2025-2026 Actuals	Existing Operating Budget as of 10/01/2026	FY2027-2028 Total Request	Over/Under EOB
5200000	TOTAL TRAVEL	—	338,668	346,630	7,962
5210010	IN-STATE TRAVEL-ADM	1,938	—	—	—
5210015	IN-STATE TRAVEL-CONF	36,464	—	—	—
5210020	IN-STATE TRAV-FIELD	61,900	—	—	—
5210030	IN-STATE TRV-IT/TRN	354	—	—	—
5210050	OUT-OF-STATE TRV-ADM	3,355	—	—	—
5210055	OUT-OF-STTRV-CONF	172,358	—	—	—
5210060	OUT-OF-STTRV-FIELD	4,903	—	—	—
5210070	OUT-OF-STTRV-IT/TRN	2,700	—	—	—
5210110	CONFERENCE REG FEES	10,594	—	—	—
Total Travel:		**$294,566**	**$338,668**	**$346,630**	**$7,962**

Operating Services

Commitment Item	Name	FY2025-2026 Actuals	Existing Operating Budget as of 10/01/2026	FY2027-2028 Total Request	Over/Under EOB
5300000	TOTAL OPERATING SERV	—	13,187,831	11,736,822	(1,451,009)
5310001	SERV-ADVERTISING	22,885	—	—	—
5310005	SERV-PRINTING	12,298	—	—	—
5310010	SERV-DUES & OTHER	13,544	—	—	—
5310011	SERV-SUBSCRIPTIONS	4,997	—	—	—
5310012	SERV-DATA MODEL/MAP	61,636	—	—	—
5310014	SERV-DRUG TESTING	2,517	—	—	—
5310015	SERV-SECURITY	680,476	—	—	—
5310017	SERV-DOC DESTRUCTION	17,293	—	—	—
5310030	SERV-ADMIN FEES	860	—	—	—
5310049	SERV-DUES & OTHER	2,000	—	—	—
5310050	SERV-DUES & OTHER	339	—	—	—
5310400	SERV-MISC	28,055	—	—	—
5330001	MAINT-BUILDINGS	72,106	—	—	—
5330007	MAINT-PROPERTY	1,650	—	—	—
5330008	MAINT-EQUIPMENT	880	—	—	—
5330012	MAINT-JANITORIAL	8,384	—	—	—
5330018	MAINT-AUTO REPAIRS	123	—	—	—
5340010	RENT-REAL ESTATE	6,047,158	—	—	—
5340020	RENT-EQUIPMENT	229,068	—	—	—
5340045	RENT-STORAGE SPACE	34,873	—	—	—
5350002	UTIL-DATA LINE/CIRCT	10,428	—	—	—
5350004	UTIL-TELEPHONE SERV	52,739	—	—	—
5350008	UTIL-DEL UPS/FED EXP	2,790	—	—	—
5350018	UTIL-MAIL/DEL/POST	1,809	—	—	—
Total Operating Services:		**$7,308,906**	**$13,187,831**	**$11,736,822**	**$(1,451,009)**

Supplies

Commitment Item	Name	FY2025-2026 Actuals	Existing Operating Budget as of 10/01/2026	FY2027-2028 Total Request	Over/Under EOB
5400000	TOTAL SUPPLIES	—	411,862	421,650	9,788
5410001	SUP-OFFICE SUPPLIES	196,413	—	—	—
5410006	SUP-COMPUTER	7,601	—	—	—
5410010	SUP-TEXTBOOKS	665	—	—	—
5410013	SUP-FOOD & BEVERAGE	18,469	—	—	—
5410036	SUP-FUELTRAC	6,925	—	—	—
5410053	SUP-PROT APP & EQUIP	(100)	—	—	—
5410400	SUP-OTHER	36,580	—	—	—
Total Supplies:		**$266,553**	**$411,862**	**$421,650**	**$9,788**

Professional Services

Commitment Item	Name	FY2025-2026 Actuals	Existing Operating Budget as of 10/01/2026	FY2027-2028 Total Request	Over/Under EOB
5500000	TOTAL PROF SERVICES	—	290,039,644	288,145,181	(1,894,463)
5510001	PROF SERV-ACCT/AUDIT	15,318,286	—	—	—
5510005	PROF SERV-LEGAL	21,245	—	—	—
5510007	PROF SERV-MED/DEN	57,410,502	—	—	—
5510020	PROF SERV-BLD/CONSTR	1,367	—	—	—
5510028	PROF SERV-ADV/PRINT	159,490	—	—	—
5510400	PROF SERV-OTHER	81,695,832	—	12,824,437	12,824,437
Total Professional Services:		**$154,606,722**	**$290,039,644**	**$300,969,618**	**$10,929,974**

Other Charges

Commitment Item	Name	FY2025-2026 Actuals	Existing Operating Budget as of 10/01/2026	FY2027-2028 Total Request	Over/Under EOB
5600000	TOTAL OTHER CHARGES	—	189,370,143	191,827,643	2,457,500
5610015	LOC AID-MEDICAID PMT	54,139,134	—	—	—
5610020	PUBLIC ASST-HEALTH	1,246,271	—	—	—
5620044	MISC-RECOUP STEE PY	(8)	—	—	—

Other Charges *(continued)*

Commitment Item	Name	FY2025-2026 Actuals	Existing Operating Budget as of 10/01/2026	FY2027-2028 Total Request	Over/Under EOB
5620056	MISC-CONTRACTUAL SRV	282,428	—	—	—
5620064	MISC-PROF SVCS	61,551,106	—	—	—
5620065	MISC-SUPPLIES OTHER	(1,501)	—	—	—
5620068	MISC-ACQ/MAJ REP OTH	1,318	—	—	—
5620076	MISC-OC-WAGES	57,784	—	—	—
5620078	MISC-OC-RETIRE-STEM	19,155	—	—	—
5620082	MISC-OC-MEDICARE TAX	781	—	—	—
5620083	MISC-OC-GRP INS CONT	5,490	—	—	—
5620137	MISC-OC-PS-MEDICAL	3,933	—	—	—
Total Other Charges:		**$117,305,891**	**$189,370,143**	**$191,827,643**	**$2,457,500**

Interagency Transfers

Commitment Item	Name	FY2025-2026 Actuals	Existing Operating Budget as of 10/01/2026	FY2027-2028 Total Request	Over/Under EOB
5950000	TOTAL IAT	—	99,604,382	81,949,798	(17,654,584)
5950001	IAT-COMMODITY/SERV	1,511,755	—	—	—
5950003	IAT-COMPENSATION	2,685,361	—	—	—
5950004	IAT-RELATED BENEFITS	810,639	—	—	—
5950007	IAT-PRINTING	5,539,473	—	—	—
5950008	IAT-POSTAGE	4,569,490	—	—	—
5950014	IAT-TELEPHONE	4,075,105	—	—	—
5950017	IAT-INSURANCE	557,776	—	—	—
5950026	IAT-RENTALS	905,296	—	—	—
5950030	IAT-MEDICAL SERVICES	93,028	—	—	—
5950032	IAT-ADMIN IND COST	4,053,593	—	—	—
5950033	IAT-INTER AGY TRANS	28,142,221	—	5,631,247	5,631,247
5950053	IAT-STATE TREASURER	720,034	—	—	—
5950055	IAT-ADMIN LAW JUDGE	1,806,716	—	—	—

Interagency Transfers *(continued)*

Commitment Item	Name	FY2025-2026 Actuals	Existing Operating Budget as of 10/01/2026	FY2027-2028 Total Request	Over/Under EOB
5950058	IAT-TECH SVCS	104,520,611	186,078,014	214,816,886	28,738,872
5950059	IAT-ST PROCUREMENT	72,912	—	—	—
Total Interagency Transfers:		**$160,064,010**	**$285,682,396**	**$302,397,931**	**$16,715,535**
Total Agency Expenditures:		**$601,318,860**	**$976,245,216**	**$1,011,385,370**	**$35,140,154**

PROGRAM SUMMARY STATEMENT

3052 - Medical Vendor Administration

Means of Financing

Description	FY2025-2026 Actuals	Existing Operating Budget as of 10/01/2026	FY2027-2028 Total Request	Over/Under EOB	Percent Change
STATE GENERAL FUND (Direct)	187,332,162	289,600,336	390,056,892	100,456,556	34.69%
STATE GENERAL FUND BY:	—	—	—	—	—
INTERAGENCY TRANSFERS	3,349,728	41,665,571	41,749,966	84,395	0.20%
FEES & SELF-GENERATED	—	4,200,000	4,200,000	—	—
STATUTORY DEDICATIONS	6,523,680	1,228,748	1,228,748	—	—
FEDERAL FUNDS	404,113,290	639,550,561	574,149,764	(65,400,797)	(10.23)%
TOTAL MEANS OF FINANCING	**$601,318,860**	**$976,245,216**	**$1,011,385,370**	**$35,140,154**	**3.60%**

Fees and Self-Generated

Description	FY2025-2026 Actuals	Existing Operating Budget as of 10/01/2026	FY2027-2028 Total Request	Over/Under EOB	Percent Change
Fees & Self-generated Revenues	—	4,200,000	4,200,000	—	—
Total:	**—**	**$4,200,000**	**$4,200,000**	**—**	**—**

Statutory Dedications

Description	FY2025-2026 Actuals	Existing Operating Budget as of 10/01/2026	FY2027-2028 Total Request	Over/Under EOB	Percent Change
Medical Assistance Programs Fraud Detection Fund	1,407,500	—	—	—	—
Fraud Detection Fund	116,180	724,294	724,294	—	—
Modernization And Security Fund	5,000,000	504,454	504,454	—	—
Total:	**$6,523,680**	**$1,228,748**	**$1,228,748**	**—**	**—**

Program Expenditures

Description	FY2025-2026 Actuals	Existing Operating Budget as of 10/01/2026	FY2027-2028 Total Request	Over/Under EOB	Percent Change
Salaries	101,249,951	130,006,436	133,278,311	3,271,875	2.52%
Other Compensation	4,411,699	1,881,082	2,017,814	136,732	7.27%
Related Benefits	55,810,563	65,327,154	68,388,951	3,061,797	4.69%
TOTAL PERSONAL SERVICES	**$161,472,213**	**$197,214,672**	**$203,685,076**	**$6,470,404**	**3.28%**
Travel	294,566	338,668	346,630	7,962	2.35%
Operating Services	7,308,906	13,187,831	11,736,822	(1,451,009)	(11.00)%
Supplies	266,553	411,862	421,650	9,788	2.38%
TOTAL OPERATING EXPENSES	**$7,870,025**	**$13,938,361**	**$12,505,102**	**$(1,433,259)**	**(10.28)%**
PROFESSIONAL SERVICES	**$154,606,722**	**$290,039,644**	**$300,969,618**	**$10,929,974**	**3.77%**
Other Charges	117,305,891	189,370,143	191,827,643	2,457,500	1.30%
Debt Service	—	—	—	—	—
Interagency Transfers	160,064,010	285,682,396	302,397,931	16,715,535	5.85%
TOTAL OTHER CHARGES	**$277,369,901**	**$475,052,539**	**$494,225,574**	**$19,173,035**	**4.04%**
Acquisitions	—	—	—	—	—
Major Repairs	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	**—**	**—**	**—**	**—**	**—**
TOTAL EXPENDITURES	**$601,318,860**	**$976,245,216**	**$1,011,385,370**	**$35,140,154**	**3.60%**

Program Positions

Classified	2,154	2,143	2,151	8	0.37%
Unclassified	4	10	10	—	—
TOTAL AUTHORIZED T.O. POSITIONS	2,158	2,153	2,161	8	0.37%
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	—	—	—	—	—
TOTAL NON-T.O. FTE POSITIONS	118	114	106	(8)	(7.02)%
TOTAL POSITIONS	2,276	2,267	2,267	—	—

Cost Detail

Means of Financing

Description	FY2025-2026 Actuals	Existing Operating Budget as of 10/01/2026	FY2027-2028 Total Request	Over/Under EOB
State General Fund	187,332,162	289,600,336	390,056,892	100,456,556
Interagency Transfers	3,349,728	41,665,571	41,749,966	84,395
Fees & Self-generated Revenues	—	4,200,000	4,200,000	—
Medical Assistance Programs Fraud Detection Fund	1,407,500	—	—	—
Fraud Detection Fund	116,180	724,294	724,294	—
Modernization And Security Fund	5,000,000	504,454	504,454	—
Federal Funds	404,113,290	639,550,561	574,149,764	(65,400,797)
Total:	**$601,318,860**	**$976,245,216**	**$1,011,385,370**	**$35,140,154**

Salaries

Commitment Item	Name	FY2025-2026 Actuals	Existing Operating Budget as of 10/01/2026	FY2027-2028 Total Request	Over/Under EOB
5110010	SAL-CLASS-TO-REG	98,622,518	126,632,772	129,832,015	3,199,243
5110015	SAL-CLASS-TO-OT	361,168	463,746	463,746	—
5110020	SAL-CLASS-TO-TERM	1,005,207	1,290,701	1,290,701	—
5110025	SAL-UNCLASS-TO-REG	1,259,582	1,617,323	1,689,955	72,632
5110030	SAL-UNCLASS-TO-OT	918	1,180	1,180	—
5110035	SAL-UNCLASS-TO-TERM	558	714	714	—
Total Salaries:		**$101,249,951**	**$130,006,436**	**$133,278,311**	**$3,271,875**

Other Compensation

Commitment Item	Name	FY2025-2026 Actuals	Existing Operating Budget as of 10/01/2026	FY2027-2028 Total Request	Over/Under EOB
5120010	COMPENSATION/WAGES	4,381,119	1,868,043	2,004,775	136,732
5120035	STUDENT LABOR	10,320	4,402	4,402	—
5120105	COMP-CL-NON TO-OT	13,832	5,897	5,897	—
5120110	COMP-CL-NON TO-TERM	6,429	2,740	2,740	—
Total Other Compensation:		**$4,411,699**	**$1,881,082**	**$2,017,814**	**$136,732**

Related Benefits

Commitment Item	Name	FY2025-2026 Actuals	Existing Operating Budget as of 10/01/2026	FY2027-2028 Total Request	Over/Under EOB
5130000	TOTAL RELATED BENF	—	—	107,416	107,416
5130010	RET CONTR-STATE EMP	31,604,297	36,993,335	39,947,716	2,954,381
5130015	RET CONTR-SCHOOL EMP	8,138	9,525	9,525	—
5130020	RET CONTR-TEACHERS	242,923	284,346	284,346	—
5130050	POSTRET BENEFITS	7,583,057	8,876,090	8,876,090	—
5130055	FICA TAX (OASDI)	70,779	82,845	82,845	—
5130060	MEDICARE TAX	1,426,436	1,669,667	1,669,667	—
5130070	GRP INS CONTRIBUTION	14,866,890	17,401,933	17,401,933	—
5130090	TAXABLE FRINGE BEN	8,043	9,413	9,413	—
Total Related Benefits:		**$55,810,563**	**$65,327,154**	**$68,388,951**	**$3,061,797**

Travel

Commitment Item	Name	FY2025-2026 Actuals	Existing Operating Budget as of 10/01/2026	FY2027-2028 Total Request	Over/Under EOB
5200000	TOTAL TRAVEL	—	338,668	346,630	7,962
5210010	IN-STATE TRAVEL-ADM	1,938	—	—	—
5210015	IN-STATE TRAVEL-CONF	36,464	—	—	—
5210020	IN-STATE TRAV-FIELD	61,900	—	—	—
5210030	IN-STATE TRV-IT/TRN	354	—	—	—
5210050	OUT-OF-STATE TRV-ADM	3,355	—	—	—
5210055	OUT-OF-STTRV-CONF	172,358	—	—	—
5210060	OUT-OF-STTRV-FIELD	4,903	—	—	—
5210070	OUT-OF-STTRV-IT/TRN	2,700	—	—	—
5210110	CONFERENCE REG FEES	10,594	—	—	—
Total Travel:		**$294,566**	**$338,668**	**$346,630**	**$7,962**

Operating Services

Commitment Item	Name	FY2025-2026 Actuals	Existing Operating Budget as of 10/01/2026	FY2027-2028 Total Request	Over/Under EOB
5300000	TOTAL OPERATING SERV	—	13,187,831	11,736,822	(1,451,009)
5310001	SERV-ADVERTISING	22,885	—	—	—
5310005	SERV-PRINTING	12,298	—	—	—
5310010	SERV-DUES & OTHER	13,544	—	—	—
5310011	SERV-SUBSCRIPTIONS	4,997	—	—	—
5310012	SERV-DATA MODEL/MAP	61,636	—	—	—
5310014	SERV-DRUG TESTING	2,517	—	—	—
5310015	SERV-SECURITY	680,476	—	—	—
5310017	SERV-DOC DESTRUCTION	17,293	—	—	—
5310030	SERV-ADMIN FEES	860	—	—	—
5310049	SERV-DUES & OTHER	2,000	—	—	—
5310050	SERV-DUES & OTHER	339	—	—	—
5310400	SERV-MISC	28,055	—	—	—
5330001	MAINT-BUILDINGS	72,106	—	—	—
5330007	MAINT-PROPERTY	1,650	—	—	—
5330008	MAINT-EQUIPMENT	880	—	—	—
5330012	MAINT-JANITORIAL	8,384	—	—	—
5330018	MAINT-AUTO REPAIRS	123	—	—	—
5340010	RENT-REAL ESTATE	6,047,158	—	—	—
5340020	RENT-EQUIPMENT	229,068	—	—	—
5340045	RENT-STORAGE SPACE	34,873	—	—	—
5350002	UTIL-DATA LINE/CIRCT	10,428	—	—	—
5350004	UTIL-TELEPHONE SERV	52,739	—	—	—
5350008	UTIL-DEL UPS/FED EXP	2,790	—	—	—
5350018	UTIL-MAIL/DEL/POST	1,809	—	—	—
Total Operating Services:		**$7,308,906**	**$13,187,831**	**$11,736,822**	**$(1,451,009)**

Supplies

Commitment Item	Name	FY2025-2026 Actuals	Existing Operating Budget as of 10/01/2026	FY2027-2028 Total Request	Over/Under EOB
5400000	TOTAL SUPPLIES	—	411,862	421,650	9,788
5410001	SUP-OFFICE SUPPLIES	196,413	—	—	—
5410006	SUP-COMPUTER	7,601	—	—	—
5410010	SUP-TEXTBOOKS	665	—	—	—
5410013	SUP-FOOD & BEVERAGE	18,469	—	—	—
5410036	SUP-FUELTRAC	6,925	—	—	—
5410053	SUP-PROT APP & EQUIP	(100)	—	—	—
5410400	SUP-OTHER	36,580	—	—	—
Total Supplies:		**$266,553**	**$411,862**	**$421,650**	**$9,788**

Professional Services

Commitment Item	Name	FY2025-2026 Actuals	Existing Operating Budget as of 10/01/2026	FY2027-2028 Total Request	Over/Under EOB
5500000	TOTAL PROF SERVICES	—	290,039,644	288,145,181	(1,894,463)
5510001	PROF SERV-ACCT/AUDIT	15,318,286	—	—	—
5510005	PROF SERV-LEGAL	21,245	—	—	—
5510007	PROF SERV-MED/DEN	57,410,502	—	—	—
5510020	PROF SERV-BLD/CONSTR	1,367	—	—	—
5510028	PROF SERV-ADV/PRINT	159,490	—	—	—
5510400	PROF SERV-OTHER	81,695,832	—	12,824,437	12,824,437
Total Professional Services:		**$154,606,722**	**$290,039,644**	**$300,969,618**	**$10,929,974**

Other Charges

Commitment Item	Name	FY2025-2026 Actuals	Existing Operating Budget as of 10/01/2026	FY2027-2028 Total Request	Over/Under EOB
5600000	TOTAL OTHER CHARGES	—	189,370,143	191,827,643	2,457,500
5610015	LOC AID-MEDICAID PMT	54,139,134	—	—	—
5610020	PUBLIC ASST-HEALTH	1,246,271	—	—	—
5620044	MISC-RECOUP STEE PY	(8)	—	—	—

Other Charges *(continued)*

Commitment Item	Name	FY2025-2026 Actuals	Existing Operating Budget as of 10/01/2026	FY2027-2028 Total Request	Over/Under EOB
5620056	MISC-CONTRACTUAL SRV	282,428	—	—	—
5620064	MISC-PROF SVCS	61,551,106	—	—	—
5620065	MISC-SUPPLIES OTHER	(1,501)	—	—	—
5620068	MISC-ACQ/MAJ REP OTH	1,318	—	—	—
5620076	MISC-OC-WAGES	57,784	—	—	—
5620078	MISC-OC-RETIRE-STEM	19,155	—	—	—
5620082	MISC-OC-MEDICARE TAX	781	—	—	—
5620083	MISC-OC-GRP INS CONT	5,490	—	—	—
5620137	MISC-OC-PS-MEDICAL	3,933	—	—	—
Total Other Charges:		**$117,305,891**	**$189,370,143**	**$191,827,643**	**$2,457,500**

Interagency Transfers

Commitment Item	Name	FY2025-2026 Actuals	Existing Operating Budget as of 10/01/2026	FY2027-2028 Total Request	Over/Under EOB
5950000	TOTAL IAT	—	99,604,382	81,949,798	(17,654,584)
5950001	IAT-COMMODITY/SERV	1,511,755	—	—	—
5950003	IAT-COMPENSATION	2,685,361	—	—	—
5950004	IAT-RELATED BENEFITS	810,639	—	—	—
5950007	IAT-PRINTING	5,539,473	—	—	—
5950008	IAT-POSTAGE	4,569,490	—	—	—
5950014	IAT-TELEPHONE	4,075,105	—	—	—
5950017	IAT-INSURANCE	557,776	—	—	—
5950026	IAT-RENTALS	905,296	—	—	—
5950030	IAT-MEDICAL SERVICES	93,028	—	—	—
5950032	IAT-ADMIN IND COST	4,053,593	—	—	—
5950033	IAT-INTER AGY TRANS	28,142,221	—	5,631,247	5,631,247
5950053	IAT-STATE TREASURER	720,034	—	—	—
5950055	IAT-ADMIN LAW JUDGE	1,806,716	—	—	—

Interagency Transfers *(continued)*

Commitment Item	Name	FY2025-2026 Actuals	Existing Operating Budget as of 10/01/2026	FY2027-2028 Total Request	Over/Under EOB
5950058	IAT-TECH SVCS	104,520,611	186,078,014	214,816,886	28,738,872
5950059	IAT-ST PROCUREMENT	72,912	—	—	—
Total Interagency Transfers:		**$160,064,010**	**$285,682,396**	**$302,397,931**	**$16,715,535**
Total Expenditures for Program 3052		**$601,318,860**	**$976,245,216**	**$1,011,385,370**	**$35,140,154**
Total Agency Expenditures:		**$601,318,860**	**$976,245,216**	**$1,011,385,370**	**$35,140,154**

SOURCE OF FUNDING SUMMARY

Agency Overview

Interagency Transfers

Description	FY2025-2026 Actuals	Existing Operating Budget as of 10/01/2026	FY2027-2028 Total Request	Over/Under EOB	Form ID
DEPT OF CORRECTIONS	—	202,875	202,875	—	56354
DCFS	—	270,797	270,797	—	56370
LDH-OBH	—	26,000	26,000	—	56411
LDH-MVP	—	—	—	—	56748
DCFS	—	41,165,899	41,250,294	84,395	56794
Total Interagency Transfers	**—**	**$41,665,571**	**$41,749,966**	**$84,395**	

Fees & Self-generated

Description	FY2025-2026 Actuals	Existing Operating Budget as of 10/01/2026	FY2027-2028 Total Request	Over/Under EOB	Form ID
MISC SELF-GEN REVENUE	—	250,000	250,000	—	56373
MEDICAID OUTSTATIONING	—	3,600,000	3,600,000	—	56399
FEES & SELF GENERATED	—	350,000	350,000	—	56400
Total Fees & Self-generated	**—**	**$4,200,000**	**$4,200,000**	**—**	

Statutory Dedications

Description	FY2025-2026 Actuals	Existing Operating Budget as of 10/01/2026	FY2027-2028 Total Request	Over/Under EOB	Form ID
H14-MED ASST FRAUD FUND	1,407,500	—	—	—	56374
DCFS	—	724,294	724,294	—	56794
LDH-MVA	—	504,454	504,454	—	56826
Total Statutory Dedications	**$1,407,500**	**$1,228,748**	**$1,228,748**	**—**	

Federal Funds

Description	FY2025-2026 Actuals	Existing Operating Budget as of 10/01/2026	FY2027-2028 Total Request	Over/Under EOB	Form ID
CHIP	126,952	16,800,000	16,800,000	—	56395
MAP REFUGEE	37,746	165,565	165,565	—	56396
MONEY FOLLOWS THE PERSON	2,927,338	4,310,730	4,310,730	—	56397
SCHOOL BASED ADMIN	15,173,814	7,500,000	7,500,000	—	56398
MEDICAID	333,859,334	465,901,662	456,759,395	(9,142,267)	56401
TRANSFER	—	674,603	674,603	—	56793
DCFS	—	144,198,001	144,198,001	—	56794

Federal Funds *(continued)*

Description	FY2025-2026 Actuals	Existing Operating Budget as of 10/01/2026	FY2027-2028 Total Request	Over/Under EOB	Form ID
LDH-MVA	—	—	(58,755,135)	(58,755,135)	62887
LDH-MVA	—	—	2,338,215	2,338,215	62922
LDH-MVA	—	—	158,390	158,390	62923
Total Federal Funds	**$352,125,184**	**$639,550,561**	**$574,149,764**	**$(65,400,797)**	

State General Fund (Direct)

Description	FY2025-2026 Actuals	Existing Operating Budget as of 10/01/2026	FY2027-2028 Total Request	Over/Under EOB	Form ID
TRANSFER	—	390,258	390,258	—	56793
DCFS	—	61,721,915	61,721,915	—	56794
LDH-MVA	—	—	107,912,862	107,912,862	62887
LDH-MVA	—	—	3,815,409	3,815,409	62922
LDH-MVA	—	—	158,390	158,390	62923
Total State General Fund (Direct)	**—**	**$62,112,173**	**$173,998,834**	**$111,886,661**	
Total Sources of Funding:	**$353,532,684**	**$748,757,053**	**$795,327,312**	**$46,570,259**	

SOURCE OF FUNDING DETAIL

Interagency Transfers

Form 56354 — 305 - IAT Reinstate Disability Medicaid Program

Expenditures	Existing Operating Budget as of 10/01/2026			FY2027-2028 Total Request			FY2028-2029 Projected		
	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match
Salaries	—	—	—	—	—	—	—	—	—
Other Compensation	—	—	—	—	—	—	—	—	—
Related Benefits	—	—	—	—	—	—	—	—	—
TOTAL PERSONAL SERVICES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
Travel	—	—	—	—	—	—	—	—	—
Operating Services	—	—	—	—	—	—	—	—	—
Supplies	—	—	—	—	—	—	—	—	—
TOTAL OPERATING EXPENSES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
PROFESSIONAL SERVICES	**$202,875**	**—**	**—**	**$202,875**	**—**	**—**	**$202,875**	**—**	**—**
Other Charges	—	—	—	—	—	—	—	—	—
Debt Service	—	—	—	—	—	—	—	—	—
Interagency Transfers	—	—	—	—	—	—	—	—	—
TOTAL OTHER CHARGES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
Acquisitions	—	—	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
TOTAL EXPENDITURES	**$202,875**	**—**	**—**	**$202,875**	**—**	**—**	**$202,875**	**—**	**—**

Form 56354 — 305 - IAT Reinstate Disability Medicaid Program

Question	Narrative Response
State the purpose, source and legal citation.	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.
Agency discretion or Federal requirement?	Agency discretion
Describe any budgetary peculiarities.	None
Is the Total Request amount for multiple years?	No, it is anticipated that the total requested funding will be available for expenditure during the requested budget period.
Additional information or comments.	
Provide the amount of any indirect costs.	None
Any indirect costs funded with other MOF?	None
Objectives and indicators in the Operational Plan.	None
Additional information or comments.	

Form 56370 — 305 - IAT Coordinated System of Care (CSoC)

Expenditures	Existing Operating Budget as of 10/01/2026			FY2027-2028 Total Request			FY2028-2029 Projected		
	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match
Salaries	—	—	—	—	—	—	—	—	—
Other Compensation	—	—	—	—	—	—	—	—	—
Related Benefits	—	—	—	—	—	—	—	—	—
TOTAL PERSONAL SERVICES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
Travel	—	—	—	—	—	—	—	—	—
Operating Services	—	—	—	—	—	—	—	—	—
Supplies	—	—	—	—	—	—	—	—	—
TOTAL OPERATING EXPENSES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
PROFESSIONAL SERVICES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
Other Charges	—	—	—	—	—	—	—	—	—
Debt Service	—	—	—	—	—	—	—	—	—
Interagency Transfers	270,797	—	—	270,797	—	—	270,797	—	—
TOTAL OTHER CHARGES	**$270,797**	**—**	**—**	**$270,797**	**—**	**—**	**$270,797**	**—**	**—**
Acquisitions	—	—	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
TOTAL EXPENDITURES	**$270,797**	**—**	**—**	**$270,797**	**—**	**—**	**$270,797**	**—**	**—**

Form 56370 — 305 - IAT Coordinated System of Care (CSoC)

Question	Narrative Response
State the purpose, source and legal citation.	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.
Agency discretion or Federal requirement?	Agency discretion
Describe any budgetary peculiarities.	None
Is the Total Request amount for multiple years?	No, it is anticipated that the total requested funding will be available for expenditure during the requested budget period.
Additional information or comments.	
Provide the amount of any indirect costs.	None
Any indirect costs funded with other MOF?	None
Objectives and indicators in the Operational Plan.	None
Additional information or comments.	

Form 56411 — 305 - IAT from OBH

Expenditures	Existing Operating Budget as of 10/01/2026			FY2027-2028 Total Request			FY2028-2029 Projected		
	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match
Salaries	—	—	—	—	—	—	—	—	—
Other Compensation	—	—	—	—	—	—	—	—	—
Related Benefits	—	—	—	—	—	—	—	—	—
TOTAL PERSONAL SERVICES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
Travel	—	—	—	—	—	—	—	—	—
Operating Services	—	—	—	—	—	—	—	—	—
Supplies	—	—	—	—	—	—	—	—	—
TOTAL OPERATING EXPENSES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
PROFESSIONAL SERVICES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
Other Charges	—	—	—	—	—	—	—	—	—
Debt Service	—	—	—	—	—	—	—	—	—
Interagency Transfers	26,000	—	—	26,000	—	—	26,000	—	—
TOTAL OTHER CHARGES	**$26,000**	**—**	**—**	**$26,000**	**—**	**—**	**$26,000**	**—**	**—**
Acquisitions	—	—	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
TOTAL EXPENDITURES	**$26,000**	**—**	**—**	**$26,000**	**—**	**—**	**$26,000**	**—**	**—**

Form 56411 — 305 - IAT from OBH

Question	Narrative Response
State the purpose, source and legal citation.	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 (Merakey Pennsylvania).
Agency discretion or Federal requirement?	Agency discretion
Describe any budgetary peculiarities.	None
Is the Total Request amount for multiple years?	No, it is anticipated that the total requested funding will be available for expenditure during the requested budget period.
Additional information or comments.	None
Provide the amount of any indirect costs.	None
Any indirect costs funded with other MOF?	None
Objectives and indicators in the Operational Plan.	None
Additional information or comments.	

Form 56748 — 305 - IAT MVP Unwind

Expenditures	Existing Operating Budget as of 10/01/2026			FY2027-2028 Total Request			FY2028-2029 Projected		
	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match
Salaries	—	—	—	—	—	—	—	—	—
Other Compensation	—	—	—	—	—	—	—	—	—
Related Benefits	—	—	—	—	—	—	—	—	—
TOTAL PERSONAL SERVICES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
Travel	—	—	—	—	—	—	—	—	—
Operating Services	—	—	—	—	—	—	—	—	—
Supplies	—	—	—	—	—	—	—	—	—
TOTAL OPERATING EXPENSES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
PROFESSIONAL SERVICES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
Other Charges	—	—	—	—	—	—	—	—	—
Debt Service	—	—	—	—	—	—	—	—	—
Interagency Transfers	—	—	—	—	—	—	—	—	—
TOTAL OTHER CHARGES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
Acquisitions	—	—	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
TOTAL EXPENDITURES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**

Form 56748 — 305 - IAT MVP Unwind

Question	Narrative Response
State the purpose, source and legal citation.	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.
Agency discretion or Federal requirement?	Agency discretion
Describe any budgetary peculiarities.	None
Is the Total Request amount for multiple years?	No, this narrative is for reference only due to a prior year actual. The agency's total requested amount for expenditures during the requested budget period does not include funding from this source.
Additional information or comments.	
Provide the amount of any indirect costs.	None
Any indirect costs funded with other MOF?	None
Objectives and indicators in the Operational Plan.	None
Additional information or comments.	

Form 56794 — 305 - MVA SNAP TRANSFER FROM DCFS

Expenditures	Existing Operating Budget as of 10/01/2026			FY2027-2028 Total Request			FY2028-2029 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	2,293,395	—	—	2,293,395	—	—	—	—	—
Other Compensation	—	—	—	—	—	—	—	—	—
Related Benefits	1,154,598	—	—	1,154,598	—	—	—	—	—
TOTAL PERSONAL SERVICES	**$3,447,993**	**—**	**—**	**$3,447,993**	**—**	**—**	**—**	**—**	**—**
Travel	4,204	—	—	4,304	—	—	—	—	—
Operating Services	210,149	—	—	215,151	—	—	—	—	—
Supplies	5,223	—	—	5,347	—	—	—	—	—
TOTAL OPERATING EXPENSES	**$219,576**	**—**	**—**	**$224,802**	**—**	**—**	**—**	**—**	**—**
PROFESSIONAL SERVICES	**$3,123,548**	**—**	**—**	**$3,202,717**	**—**	**—**	**—**	**—**	**—**
Other Charges	32,217,295	—	—	32,217,295	—	—	—	—	—
Debt Service	—	—	—	—	—	—	—	—	—
Interagency Transfers	2,157,487	—	—	2,157,487	—	—	—	—	—
TOTAL OTHER CHARGES	**$34,374,782**	**—**	**—**	**$34,374,782**	**—**	**—**	**—**	**—**	**—**
Acquisitions	—	—	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
TOTAL EXPENDITURES	**$41,165,899**	**—**	**—**	**$41,250,294**	**—**	**—**	**—**	**—**	**—**

Form 56794 — 305 - MVA SNAP TRANSFER FROM DCFS

Question	Narrative Response
State the purpose, source and legal citation.	Act 478 and the preamble to Act 1, section 3.B, both of the 2025 Regular Legislative Session, mandated the transfer of certain SNAP and TANF programs from DCFS to LDH. This source of funding covers the two SNAP grants that USDA-FNS required to stay with DCFS, along with the TANF grant that stayed as well.
Agency discretion or Federal requirement?	Federal requirement.
Describe any budgetary peculiarities.	None
Is the Total Request amount for multiple years?	No
Additional information or comments.	N/A
Provide the amount of any indirect costs.	N/A
Any indirect costs funded with other MOF?	N/A
Objectives and indicators in the Operational Plan.	None
Additional information or comments.	N/A

Statutory Dedications

Form 56374 — 305 - Medical Assistance Program Fraud Detection Fund

Expenditures	Existing Operating Budget as of 10/01/2026			FY2027-2028 Total Request			FY2028-2029 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	—	—
Other Compensation	—	—	—	—	—	—	49,470	—	—
Related Benefits	—	—	—	—	—	—	238,034	—	—
TOTAL PERSONAL SERVICES	**—**	**—**	**—**	**—**	**—**	**—**	**$691,343**	**—**	**—**
Travel	—	—	—	—	—	—	2,868	—	—
Operating Services	—	—	—	—	—	—	4,300	—	—
Supplies	—	—	—	—	—	—	—	—	—
TOTAL OPERATING EXPENSES	**—**	**—**	**—**	**—**	**—**	**—**	**$7,168**	**—**	**—**
PROFESSIONAL SERVICES	**—**	**—**	**—**	**—**	**—**	**—**	**$11,734**	**—**	**—**
Other Charges	—	—	—	—	—	—	—	—	—
Debt Service	—	—	—	—	—	—	—	—	—
Interagency Transfers	—	—	—	—	—	—	1,100	—	—
TOTAL OTHER CHARGES	**—**	**—**	**—**	**—**	**—**	**—**	**$1,100**	**—**	**—**
Acquisitions	—	—	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
TOTAL EXPENDITURES	**—**	**—**	**—**	**—**	**—**	**—**	**$711,345**	**—**	**—**

Form 56374 — 305 - Medical Assistance Program Fraud Detection Fund

Question	Narrative Response
State the purpose, source and legal citation.	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.
Agency discretion or Federal requirement?	Agency discretion
Describe any budgetary peculiarities.	None
Is the Total Request amount for multiple years?	No, it is anticipated that the total requested funding will be available for expenditure during the requested budget period.
Additional information or comments.	
Provide the amount of any indirect costs.	None
Any indirect costs funded with other MOF?	None
Objectives and indicators in the Operational Plan.	None
Additional information or comments.	

Form 56794 — 305 - MVA SNAP TRANSFER FROM DCFS

Expenditures	Existing Operating Budget as of 10/01/2026			FY2027-2028 Total Request			FY2028-2029 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	75,000	—	—	75,000	—	—	—	—	—
Related Benefits	1,088	—	—	1,088	—	—	—	—	—
TOTAL PERSONAL SERVICES	**$76,088**	**—**	**—**	**$76,088**	**—**	**—**	**—**	**—**	**—**
Travel	4,150	—	—	4,150	—	—	—	—	—
Operating Services	35,275	—	—	35,275	—	—	—	—	—
Supplies	600	—	—	600	—	—	—	—	—
TOTAL OPERATING EXPENSES	**$40,025**	**—**	**—**	**$40,025**	**—**	**—**	**—**	**—**	**—**
PROFESSIONAL SERVICES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
Other Charges	20,000	—	—	20,000	—	—	—	—	—
Debt Service	—	—	—	—	—	—	—	—	—
Interagency Transfers	588,181	—	—	588,181	—	—	—	—	—
TOTAL OTHER CHARGES	**$608,181**	**—**	**—**	**$608,181**	**—**	**—**	**—**	**—**	**—**
Acquisitions	—	—	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
TOTAL EXPENDITURES	**$724,294**	**—**	**—**	**$724,294**	**—**	**—**	**—**	**—**	**—**

Form 56794 — 305 - MVA SNAP TRANSFER FROM DCFS

Question	Narrative Response
State the purpose, source and legal citation.	Act 478 and the preamble to Act 1, section 3.B, both of the 2025 Regular Legislative Session, mandated the transfer of certain SNAP and TANF programs from DCFS to LDH. This source of funding covers the two SNAP grants that USDA-FNS required to stay with DCFS, along with the TANF grant that stayed as well.
Agency discretion or Federal requirement?	Federal requirement.
Describe any budgetary peculiarities.	None
Is the Total Request amount for multiple years?	No
Additional information or comments.	N/A
Provide the amount of any indirect costs.	N/A
Any indirect costs funded with other MOF?	N/A
Objectives and indicators in the Operational Plan.	None
Additional information or comments.	N/A

Form 56826 — 305- Modernization and Security Fund (V65)

Expenditures	Existing Operating Budget as of 10/01/2026			FY2027-2028 Total Request			FY2028-2029 Projected		
	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match
Salaries	—	—	—	—	—	—	—	—	—
Other Compensation	—	—	—	—	—	—	—	—	—
Related Benefits	—	—	—	—	—	—	—	—	—
TOTAL PERSONAL SERVICES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
Travel	—	—	—	—	—	—	—	—	—
Operating Services	—	—	—	—	—	—	—	—	—
Supplies	—	—	—	—	—	—	—	—	—
TOTAL OPERATING EXPENSES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
PROFESSIONAL SERVICES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
Other Charges	504,454	—	—	504,454	—	—	—	—	—
Debt Service	—	—	—	—	—	—	—	—	—
Interagency Transfers	—	—	—	—	—	—	—	—	—
TOTAL OTHER CHARGES	**$504,454**	**—**	**—**	**$504,454**	**—**	**—**	**—**	**—**	**—**
Acquisitions	—	—	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
TOTAL EXPENDITURES	**$504,454**	**—**	**—**	**$504,454**	**—**	**—**	**—**	**—**	**—**

Form 56826 — 305- Modernization and Security Fund (V65)

Question	Narrative Response
State the purpose, source and legal citation.	Act 365 of the 2025 Regular Legislative session established the Modernization and Security Fund. The monies in this fund shall be utilized for the following: Providing for payments of major repairs on state infrastructure Providing for payments on acquisitions for state agencies Providing for financial investment into information technology initiatives within state agencies Providing for investment into security initiatives at state agencies Any remaining monies in the fund shall be used solely for various initiatives focused on ensuring technological adequacy and security of the state.
Agency discretion or Federal requirement?	Agency discretion.
Describe any budgetary peculiarities.	None.
Is the Total Request amount for multiple years?	No.
Additional information or comments.	N/A
Provide the amount of any indirect costs.	None
Any indirect costs funded with other MOF?	N/A
Objectives and indicators in the Operational Plan.	N/A
Additional information or comments.	N/A

Federal Funds

Form 56395 — 305 - FEDA CHIP

Expenditures	Existing Operating Budget as of 10/01/2026			FY2027-2028 Total Request			FY2028-2029 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	—	—
TOTAL PERSONAL SERVICES	**$2,685,022**	**—**	**—**	**$2,685,022**	**—**	**—**	**$2,685,022**	**—**	**—**
Travel	6,218	—	—	6,218	—	—	6,218	—	—
Operating Services	115,537	—	—	115,537	—	—	115,537	—	—
Supplies	7,429	—	—	7,429	—	—	7,429	—	—
TOTAL OPERATING EXPENSES	**$129,184**	**—**	**—**	**$129,184**	**—**	**—**	**$129,184**	**—**	**—**
PROFESSIONAL SERVICES	**$5,502,038**	**—**	**—**	**$5,502,038**	**—**	**—**	**$5,502,038**	**—**	**—**
Other Charges	1,662,476	—	—	1,662,476	—	—	1,662,476	—	—
Debt Service	—	—	—	—	—	—	—	—	—
Interagency Transfers	6,821,280	—	—	6,821,280	—	—	6,821,280	—	—
TOTAL OTHER CHARGES	**$8,483,756**	**—**	**—**	**$8,483,756**	**—**	**—**	**$8,483,756**	**—**	**—**
Acquisitions	—	—	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
TOTAL EXPENDITURES	**$16,800,000**	**—**	**—**	**$16,800,000**	**—**	**—**	**$16,800,000**	**—**	**—**

Form 56395 — 305 - FEDA CHIP

Question	Narrative Response
State the purpose, source and legal citation.	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 SFY7 is 31.86% State and 68.14% Federal.
Agency discretion or Federal requirement?	Agency discretion
Describe any budgetary peculiarities.	None
Is the Total Request amount for multiple years?	No, it is anticipated that the total requested amount will be available for expenditures for this current fiscal year.
Additional information or comments.	
Provide the amount of any indirect costs.	None
Any indirect costs funded with other MOF?	None
Objectives and indicators in the Operational Plan.	None
Additional information or comments.	

Form 56396 — 305 - MAP REFUGEE

Expenditures	Existing Operating Budget as of 10/01/2026			FY2027-2028 Total Request			FY2028-2029 Projected		
	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match
Salaries	—	—	—	—	—	—	—	—	—
Other Compensation	—	—	—	—	—	—	—	—	—
Related Benefits	—	—	—	—	—	—	—	—	—
TOTAL PERSONAL SERVICES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
Travel	—	—	—	—	—	—	—	—	—
Operating Services	—	—	—	—	—	—	—	—	—
Supplies	—	—	—	—	—	—	—	—	—
TOTAL OPERATING EXPENSES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
PROFESSIONAL SERVICES	**$165,565**	**—**	**—**	**$165,565**	**—**	**—**	**$50,000**	**—**	**—**
Other Charges	—	—	—	—	—	—	—	—	—
Debt Service	—	—	—	—	—	—	—	—	—
Interagency Transfers	—	—	—	—	—	—	—	—	—
TOTAL OTHER CHARGES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
Acquisitions	—	—	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
TOTAL EXPENDITURES	**$165,565**	**—**	**—**	**$165,565**	**—**	**—**	**$50,000**	**—**	**—**

Form 56396 — 305 - MAP REFUGEE

Question	Narrative Response
State the purpose, source and legal citation.	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 as defined by USCIS, are in need of medical care, and are not eligible for any other Medical program. RMA is 100% federally funded.
Agency discretion or Federal requirement?	Agency discretion
Describe any budgetary peculiarities.	None
Is the Total Request amount for multiple years?	No, it is anticipated that the total requested funding will be available for expenditure during the requested budget period.
Additional information or comments.	
Provide the amount of any indirect costs.	None
Any indirect costs funded with other MOF?	None
Objectives and indicators in the Operational Plan.	None
Additional information or comments.	

Form 56397 — 305 - MONEY FOLLOWS THE PERSON

Expenditures	Existing Operating Budget as of 10/01/2026			FY2027-2028 Total Request			FY2028-2029 Projected		
	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match
Salaries	—	—	—	—	—	—	—	—	—
Other Compensation	—	—	—	—	—	—	—	—	—
Related Benefits	—	—	—	—	—	—	—	—	—
TOTAL PERSONAL SERVICES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
Travel	—	—	—	—	—	—	—	—	—
Operating Services	—	—	—	—	—	—	—	—	—
Supplies	—	—	—	—	—	—	—	—	—
TOTAL OPERATING EXPENSES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
PROFESSIONAL SERVICES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
Other Charges	—	—	—	—	—	—	—	—	—
Debt Service	—	—	—	—	—	—	—	—	—
Interagency Transfers	4,310,730	—	—	4,310,730	—	—	2,200,000	—	—
TOTAL OTHER CHARGES	**$4,310,730**	**—**	**—**	**$4,310,730**	**—**	**—**	**$2,200,000**	**—**	**—**
Acquisitions	—	—	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
TOTAL EXPENDITURES	**$4,310,730**	**—**	**—**	**$4,310,730**	**—**	**—**	**$2,200,000**	**—**	**—**

Form 56397 — 305 - MONEY FOLLOWS THE PERSON

Question	Narrative Response
State the purpose, source and legal citation.	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.
Agency discretion or Federal requirement?	Agency discretion
Describe any budgetary peculiarities.	None
Is the Total Request amount for multiple years?	No, it is anticipated that the total requested funding will be available for expenditure during the requested budget period.
Additional information or comments.	
Provide the amount of any indirect costs.	None
Any indirect costs funded with other MOF?	None
Objectives and indicators in the Operational Plan.	None
Additional information or comments.	

Form 56398 — 305 - SCHOOL BASED ADMIN

Expenditures	Existing Operating Budget as of 10/01/2026			FY2027-2028 Total Request			FY2028-2029 Projected		
	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match
Salaries	—	—	—	—	—	—	—	—	—
Other Compensation	—	—	—	—	—	—	—	—	—
Related Benefits	—	—	—	—	—	—	—	—	—
TOTAL PERSONAL SERVICES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
Travel	—	—	—	—	—	—	—	—	—
Operating Services	—	—	—	—	—	—	—	—	—
Supplies	—	—	—	—	—	—	—	—	—
TOTAL OPERATING EXPENSES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
PROFESSIONAL SERVICES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
Other Charges	7,500,000	—	—	7,500,000	—	—	3,000,000	—	—
Debt Service	—	—	—	—	—	—	—	—	—
Interagency Transfers	—	—	—	—	—	—	—	—	—
TOTAL OTHER CHARGES	**$7,500,000**	**—**	**—**	**$7,500,000**	**—**	**—**	**$3,000,000**	**—**	**—**
Acquisitions	—	—	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
TOTAL EXPENDITURES	**$7,500,000**	**—**	**—**	**$7,500,000**	**—**	**—**	**$3,000,000**	**—**	**—**

Form 56398 — 305 - SCHOOL BASED ADMIN

Question	Narrative Response
State the purpose, source and legal citation.	To enact Chapter 55 of Title 46 of the Louisiana Revised Statutes 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 therapist.
Agency discretion or Federal requirement?	Agency discretion
Describe any budgetary peculiarities.	None
Is the Total Request amount for multiple years?	No, it is anticipated that the total requested funding will be available for expenditure during the requested budget period.
Additional information or comments.	
Provide the amount of any indirect costs.	None
Any indirect costs funded with other MOF?	None
Objectives and indicators in the Operational Plan.	None
Additional information or comments.	

Form 56401 — 305 - MEDICAID TITLE 19

Expenditures	Existing Operating Budget as of 10/01/2026			FY2027-2028 Total Request			FY2028-2029 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	61,299,398	—	43,061,566	61,299,398	—	9,459,642	46,608,723	—	9,459,642
Other Compensation	524,627	—	1,078,191	524,627	—	1,654,639	1,690,218	—	1,654,639
Related Benefits	34,260,581	—	18,241,092	34,260,581	—	6,910,100	31,824,481	—	6,910,100
TOTAL PERSONAL SERVICES	**$96,084,606**	**—**	**$62,380,849**	**$96,084,606**	**—**	**$18,024,381**	**$80,123,422**	**—**	**$18,024,381**
Travel	98,382	—	158,104	102,481	—	106,476	92,178	—	104,133
Operating Services	6,594,664	—	4,406,635	5,915,795	—	2,356,315	15,997,153	—	1,985,428
Supplies	111,871	—	194,041	116,917	—	130,725	110,139	—	127,848
TOTAL OPERATING EXPENSES	**$6,804,917**	**—**	**$4,758,780**	**$6,135,193**	**—**	**$2,593,516**	**$16,199,470**	**—**	**$2,217,409**
PROFESSIONAL SERVICES	**$203,970,333**	**—**	**$72,487,450**	**$199,753,423**	**—**	**$61,287,879**	**$118,418,514**	**—**	**$60,031,530**
Other Charges	20,990,303	—	63,162,116	20,772,803	—	9,376,624	74,107,435	—	9,376,624
Debt Service	—	—	—	—	—	—	—	—	—
Interagency Transfers	138,051,503	—	86,811,141	134,013,370	—	44,714,380	193,015,959	—	44,714,380
TOTAL OTHER CHARGES	**$159,041,806**	**—**	**$149,973,257**	**$154,786,173**	**—**	**$54,091,004**	**$267,123,394**	**—**	**$54,091,004**
Acquisitions	—	—	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
TOTAL EXPENDITURES	**$465,901,662**	**—**	**$289,600,336**	**$456,759,395**	**—**	**$135,996,780**	**$481,864,800**	**—**	**$134,364,324**

Form 56401 — 305 - MEDICAID TITLE 19

Question	Narrative Response
State the purpose, source and legal citation.	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 SFY27 Federal Match for Title XIX 'Medicaid' is 31.94% for State and 68.06% for Federal. The SFY27 Federal Match for Title XXI 'LaCHIP' is 22.36% for State and 77.64% 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.
Agency discretion or Federal requirement?	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.
Describe any budgetary peculiarities.	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 2) 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.
Is the Total Request amount for multiple years?	No, it is anticipated that the total requested funding will be available for expenditure during the requested budget period.
Additional information or comments.	
Provide the amount of any indirect costs.	N/A
Any indirect costs funded with other MOF?	N/A
Objectives and indicators in the Operational Plan.	N/A
Additional information or comments.	

Form 56793 — 305- MVA SNAP Transfer of 8 TO from DCFS

Expenditures	Existing Operating Budget as of 10/01/2026			FY2027-2028 Total Request			FY2028-2029 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	285,136	—	—	285,136	—	—	—	—	—
Other Compensation	—	—	—	—	—	—	—	—	—
Related Benefits	134,468	—	—	134,468	—	—	—	—	—
TOTAL PERSONAL SERVICES	**$419,604**	**—**	**—**	**$419,604**	**—**	**—**	**—**	**—**	**—**
Travel	—	—	—	—	—	—	—	—	—
Operating Services	—	—	—	—	—	—	—	—	—
Supplies	—	—	—	—	—	—	—	—	—
TOTAL OPERATING EXPENSES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
PROFESSIONAL SERVICES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
Other Charges	—	—	—	—	—	—	—	—	—
Debt Service	—	—	—	—	—	—	—	—	—
Interagency Transfers	254,999	—	—	254,999	—	—	—	—	—
TOTAL OTHER CHARGES	**$254,999**	**—**	**—**	**$254,999**	**—**	**—**	**—**	**—**	**—**
Acquisitions	—	—	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
TOTAL EXPENDITURES	**$674,603**	**—**	**—**	**$674,603**	**—**	**—**	**—**	**—**	**—**

Form 56793 — 305- MVA SNAP Transfer of 8 TO from DCFS

Question	Narrative Response
State the purpose, source and legal citation.	Act 478 and the preamble to Act 1, section 3.B, both of the 2025 Regular Legislative Session, mandated the transfer of certain SNAP and TANF programs from DCFS to LDH. This source of funding covers SNAP positions that came before the full SNAP Transition BA-7. .
Agency discretion or Federal requirement?	Federal requirement.
Describe any budgetary peculiarities.	None
Is the Total Request amount for multiple years?	No
Additional information or comments.	N/A
Provide the amount of any indirect costs.	N/A
Any indirect costs funded with other MOF?	N/A
Objectives and indicators in the Operational Plan.	None
Additional information or comments.	N/A

Form 56794 — 305 - MVA SNAP TRANSFER FROM DCFS

Expenditures	Existing Operating Budget as of 10/01/2026			FY2027-2028 Total Request			FY2028-2029 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	21,481,831	—	—	21,481,831	—	—	—	—	—
Other Compensation	146,130	—	—	146,130	—	—	—	—	—
Related Benefits	10,492,549	—	—	10,492,549	—	—	—	—	—
TOTAL PERSONAL SERVICES	**$32,120,510**	**—**	**—**	**$32,120,510**	**—**	**—**	**—**	**—**	**—**
Travel	67,610	—	—	67,610	—	—	—	—	—
Operating Services	1,825,571	—	—	1,825,571	—	—	—	—	—
Supplies	92,698	—	—	92,698	—	—	—	—	—
TOTAL OPERATING EXPENSES	**$1,985,879**	**—**	**—**	**$1,985,879**	**—**	**—**	**—**	**—**	**—**
PROFESSIONAL SERVICES	**$4,587,835**	**—**	**—**	**$4,587,835**	**—**	**—**	**—**	**—**	**—**
Other Charges	59,113,499	—	—	59,113,499	—	—	—	—	—
Debt Service	—	—	—	—	—	—	—	—	—
Interagency Transfers	46,390,278	—	—	46,390,278	—	—	—	—	—
TOTAL OTHER CHARGES	**$105,503,777**	**—**	**—**	**$105,503,777**	**—**	**—**	**—**	**—**	**—**
Acquisitions	—	—	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
TOTAL EXPENDITURES	**$144,198,001**	**—**	**—**	**$144,198,001**	**—**	**—**	**—**	**—**	**—**

Form 56794 — 305 - MVA SNAP TRANSFER FROM DCFS

Question	Narrative Response
State the purpose, source and legal citation.	Act 478 and the preamble to Act 1, section 3.B, both of the 2025 Regular Legislative Session, mandated the transfer of certain SNAP and TANF programs from DCFS to LDH. This source of funding covers the two SNAP grants that USDA-FNS required to stay with DCFS, along with the TANF grant that stayed as well.
Agency discretion or Federal requirement?	Federal requirement.
Describe any budgetary peculiarities.	None
Is the Total Request amount for multiple years?	No
Additional information or comments.	N/A
Provide the amount of any indirect costs.	N/A
Any indirect costs funded with other MOF?	N/A
Objectives and indicators in the Operational Plan.	None
Additional information or comments.	N/A

Form 62887 — EOB Source of Funding for Base Adjustments

Expenditures	Existing Operating Budget as of 10/01/2026			FY2027-2028 Total Request			FY2028-2029 Projected		
	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match
Salaries	—	—	—	—	—	—	—	—	—
Other Compensation	—	—	—	—	—	—	—	—	—
Related Benefits	—	—	—	—	—	—	—	—	—
TOTAL PERSONAL SERVICES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
Travel	—	—	—	—	—	—	—	—	—
Operating Services	—	—	—	—	—	—	—	—	—
Supplies	—	—	—	—	—	—	—	—	—
TOTAL OPERATING EXPENSES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
PROFESSIONAL SERVICES	**—**	**—**	**—**	**$11,361,280**	**—**	**—**	**—**	**—**	**—**
Other Charges	—	—	—	(84,961,250)	—	—	—	—	—
Debt Service	—	—	—	—	—	—	—	—	—
Interagency Transfers	—	—	—	14,844,835	—	—	—	—	—
TOTAL OTHER CHARGES	**—**	**—**	**—**	**$(70,116,415)**	**—**	**—**	**—**	**—**	**—**
Acquisitions	—	—	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
TOTAL EXPENDITURES	**—**	**—**	**—**	**$(58,755,135)**	**—**	**—**	**—**	**—**	**—**

Form 62887 — EOB Source of Funding for Base Adjustments

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

Form 62922 — 305 - MVA Market Adjustment Classified Employees

Expenditures	Existing Operating Budget as of 10/01/2026			FY2027-2028 Total Request			FY2028-2029 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	—	—	—	1,599,621	—	—	—	—	—
Other Compensation	—	—	—	—	—	—	—	—	—
Related Benefits	—	—	—	738,594	—	—	—	—	—
TOTAL PERSONAL SERVICES	**—**	**—**	**—**	**$2,338,215**	**—**	**—**	**—**	**—**	**—**
Travel	—	—	—	—	—	—	—	—	—
Operating Services	—	—	—	—	—	—	—	—	—
Supplies	—	—	—	—	—	—	—	—	—
TOTAL OPERATING EXPENSES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
PROFESSIONAL SERVICES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
Other Charges	—	—	—	—	—	—	—	—	—
Debt Service	—	—	—	—	—	—	—	—	—
Interagency Transfers	—	—	—	—	—	—	—	—	—
TOTAL OTHER CHARGES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
Acquisitions	—	—	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
TOTAL EXPENDITURES	**—**	**—**	**—**	**$2,338,215**	**—**	**—**	**—**	**—**	**—**

Form 62922 — 305 - MVA Market Adjustment Classified Employees

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

Form 62923 — 305 - MVA Market Adjustment Unclassified Unemployees

Expenditures	Existing Operating Budget as of 10/01/2026			FY2027-2028 Total Request			FY2028-2029 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	—	—	—	36,316	—	—	—	—	—
Other Compensation	—	—	—	68,366	—	—	—	—	—
Related Benefits	—	—	—	53,708	—	—	—	—	—
TOTAL PERSONAL SERVICES	**—**	**—**	**—**	**$158,390**	**—**	**—**	**—**	**—**	**—**
Travel	—	—	—	—	—	—	—	—	—
Operating Services	—	—	—	—	—	—	—	—	—
Supplies	—	—	—	—	—	—	—	—	—
TOTAL OPERATING EXPENSES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
PROFESSIONAL SERVICES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
Other Charges	—	—	—	—	—	—	—	—	—
Debt Service	—	—	—	—	—	—	—	—	—
Interagency Transfers	—	—	—	—	—	—	—	—	—
TOTAL OTHER CHARGES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
Acquisitions	—	—	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
TOTAL EXPENDITURES	**—**	**—**	**—**	**$158,390**	**—**	**—**	**—**	**—**	**—**

Form 62923 — 305 - MVA Market Adjustment Unclassified Unemployees

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

State General Fund (Direct)

Form 56793 — 305- MVA SNAP Transfer of 8 TO from DCFS

Expenditures	Existing Operating Budget as of 10/01/2026			FY2027-2028 Total Request			FY2028-2029 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	265,387	—	—	265,387	—	—	—	—	—
Other Compensation	—	—	—	—	—	—	—	—	—
Related Benefits	124,871	—	—	124,871	—	—	—	—	—
TOTAL PERSONAL SERVICES	**$390,258**	**—**	**—**	**$390,258**	**—**	**—**	**—**	**—**	**—**
Travel	—	—	—	—	—	—	—	—	—
Operating Services	—	—	—	—	—	—	—	—	—
Supplies	—	—	—	—	—	—	—	—	—
TOTAL OPERATING EXPENSES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
PROFESSIONAL SERVICES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
Other Charges	—	—	—	—	—	—	—	—	—
Debt Service	—	—	—	—	—	—	—	—	—
Interagency Transfers	—	—	—	—	—	—	—	—	—
TOTAL OTHER CHARGES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
Acquisitions	—	—	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
TOTAL EXPENDITURES	**$390,258**	**—**	**—**	**$390,258**	**—**	**—**	**—**	**—**	**—**

Form 56793 — 305- MVA SNAP Transfer of 8 TO from DCFS

Question	Narrative Response
State the purpose, source and legal citation.	Act 478 and the preamble to Act 1, section 3.B, both of the 2025 Regular Legislative Session, mandated the transfer of certain SNAP and TANF programs from DCFS to LDH. This source of funding covers SNAP positions that came before the full SNAP Transition BA-7. .
Agency discretion or Federal requirement?	Federal requirement.
Describe any budgetary peculiarities.	None
Is the Total Request amount for multiple years?	No
Additional information or comments.	N/A
Provide the amount of any indirect costs.	N/A
Any indirect costs funded with other MOF?	N/A
Objectives and indicators in the Operational Plan.	None
Additional information or comments.	N/A

Form 56794 — 305 - MVA SNAP TRANSFER FROM DCFS

Expenditures	Existing Operating Budget as of 10/01/2026			FY2027-2028 Total Request			FY2028-2029 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	21,597,506	—	—	21,597,506	—	—	—	—	—
Other Compensation	146,130	—	—	146,130	—	—	—	—	—
Related Benefits	10,668,595	—	—	10,668,595	—	—	—	—	—
TOTAL PERSONAL SERVICES	**$32,412,231**	**—**	**—**	**$32,412,231**	**—**	**—**	**—**	**—**	**—**
Travel	59,721	—	—	59,721	—	—	—	—	—
Operating Services	1,112,072	—	—	1,112,072	—	—	—	—	—
Supplies	82,170	—	—	82,170	—	—	—	—	—
TOTAL OPERATING EXPENSES	**$1,253,963**	**—**	**—**	**$1,253,963**	**—**	**—**	**—**	**—**	**—**
PROFESSIONAL SERVICES	**$2,006,288**	**—**	**—**	**$2,006,288**	**—**	**—**	**—**	**—**	**—**
Other Charges	18,558,280	—	—	18,558,280	—	—	—	—	—
Debt Service	—	—	—	—	—	—	—	—	—
Interagency Transfers	7,491,153	—	—	7,491,153	—	—	—	—	—
TOTAL OTHER CHARGES	**$26,049,433**	**—**	**—**	**$26,049,433**	**—**	**—**	**—**	**—**	**—**
Acquisitions	—	—	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
TOTAL EXPENDITURES	**$61,721,915**	**—**	**—**	**$61,721,915**	**—**	**—**	**—**	**—**	**—**

Form 56794 — 305 - MVA SNAP TRANSFER FROM DCFS

Question	Narrative Response
State the purpose, source and legal citation.	Act 478 and the preamble to Act 1, section 3.B, both of the 2025 Regular Legislative Session, mandated the transfer of certain SNAP and TANF programs from DCFS to LDH. This source of funding covers the two SNAP grants that USDA-FNS required to stay with DCFS, along with the TANF grant that stayed as well.
Agency discretion or Federal requirement?	Federal requirement.
Describe any budgetary peculiarities.	None
Is the Total Request amount for multiple years?	No
Additional information or comments.	N/A
Provide the amount of any indirect costs.	N/A
Any indirect costs funded with other MOF?	N/A
Objectives and indicators in the Operational Plan.	None
Additional information or comments.	N/A

Form 62887 — EOB Source of Funding for Base Adjustments

Expenditures	Existing Operating Budget as of 10/01/2026			FY2027-2028 Total Request			FY2028-2029 Projected		
	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match
Salaries	—	—	—	—	—	—	—	—	—
Other Compensation	—	—	—	—	—	—	—	—	—
Related Benefits	—	—	—	—	—	—	—	—	—
TOTAL PERSONAL SERVICES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
Travel	—	—	—	—	—	—	—	—	—
Operating Services	—	—	—	—	—	—	—	—	—
Supplies	—	—	—	—	—	—	—	—	—
TOTAL OPERATING EXPENSES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
PROFESSIONAL SERVICES	**—**	**—**	**—**	**$4,949,061**	**—**	**—**	**—**	**—**	**—**
Other Charges	—	—	—	87,741,250	—	—	—	—	—
Debt Service	—	—	—	—	—	—	—	—	—
Interagency Transfers	—	—	—	15,222,551	—	—	—	—	—
TOTAL OTHER CHARGES	**—**	**—**	**—**	**$102,963,801**	**—**	**—**	**—**	**—**	**—**
Acquisitions	—	—	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
TOTAL EXPENDITURES	**—**	**—**	**—**	**$107,912,862**	**—**	**—**	**—**	**—**	**—**

Form 62887 — EOB Source of Funding for Base Adjustments

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

Form 62922 — 305 - MVA Market Adjustment Classified Employees

Expenditures	Existing Operating Budget as of 10/01/2026			FY2027-2028 Total Request			FY2028-2029 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	—	—	—	1,599,622	—	—	—	—	—
Other Compensation	—	—	—	—	—	—	—	—	—
Related Benefits	—	—	—	2,215,787	—	—	—	—	—
TOTAL PERSONAL SERVICES	**—**	**—**	**—**	**$3,815,409**	**—**	**—**	**—**	**—**	**—**
Travel	—	—	—	—	—	—	—	—	—
Operating Services	—	—	—	—	—	—	—	—	—
Supplies	—	—	—	—	—	—	—	—	—
TOTAL OPERATING EXPENSES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
PROFESSIONAL SERVICES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
Other Charges	—	—	—	—	—	—	—	—	—
Debt Service	—	—	—	—	—	—	—	—	—
Interagency Transfers	—	—	—	—	—	—	—	—	—
TOTAL OTHER CHARGES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
Acquisitions	—	—	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
TOTAL EXPENDITURES	**—**	**—**	**—**	**$3,815,409**	**—**	**—**	**—**	**—**	**—**

Form 62922 — 305 - MVA Market Adjustment Classified Employees

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

Form 62923 — 305 - MVA Market Adjustment Unclassified Unemployees

Expenditures	Existing Operating Budget as of 10/01/2026			FY2027-2028 Total Request			FY2028-2029 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	—	—	—	36,316	—	—	—	—	—
Other Compensation	—	—	—	68,366	—	—	—	—	—
Related Benefits	—	—	—	53,708	—	—	—	—	—
TOTAL PERSONAL SERVICES	**—**	**—**	**—**	**$158,390**	**—**	**—**	**—**	**—**	**—**
Travel	—	—	—	—	—	—	—	—	—
Operating Services	—	—	—	—	—	—	—	—	—
Supplies	—	—	—	—	—	—	—	—	—
TOTAL OPERATING EXPENSES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
PROFESSIONAL SERVICES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
Other Charges	—	—	—	—	—	—	—	—	—
Debt Service	—	—	—	—	—	—	—	—	—
Interagency Transfers	—	—	—	—	—	—	—	—	—
TOTAL OTHER CHARGES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
Acquisitions	—	—	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
TOTAL EXPENDITURES	**—**	**—**	**—**	**$158,390**	**—**	**—**	**—**	**—**	**—**

Form 62923 — 305 - MVA Market Adjustment Unclassified Unemployees

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

Fees & Self-generated

Form 56373 — 305 - RECOVERY FROM 3RD PARTIES

Expenditures	Existing Operating Budget as of 10/01/2026			FY2027-2028 Total Request			FY2028-2029 Projected		
	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match
Salaries	—	—	—	—	—	—	—	—	—
Other Compensation	—	—	—	—	—	—	—	—	—
Related Benefits	—	—	—	—	—	—	—	—	—
TOTAL PERSONAL SERVICES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
Travel	—	—	—	—	—	—	—	—	—
Operating Services	—	—	—	—	—	—	—	—	—
Supplies	—	—	—	—	—	—	—	—	—
TOTAL OPERATING EXPENSES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
PROFESSIONAL SERVICES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
Other Charges	250,000	—	—	250,000	—	—	400,000	—	—
Debt Service	—	—	—	—	—	—	—	—	—
Interagency Transfers	—	—	—	—	—	—	—	—	—
TOTAL OTHER CHARGES	**$250,000**	**—**	**—**	**$250,000**	**—**	**—**	**$400,000**	**—**	**—**
Acquisitions	—	—	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
TOTAL EXPENDITURES	**$250,000**	**—**	**—**	**$250,000**	**—**	**—**	**$400,000**	**—**	**—**

Form 56373 — 305 - RECOVERY FROM 3RD PARTIES

Question	Narrative Response
State the purpose, source and legal citation.	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 Stateís 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.
Agency discretion or Federal requirement?	Agency discretion
Describe any budgetary peculiarities.	None
Is the Total Request amount for multiple years?	No, it is anticipated that the total requested amount will be available for expenditures from July 1, 2026 - June 30, 2027.
Additional information or comments.	
Provide the amount of any indirect costs.	None
Any indirect costs funded with other MOF?	None
Objectives and indicators in the Operational Plan.	None
Additional information or comments.	

Form 56399 — 305 - MEDICAID OUTSTATIONING

Expenditures	Existing Operating Budget as of 10/01/2026			FY2027-2028 Total Request			FY2028-2029 Projected		
	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match
Salaries	—	—	—	—	—	—	—	—	—
Other Compensation	—	—	—	—	—	—	—	—	—
Related Benefits	—	—	—	—	—	—	—	—	—
TOTAL PERSONAL SERVICES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
Travel	—	—	—	—	—	—	—	—	—
Operating Services	—	—	—	—	—	—	—	—	—
Supplies	—	—	—	—	—	—	—	—	—
TOTAL OPERATING EXPENSES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
PROFESSIONAL SERVICES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
Other Charges	3,600,000	—	—	3,600,000	—	—	3,600,000	—	—
Debt Service	—	—	—	—	—	—	—	—	—
Interagency Transfers	—	—	—	—	—	—	—	—	—
TOTAL OTHER CHARGES	**$3,600,000**	**—**	**—**	**$3,600,000**	**—**	**—**	**$3,600,000**	**—**	**—**
Acquisitions	—	—	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
TOTAL EXPENDITURES	**$3,600,000**	**—**	**—**	**$3,600,000**	**—**	**—**	**$3,600,000**	**—**	**—**

Form 56399 — 305 - MEDICAID OUTSTATIONING

Question	Narrative Response
State the purpose, source and legal citation.	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.
Agency discretion or Federal requirement?	Agency discretion
Describe any budgetary peculiarities.	None
Is the Total Request amount for multiple years?	No, it is anticipated that the total requested funding will be available for expenditure during the requested budget period.
Additional information or comments.	
Provide the amount of any indirect costs.	None
Any indirect costs funded with other MOF?	None
Objectives and indicators in the Operational Plan.	None
Additional information or comments.	

Form 56400 — 305 - Application, Licensing, and Certification Fees

Expenditures	Existing Operating Budget as of 10/01/2026			FY2027-2028 Total Request			FY2028-2029 Projected		
	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match
Salaries	—	—	—	—	—	—	—	—	—
Other Compensation	—	—	—	—	—	—	—	—	—
Related Benefits	—	—	—	—	—	—	—	—	—
TOTAL PERSONAL SERVICES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
Travel	—	—	—	—	—	—	—	—	—
Operating Services	—	—	—	—	—	—	—	—	—
Supplies	—	—	—	—	—	—	—	—	—
TOTAL OPERATING EXPENSES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
PROFESSIONAL SERVICES	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
Other Charges	350,000	—	—	350,000	—	—	200,000	—	—
Debt Service	—	—	—	—	—	—	—	—	—
Interagency Transfers	—	—	—	—	—	—	—	—	—
TOTAL OTHER CHARGES	**$350,000**	**—**	**—**	**$350,000**	**—**	**—**	**$200,000**	**—**	**—**
Acquisitions	—	—	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**	**—**
TOTAL EXPENDITURES	**$350,000**	**—**	**—**	**$350,000**	**—**	**—**	**$200,000**	**—**	**—**

Form 56400 — 305 - Application, Licensing, and Certification Fees

Question	Narrative Response
State the purpose, source and legal citation.	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 ß42 CFR 455.460 and the Medicaid Provider Screening Application Fee LAC 50:I.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.
Agency discretion or Federal requirement?	Agency discretion
Describe any budgetary peculiarities.	None
Is the Total Request amount for multiple years?	No, it is anticipated that the total requested funding will be available for expenditure during the requested budget period.
Additional information or comments.	
Provide the amount of any indirect costs.	None
Any indirect costs funded with other MOF?	None
Objectives and indicators in the Operational Plan.	None
Additional information or comments.	

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 56354 DEPT OF CORRECTIONS	Interagency Transfers Form ID 56370 DCFS	Interagency Transfers Form ID 56411 LDH-OBH
Salaries	43,061,566	130,006,436	21,198,673	—	—	—
Other Compensation	1,078,191	1,881,082	932,061	—	—	—
Related Benefits	18,241,092	65,327,154	7,447,626	—	—	—
TOTAL PERSONAL SERVICES	**$62,380,849**	**$197,214,672**	**$29,578,360**	**—**	**—**	**—**
Travel	158,104	338,668	98,383	—	—	—
Operating Services	4,406,635	13,187,831	3,294,563	—	—	—
Supplies	194,041	411,862	111,871	—	—	—
TOTAL OPERATING EXPENSES	**$4,758,780**	**$13,938,361**	**$3,504,817**	**—**	**—**	**—**
PROFESSIONAL SERVICES	**$72,487,450**	**$290,039,644**	**$70,481,162**	**$202,875**	**—**	**—**
Other Charges	63,162,116	189,370,143	44,603,836	—	—	—
Debt Service	—	—	—	—	—	—
Interagency Transfers	86,811,141	285,682,396	79,319,988	—	270,797	26,000
TOTAL OTHER CHARGES	**$149,973,257**	**$475,052,539**	**$123,923,824**	**—**	**$270,797**	**$26,000**
Acquisitions	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	**—**	**—**	**—**	**—**	**—**	**—**
TOTAL EXPENDITURES	**$289,600,336**	**$976,245,216**	**$227,488,163**	**$202,875**	**$270,797**	**$26,000**

Expenditures	Interagency Transfers Form ID 56794 DCFS	Fees & Self-generated Form ID 56373 MISC SELF-GEN REVENUE	Fees & Self-generated Form ID 56399 MEDICAID OUTSTATIONING	Fees & Self-generated Form ID 56400 FEES & SELF GENERATED	Statutory Dedications Form ID 56794 DCFS	Statutory Dedications Form ID 56826 LDH-MVA
Salaries	2,293,395	—	—	—	—	—
Other Compensation	—	—	—	—	75,000	—
Related Benefits	1,154,598	—	—	—	1,088	—
TOTAL PERSONAL SERVICES	**$3,447,993**	**—**	**—**	**—**	**$76,088**	**—**
Travel	4,204	—	—	—	4,150	—
Operating Services	210,149	—	—	—	35,275	—
Supplies	5,223	—	—	—	600	—
TOTAL OPERATING EXPENSES	**$219,576**	**—**	**—**	**—**	**$40,025**	**—**
PROFESSIONAL SERVICES	**$3,123,548**	**—**	**—**	**—**	**—**	**—**
Other Charges	32,217,295	250,000	3,600,000	350,000	20,000	504,454
Debt Service	—	—	—	—	—	—
Interagency Transfers	2,157,487	—	—	—	588,181	—
TOTAL OTHER CHARGES	**$34,374,782**	**$250,000**	**$3,600,000**	**$350,000**	**$608,181**	**$504,454**
Acquisitions	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	**—**	**—**	**—**	**—**	**—**	**—**
TOTAL EXPENDITURES	**$41,165,899**	**$250,000**	**$3,600,000**	**$350,000**	**$724,294**	**$504,454**

Expenditures	Federal Funds Form ID 56395 CHIP	Federal Funds Form ID 56396 MAP REFUGEE	Federal Funds Form ID 56397 MONEY FOLLOWS THE PERSON	Federal Funds Form ID 56398 SCHOOL BASED ADMIN	Federal Funds Form ID 56401 MEDICAID	Federal Funds Form ID 56793 TRANSFER
Salaries	1,585,110	—	—	—	61,299,398	285,136
Other Compensation	57,134	—	—	—	524,627	—
Related Benefits	1,042,778	—	—	—	34,260,581	134,468
TOTAL PERSONAL SERVICES	**$2,685,022**	**—**	**—**	**—**	**$96,084,606**	**$419,604**
Travel	6,218	—	—	—	98,382	—
Operating Services	115,537	—	—	—	6,594,664	—
Supplies	7,429	—	—	—	111,871	—
TOTAL OPERATING EXPENSES	**$129,184**	**—**	**—**	**—**	**$6,804,917**	**—**
PROFESSIONAL SERVICES	**$5,502,038**	**$165,565**	**—**	**—**	**$203,970,333**	**—**
Other Charges	1,662,476	—	—	7,500,000	20,990,303	—
Debt Service	—	—	—	—	—	—
Interagency Transfers	6,821,280	—	4,310,730	—	138,051,503	254,999
TOTAL OTHER CHARGES	**$8,483,756**	**—**	**$4,310,730**	**$7,500,000**	**$159,041,806**	**$254,999**
Acquisitions	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	**—**	**—**	**—**	**—**	**—**	**—**
TOTAL EXPENDITURES	**$16,800,000**	**$165,565**	**$4,310,730**	**$7,500,000**	**$465,901,662**	**$674,603**

Expenditures	Federal Funds Form ID 56794 DCFS	State General Fund (Direct) Form ID 56793 TRANSFER	State General Fund (Direct) Form ID 56794 DCFS
Salaries	21,481,831	265,387	21,597,506
Other Compensation	146,130	—	146,130
Related Benefits	10,492,549	124,871	10,668,595
TOTAL PERSONAL SERVICES	**$32,120,510**	**$390,258**	**$32,412,231**
Travel	67,610	—	59,721
Operating Services	1,825,571	—	1,112,072
Supplies	92,698	—	82,170
TOTAL OPERATING EXPENSES	**$1,985,879**	**—**	**$1,253,963**
PROFESSIONAL SERVICES	**$4,587,835**	**—**	**$2,006,288**
Other Charges	59,113,499	—	18,558,280
Debt Service	—	—	—
Interagency Transfers	46,390,278	—	7,491,153
TOTAL OTHER CHARGES	**$105,503,777**	**—**	**$26,049,433**
Acquisitions	—	—	—
Major Repairs	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	**—**	**—**	**—**
TOTAL EXPENDITURES	**$144,198,001**	**$390,258**	**$61,721,915**

Total Request

Expenditures	Used as a Cash Match	Total Means of Financing By Expenditure	Total State General Fund	Interagency Transfers Form ID 56354 DEPT OF CORRECTIONS	Interagency Transfers Form ID 56370 DCFS	Interagency Transfers Form ID 56411 LDH-OBH
Salaries	9,459,642	133,278,311	21,198,673	—	—	—
Other Compensation	1,654,639	2,017,814	932,061	—	—	—
Related Benefits	6,910,100	68,388,951	7,447,626	—	—	—
TOTAL PERSONAL SERVICES	**$18,024,381**	**$203,685,076**	**$29,578,360**	**—**	**—**	**—**
Travel	106,476	346,630	102,146	—	—	—
Operating Services	2,356,315	11,736,822	2,517,421	—	—	—
Supplies	130,725	421,650	116,489	—	—	—
TOTAL OPERATING EXPENSES	**$2,593,516**	**$12,505,102**	**$2,736,056**	**—**	**—**	**—**
PROFESSIONAL SERVICES	**$61,287,879**	**$300,969,618**	**$69,238,536**	**$202,875**	**—**	**—**
Other Charges	9,376,624	191,827,643	44,498,836	—	—	—
Debt Service	—	—	—	—	—	—
Interagency Transfers	44,714,380	302,397,931	70,006,270	—	270,797	26,000
TOTAL OTHER CHARGES	**$54,091,004**	**$494,225,574**	**$114,505,106**	**—**	**$270,797**	**$26,000**
Acquisitions	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	**—**	**—**	**—**	**—**	**—**	**—**
TOTAL EXPENDITURES	**$135,996,780**	**$1,011,385,370**	**$216,058,058**	**$202,875**	**$270,797**	**$26,000**

Expenditures	Interagency Transfers Form ID 56794 DCFS	Statutory Dedications Form ID 56794 DCFS	Statutory Dedications Form ID 56826 LDH-MVA	Federal Funds Form ID 56395 CHIP	Federal Funds Form ID 56396 MAP REFUGEE	Federal Funds Form ID 56397 MONEY FOLLOWS THE PERSON
Salaries	2,293,395	—	—	1,585,110	—	—
Other Compensation	—	75,000	—	57,134	—	—
Related Benefits	1,154,598	1,088	—	1,042,778	—	—
TOTAL PERSONAL SERVICES	**$3,447,993**	**$76,088**	**—**	**$2,685,022**	**—**	**—**
Travel	4,304	4,150	—	6,218	—	—
Operating Services	215,151	35,275	—	115,537	—	—
Supplies	5,347	600	—	7,429	—	—
TOTAL OPERATING EXPENSES	**$224,802**	**$40,025**	**—**	**$129,184**	**—**	**—**
PROFESSIONAL SERVICES	**$3,202,717**	**—**	**—**	**$5,502,038**	**$165,565**	**—**
Other Charges	32,217,295	20,000	504,454	1,662,476	—	—
Debt Service	—	—	—	—	—	—
Interagency Transfers	2,157,487	588,181	—	6,821,280	—	4,310,730
TOTAL OTHER CHARGES	**$34,374,782**	**$608,181**	**$504,454**	**$8,483,756**	**—**	**$4,310,730**
Acquisitions	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	**—**	**—**	**—**	**—**	**—**	**—**
TOTAL EXPENDITURES	**$41,250,294**	**$724,294**	**$504,454**	**$16,800,000**	**$165,565**	**$4,310,730**

Expenditures	Federal Funds Form ID 56398 SCHOOL BASED ADMIN	Federal Funds Form ID 56401 MEDICAID	Federal Funds Form ID 56793 TRANSFER	Federal Funds Form ID 56794 DCFS	Federal Funds Form ID 62887 LDH-MVA	Federal Funds Form ID 62922 LDH-MVA
Salaries	—	61,299,398	285,136	21,481,831	—	1,599,621
Other Compensation	—	524,627	—	146,130	—	—
Related Benefits	—	34,260,581	134,468	10,492,549	—	738,594
TOTAL PERSONAL SERVICES	**—**	**$96,084,606**	**$419,604**	**$32,120,510**	**—**	**$2,338,215**
Travel	—	102,481	—	67,610	—	—
Operating Services	—	5,915,795	—	1,825,571	—	—
Supplies	—	116,917	—	92,698	—	—
TOTAL OPERATING EXPENSES	**—**	**$6,135,193**	**—**	**$1,985,879**	**—**	**—**
PROFESSIONAL SERVICES	**—**	**$199,753,423**	**—**	**$4,587,835**	**$11,361,280**	**—**
Other Charges	7,500,000	20,772,803	—	59,113,499	(84,961,250)	—
Debt Service	—	—	—	—	—	—
Interagency Transfers	—	134,013,370	254,999	46,390,278	14,844,835	—
TOTAL OTHER CHARGES	**$7,500,000**	**$154,786,173**	**$254,999**	**$105,503,777**	**$(70,116,415)**	**—**
Acquisitions	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	**—**	**—**	**—**	**—**	**—**	**—**
TOTAL EXPENDITURES	**$7,500,000**	**$456,759,395**	**$674,603**	**$144,198,001**	**$(58,755,135)**	**$2,338,215**

Expenditures	Federal Funds Form ID 62923 LDH-MVA	State General Fund (Direct) Form ID 56793 TRANSFER	State General Fund (Direct) Form ID 56794 DCFS	State General Fund (Direct) Form ID 62887 LDH-MVA	State General Fund (Direct) Form ID 62922 LDH-MVA	State General Fund (Direct) Form ID 62923 LDH-MVA
Salaries	36,316	265,387	21,597,506	—	1,599,622	36,316
Other Compensation	68,366	—	146,130	—	—	68,366
Related Benefits	53,708	124,871	10,668,595	—	2,215,787	53,708
TOTAL PERSONAL SERVICES	**$158,390**	**$390,258**	**$32,412,231**	**—**	**$3,815,409**	**$158,390**
Travel	—	—	59,721	—	—	—
Operating Services	—	—	1,112,072	—	—	—
Supplies	—	—	82,170	—	—	—
TOTAL OPERATING EXPENSES	**—**	**—**	**$1,253,963**	**—**	**—**	**—**
PROFESSIONAL SERVICES	**—**	**—**	**$2,006,288**	**$4,949,061**	**—**	**—**
Other Charges	—	—	18,558,280	87,741,250	—	—
Debt Service	—	—	—	—	—	—
Interagency Transfers	—	—	7,491,153	15,222,551	—	—
TOTAL OTHER CHARGES	**—**	**—**	**$26,049,433**	**$102,963,801**	**—**	**—**
Acquisitions	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	**—**	**—**	**—**	**—**	**—**	**—**
TOTAL EXPENDITURES	**$158,390**	**$390,258**	**$61,721,915**	**$107,912,862**	**$3,815,409**	**$158,390**

Expenditures	Fees & Self-generated Form ID 56373 MISC SELF-GEN REVENUE	Fees & Self-generated Form ID 56399 MEDICAID OUTSTATIONING	Fees & Self-generated Form ID 56400 FEES & SELF GENERATED
Salaries	—	—	—
Other Compensation	—	—	—
Related Benefits	—	—	—
TOTAL PERSONAL SERVICES	**—**	**—**	**—**
Travel	—	—	—
Operating Services	—	—	—
Supplies	—	—	—
TOTAL OPERATING EXPENSES	**—**	**—**	**—**
PROFESSIONAL SERVICES	**—**	**—**	**—**
Other Charges	250,000	3,600,000	350,000
Debt Service	—	—	—
Interagency Transfers	—	—	—
TOTAL OTHER CHARGES	**$250,000**	**$3,600,000**	**$350,000**
Acquisitions	—	—	—
Major Repairs	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	**—**	**—**	**—**
TOTAL EXPENDITURES	**$250,000**	**$3,600,000**	**$350,000**

REVENUE COLLECTIONS/INCOME

Interagency Transfers

003 - Interagency Transfers

Source	Commitment Item	Commitment Item Name	FY2025-2026 Actuals	FY-2027 Estimate	FY2027-2028 Projected	Over/Under Current Year Estimate
SOURCE						
DCFS	4710059	MR-FROM STATE AGENCY	—	270,797	270,797	—
DEPT OF CORRECTIONS	4710059	MR-FROM STATE AGENCY	202,875	202,875	202,875	—
LDH-OBH	4710059	MR-FROM STATE AGENCY	26,000	26,000	26,000	—
DCFS-TANF	4710059	MR-FROM STATE AGENCY	—	41,165,899	41,250,294	84,395
Total Collections/Income			**$228,875**	**$41,665,571**	**$41,749,966**	**$84,395**
TYPE						
Expenditures Source of Funding Form (BR-6)			—	41,665,571	41,749,966	84,395
Transfer			228,875	—	—	—
Total Expenditures, Transfers and Carry Forwards to Next FY			**$228,875**	**$41,665,571**	**$41,749,966**	**$84,395**
Difference in Total Collections/Income and Total Expenditures, Transfers and Carry Forwards to Next FY			**—**	**—**	**—**	**—**

Fees & Self-generated

002 - Fees & Self-generated Revenues

Source	Commitment Item	Commitment Item Name	FY2025-2026 Actuals	FY-2027 Estimate	FY2027-2028 Projected	Over/Under Current Year Estimate
SOURCE						
FEES & SELF GENERATED	4710029	MR-PRIVATE SOURCES	—	350,000	350,000	—
THIRD PARTY PAYMENTS	4710029	MR-PRIVATE SOURCES	—	250,000	250,000	—
DONATIONS	4710029	MR-PRIVATE SOURCES	—	3,600,000	3,600,000	—
Total Collections/Income			**—**	**$4,200,000**	**$4,200,000**	**—**
TYPE						
Expenditures Source of Funding Form (BR-6)			—	4,200,000	4,200,000	—
Total Expenditures, Transfers and Carry Forwards to Next FY			**—**	**$4,200,000**	**$4,200,000**	**—**
Difference in Total Collections/Income and Total Expenditures, Transfers and Carry Forwards to Next FY			**—**	**—**	**—**	**—**

Statutory Dedications

H14 - Medical Assistance Programs Fraud Detection Fund

Source	Commitment Item	Commitment Item Name	FY2025-2026 Actuals	FY-2027 Estimate	FY2027-2028 Projected	Over/Under Current Year Estimate
SOURCE						
H14-MED ASST FRAUD FUND	4830014	INTRAFUND TRANSFER	1,407,500	—	—	—
Total Collections/Income			**$1,407,500**	**—**	**—**	**—**
TYPE						
Expenditures Source of Funding Form (BR-6)			1,407,500	—	—	—
Total Expenditures, Transfers and Carry Forwards to Next FY			**$1,407,500**	**—**	**—**	**—**
Difference in Total Collections/Income and Total Expenditures, Transfers and Carry Forwards to Next FY			**—**	**—**	**—**	**—**

S02 - Fraud Detection Fund

Source	Commitment Item	Commitment Item Name	FY2025-2026 Actuals	FY-2027 Estimate	FY2027-2028 Projected	Over/Under Current Year Estimate
SOURCE						
S02-FRAUD DETECTION FD	4830014	INTRAFUND TRANSFER	—	724,294	724,294	—
Total Collections/Income			**—**	**$724,294**	**$724,294**	**—**
TYPE						
Expenditures Source of Funding Form (BR-6)			—	724,294	724,294	—
Total Expenditures, Transfers and Carry Forwards to Next FY			**—**	**$724,294**	**$724,294**	**—**
Difference in Total Collections/Income and Total Expenditures, Transfers and Carry Forwards to Next FY			**—**	**—**	**—**	**—**

V65 - Modernization And Security Fund

Source	Commitment Item	Commitment Item Name	FY2025-2026 Actuals	FY-2027 Estimate	FY2027-2028 Projected	Over/Under Current Year Estimate
SOURCE						
V65-MODERN AND SEC FUND	4830014	INTRAFUND TRANSFER	—	504,454	504,454	—
Total Collections/Income			**—**	**$504,454**	**$504,454**	**—**
TYPE						
Expenditures Source of Funding Form (BR-6)			—	504,454	504,454	—
Total Expenditures, Transfers and Carry Forwards to Next FY			**—**	**$504,454**	**$504,454**	**—**
Difference in Total Collections/Income and Total Expenditures, Transfers and Carry Forwards to Next FY			**—**	**—**	**—**	**—**

Federal Funds

006 - Federal Funds

Source	Commitment Item	Commitment Item Name	FY2025-2026 Actuals	FY-2027 Estimate	FY2027-2028 Projected	Over/Under Current Year Estimate
SOURCE						
MAP REFUGEE	4060035	FR-OTHER	165,565	165,565	165,565	—
CHIP	4060035	FR-OTHER	16,800,000	16,800,000	16,800,000	—
MONEY FOLLOWS THE PERSON	4060035	FR-OTHER	4,310,730	4,310,730	4,310,730	—
SCHOOL BASED ADMIN	4060035	FR-OTHER	7,500,000	7,500,000	7,500,000	—
MEDICAID	4060035	FR-OTHER	178,476,285	465,901,662	465,901,662	—
FEDERAL	4060035	FR-OTHER	144,872,604	144,872,604	79,471,807	(65,400,797)
Total Collections/Income			**$352,125,184**	**$639,550,561**	**$574,149,764**	**$(65,400,797)**
TYPE						
Expenditures Source of Funding Form (BR-6)			352,125,184	639,550,561	574,149,764	(65,400,797)
Total Expenditures, Transfers and Carry Forwards to Next FY			**$352,125,184**	**$639,550,561**	**$574,149,764**	**$(65,400,797)**
Difference in Total Collections/Income and Total Expenditures, Transfers and Carry Forwards to Next FY			—	—	—	—

Justification of Differences

Form 57425 — 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 57426 — 305 - IAT DOC Reinstatement of Disability Medicaid

Question	Narrative Response
Explain any transfers to other appropriations.	Transfer to MVA, to pool unused funds for carryover. Preamble language allows LDH to carry over non-SGF state funds.
Break out INA by Source of Funding.	N/A
Additional information or comments.	

Form 57427 — 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 57428 — 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 57429 — 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 57430 — 305 - Med. Asst. Programs Fraud Det. Fund (H14)

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 57431 — 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 57432 — 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 57433 — 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 57434 — 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 57435 — 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 57436 — 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 57437 — 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 57475 — 305 - IAT from OBH for PASRR

Question	Narrative Response
Explain any transfers to other appropriations.	Transfer to MVA, to pool unused funds for carryover. Preamble language allows LDH to carry over non-SGF state funds.
Break out INA by Source of Funding.	N/A
Additional information or comments.	

Form 57562 — 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.	

Form 57663 — 305 - MVA - TANF, eHIP, and SEBT Tech from DCFS

Question	Narrative Response
Explain any transfers to other appropriations.	None
Break out INA by Source of Funding.	None
Additional information or comments.	None

Form 57664 — 305 - MVA - S02 Fraud Detection Fund

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

Form 57665 — 305 - MVA - SNAP

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

Form 61696 — 305 - Modernization and Security Fund

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

SCHEDULE OF REQUESTED EXPENDITURES

3052 - Medical Vendor Administration

Travel

FY2027-2028 Request	Description
346,630	Travel-related expenses, including but not limited to administrative travel, certifications, conferences, conventions, field travel, meal reimbursements, and training.
$346,630	**Total Travel**

Operating Services

FY2027-2028 Request	Description
940,710	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.
34,735	Includes, but not limited to, annual membership dues and subscriptions to various professional organizations and publications
99,129	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.
87,603	Includes, but not limited to, non-OTM telephone and communications services
4,066,316	Includes, but not limited to, office space for local and regional staff
176,782	Includes, but not limited to, security guards for headquarters and regional offices
60,789	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.
6,270,758	Miscellaneous operating expenses, including but not limited to administrative fees, janitorial services, data processing and contractual services, office relocation and moving expenses, document destruction, licenses, and other miscellaneous operating costs.
$11,736,822	**Total Operating Services**

Supplies

FY2027-2028 Request	Description
421,650	Includes, but not limited to, general consumable office supplies for use in conducting the day-to-day activities of the Medicaid and SNAP programs such as paper, pens, folders, binders, staples, printer toner, etc.
$421,650	**Total Supplies**

Professional Services

FY2027-2028 Request	Means of Financing	Description
216,388,001	Federal Funds	
84,581,617	State General Fund	
$300,969,618		**Accounting, auditing, and related contracts for the administration of the Medicaid program**
$300,969,618	**Total Professional Services**	

Other Charges

FY2027-2028 Request	Means of Financing	Description
51,793,385	State General Fund	
$51,793,385		**Administrative costs associated with Medicaid and SNAP program initiatives, including but not limited to, staff augmentation**
140,034,258	Federal Funds	
$140,034,258		**Administrative costs associated with Medicaid program initiatives, including but not limited to, staff augmentation**
$191,827,643	**Total Other Charges**	

Interagency Transfers

FY2027-2028 Request	Means of Financing	Receiving Agency	Description
52,000	Federal Funds		
$52,000		**ACADIANA AREA HUMAN SRVC DIST**	**AAHSA PASRR**

Interagency Transfers *(continued)*

FY2027-2028 Request	Means of Financing	Receiving Agency	Description
25,000	Federal Funds		
$25,000		**ACADIANA AREA HUMAN SRVC DIST**	**Acadiana Area Human Services District (AAHSD) - ACT 421 TEFRA**
8,568,859	Federal Funds		
$8,568,859		**ADMINISTRATIVE AGENCIES**	
109,000	Federal Funds		
$109,000		**CAPITAL AREA HUMAN SRV DSTRCT**	**Capital Area Human Services District (CAHSD) ACT 421 -TEFRA**
30,000	Federal Funds		
$30,000		**CAPITAL AREA HUMAN SRV DSTRCT**	**Capital Area Human Services District (CAHSD) - Pre-Admission Screening and Resident Review (PASRR)**
18,000	Federal Funds		
$18,000		**CENTRAL LA HUMAN SERVICE DIST**	**Act 421 Children's Medicaid (Tax Equity & Fiscal Responsibility Act or TEFRA) Option**
17,000	Federal Funds		
$17,000		**CENTRAL LA HUMAN SERVICE DIST**	**Central Louisiana Human Services District (CLHSD) Pre-Admission Screening and Resident Review (PASRR)**
4,000,000	Federal Funds		
$4,000,000		**DCFS-OFF FOR CHILD/FAMILY SRV**	**Admin activities related to medical eligibility, case management and supervision, referral of medical and behavioral health related services and Medicaid Outreach.**
1,656,885	Federal Funds		
1,656,885	State General Fund		
$3,313,770		**DIVISION OF ADMINISTRATION**	**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)**
52,167	Federal Funds		
52,167	State General Fund		
$104,334		**DIVISION OF ADMINISTRATION**	**DOA - Capitol Police Security**

Interagency Transfers *(continued)*

FY2027-2028 Request	Means of Financing	Receiving Agency	Description
284,811	Federal Funds		
284,810	State General Fund		
$569,621		**DIVISION OF ADMINISTRATION**	**DOA - Louisiana Department of the Treasury**
836,235	Federal Funds		
620,778	State General Fund		
$1,457,013		**DIVISION OF ADMINISTRATION**	**DOA - Office of Group Benefits**
452,688	Federal Funds		
452,689	State General Fund		
$905,377		**DIVISION OF ADMINISTRATION**	**DOA - Office of Risk Management (ORM)**
198,671	State General Fund		
$198,671		**DIVISION OF ADMINISTRATION**	**DOA - Office of State Procurement (OSP)**
198,670	Federal Funds		
$198,670		**DIVISION OF ADMINISTRATION**	**DOA - Office of State Procurement - Technical product support to include but not limited to module application development, maintenance, project management, licenses, software, and enhancements.**
34,926	Federal Funds		
34,926	State General Fund		
$69,852		**DIVISION OF ADMINISTRATION**	**DOA - Office of State Uniform Payroll (OSUP) Services**
768,521	Federal Funds		
768,521	State General Fund		
$1,537,042		**DIVISION OF ADMINISTRATION**	**DOA - Office of Technology Services (OTS) Production Support Services (PSS)**
77,278,646	State General Fund		
$77,278,646		**DIVISION OF ADMINISTRATION**	**DOA - Office of Technology Services- Technical product support to include but not limited to module application development, maintenance, project management, licenses, software, and enhancements.**

Interagency Transfers *(continued)*

FY2027-2028 Request	Means of Financing	Receiving Agency	Description
154,523,745	Federal Funds		
$154,523,745		**DIVISION OF ADMINISTRATION**	**DOA - Office of Technology Services-Technical product support to include but not limited to module application development, maintenance, project management, licenses, software and enhancements.**
578,494	Federal Funds		
578,496	State General Fund		
$1,156,989		**DIVISION OF ADMINISTRATION**	**DOA - State Civil Service (SCS) and Comprehensive Public Training Program (CPTP) Fees**
10,000	Federal Funds		
$10,000		**FLA PAR HUMAN SERVCS AUTHORITY**	**FPHSA - Centers for Medicare and Medicaid Services (CMS) mandated Pre-Admission Screening and Resident Review (PASRR) services**
80,000	Federal Funds		
$80,000		**FLA PAR HUMAN SERVCS AUTHORITY**	
2,300,000	Federal Funds		
$2,300,000		**HEALTH & HOSP OFF OF SECRETARY**	**Funding to OS to cover all costs necessary to carry out OMF/Administrative functions of SNAP including HR, Fiscal, Legal & OTS.**
150,332	Federal Funds		
$150,332		**HEALTH & HOSP OFF OF SECRETARY**	**Office of the Secretary (OS) - Bureaus of Legal Services Statewide Program Mgr. 1 (Position #50556686)**
1,300,000	Federal Funds		
$1,300,000		**HEALTH & HOSP OFF OF SECRETARY**	**OS - Bureau of Legal and Internal Audit Services**
600,000	Federal Funds		
$600,000		**HEALTH & HOSP OFF OF SECRETARY**	**OS - Bureau of Legal Services (Medicaid)**
3,100,000	Federal Funds		
$3,100,000		**HEALTH & HOSP OFF OF SECRETARY**	**OS - Health Standards**

Interagency Transfers *(continued)*

FY2027-2028 Request	Means of Financing	Receiving Agency	Description
1,419,546	Federal Funds		
$1,419,546		**HEALTH & HOSP OFF OF SECRETARY**	**OS - Medicaid Financial Reporting**
200,000	Federal Funds		
$200,000		**HED-BOARD OF REGENTS**	**Board of Regents (BOR) - Medical and Allied Health Professional Education Scholarships and Loan Program.**
56,000	Federal Funds		
$56,000		**IMPERIAL CALCASIEU HUM SV AUTH**	**IMCAL HSA TEFRA**
28,000	Federal Funds		
$28,000		**IMPERIAL CALCASIEU HUM SV AUTH**	**Imperial Calcasieu PASRR**
33,000	Federal Funds		
$33,000		**JEFFERSON PARISH HUMAN SRV ATH**	**Act 421 Tax Equity & Fiscal Responsibility Act (TEFRA) Option**
47,000	Federal Funds		
$47,000		**METRO HUMAN SVCS DISTRICT**	**Act 421 Tax Equity & Fiscal Responsibility Act (TEFRA) Option**
23,000	Federal Funds		
$23,000		**NE DELTA HUMAN SVCS AUTHORITY**	**Northeast Delta Human Services Authority (NEDHSA) - ACT 421 - TEFRA**
15,000	Federal Funds		
$15,000		**NE DELTA HUMAN SVCS AUTHORITY**	**Northeast Delta - Pre-Admission Screening and Resident Review (PASRR)**
45,000	Federal Funds		
$45,000		**NORTHWEST LA HUMAN SVCS DIST**	**Act 421 Tax Equity & Fiscal Responsibility Act (TEFRA) Option**
450,000	Federal Funds		
$450,000		**OFFICE OF AGING & ADULT SRVS**	**Maximus Contract Increase for OAAS**
1,135,953	Federal Funds		
$1,135,953		**OFFICE OF AGING & ADULT SRVS**	**OAAS - Adult Protective Services (APS)**

Interagency Transfers *(continued)*

FY2027-2028 Request	Means of Financing	Receiving Agency	Description
1,339,389	Federal Funds		
$1,339,389		**OFFICE OF AGING & ADULT SRVS**	**OAAS - Long-Term Personal Care Services (LT-PCS)**
1,920,967	Federal Funds		
$1,920,967		**OFFICE OF AGING & ADULT SRVS**	**OAAS - Money Follows the Person (MFP)**
400,000	Federal Funds		
$400,000		**OFFICE OF AGING & ADULT SRVS**	**OAAS - Nursing Home Resident Trust Fund (NHRTF)**
2,489,081	Federal Funds		
$2,489,081		**OFFICE OF AGING & ADULT SRVS**	**OAAS - OAAS Participant Tracking System (OPTS)**
2,093,863	Federal Funds		
$2,093,863		**OFFICE OF AGING & ADULT SRVS**	**OAAS - Permanent Supportive Housing (PSH)**
8,199,166	Federal Funds		
$8,199,166		**OFFICE OF AGING & ADULT SRVS**	**To reimburse OAAS up to $8,199,166 of the federal costs associated with staff who provide support through the programs the Executive Administration Protection and Support teams, listed as; the Assistant Secretary, Deputy Assistant Secretary, Finance and Administration Support Services, Program Operations admin and Regional offices, Policy Development, Research and Quality, My Choice Louisiana, and Nursing Facility Admissions that provide access to quality long-term services and supports for the elderly and people with adult-onset disabilities in a manner that supports choice, informal caregiving and effective use of public resources.**
816,829	Federal Funds		
$816,829		**OFFICE OF AGING & ADULT SRVS**	

Interagency Transfers *(continued)*

FY2027-2028 Request	Means of Financing	Receiving Agency	Description
284,886	Federal Funds		
$284,886		**OFFICE OF BEHAVIORAL HEALTH**	**Certified Community Behavioral Health Clinic (CCBHC)**
3,772,950	Federal Funds		
$3,772,950		**OFFICE OF BEHAVIORAL HEALTH**	**OBH - Pre-Admission Screening and Resident Review (PASRR) Level ii**
3,792,500	Federal Funds		
$3,792,500		**OFFICE OF BEHAVIORAL HEALTH**	**OBH - Specialized Behavioral Health Services (SBHS), Pre-Admission Screening and Resident Review (PASRR), and Department of Justice (DOJ) Nursing Facility Transition (NFT) services**
5,583,600	Federal Funds		
$5,583,600		**OFFICE OF BEHAVIORAL HEALTH**	**OBH - Statewide Crisis Hub**
227,000	Federal Funds		
$227,000		**OFFICE OF PUBLIC HEALTH**	**OPH Tobacco Control Statewide QUITLINE** **Immunization LINKS System**
534,006	Federal Funds		
$534,006		**OFFICE OF THE ATTORNEY GENERAL**	**OAG - Department of Justice (DOJ) Advocacy Center Ombudsman services for the Community Living Ombudsman Program (CLOP at $459,006) and Supported Independent Living Advocacy Program (SILAP at $75,000)**
4,217,331	Federal Funds		
$4,217,331		**OFF INTEL & DEV DIS SUPP**	**Medicaid Match for support services provided by OCDD**
130,351	Federal Funds		
$130,351		**OFF INTEL & DEV DIS SUPP**	**OCDD - Act 421 Children's Medicaid (Tax Equity & Fiscal Responsibility Act or TEFRA) Option**

Interagency Transfers *(continued)*

FY2027-2028 Request	Means of Financing	Receiving Agency	Description
386,678	Federal Funds		
$386,678		**OFF INTEL & DEV DIS SUPP**	**OCDD - Assessment of Services Needs for persons on the SUN registry and to prioritize access of 1915c HCBS**
1,009,255	Federal Funds		
$1,009,255		**OFF INTEL & DEV DIS SUPP**	**OCDD - Money Follows the Person (MFP) Rebalancing Demonstration Grant**
31,462	Federal Funds		
$31,462		**S CNTL LA HUMAN SVCS AUTHORITY**	**South Central LA Humans Services Authority (SCLHSA) - Act 421 Children's Medicaid (Tax Equity & Fiscal Responsibility Act or TEFRA) Option**
21,099	Federal Funds		
21,099	State General Fund		
$42,197		**WORKFORCE SUPP & TRAINING**	**LWC - Louisiana Workforce Commission (LWC)**
$302,397,931	**Total Interagency Transfers**		



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Continuation Budget Adjustments

AGENCY SUMMARY STATEMENT

Total Agency

Means of Financing

Description	Existing Operating Budget as of 10/01/2026	Non-Recurring	Inflation	Compulsory	Workload	Other	FY2027-2028 Requested Continuation Level
STATE GENERAL FUND (Direct)	289,600,336	(10,730,510)	1,789,482	3,973,799	—	105,423,785	390,056,892
STATE GENERAL FUND BY:	—	—	—	—	—	—	—
INTERAGENCY TRANSFERS	41,665,571	—	84,395	—	—	—	41,749,966
FEES & SELF-GENERATED	4,200,000	—	—	—	—	—	4,200,000
STATUTORY DEDICATIONS	1,228,748	—	953	—	—	(953)	1,228,748
FEDERAL FUNDS	639,550,561	(17,562,502)	5,114,329	2,496,605	—	(55,449,229)	574,149,764
TOTAL MEANS OF FINANCING	**$976,245,216**	**$(28,293,012)**	**$6,989,159**	**$6,470,404**	**—**	**$49,973,603**	**$1,011,385,370**

Fees and Self-Generated

Description	Existing Operating Budget as of 10/01/2026	Non-Recurring	Inflation	Compulsory	Workload	Other	FY2027-2028 Requested Continuation Level
Fees & Self-generated Revenues	4,200,000	—	—	—	—	—	4,200,000
Total:	**$4,200,000**	**—**	**—**	**—**	**—**	**—**	**$4,200,000**

Statutory Dedications

Description	Existing Operating Budget as of 10/01/2026	Non-Recurring	Inflation	Compulsory	Workload	Other	FY2027-2028 Requested Continuation Level
Fraud Detection Fund	724,294	—	953	—	—	(953)	724,294
Modernization And Security Fund	504,454	—	—	—	—	—	504,454
Total:	**$1,228,748**	**—**	**$953**	**—**	**—**	**$(953)**	**$1,228,748**

Expenditures and Positions

Description	Existing Operating Budget as of 10/01/2026	Non-Recurring	Inflation	Compulsory	Workload	Other	FY2027-2028 Requested Continuation Level
Salaries	130,006,436	—	—	3,271,875	—	—	133,278,311
Other Compensation	1,881,082	—	—	136,732	—	—	2,017,814
Related Benefits	65,327,154	—	—	3,061,797	—	—	68,388,951
TOTAL PERSONAL SERVICES	**$197,214,672**	**—**	**—**	**$6,470,404**	**—**	**—**	**$203,685,076**
Travel	338,668	—	8,061	—	—	(99)	346,630
Operating Services	13,187,831	(1,723,032)	272,863	—	—	(840)	11,736,822
Supplies	411,862	—	9,802	—	—	(14)	421,650
TOTAL OPERATING EXPENSES	**$13,938,361**	**$(1,723,032)**	**$290,726**	**—**	**—**	**$(953)**	**$12,505,102**
PROFESSIONAL SERVICES	**$290,039,644**	**$(8,592,896)**	**$6,698,433**	**—**	**—**	**$12,824,437**	**$300,969,618**
Other Charges	189,370,143	(322,500)	—	—	—	2,780,000	191,827,643
Debt Service	—	—	—	—	—	—	—
Interagency Transfers	285,682,396	(17,654,584)	—	—	—	34,370,119	302,397,931
TOTAL OTHER CHARGES	**$475,052,539**	**$(17,977,084)**	**—**	**—**	**—**	**$37,150,119**	**$494,225,574**
Acquisitions	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	**—**	**—**	**—**	**—**	**—**	**—**	**—**
TOTAL EXPENDITURES	**$976,245,216**	**$(28,293,012)**	**$6,989,159**	**$6,470,404**	**—**	**$49,973,603**	**$1,011,385,370**
Classified	2,143	—	—	—	—	8	2,151
Unclassified	10	—	—	—	—	—	10
TOTAL AUTHORIZED T.O. POSITIONS	**2,153**	**—**	**—**	**—**	**—**	**8**	**2,161**
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	**—**	**—**	**—**	**—**	**—**	**—**	**—**
TOTAL NON-T.O. FTE POSITIONS	**114**	**—**	**—**	**—**	**—**	**(8)**	**106**

CONTINUATION BUDGET ADJUSTMENTS - SUMMARIZED

Form 59304 — FY27-28 Non-Recurring Carryforwards

Means of Financing

	Amount
STATE GENERAL FUND (Direct)	(10,730,510)
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	(17,562,502)
TOTAL MEANS OF FINANCING	**$(28,293,012)**

Positions

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

Expenditures

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	**—**
Travel	—
Operating Services	(1,723,032)
Supplies	—
TOTAL OPERATING EXPENSES	**$(1,723,032)**
PROFESSIONAL SERVICES	**$(8,592,896)**
Other Charges	(322,500)
Debt Service	—
Interagency Transfers	(17,654,584)
TOTAL OTHER CHARGES	**$(17,977,084)**
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	**—**
TOTAL EXPENDITURES	**$(28,293,012)**

Form 59307 — FY27-28 Inflation

Means of Financing

	Amount
STATE GENERAL FUND (Direct)	1,789,482
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	84,395
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	953
FEDERAL FUNDS	5,114,329
TOTAL MEANS OF FINANCING	**$6,989,159**

Positions

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

Expenditures

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	**—**
Travel	8,061
Operating Services	272,863
Supplies	9,802
TOTAL OPERATING EXPENSES	**$290,726**
PROFESSIONAL SERVICES	**$6,698,433**
Other Charges	—
Debt Service	—
Interagency Transfers	—
TOTAL OTHER CHARGES	**—**
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	**—**
TOTAL EXPENDITURES	**$6,989,159**

Form 59524 — 305 - Annual Market Adjustment for Classified Employees

Means of Financing

	Amount
STATE GENERAL FUND (Direct)	3,815,409
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	2,338,215
TOTAL MEANS OF FINANCING	**$6,153,624**

Positions

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

Expenditures

	Amount
Salaries	3,199,243
Other Compensation	—
Related Benefits	2,954,381
TOTAL PERSONAL SERVICES	**$6,153,624**
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	**—**
PROFESSIONAL SERVICES	**—**
Other Charges	—
Debt Service	—
Interagency Transfers	—
TOTAL OTHER CHARGES	**—**
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	**—**
TOTAL EXPENDITURES	**$6,153,624**

Form 59525 — 305 - Annual Market Adjustment for Unclassified Employees

Means of Financing

	Amount
STATE GENERAL FUND (Direct)	158,390
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	158,390
TOTAL MEANS OF FINANCING	**$316,780**

Positions

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

Expenditures

	Amount
Salaries	72,632
Other Compensation	136,732
Related Benefits	107,416
TOTAL PERSONAL SERVICES	**$316,780**
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	**—**
PROFESSIONAL SERVICES	**—**
Other Charges	—
Debt Service	—
Interagency Transfers	—
TOTAL OTHER CHARGES	**—**
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	**—**
TOTAL EXPENDITURES	**$316,780**

Form 59526 — 305 - Personal Services Base Adjustments

Means of Financing

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

Positions

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

Expenditures

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

Form 59527 — 305 - Conversion of 8 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	—
TOTAL MEANS OF FINANCING	**—**

Positions

	FTE
Classified	8
Unclassified	—
TOTAL AUTHORIZED T.O. POSITIONS	8
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	—
TOTAL NON-T.O. FTE POSITIONS	(8)

Expenditures

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

Form 59529 — 305 - Act 421 Children's Medicaid Option / TEFRA LGE's

Means of Financing

	Amount
STATE GENERAL FUND (Direct)	106,990
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	106,990
TOTAL MEANS OF FINANCING	**$213,980**

Positions

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

Expenditures

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	**—**
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	**—**
PROFESSIONAL SERVICES	**—**
Other Charges	—
Debt Service	—
Interagency Transfers	213,980
TOTAL OTHER CHARGES	**$213,980**
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	**—**
TOTAL EXPENDITURES	**$213,980**

Form 59530 — 305 - Medicaid Eligibility Contract Cost Increase

Means of Financing

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

Positions

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

Expenditures

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

Form 59531 — 305 - PASRR Level II Position Reclassification

Means of Financing

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

Positions

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

Expenditures

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

Form 59532 — 305 - PASRR Level II Evaluation and IT System

Means of Financing

	Amount
STATE GENERAL FUND (Direct)	—
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	1,826,475
TOTAL MEANS OF FINANCING	**$1,826,475**

Positions

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

Expenditures

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	**—**
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	**—**
PROFESSIONAL SERVICES	**—**
Other Charges	—
Debt Service	—
Interagency Transfers	1,826,475
TOTAL OTHER CHARGES	**$1,826,475**
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	**—**
TOTAL EXPENDITURES	**$1,826,475**

Form 59533 — 305 - Rate and Audit Cost Report Solution

Means of Financing

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

Positions

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

Expenditures

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

Form 59534 — 305 - Horne Financial Collection & Cost Reporting System

Means of Financing

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

Positions

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

Expenditures

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

Form 59535 — 305 - IAT Authority for MOUs with Office of the Secretary

Means of Financing

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

Positions

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

Expenditures

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

Form 59536 — 305 - MVA - SNAP Admin MOF Swap OBBBA FFP Rates

Means of Financing

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

Positions

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

Expenditures

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

Form 59537 — 305 - MVA - Increase in Accenture Contract

Means of Financing

	Amount
STATE GENERAL FUND (Direct)	695,000
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	2,085,000
TOTAL MEANS OF FINANCING	**$2,780,000**

Positions

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

Expenditures

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	**—**
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	**—**
PROFESSIONAL SERVICES	**—**
Other Charges	2,780,000
Debt Service	—
Interagency Transfers	—
TOTAL OTHER CHARGES	**$2,780,000**
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	**—**
TOTAL EXPENDITURES	**$2,780,000**

Form 59538 — 305 - MVA - Annualization of Remaining SNAP Budget

Means of Financing

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

Positions

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

Expenditures

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

Form 59541 — 305 - OAAS OPTS Module Development

Means of Financing

	Amount
STATE GENERAL FUND (Direct)	—
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	2,489,077
TOTAL MEANS OF FINANCING	**$2,489,077**

Positions

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

Expenditures

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	**—**
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	**—**
PROFESSIONAL SERVICES	**—**
Other Charges	—
Debt Service	—
Interagency Transfers	2,489,077
TOTAL OTHER CHARGES	**$2,489,077**
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	**—**
TOTAL EXPENDITURES	**$2,489,077**

Form 59542 — 305 - Maximus Contract Increase

Means of Financing

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

Positions

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

Expenditures

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

Form 61673 — 305- MVA SNAP BENEFIT COST SHARE ANNUALIZATION

Means of Financing

	Amount
STATE GENERAL FUND (Direct)	75,015,000
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	(75,015,000)
TOTAL MEANS OF FINANCING	**—**

Positions

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

Expenditures

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

Form 61675 — 305- MVA SNAP COST SHARE ANNUALIZATION

Means of Financing

	Amount
STATE GENERAL FUND (Direct)	12,031,250
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	(12,031,250)
TOTAL MEANS OF FINANCING	**—**

Positions

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

Expenditures

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

Form 61680 — 305-MVA SNAP DELOITTE OTS (LITE)

Means of Financing

	Amount
STATE GENERAL FUND (Direct)	11,969,100
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	11,969,100
TOTAL MEANS OF FINANCING	**$23,938,200**

Positions

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

Expenditures

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	**—**
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	**—**
PROFESSIONAL SERVICES	**—**
Other Charges	—
Debt Service	—
Interagency Transfers	23,938,200
TOTAL OTHER CHARGES	**$23,938,200**
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	**—**
TOTAL EXPENDITURES	**$23,938,200**

Form 62049 — 305 - Medicaid Eligibility Printing Cost Increase

Means of Financing

	Amount
STATE GENERAL FUND (Direct)	1,742,952
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	1,742,952
TOTAL MEANS OF FINANCING	**$3,485,904**

Positions

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

Expenditures

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	**—**
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	**—**
PROFESSIONAL SERVICES	**—**
Other Charges	—
Debt Service	—
Interagency Transfers	3,485,904
TOTAL OTHER CHARGES	**$3,485,904**
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	**—**
TOTAL EXPENDITURES	**$3,485,904**

Form 62081 — 305 - Pelican Data Broker Services Contract Increase

Means of Financing

	Amount
STATE GENERAL FUND (Direct)	3,206,109
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	9,618,328
TOTAL MEANS OF FINANCING	**$12,824,437**

Positions

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

Expenditures

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	**—**
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	**—**
PROFESSIONAL SERVICES	**$12,824,437**
Other Charges	—
Debt Service	—
Interagency Transfers	—
TOTAL OTHER CHARGES	**—**
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	**—**
TOTAL EXPENDITURES	**$12,824,437**

Form 62086 — 305 - Certified Community Behavioral Health Clinic (CCBHC)

Means of Financing

	Amount
STATE GENERAL FUND (Direct)	—
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	284,886
TOTAL MEANS OF FINANCING	**$284,886**

Positions

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

Expenditures

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	**—**
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	**—**
PROFESSIONAL SERVICES	**—**
Other Charges	—
Debt Service	—
Interagency Transfers	284,886
TOTAL OTHER CHARGES	**$284,886**
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	**—**
TOTAL EXPENDITURES	**$284,886**

Form 62091 — 305 - Medicaid Eligibility Postage Cost Increase

Means of Financing

	Amount
STATE GENERAL FUND (Direct)	657,384
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	657,384
TOTAL MEANS OF FINANCING	**$1,314,768**

Positions

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

Expenditures

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	**—**
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	**—**
PROFESSIONAL SERVICES	**—**
Other Charges	—
Debt Service	—
Interagency Transfers	1,314,768
TOTAL OTHER CHARGES	**$1,314,768**
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	**—**
TOTAL EXPENDITURES	**$1,314,768**

Form 62173 — 305 - Compulsory Adjustment - Standard Inflation

Means of Financing

	Amount
STATE GENERAL FUND (Direct)	—
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	(953)
FEDERAL FUNDS	—
TOTAL MEANS OF FINANCING	**$(953)**

Positions

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

Expenditures

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	**—**
Travel	(99)
Operating Services	(840)
Supplies	(14)
TOTAL OPERATING EXPENSES	**$(953)**
PROFESSIONAL SERVICES	**—**
Other Charges	—
Debt Service	—
Interagency Transfers	—
TOTAL OTHER CHARGES	**—**
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	**—**
TOTAL EXPENDITURES	**$(953)**

Form 62653 — 305 - Program Operations-CCW Waitlist Reduction Initiative

Means of Financing

	Amount
STATE GENERAL FUND (Direct)	—
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	816,829
TOTAL MEANS OF FINANCING	**$816,829**

Positions

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

Expenditures

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	**—**
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	**—**
PROFESSIONAL SERVICES	**—**
Other Charges	—
Debt Service	—
Interagency Transfers	816,829
TOTAL OTHER CHARGES	**$816,829**
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	**—**
TOTAL EXPENDITURES	**$816,829**

PROGRAM SUMMARY STATEMENT

3052 - Medical Vendor Administration

Means of Financing

Description	Existing Operating Budget as of 10/01/2026	Non-Recurring	Inflation	Compulsory	Workload	Other	FY2027-2028 Requested Continuation Level
STATE GENERAL FUND (Direct)	289,600,336	(10,730,510)	1,789,482	3,973,799	—	105,423,785	390,056,892
STATE GENERAL FUND BY:	—	—	—	—	—	—	—
INTERAGENCY TRANSFERS	41,665,571	—	84,395	—	—	—	41,749,966
FEES & SELF-GENERATED	4,200,000	—	—	—	—	—	4,200,000
STATUTORY DEDICATIONS	1,228,748	—	953	—	—	(953)	1,228,748
FEDERAL FUNDS	639,550,561	(17,562,502)	5,114,329	2,496,605	—	(55,449,229)	574,149,764
TOTAL MEANS OF FINANCING	**$976,245,216**	**$(28,293,012)**	**$6,989,159**	**$6,470,404**	**—**	**$49,973,603**	**$1,011,385,370**

Fees and Self-Generated

Description	Existing Operating Budget as of 10/01/2026	Non-Recurring	Inflation	Compulsory	Workload	Other	FY2027-2028 Requested Continuation Level
Fees & Self-generated Revenues	4,200,000	—	—	—	—	—	4,200,000
Total:	**$4,200,000**	**—**	**—**	**—**	**—**	**—**	**$4,200,000**

Statutory Dedications

Description	Existing Operating Budget as of 10/01/2026	Non-Recurring	Inflation	Compulsory	Workload	Other	FY2027-2028 Requested Continuation Level
Fraud Detection Fund	724,294	—	953	—	—	(953)	724,294
Modernization And Security Fund	504,454	—	—	—	—	—	504,454
Total:	**$1,228,748**	**—**	**$953**	**—**	**—**	**$(953)**	**$1,228,748**

Expenditures and Positions

Description	Existing Operating Budget as of 10/01/2026	Non-Recurring	Inflation	Compulsory	Workload	Other	FY2027-2028 Requested Continuation Level
Salaries	130,006,436	—	—	3,271,875	—	—	133,278,311
Other Compensation	1,881,082	—	—	136,732	—	—	2,017,814
Related Benefits	65,327,154	—	—	3,061,797	—	—	68,388,951
TOTAL PERSONAL SERVICES	**$197,214,672**	**—**	**—**	**$6,470,404**	**—**	**—**	**$203,685,076**
Travel	338,668	—	8,061	—	—	(99)	346,630
Operating Services	13,187,831	(1,723,032)	272,863	—	—	(840)	11,736,822
Supplies	411,862	—	9,802	—	—	(14)	421,650
TOTAL OPERATING EXPENSES	**$13,938,361**	**$(1,723,032)**	**$290,726**	**—**	**—**	**$(953)**	**$12,505,102**
PROFESSIONAL SERVICES	**$290,039,644**	**$(8,592,896)**	**$6,698,433**	**—**	**—**	**$12,824,437**	**$300,969,618**
Other Charges	189,370,143	(322,500)	—	—	—	2,780,000	191,827,643
Debt Service	—	—	—	—	—	—	—
Interagency Transfers	285,682,396	(17,654,584)	—	—	—	34,370,119	302,397,931
TOTAL OTHER CHARGES	**$475,052,539**	**$(17,977,084)**	**—**	**—**	**—**	**$37,150,119**	**$494,225,574**
Acquisitions	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	**—**	**—**	**—**	**—**	**—**	**—**	**—**
TOTAL EXPENDITURES	**$976,245,216**	**$(28,293,012)**	**$6,989,159**	**$6,470,404**	**—**	**$49,973,603**	**$1,011,385,370**
Classified	2,143	—	—	—	—	8	2,151
Unclassified	10	—	—	—	—	—	10
TOTAL AUTHORIZED T.O. POSITIONS	**2,153**	**—**	**—**	**—**	**—**	**8**	**2,161**
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	**—**	**—**	**—**	**—**	**—**	**—**	**—**
TOTAL NON-T.O. FTE POSITIONS	**114**	**—**	**—**	**—**	**—**	**(8)**	**106**

CONTINUATION BUDGET ADJUSTMENTS - BY PROGRAM

Form 59304 — FY27-28 Non-Recurring Carryforwards

3052 - Medical Vendor Administration

Means of Financing

	Amount
STATE GENERAL FUND (Direct)	(10,730,510)
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	(17,562,502)
TOTAL MEANS OF FINANCING	**$(28,293,012)**

Expenditures

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	**—**
Travel	—
Operating Services	(1,723,032)
Supplies	—
TOTAL OPERATING EXPENSES	**$(1,723,032)**
PROFESSIONAL SERVICES	**$(8,592,896)**
Other Charges	(322,500)
Debt Service	—
Interagency Transfers	(17,654,584)
TOTAL OTHER CHARGES	**$(17,977,084)**
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	**—**
TOTAL EXPENDITURES	**$(28,293,012)**

Positions

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

Statutory Dedications

	Amount
Total:	**—**

Supporting Detail

Means of Financing

Description	Amount
Federal Funds	(17,562,502)
State General Fund	(10,730,510)
Total:	**$(28,293,012)**

Operating Services

Commitment item	Name	Amount
5300000	TOTAL OPERATING SERV	(1,723,032)
Total:		**$(1,723,032)**

Professional Services

Commitment item	Name	Amount
5500000	TOTAL PROF SERVICES	(8,592,896)
Total:		**$(8,592,896)**

Other Charges

Commitment item	Name	Amount
5600000	TOTAL OTHER CHARGES	(322,500)
Total:		**$(322,500)**

Interagency Transfer

Commitment item	Name	Amount
5950000	TOTAL IAT	(17,654,584)
Total:		**$(17,654,584)**

Form 59307 — FY27-28 Inflation

3052 - Medical Vendor Administration

Means of Financing

	Amount
STATE GENERAL FUND (Direct)	1,789,482
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	84,395
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	953
FEDERAL FUNDS	5,114,329
TOTAL MEANS OF FINANCING	**$6,989,159**

Expenditures

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	**—**
Travel	8,061
Operating Services	272,863
Supplies	9,802
TOTAL OPERATING EXPENSES	**$290,726**
PROFESSIONAL SERVICES	**$6,698,433**
Other Charges	—
Debt Service	—
Interagency Transfers	—
TOTAL OTHER CHARGES	**—**
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	**—**
TOTAL EXPENDITURES	**$6,989,159**

Positions

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

Statutory Dedications

	Amount
Fraud Detection Fund	953
Total:	**$953**

Supporting Detail

Means of Financing

Description	Amount
Federal Funds	5,114,329
Fraud Detection Fund	953
Interagency Transfers	84,395
State General Fund	1,789,482
Total:	**$6,989,159**

Travel

Commitment item	Name	Amount
5200000	TOTAL TRAVEL	8,061
Total:		**$8,061**

Operating Services

Commitment item	Name	Amount
5300000	TOTAL OPERATING SERV	272,863
Total:		**$272,863**

Supplies

Commitment item	Name	Amount
5400000	TOTAL SUPPLIES	9,802
Total:		**$9,802**

Professional Services

Commitment item	Name	Amount
5500000	TOTAL PROF SERVICES	6,698,433
Total:		**$6,698,433**

Form 59524 — 305 - Annual Market Adjustment for Classified Employees

3052 - Medical Vendor Administration

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	3,815,409
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	2,338,215
TOTAL MEANS OF FINANCING	**$6,153,624**

AUTHORIZED POSITIONS

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

EXPENDITURES

	Amount
Salaries	3,199,243
Other Compensation	—
Related Benefits	2,954,381
TOTAL PERSONAL SERVICES	**$6,153,624**
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	**—**
PROFESSIONAL SERVICES	**—**
Other Charges	—
Debt Service	—
Interagency Transfers	—
TOTAL OTHER CHARGES	**—**
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	**—**
TOTAL EXPENDITURES	**$6,153,624**

Question	Narrative Response
Explain the need for this request.	This request is for funding of the annual market adjustment to salaries for classified employees per LaGOV PEP Payroll Projections Report dated 09/15/2025.
Cite performance indicators for the adjustment.	N/A
What would the impact be if this is not funded?	N/A
Is revenue a fixed amount or can it be adjusted?	N/A
Is the expenditure of these revenues restricted?	N/A
Additional information or comments.	N/A

Form 59525 — 305 - Annual Market Adjustment for Unclassified Employees

3052 - Medical Vendor Administration

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	158,390
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	158,390
TOTAL MEANS OF FINANCING	**$316,780**

AUTHORIZED POSITIONS

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

EXPENDITURES

	Amount
Salaries	72,632
Other Compensation	136,732
Related Benefits	107,416
TOTAL PERSONAL SERVICES	**$316,780**
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	**—**
PROFESSIONAL SERVICES	**—**
Other Charges	—
Debt Service	—
Interagency Transfers	—
TOTAL OTHER CHARGES	**—**
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	**—**
TOTAL EXPENDITURES	**$316,780**

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.	N/A

Form 59526 — 305 - Personal Services Base Adjustments

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	—
TOTAL MEANS OF FINANCING	**—**

AUTHORIZED POSITIONS

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

EXPENDITURES

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

Question	Narrative Response
Explain the need for this request.	This request is for the annualization of salaries, other compensation, and related benefits per the attached LaGOV PEP Payroll Projections Report dated 09/15/2024.
Cite performance indicators for the adjustment.	N/A
What would the impact be if this is not funded?	N/A
Is revenue a fixed amount or can it be adjusted?	N/A
Is the expenditure of these revenues restricted?	N/A
Additional information or comments.	N/A

Form 59527 — 305 - Conversion of 8 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	—
TOTAL MEANS OF FINANCING	**—**

EXPENDITURES

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

AUTHORIZED POSITIONS

	FTE
Classified	8
Unclassified	—
TOTAL AUTHORIZED T.O. POSITIONS	8
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	—
TOTAL NON-T.O. FTE POSITIONS	(8)

Statutory Dedications

	Amount
Fraud Detection Fund	—
Medical Assistance Programs Fraud Detection Fund	—
Total:	**—**

Question	Narrative Response
Explain the need for this request.	This request is for the conversion of 8 job appointments expiring in FY27 to authorized T.O. Following are the explanations as to why the current incumbent is still needed in the agency: Position #69001 - This position is needed to support ancillary services (FQHCs/RHCs, Durable Medical Equipment, Hearing and Eye Care/Vision Services, etc.) due to state and federal regulatory requirements associated with these services. Having T.O. would support the long-term stability of operations and oversight of Medicaid benefits, assist with succession planning, and reduce employee turnover. Position #50636840 - This position is needed due to establishing a new centralized managed care organization oversight unit to effectively and efficiently monitor Managed Care contractor performance and compliance with agency contracts related to the care of children in DCFS custody. This position serves as the primary Medicaid liaison between LDH and DCFS regarding healthcare services for children and youth in state custody and coordinates implementation and oversight of MCO requirements related to DCFS collaboration, care management, multidisciplinary care teams, reporting, and data sharing. Positions #50667031 and #50667034 - These positions are responsible for post eligibility review, MEQC and PERM. It is critical to the agency that we maintain these positions to continue our ongoing work to improve error rates in preparation for federal law changes that will impose penalties on states for error rates above 3% beginning in October 2029. Four (4) Positions in Program Integrity - These positions are perpetual positions within the PI Unit to work fraud, waste, and abuse provider cases and require working in the case management system. This request shifts funding from Other Compensation to Salaries based on the incumbent's requested salary for a net effect of $0 to the agency.
Cite performance indicators for the adjustment.	N/A
What would the impact be if this is not funded?	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.
Is revenue a fixed amount or can it be adjusted?	N/A
Is the expenditure of these revenues restricted?	N/A
Additional information or comments.	N/A

Form 59529 — 305 - Act 421 Children's Medicaid Option / TEFRA LGE's

3052 - Medical Vendor Administration

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	106,990
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	106,990
TOTAL MEANS OF FINANCING	**$213,980**

AUTHORIZED POSITIONS

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

EXPENDITURES

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	**—**
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	**—**
PROFESSIONAL SERVICES	**—**
Other Charges	—
Debt Service	—
Interagency Transfers	213,980
TOTAL OTHER CHARGES	**$213,980**
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	**—**
TOTAL EXPENDITURES	**$213,980**

Question	Narrative Response
Explain the need for this request.	The Act 421 Children's Medicaid Option (Act 421-CMO) or TEFRA Program requires children to meet hospital, ICF, or nursing facility level of care (LOC) in order to receive Medicaid coverage through this program. Medicaid and OCDD established Intergovernmental Agreements (IGAs) with each of the ten Local Governing Entities (LGEs) to conduct these LOC assessments as part of the eligibility process. The FY26 EOB is $425k and the FY27 projection is $499k. The request is to fund an increase of $74k to cover the cost of the increased number of assessments being performed by the LGEs.
Cite performance indicators for the adjustment.	None
What would the impact be if this is not funded?	If this request is not funded, MVA will not have the ability to continue paying the LGE's for the increased waiver assessments.
Is revenue a fixed amount or can it be adjusted?	Revenue is fixed.
Is the expenditure of these revenues restricted?	Expenditures are restricted to costs allowed by the Medicaid State Plan, and federal regulations.
Additional information or comments.	N/A

Form 59530 — 305 - Medicaid Eligibility Contract Cost Increase

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	—
TOTAL MEANS OF FINANCING	**—**

AUTHORIZED POSITIONS

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

EXPENDITURES

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

Question	Narrative Response
Explain the need for this request.	Annualizes support for the Medical Vendor Administration (MVA) contracts for the performance of Medical Eligibility Determination Team (MEDT) reviews and make a determination of disability for individuals applying for, or enrolled in, Medicaid or the Children's Health Insurance Program (CHIP) on the basis of disability, in accordance with federal requirements. Over the last several years, Eligibility has received a drastic increase in MEDT review requests for both physical and mental health cases. Since the pandemic, the volume of mental health cases has risen drastically, creating a backlog in cases and a lack of funding to work these cases in addition to physical cases. We have attempted to remain within budget, but have steadily exceeded the annual budget.
Cite performance indicators for the adjustment.	None
What would the impact be if this is not funded?	If this request is not funded, the Medical Eligibility Determinations Team will continue to fall behind with assessments, as the contractors are paid by the case.
Is revenue a fixed amount or can it be adjusted?	Revenue is fixed.
Is the expenditure of these revenues restricted?	Expenditures are restricted to costs allowed by the Medicaid State Plan and federal regulations.
Additional information or comments.	N/A

Form 59531 — 305 - PASRR Level II Position Reclassification

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	—
TOTAL MEANS OF FINANCING	**—**

AUTHORIZED POSITIONS

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

EXPENDITURES

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

Question	Narrative Response
Explain the need for this request.	This reclassification would better align the OBH PASRR team's pay with their actual duties, which involve conducting required screenings for individuals needing nursing facility placement. The change would also make the OBH's staffing structure consistent with the one used by OAAS for its PASRR program. The reclassification is needed because the OBH PASRR team, which consists of licensed mental health professionals, has been experiencing increased workload and stress. This is due to stricter compliance requirements and a higher volume of cases.
Cite performance indicators for the adjustment.	None.
What would the impact be if this is not funded?	If this request is not funded, MVA could not reimburse OBH for their request to reallocate positions to right-size the pay for these positions.
Is revenue a fixed amount or can it be adjusted?	Revenue is fixed.
Is the expenditure of these revenues restricted?	Expenditures are restricted to those allowed by the Medicaid State Plan, and federal regulations.
Additional information or comments.	N/A

Form 59532 — 305 - PASRR Level II Evaluation and IT System

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	1,826,475
TOTAL MEANS OF FINANCING	**$1,826,475**

AUTHORIZED POSITIONS

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

EXPENDITURES

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	**—**
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	**—**
PROFESSIONAL SERVICES	**—**
Other Charges	—
Debt Service	—
Interagency Transfers	1,826,475
TOTAL OTHER CHARGES	**$1,826,475**
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	**—**
TOTAL EXPENDITURES	**$1,826,475**

Question	Narrative Response
Explain the need for this request.	Provides for a Pre-Admission Screening Resident Review (PASRR) Level II evaluation and IT system for the Office of Behavioral Health (OBH) that will speed up determinations for placement and services. Based on an agreement between the Louisiana Department of Health (LDH) and the Department of Justice (DOJ), the state's PASRR program is undergoing significant improvements. Specific OBH enhancements include efforts to streamline its Level II processes to speed up determinations for placement and services. To achieve this, the state is seeking an IT system that will consolidate the seven separate systems currently required to process a single PASRR Level II request. This new system would ideally: process requests for Level II evaluations conduct and record the findings of the evaluation, track performance outcomes for each review, communicate findings to internal and external stakeholders, and issue final determinations for placement and service needs.
Cite performance indicators for the adjustment.	None
What would the impact be if this is not funded?	If this request is not funded, PASRR evaluations will take longer, creating longer wait times for determinations for placement and services delivered to clients.
Is revenue a fixed amount or can it be adjusted?	Revenue is fixed.
Is the expenditure of these revenues restricted?	Expenditures are restricted to costs allowed in the Medicaid State Plan and federal regulations.
Additional information or comments.	N/A

Form 59533 — 305 - Rate and Audit Cost Report Solution

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	—
TOTAL MEANS OF FINANCING	**—**

AUTHORIZED POSITIONS

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

EXPENDITURES

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

Question	Narrative Response
Explain the need for this request.	Proposal to modernize Medicaid cost reporting across the state. The plan is to implement a modern, cloud-based Medicaid cost reporting system to replace the current spreadsheet-based, manual, and disconnected processes. This unified platform will allow providers, LDH reviewers, and program leadership to work in one systemówith shared access to forms, documentation, communication, and review workflows. This system is designed to make cost report preparation significantly easier for providers while equipping LDH with better tools for tracking submissions, monitoring progress, and generating actionable insights through built-in reporting features. Rate and Audit is in receipt of a proposal for this custom solution.
Cite performance indicators for the adjustment.	None
What would the impact be if this is not funded?	If not funded, cost reporting will continue as a manual process, where the risk of human error is increased.
Is revenue a fixed amount or can it be adjusted?	Revenue is fixed.
Is the expenditure of these revenues restricted?	Expenditures are restricted to costs allowed by the Medicaid State Plan and federal regulations.
Additional information or comments.	N/A

Form 59534 — 305 - Horne Financial Collection & Cost Reporting System

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	—
TOTAL MEANS OF FINANCING	**—**

AUTHORIZED POSITIONS

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

EXPENDITURES

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

Question	Narrative Response
Explain the need for this request.	An electronic system to streamline cost reporting, strengthen Medicaid reimbursement accuracy, and ensure seamless RMTS (Random Moment Time Sampling) integration for School-Based Medicaid services. Cost is for year one of the received proposal.
Cite performance indicators for the adjustment.	None
What would the impact be if this is not funded?	If not funded, School-based services will continue to be tracked manually, creating additional risk for human error.
Is revenue a fixed amount or can it be adjusted?	Revenue is fixed.
Is the expenditure of these revenues restricted?	Expenditures are restricted to costs allowed by the Medicaid State Plan and federal regulations.
Additional information or comments.	N/A

Form 59535 — 305 - IAT Authority for MOUs with Office of the Secretary

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	—
TOTAL MEANS OF FINANCING	**—**

AUTHORIZED POSITIONS

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

EXPENDITURES

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

Question	Narrative Response
Explain the need for this request.	Office of the Secretary is currently requesting additional IAT funds to cover the MOUs between OS and BHSF, for Health Standards, Medicaid Financial Reporting (LDH Fiscal), and BHSF Cost Allocation. This request will allow BHSF-MVA to incur these increased costs from the amended MOUs.
Cite performance indicators for the adjustment.	None
What would the impact be if this is not funded?	If not funded, the Office of the Secretary would continue to absorb costs that could be reimbursed through the Medicaid Administrative grant.
Is revenue a fixed amount or can it be adjusted?	Revenue is fixed.
Is the expenditure of these revenues restricted?	Expenditures are restricted to costs allowed by the Medicaid State Plan and federal regulations.
Additional information or comments.	N/A

Form 59536 — 305 - MVA - SNAP Admin MOF Swap OBBBA FFP Rates

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	—
TOTAL MEANS OF FINANCING	**—**

AUTHORIZED POSITIONS

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

EXPENDITURES

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

Question	Narrative Response
Explain the need for this request.	H.R. 1, also called the One Big Beautiful Bill Act, passed by the US Congress, changed the federal financial participation (FFP) of the SNAP Administration Grant program from a 50/50 split (federal/state) to a 25/75 split (federal/state). This change in FFP requires LDH to request this Means of Finance Swap between Federal Funds authority and State General Fund authority. The change in FFP begins on 10/1/26, or three months into the state fiscal year, thus LDH is only requesting the MOF swap for 9 months' worth of authority.
Cite performance indicators for the adjustment.	None
What would the impact be if this is not funded?	LDH will not have the needed state match to appropriately share the costs for the SNAP Administration grant program.
Is revenue a fixed amount or can it be adjusted?	Revenue is fixed.
Is the expenditure of these revenues restricted?	The expenditure of these revenues are restricted to eligible expenditures allowed by the SNAP State Plan, and federal regulations.
Additional information or comments.	N/A

Form 59537 — 305 - MVA - Increase in Accenture Contract

3052 - Medical Vendor Administration

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	695,000
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	2,085,000
TOTAL MEANS OF FINANCING	**$2,780,000**

AUTHORIZED POSITIONS

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

EXPENDITURES

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	**—**
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	**—**
PROFESSIONAL SERVICES	**—**
Other Charges	2,780,000
Debt Service	—
Interagency Transfers	—
TOTAL OTHER CHARGES	**$2,780,000**
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	**—**
TOTAL EXPENDITURES	**$2,780,000**

Question	Narrative Response
Explain the need for this request.	This request is needed due to LDH only receiving three quarters of the budget authority in the SNAP Transition BA-7. This request will make LDH whole regarding the Accenture contract authority.
Cite performance indicators for the adjustment.	None
What would the impact be if this is not funded?	If this request is not funded, LDH would be short three months of authority to fully fund the Accenture contract, which runs the Call Center for SNAP.
Is revenue a fixed amount or can it be adjusted?	The revenue is a fixed amount.
Is the expenditure of these revenues restricted?	These revenues are restricted to SNAP eligible expenditures, from the SNAP State Plan and federal regulations.
Additional information or comments.	N/A

Form 59538 — 305 - MVA - Annualization of Remaining SNAP Budget

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	—
TOTAL MEANS OF FINANCING	**—**

AUTHORIZED POSITIONS

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

EXPENDITURES

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

Question	Narrative Response
Explain the need for this request.	The need for this request is to annualize the transfer of the SNAP Administrative budget from DCFS in the SNAP Transition BA-7 in FY26. This will fully fund the SNAP Admin program for FY27.
Cite performance indicators for the adjustment.	None
What would the impact be if this is not funded?	If this request isn't funded, SNAP Administration will not have enough authority to complete FY27 while conducting the business expected.
Is revenue a fixed amount or can it be adjusted?	Revenue is fixed.
Is the expenditure of these revenues restricted?	These revenues are restricted to SNAP-eligible expenditures, based on the SNAP State Plan and federal regulations.
Additional information or comments.	N/A

Form 59541 — 305 - OAAS OPTS Module Development

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	2,489,077
TOTAL MEANS OF FINANCING	**$2,489,077**

AUTHORIZED POSITIONS

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

EXPENDITURES

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	**—**
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	**—**
PROFESSIONAL SERVICES	**—**
Other Charges	—
Debt Service	—
Interagency Transfers	2,489,077
TOTAL OTHER CHARGES	**$2,489,077**
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	**—**
TOTAL EXPENDITURES	**$2,489,077**

Question	Narrative Response
Explain the need for this request.	This request is to develop the Plan of Care (POC) module for LT-PCS participants and ADHC Waiver and Community Choices Waiver (CCW) participants. In order to track applicant and participant services more efficiently in one system and prevent duplicate data entry in more than one system, OAAS has requested ULL to develop a POC module, which will be tightly integrated with the OAAS Participants Tracking System (OPTS).
Cite performance indicators for the adjustment.	None
What would the impact be if this is not funded?	If not funded, MVA cannot fund the OPTS Plan of Care module, which has been approved in an Advance Planning Document with the Centers for Medicare and Medicaid Services (CMS).
Is revenue a fixed amount or can it be adjusted?	Revenue can be adjusted based on amount needed for upgrades.
Is the expenditure of these revenues restricted?	Expenditures are restricted to costs allowed by the Medicaid State Plan and federal regulations.
Additional information or comments.	N/A

Form 59542 — 305 - Maximus Contract Increase

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	—
TOTAL MEANS OF FINANCING	**—**

AUTHORIZED POSITIONS

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

EXPENDITURES

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

Question	Narrative Response
Explain the need for this request.	This request is to fund the federal share of OAAS's request for an increase in authority for the Maximus contract. The contract amount was established based on submission volumes provided in the State's 2021 RFP. However, PASRR Level I submission volumes have significantly outpaced the original projections, resulting in a projected shortfall of $600,000. This request will fund the 75% federal share.
Cite performance indicators for the adjustment.	None
What would the impact be if this is not funded?	If not funded, MVA cannot fund the federally-allowed portion of the increase to the OAAS Maximus contract.
Is revenue a fixed amount or can it be adjusted?	Revenue can be adjusted based on the need of the contract.
Is the expenditure of these revenues restricted?	Expenditures are restricted to costs allowed by the Medicaid State Plan and federal regulations.
Additional information or comments.	N/A

Form 61673 — 305- MVA SNAP BENEFIT COST SHARE ANNUALIZATION

3052 - Medical Vendor Administration

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	75,015,000
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	(75,015,000)
TOTAL MEANS OF FINANCING	**—**

AUTHORIZED POSITIONS

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

EXPENDITURES

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

Question	Narrative Response
Explain the need for this request.	H.R.1 requires all states that exceed the 6% payment error rate threshold to fund a share of SNAP benefits. In SFY26, total SNAP benefits in Louisiana were $1.6B. If Louisiana's payment error rate for FFY27 is between 6% and 7.99%, the state will be required to pay 5% of all benefits in FFY28. If the rate falls between 8% and 9.99%, the state will be required to pay 10% of all benefits in FFY28. Although the State Five-Year Budget Forecast is officially projecting that Louisiana will exceed 8% based on FFY26 rates, Louisiana's current estimate for the FFY27 error rate is 7.78% (October through April). If this rate does not increase further, Louisiana's cost share would total $60M for nine months of SFY28, based on the SFY26 benefits paid. If the rate increases into the next tier, Louisiana's cost share would total $75M. (Note: With disenrollment, the benefits paid in SFY27 will likely be lower, and therefore the cost share would decrease in tandem.) Seethecalculationsbelow. SNAPBENEFITCOSTSHARE FY2027-2028SNAPBUDGET 7/1/2027-6/30/2028 10/1/2027-6/30/2028 MONTHLYBENEFITS:x 12 MONTHS X 9MONTHS REQUEST 83,350,000 1,000,200,000 750,150,000 HB 1 and SENATE BILL ERROR RATE: 6%-7.99% = 5% 50,010,000 37,507,500 8% - 9.99% = 10% 100,020,000 75,015,000
Cite performance indicators for the adjustment.	The SNAP program issues approximately $83,350,000 per month in benefits, which totals $1,000,200,000 per year. Under the rule, an error rate between 6% and 7.99% would result in the state paying 5% of the benefits (which is $50,010,000). An error rate between 8% and 9.99% would result in the state paying 10% of the benefits. This amounts to $100,020,000 for a 12-month period, or $75,015,000 for a nine-month period
What would the impact be if this is not funded?	LDH will be unable to administer SNAP in Louisiana if this workload is not funded.
Is revenue a fixed amount or can it be adjusted?	If Louisiana's payment error rate for FFY27 is between 6% and 7.99%, the state will be required to pay 5% of all benefits in FFY28. If the rate falls between 8% and 9.99%, the state will be required to pay 10% of all benefits in FFY28
Is the expenditure of these revenues restricted?	
Additional information or comments.	

Form 61675 — 305- MVA SNAP COST SHARE ANNUALIZATION

3052 - Medical Vendor Administration

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	12,031,250
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	(12,031,250)
TOTAL MEANS OF FINANCING	**—**

AUTHORIZED POSITIONS

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

EXPENDITURES

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

Question	Narrative Response
Explain the need for this request.	Increased State Cost Share for SNAP Administration (H.R.1) Additional budget authority in State General Funds is needed for the first quarter of State Fiscal Year 2027-2028 (July 1, 2027, through September 30, 2027). This increase is a result of the One Big Beautiful Bill Act, which mandates an increase in the state match from 50% to 75%. See the calculations below. ADDITIONAL 3 MONTH BUDGET AUTHORITY FY 2027-2028 SNAP BUDGET (7/1/2027 - 9/30/2027) ONE BIG BEAUTIFUL BILL ACT ESTIMATED COST STATE 75% FEDERAL 25% YEARLY ESTIMATED COST: 5,347,222 X 12 = 64,166,664 48,124,998 16,041,666 FIRST QUARTER (7/1/2027 - 9/30/2027) 16,041,666 12,031,250 4,010,416
Cite performance indicators for the adjustment.	The federal cost share for SNAP administration is reduced to 25% as of October 1, 2026. This means of finance substitution increases the State General Fund (Direct) and decreases Federal Funds as a result of changes in the Federal Financial Participation (FFP) for Supplemental Nutrition Assistance Program (SNAP) administrative services. As mandated by the One Big Beautiful Bill Act, the state match is increasing from 50% to 75% effective October 1, 2026, in State Fiscal Year (SFY) 2026-2027. The current SFY27 budget includes nine months of the increased cost share. This request annualizes the mandated coverage from July 1, 2027, through September 30, 2027
What would the impact be if this is not funded?	LDH will be unable to administer SNAP in Louisiana if this request is not funded. The Agency would have insufficient state match.
Is revenue a fixed amount or can it be adjusted?	This request is a fixed amount.
Is the expenditure of these revenues restricted?	
Additional information or comments.	

Form 61680 — 305-MVA SNAP DELOITTE OTS (LITE)

3052 - Medical Vendor Administration

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	11,969,100
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	11,969,100
TOTAL MEANS OF FINANCING	**$23,938,200**

AUTHORIZED POSITIONS

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

EXPENDITURES

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	**—**
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	**—**
PROFESSIONAL SERVICES	**—**
Other Charges	—
Debt Service	—
Interagency Transfers	23,938,200
TOTAL OTHER CHARGES	**$23,938,200**
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	**—**
TOTAL EXPENDITURES	**$23,938,200**

Question	Narrative Response
Explain the need for this request.	It is necessary to include supplemental request in 2027 EOB to continue existing operations. See BA.7 ATTACHED
Cite performance indicators for the adjustment.	Deloitte tracks performance across three main levels: firm-wide financial and operational metrics, employee-level key performance indicators (KPIs), and specialized transformation or digital frameworks.
What would the impact be if this is not funded?	Not having this workload funded would create performance review penalties, delay performances, and differentiator status. While some practice areas treat initiatives as flexible or secondary during non-milestone years, strong performance on client projects alone may only keep the baseline-rated rather than top-tier.
Is revenue a fixed amount or can it be adjusted?	This request is a fixed amount.
Is the expenditure of these revenues restricted?	
Additional information or comments.	

STATE OF LOUISIANA
DIVISION OF ADMINISTRATION, OFFICE OF PLANNING AND BUDGET
REQUEST FOR MID-YEAR BUDGET ADJUSTMENT

DEPARTMENT: Department of Health	FOR OPB USE ONLY	
AGENCY: Medical Vendor Administration	OPB LOG NUMBER	AGENDA NUMBER
SCHEDULE NUMBER: 09-305		
SUBMISSION DATE: June 9, 2026	Approval and Authority:	
AGENCY BA-7 NUMBER: #4 - Supplemental Bill HB 312		
HEAD OF BUDGET UNIT: Seth Gold		
TITLE: Medicaid Executive Director		
SIGNATURE *(Certifies that the information provided is correct and true to the best of your knowledge)*:		

MEANS OF FINANCING	CURRENT FY 2025-2026	ADJUSTMENT (+) or (-)	REVISED FY 2025-2026
GENERAL FUND BY:			
DIRECT	$198,469,654	$6,969,100	**$205,438,754**
INTERAGENCY TRANSFERS	$41,665,571	$0	**$41,665,571**
FEES & SELF-GENERATED	$4,200,000	$0	**$4,200,000**
Regular Fees & Self-generated	$4,200,000	$0	$4,200,000
Subtotal of Fund Accounts from Page 2	$0	$0	$0
STATUTORY DEDICATIONS	$7,131,794	$0	**$7,131,794**
Medical Assistance Programs Fraud Detection (H14)	$1,407,500	$0	$1,407,500
Modernization and Security Fund (V65)	$5,000,000	$0	$5,000,000
Subtotal of Dedications from Page 2	$724,294	$0	$724,294
FEDERAL	$605,158,824	$16,162,105	**$621,320,929**
TOTAL	**$856,625,843**	**$23,131,205**	**$879,757,048**
AUTHORIZED POSITIONS	2,158	0	**2,158**
AUTHORIZED OTHER CHARGES	0	0	**0**
NON-TO FTE POSITIONS	118	0	**118**
TOTAL POSITIONS	**2,276**	**0**	**2,276**

PROGRAM EXPENDITURES	DOLLARS	POS	DOLLARS	POS	DOLLARS	POS
PROGRAM NAME:						
MVA - Community Engagement (CE)	$856,625,843	2,276	$3,974,505	0	**$860,600,348**	**2,276**
MVA - Office of Aging & Adult Services (C	$0	0	$218,500	0	**$218,500**	**0**
MVA - SNAP OTS	$0	0	$23,938,200	0	**$23,938,200**	**0**
MVA Reduction in Appropriation	$0	0	($5,000,000)	0	**($5,000,000)**	**0**
	$0	0	$0	0	**$0**	**0**
	$0	0	$0	0	**$0**	**0**
	$0	0	$0	0	**$0**	**0**
	$0	0	$0	0	**$0**	**0**
	$0	0	$0	0	**$0**	**0**
	$0	0	$0	0	**$0**	**0**
Subtotal of programs from Page 2:	$0	0	$0	0	**$0**	**0**
TOTAL	**$856,625,843**	**2,276**	**$23,131,205**	**0**	$879,757,048	**2,276**

BA-7 FORM (07/08/2025)

Page 1

Form 62049 — 305 - Medicaid Eligibility Printing Cost Increase

3052 - Medical Vendor Administration

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	1,742,952
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	1,742,952
TOTAL MEANS OF FINANCING	**$3,485,904**

AUTHORIZED POSITIONS

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

EXPENDITURES

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	**—**
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	**—**
PROFESSIONAL SERVICES	**—**
Other Charges	—
Debt Service	—
Interagency Transfers	3,485,904
TOTAL OTHER CHARGES	**$3,485,904**
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	**—**
TOTAL EXPENDITURES	**$3,485,904**

Question	Narrative Response
Explain the need for this request.	
Cite performance indicators for the adjustment.	
What would the impact be if this is not funded?	
Is revenue a fixed amount or can it be adjusted?	
Is the expenditure of these revenues restricted?	
Additional information or comments.	

Form 62081 — 305 - Pelican Data Broker Services Contract Increase

3052 - Medical Vendor Administration

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	3,206,109
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	9,618,328
TOTAL MEANS OF FINANCING	**$12,824,437**

EXPENDITURES

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	**—**
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	**—**
PROFESSIONAL SERVICES	**$12,824,437**
Other Charges	—
Debt Service	—
Interagency Transfers	—
TOTAL OTHER CHARGES	**—**
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	**—**
TOTAL EXPENDITURES	**$12,824,437**

AUTHORIZED POSITIONS

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

Statutory Dedications

	Amount
Total:	**—**

Question	Narrative Response
Explain the need for this request.	
Cite performance indicators for the adjustment.	
What would the impact be if this is not funded?	
Is revenue a fixed amount or can it be adjusted?	
Is the expenditure of these revenues restricted?	
Additional information or comments.	

Form 62086 — 305 - Certified Community Behavioral Health Clinic (CCBHC)

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	284,886
TOTAL MEANS OF FINANCING	**$284,886**

AUTHORIZED POSITIONS

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

EXPENDITURES

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	**—**
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	**—**
PROFESSIONAL SERVICES	**—**
Other Charges	—
Debt Service	—
Interagency Transfers	284,886
TOTAL OTHER CHARGES	**$284,886**
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	**—**
TOTAL EXPENDITURES	**$284,886**

Question	Narrative Response
Explain the need for this request.	
Cite performance indicators for the adjustment.	
What would the impact be if this is not funded?	
Is revenue a fixed amount or can it be adjusted?	
Is the expenditure of these revenues restricted?	
Additional information or comments.	

Form 62091 — 305 - Medicaid Eligibility Postage Cost Increase

3052 - Medical Vendor Administration

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	657,384
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	—
FEDERAL FUNDS	657,384
TOTAL MEANS OF FINANCING	**$1,314,768**

EXPENDITURES

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	**—**
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	**—**
PROFESSIONAL SERVICES	**—**
Other Charges	—
Debt Service	—
Interagency Transfers	1,314,768
TOTAL OTHER CHARGES	**$1,314,768**
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	**—**
TOTAL EXPENDITURES	**$1,314,768**

AUTHORIZED POSITIONS

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

Statutory Dedications

	Amount
Total:	**—**

Question	Narrative Response
Explain the need for this request.	
Cite performance indicators for the adjustment.	
What would the impact be if this is not funded?	
Is revenue a fixed amount or can it be adjusted?	
Is the expenditure of these revenues restricted?	
Additional information or comments.	

Form 62173 — 305 - Compulsory Adjustment - Standard Inflation

3052 - Medical Vendor Administration

MEANS OF FINANCING

	Amount
STATE GENERAL FUND (Direct)	—
STATE GENERAL FUND BY:	—
INTERAGENCY TRANSFERS	—
FEES & SELF-GENERATED	—
STATUTORY DEDICATIONS	(953)
FEDERAL FUNDS	—
TOTAL MEANS OF FINANCING	**$(953)**

EXPENDITURES

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	**—**
Travel	(99)
Operating Services	(840)
Supplies	(14)
TOTAL OPERATING EXPENSES	**$(953)**
PROFESSIONAL SERVICES	**—**
Other Charges	—
Debt Service	—
Interagency Transfers	—
TOTAL OTHER CHARGES	**—**
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	**—**
TOTAL EXPENDITURES	**$(953)**

AUTHORIZED POSITIONS

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

Statutory Dedications

	Amount
Fraud Detection Fund	(953)
Total:	**$(953)**

Question	Narrative Response
Explain the need for this request.	
Cite performance indicators for the adjustment.	
What would the impact be if this is not funded?	
Is revenue a fixed amount or can it be adjusted?	
Is the expenditure of these revenues restricted?	
Additional information or comments.	

Form 62653 — 305 - Program Operations-CCW Waitlist Reduction Initiative

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	816,829
TOTAL MEANS OF FINANCING	**$816,829**

AUTHORIZED POSITIONS

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

EXPENDITURES

	Amount
Salaries	—
Other Compensation	—
Related Benefits	—
TOTAL PERSONAL SERVICES	**—**
Travel	—
Operating Services	—
Supplies	—
TOTAL OPERATING EXPENSES	**—**
PROFESSIONAL SERVICES	**—**
Other Charges	—
Debt Service	—
Interagency Transfers	816,829
TOTAL OTHER CHARGES	**$816,829**
Acquisitions	—
Major Repairs	—
TOTAL ACQ. & MAJOR REPAIRS	**—**
TOTAL EXPENDITURES	**$816,829**

Question	Narrative Response
Explain the need for this request.	Requesting funding to support the Community Choices Waiver Waitlist Reduction Initiative utilizing the Medicaid UNO Staff Augmentation contract. This option will allow OAAS to claim a 50% Admin Medicaid Federal match. Requesting laptop and accessories equipment for the new Prioritization Eligibility Team (PET) contracted positions. The Louisiana Department of Health (LDH), Office of Aging and Adult Services (OAAS) engaged HCBS Strategies to identify and recommend opportunities to improve OAAS waitlist policies and procedures. In a series of intensive biweekly meetings from late October 2025 to the present, OAAS and HCBS Strategies explored the Stateís current waitlist management processes, identified the Stateís goals for waitlist management as well as their broader vision for home and community-based services (HCBS), and discussed potential approaches to reaching these goals that align with their larger vision. OAAS decided to implement a data-informed prioritization strategy for the Community Choices Waiver (CCW) Registry that leverages data from the Stateís current Level of Care Eligibility Tool (LOCET) to characterize the urgency of a comprehensive assessment, and then utilizes an in-person screener to confirm Level of Care and generate an institutional risk score used to place individuals into one of three priority categories ranging from Imminent Risk, Elevated Risk, and Monitored Risk. This initiative will also require annual rescreening of individuals on the CCW Registry to ensure that prioritization based on the institutional risk score continues to reflect current need. To perform these in-person assessments and rescreenings, additional staff members (total of 15) are needed ($1,489,986, Med Cert Spec 1 or Community Health Workers). The funding for these positions will be a recurring cost to ensure the CCW Waitlist is reduced and maintained.
Cite performance indicators for the adjustment.	None
What would the impact be if this is not funded?	
Is revenue a fixed amount or can it be adjusted?	
Is the expenditure of these revenues restricted?	
Additional information or comments.	



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Technical and Other Adjustments

AGENCY SUMMARY STATEMENT

Total Agency

Means of Financing	Existing Operating Budget as of 10/01/2026	FY2027-2028 Requested Continuation Adjustment	FY2027-2028 Requested in this Adjustment Package	FY2027-2028 Requested Realignment
STATE GENERAL FUND (Direct)	289,600,336	100,456,556	—	390,056,892
STATE GENERAL FUND BY:	—	—	—	—
INTERAGENCY TRANSFERS	41,665,571	84,395	—	41,749,966
FEES & SELF-GENERATED	4,200,000	—	—	4,200,000
STATUTORY DEDICATIONS	1,228,748	—	—	1,228,748
FEDERAL FUNDS	639,550,561	(65,400,797)	—	574,149,764
TOTAL MEANS OF FINANCING	**$976,245,216**	**$35,140,154**	**—**	**$1,011,385,370**
Salaries	130,006,436	3,271,875	—	133,278,311
Other Compensation	1,881,082	136,732	—	2,017,814
Related Benefits	65,327,154	3,061,797	—	68,388,951
TOTAL PERSONAL SERVICES	**$197,214,672**	**$6,470,404**	**—**	**$203,685,076**
Travel	338,668	7,962	—	346,630
Operating Services	13,187,831	(1,451,009)	—	11,736,822
Supplies	411,862	9,788	—	421,650
TOTAL OPERATING EXPENSES	**$13,938,361**	**$(1,433,259)**	**—**	**$12,505,102**
PROFESSIONAL SERVICES	**$290,039,644**	**$10,929,974**	**—**	**$300,969,618**
Other Charges	189,370,143	2,457,500	—	191,827,643
Debt Service	—	—	—	—
Interagency Transfers	285,682,396	16,715,535	—	302,397,931
TOTAL OTHER CHARGES	**$475,052,539**	**$19,173,035**	**—**	**$494,225,574**
Acquisitions	—	—	—	—
Major Repairs	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	**—**	**—**	**—**	**—**
TOTAL EXPENDITURES	**$976,245,216**	**$35,140,154**	**—**	**$1,011,385,370**
Classified	**2,143**	**8**	**—**	**2,151**
Unclassified	**10**	**—**	**—**	**10**
TOTAL AUTHORIZED T.O. POSITIONS	**2,153**	**8**	**—**	**2,161**
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	**—**	**—**	**—**	**—**
TOTAL NON-T.O. FTE POSITIONS	**114**	**(8)**	**—**	**106**

PROGRAM BREAKOUT

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

PROGRAM SUMMARY STATEMENT

3052 - Medical Vendor Administration

Means of Financing	Existing Operating Budget as of 10/01/2026	FY2027-2028 Requested Continuation Adjustment	FY2027-2028 Requested in this Adjustment Package	FY2027-2028 Requested Realignment
STATE GENERAL FUND (Direct)	289,600,336	100,456,556	—	390,056,892
STATE GENERAL FUND BY:	—	—	—	—
INTERAGENCY TRANSFERS	41,665,571	84,395	—	41,749,966
FEES & SELF-GENERATED	4,200,000	—	—	4,200,000
STATUTORY DEDICATIONS	1,228,748	—	—	1,228,748
FEDERAL FUNDS	639,550,561	(65,400,797)	—	574,149,764
TOTAL MEANS OF FINANCING	**$976,245,216**	**$35,140,154**	**—**	**$1,011,385,370**
Salaries	130,006,436	3,271,875	—	133,278,311
Other Compensation	1,881,082	136,732	—	2,017,814
Related Benefits	65,327,154	3,061,797	—	68,388,951
TOTAL PERSONAL SERVICES	**$197,214,672**	**$6,470,404**	**—**	**$203,685,076**
Travel	338,668	7,962	—	346,630
Operating Services	13,187,831	(1,451,009)	—	11,736,822
Supplies	411,862	9,788	—	421,650
TOTAL OPERATING EXPENSES	**$13,938,361**	**$(1,433,259)**	**—**	**$12,505,102**
PROFESSIONAL SERVICES	**$290,039,644**	**$10,929,974**	**—**	**$300,969,618**
Other Charges	189,370,143	2,457,500	—	191,827,643
Debt Service	—	—	—	—
Interagency Transfers	285,682,396	16,715,535	—	302,397,931
TOTAL OTHER CHARGES	**$475,052,539**	**$19,173,035**	**—**	**$494,225,574**
Acquisitions	—	—	—	—
Major Repairs	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	**—**	**—**	**—**	**—**
TOTAL EXPENDITURES	**$976,245,216**	**$35,140,154**	**—**	**$1,011,385,370**
Classified	**2,143**	**8**	**—**	**2,151**
Unclassified	**10**	**—**	**—**	**10**
TOTAL AUTHORIZED T.O. POSITIONS	**2,153**	**8**	**—**	**2,161**
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	**—**	**—**	**—**	**—**
TOTAL NON-T.O. FTE POSITIONS	**114**	**(8)**	**—**	**106**

New or Expanded Requests

AGENCY SUMMARY STATEMENT

Total Agency

Means of Financing and Expenditures	Existing Operating Budget as of 10/01/2026	FY2027-2028 Requested Continuation Adjustment	FY2027-2028 Requested in Technical/Other Package	FY2027-2028 Requested New/Expanded	FY2027-2028 Requested Realignment
STATE GENERAL FUND (Direct)	289,600,336	100,456,556	—	—	390,056,892
STATE GENERAL FUND BY:	—	—	—	—	—
INTERAGENCY TRANSFERS	41,665,571	84,395	—	—	41,749,966
FEES & SELF-GENERATED	4,200,000	—	—	—	4,200,000
STATUTORY DEDICATIONS	1,228,748	—	—	—	1,228,748
FEDERAL FUNDS	639,550,561	(65,400,797)	—	—	574,149,764
TOTAL MEANS OF FINANCING	**$976,245,216**	**$35,140,154**	**—**	**—**	**$1,011,385,370**
Salaries	130,006,436	3,271,875	—	—	133,278,311
Other Compensation	1,881,082	136,732	—	—	2,017,814
Related Benefits	65,327,154	3,061,797	—	—	68,388,951
TOTAL PERSONAL SERVICES	**$197,214,672**	**$6,470,404**	**—**	**—**	**$203,685,076**
Travel	338,668	7,962	—	—	346,630
Operating Services	13,187,831	(1,451,009)	—	—	11,736,822
Supplies	411,862	9,788	—	—	421,650
TOTAL OPERATING EXPENSES	**$13,938,361**	**$(1,433,259)**	**—**	**—**	**$12,505,102**
PROFESSIONAL SERVICES	**$290,039,644**	**$10,929,974**	**—**	**—**	**$300,969,618**
Other Charges	189,370,143	2,457,500	—	—	191,827,643
Debt Service	—	—	—	—	—
Interagency Transfers	285,682,396	16,715,535	—	—	302,397,931
TOTAL OTHER CHARGES	**$475,052,539**	**$19,173,035**	**—**	**—**	**$494,225,574**
Acquisitions	—	—	—	—	—
Major Repairs	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	**—**	**—**	**—**	**—**	**—**
TOTAL EXPENDITURES	**$976,245,216**	**$35,140,154**	**—**	**—**	**$1,011,385,370**
Classified	2,143	8	—	—	2,151
Unclassified	10	—	—	—	10
TOTAL AUTHORIZED T.O. POSITIONS	2,153	8	—	—	2,161
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	—	—	—	—	—
TOTAL NON-T.O. FTE POSITIONS	114	(8)	—	—	106

Fees and Self-Generated

Description	Existing Operating Budget as of 10/01/2026	FY2027-2028 Requested Continuation Adjustment	FY2027-2028 Requested in Technical/Other Package	FY2027-2028 Requested New/Expanded	FY2027-2028 Requested Realignment
Fees & Self-generated Revenues	4,200,000	—	—	—	4,200,000
Total:	**$4,200,000**	**—**	**—**	**—**	**$4,200,000**

Statutory Dedications

Description	Existing Operating Budget as of 10/01/2026	FY2027-2028 Requested Continuation Adjustment	FY2027-2028 Requested in Technical/Other Package	FY2027-2028 Requested New/Expanded	FY2027-2028 Requested Realignment
Fraud Detection Fund	724,294	—	—	—	724,294
Medical Assistance Programs Fraud Detection Fund	—	—	—	—	—
Modernization And Security Fund	504,454	—	—	—	504,454
Total:	**$1,228,748**	**—**	**—**	**—**	**$1,228,748**

PROGRAM SUMMARY STATEMENT

3052 - Medical Vendor Administration

Means of Financing and Expenditures	Existing Operating Budget as of 10/01/2026	FY2027-2028 Requested Continuation Adjustment	FY2027-2028 Requested in Technical/Other Package	FY2027-2028 Requested New/Expanded	FY2027-2028 Requested Realignment
STATE GENERAL FUND (Direct)	289,600,336	100,456,556	—	—	390,056,892
STATE GENERAL FUND BY:	—	—	—	—	—
INTERAGENCY TRANSFERS	41,665,571	84,395	—	—	41,749,966
FEES & SELF-GENERATED	4,200,000	—	—	—	4,200,000
STATUTORY DEDICATIONS	1,228,748	—	—	—	1,228,748
FEDERAL FUNDS	639,550,561	(65,400,797)	—	—	574,149,764
TOTAL MEANS OF FINANCING	**$976,245,216**	**$35,140,154**	**—**	**—**	**$1,011,385,370**
Salaries	130,006,436	3,271,875	—	—	133,278,311
Other Compensation	1,881,082	136,732	—	—	2,017,814
Related Benefits	65,327,154	3,061,797	—	—	68,388,951
TOTAL PERSONAL SERVICES	**$197,214,672**	**$6,470,404**	**—**	**—**	**$203,685,076**
Travel	338,668	7,962	—	—	346,630
Operating Services	13,187,831	(1,451,009)	—	—	11,736,822
Supplies	411,862	9,788	—	—	421,650
TOTAL OPERATING EXPENSES	**$13,938,361**	**$(1,433,259)**	**—**	**—**	**$12,505,102**
PROFESSIONAL SERVICES	**$290,039,644**	**$10,929,974**	**—**	**—**	**$300,969,618**
Other Charges	189,370,143	2,457,500	—	—	191,827,643
Debt Service	—	—	—	—	—
Interagency Transfers	285,682,396	16,715,535	—	—	302,397,931
TOTAL OTHER CHARGES	**$475,052,539**	**$19,173,035**	**—**	**—**	**$494,225,574**
Acquisitions	—	—	—	—	—
Major Repairs	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	**—**	**—**	**—**	**—**	**—**
TOTAL EXPENDITURES	**$976,245,216**	**$35,140,154**	**—**	**—**	**$1,011,385,370**
Classified	2,143	8	—	—	2,151
Unclassified	10	—	—	—	10
TOTAL AUTHORIZED T.O. POSITIONS	2,153	8	—	—	2,161
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	—	—	—	—	—
TOTAL NON-T.O. FTE POSITIONS	114	(8)	—	—	106

Fees and Self-Generated

Description	Existing Operating Budget as of 10/01/2026	FY2027-2028 Requested Continuation Adjustment	FY2027-2028 Requested in Technical/Other Package	FY2027-2028 Requested New/Expanded	FY2027-2028 Requested Realignment
Fees & Self-generated Revenues	4,200,000	—	—	—	4,200,000
Total:	**$4,200,000**	**—**	**—**	**—**	**$4,200,000**

Statutory Dedications

Description	Existing Operating Budget as of 10/01/2026	FY2027-2028 Requested Continuation Adjustment	FY2027-2028 Requested in Technical/Other Package	FY2027-2028 Requested New/Expanded	FY2027-2028 Requested Realignment
Fraud Detection Fund	724,294	—	—	—	724,294
Medical Assistance Programs Fraud Detection Fund	—	—	—	—	—
Modernization And Security Fund	504,454	—	—	—	504,454
Total:	**$1,228,748**	**—**	**—**	**—**	**$1,228,748**



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Total Request Summary

AGENCY SUMMARY STATEMENT

Total Agency

Means of Financing

Description	FY2025-2026 Actuals	Existing Operating Budget as of 10/01/2026	FY2027-2028 Requested Continuation Adjustments	FY2027-2028 Requested in Technical/Other Adjustments	FY2027-2028 Requested New or Expanded Adjustments	FY2027-2028 Total Request	Over/Under EOB
STATE GENERAL FUND (Direct)	187,332,162	289,600,336	100,456,556	—	—	390,056,892	100,456,556
STATE GENERAL FUND BY:	—	—	—	—	—	—	—
INTERAGENCY TRANSFERS	3,349,728	41,665,571	84,395	—	—	41,749,966	84,395
FEES & SELF-GENERATED	—	4,200,000	—	—	—	4,200,000	—
STATUTORY DEDICATIONS	6,523,680	1,228,748	—	—	—	1,228,748	—
FEDERAL FUNDS	404,113,290	639,550,561	(65,400,797)	—	—	574,149,764	(65,400,797)
TOTAL MEANS OF FINANCING	**$601,318,860**	**$976,245,216**	**$35,140,154**	**—**	**—**	**$1,011,385,370**	**$35,140,154**

Statutory Dedications

Description	FY2025-2026 Actuals	Existing Operating Budget as of 10/01/2026	FY2027-2028 Requested Continuation Adjustments	FY2027-2028 Requested in Technical/Other Adjustments	FY2027-2028 Requested New or Expanded Adjustments	FY2027-2028 Total Request	Over/Under EOB
Fraud Detection Fund	116,180	724,294	—	—	—	724,294	—
Medical Assistance Programs Fraud Detection Fund	1,407,500	—	—	—	—	—	—
Modernization And Security Fund	5,000,000	504,454	—	—	—	504,454	—
Total:	**$6,523,680**	**$1,228,748**	**—**	**—**	**—**	**$1,228,748**	**—**

Expenditures and Positions

Description	FY2025-2026 Actuals	Existing Operating Budget as of 10/01/2026	FY2027-2028 Requested Continuation Adjustments	FY2027-2028 Requested in Technical/Other Adjustments	FY2027-2028 Requested New or Expanded Adjustments	FY2027-2028 Total Request	Over/Under EOB
Salaries	101,249,951	130,006,436	3,271,875	—	—	133,278,311	3,271,875
Other Compensation	4,411,699	1,881,082	136,732	—	—	2,017,814	136,732
Related Benefits	55,810,563	65,327,154	3,061,797	—	—	68,388,951	3,061,797
TOTAL PERSONAL SERVICES	**$161,472,213**	**$197,214,672**	**$6,470,404**	**—**	**—**	**$203,685,076**	**$6,470,404**
Travel	294,566	338,668	7,962	—	—	346,630	7,962
Operating Services	7,308,906	13,187,831	(1,451,009)	—	—	11,736,822	(1,451,009)
Supplies	266,553	411,862	9,788	—	—	421,650	9,788
TOTAL OPERATING EXPENSES	**$7,870,025**	**$13,938,361**	**$(1,433,259)**	**—**	**—**	**$12,505,102**	**$(1,433,259)**
PROFESSIONAL SERVICES	**$154,606,722**	**$290,039,644**	**$10,929,974**	**—**	**—**	**$300,969,618**	**$10,929,974**
Other Charges	117,305,891	189,370,143	2,457,500	—	—	191,827,643	2,457,500
Debt Service	—	—	—	—	—	—	—
Interagency Transfers	160,064,010	285,682,396	16,715,535	—	—	302,397,931	16,715,535
TOTAL OTHER CHARGES	**$277,369,901**	**$475,052,539**	**$19,173,035**	**—**	**—**	**$494,225,574**	**$19,173,035**
Acquisitions	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	**—**	**—**	**—**	**—**	**—**	**—**	**—**
TOTAL EXPENDITURES	**$601,318,860**	**$976,245,216**	**$35,140,154**	**—**	**—**	**$1,011,385,370**	**$35,140,154**
Classified	2,154	2,143	8	—	—	2,151	8
Unclassified	4	10	—	—	—	10	—
TOTAL AUTHORIZED T.O. POSITIONS	**2,158**	**2,153**	**8**	**—**	**—**	**2,161**	**8**
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	**—**	**—**	**—**	**—**	**—**	**—**	**—**
TOTAL NON-T.O. FTE POSITIONS	**118**	**114**	**(8)**	**—**	**—**	**106**	**(8)**

PROGRAM SUMMARY STATEMENT

3052 - Medical Vendor Administration

Means of Financing

Description	FY2025-2026 Actuals	Existing Operating Budget as of 10/01/2026	FY2027-2028 Requested Continuation Adjustments	FY2027-2028 Requested in Technical/Other Adjustments	FY2027-2028 Requested New or Expanded Adjustments	FY2027-2028 Total Request	Over/Under EOB
STATE GENERAL FUND (Direct)	187,332,162	289,600,336	100,456,556	—	—	390,056,892	100,456,556
STATE GENERAL FUND BY:	—	—	—	—	—	—	—
INTERAGENCY TRANSFERS	3,349,728	41,665,571	84,395	—	—	41,749,966	84,395
FEES & SELF-GENERATED	—	4,200,000	—	—	—	4,200,000	—
STATUTORY DEDICATIONS	6,523,680	1,228,748	—	—	—	1,228,748	—
FEDERAL FUNDS	404,113,290	639,550,561	(65,400,797)	—	—	574,149,764	(65,400,797)
TOTAL MEANS OF FINANCING	**$601,318,860**	**$976,245,216**	**$35,140,154**	**—**	**—**	**$1,011,385,370**	**$35,140,154**

Statutory Dedications

Description	FY2025-2026 Actuals	Existing Operating Budget as of 10/01/2026	FY2027-2028 Requested Continuation Adjustments	FY2027-2028 Requested in Technical/Other Adjustments	FY2027-2028 Requested New or Expanded Adjustments	FY2027-2028 Total Request	Over/Under EOB
Fraud Detection Fund	116,180	724,294	—	—	—	724,294	—
Medical Assistance Programs Fraud Detection Fund	1,407,500	—	—	—	—	—	—
Modernization And Security Fund	5,000,000	504,454	—	—	—	504,454	—
Total:	**$6,523,680**	**$1,228,748**	**—**	**—**	**—**	**$1,228,748**	**—**

Expenditures and Positions

Description	FY2025-2026 Actuals	Existing Operating Budget as of 10/01/2026	FY2027-2028 Requested Continuation Adjustments	FY2027-2028 Requested in Technical/Other Adjustments	FY2027-2028 Requested New or Expanded Adjustments	FY2027-2028 Total Request	Over/Under EOB
Salaries	101,249,951	130,006,436	3,271,875	—	—	133,278,311	3,271,875
Other Compensation	4,411,699	1,881,082	136,732	—	—	2,017,814	136,732
Related Benefits	55,810,563	65,327,154	3,061,797	—	—	68,388,951	3,061,797
TOTAL PERSONAL SERVICES	**$161,472,213**	**$197,214,672**	**$6,470,404**	**—**	**—**	**$203,685,076**	**$6,470,404**
Travel	294,566	338,668	7,962	—	—	346,630	7,962
Operating Services	7,308,906	13,187,831	(1,451,009)	—	—	11,736,822	(1,451,009)
Supplies	266,553	411,862	9,788	—	—	421,650	9,788
TOTAL OPERATING EXPENSES	**$7,870,025**	**$13,938,361**	**$(1,433,259)**	**—**	**—**	**$12,505,102**	**$(1,433,259)**
PROFESSIONAL SERVICES	**$154,606,722**	**$290,039,644**	**$10,929,974**	**—**	**—**	**$300,969,618**	**$10,929,974**
Other Charges	117,305,891	189,370,143	2,457,500	—	—	191,827,643	2,457,500
Debt Service	—	—	—	—	—	—	—
Interagency Transfers	160,064,010	285,682,396	16,715,535	—	—	302,397,931	16,715,535
TOTAL OTHER CHARGES	**$277,369,901**	**$475,052,539**	**$19,173,035**	**—**	**—**	**$494,225,574**	**$19,173,035**
Acquisitions	—	—	—	—	—	—	—
Major Repairs	—	—	—	—	—	—	—
TOTAL ACQ. & MAJOR REPAIRS	**—**	**—**	**—**	**—**	**—**	**—**	**—**
TOTAL EXPENDITURES	**$601,318,860**	**$976,245,216**	**$35,140,154**	**—**	**—**	**$1,011,385,370**	**$35,140,154**
Classified	2,154	2,143	8	—	—	2,151	8
Unclassified	4	10	—	—	—	10	—
TOTAL AUTHORIZED T.O. POSITIONS	**2,158**	**2,153**	**8**	**—**	**—**	**2,161**	**8**
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	**—**	**—**	**—**	**—**	**—**	**—**	**—**
TOTAL NON-T.O. FTE POSITIONS	**118**	**114**	**(8)**	**—**	**—**	**106**	**(8)**



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Addenda

Department: 09A - LDH

Agency: 305 MEDICAL VENDOR ADMINISTRATION

STATE OF LOUISIANA

Childrens Budget

Department Summary

CHILD - DS

Fiscal Year 2027 - 2028

Report Date: 10/31/26

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	$137,547,779	$18,524,655	$1,546,438	$325,932	$292,608,843	$450,553,647	2,272
			Total:	**$137,547,779**	**$18,524,655**	**$1,546,438**	**$325,932**	**$292,608,843**	**$450,553,647**	**2,272**

Department: 09A - LDH
Agency: 305 MEDICAL VENDOR ADMINISTRATION

STATE OF LOUISIANA
Childrens Budget
by Department

CHILD - DC
Fiscal Year 2027 - 2028
Report Date: 10/31/26

Means of Financing:	Existing Operating Budget	Requested Continuation	Requested NE	Total Requested	Total Recommended
STATE GENERAL FUND (Direct)	$78,157,305	$137,547,779	$0	$137,547,779	$0
STATE GENERAL FUND BY:					
INTERAGENCY TRANSFERS	$18,708,634	$18,524,655	$0	$18,524,655	$0
FEES & SELF-GENERATED	$1,546,440	$1,546,438	$0	$1,546,438	$0
STATUTORY DEDICATIONS	$2,685,174	$325,932	$0	$325,932	$0
FEDERAL FUNDS	$278,709,764	$292,608,843	$0	$292,608,843	$0
TOTAL MEANS OF FINANCING	**$379,807,317**	**$450,553,647**	**$0**	**$450,553,647**	**$0**
Salaries	$44,056,448	$49,518,458	$0	$49,518,458	$0
Other Compensation	$770,551	$968,145	$0	$968,145	$0
Related Benefits	$23,494,922	$23,229,829	$0	$23,229,829	$0
TOTAL PERSONAL SERVICES	**$68,321,921**	**$73,716,432**	**$0**	**$73,716,432**	**$0**
Travel	$129,980	$281,606	$0	$281,606	$0
Operating Services	$2,894,055	$5,984,323	$0	$5,984,323	$0
Supplies	$163,662	$295,153	$0	$295,153	$0
TOTAL OPERATING EXPENSES	**$3,187,697**	**$6,561,082**	**$0**	**$6,561,082**	**$0**
PROFESSIONAL SERVICES	**$113,280,535**	**$100,947,420**	**$0**	**$100,947,420**	**$0**
Other Charges	$127,069,840	$120,206,339	$0	$120,206,339	$0
Debt Service	$0	$0	$0	$0	$0
Interagency Transfers	$67,947,324	$149,122,374	$0	$149,122,374	$0
TOTAL OTHER CHARGES	**$195,017,164**	**$269,328,713**	**$0**	**$269,328,713**	**$0**
Acquisitions	$0	$0	$0	$0	$0
Major Repairs	$0	$0	$0	$0	$0
TOTAL ACQ. & MAJOR REPAIRS	**$0**	**$0**	**$0**	**$0**	**$0**

Department: 09A - LDH
Agency: 305 MEDICAL VENDOR ADMINISTRATION

STATE OF LOUISIANA
Childrens Budget
by Department

CHILD - DC
Fiscal Year 2027 - 2028
Report Date: 10/31/26

TOTAL EXPENDITURES	**$379,807,317**	**$450,553,647**	**$0**	**$450,553,647**	**$0**
Classified	2,154	2,155	0	2,155	0
Unclassified	0	0	0	0	0
TOTAL AUTHORIZED T.O. POSITIONS	**2,154**	**2,155**	**0**	**2,155**	**0**
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	**0**	**0**	**0**	**0**	**0**
TOTAL NON-T.O. FTE POSITIONS	**118**	**117**	**0**	**117**	**0**
TOTAL POSITIONS	**2,272**	**2,272**	**0**	**2,272**	**0**

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	$137,547,779	$18,524,655	$1,546,438	$325,932	$292,608,843	$450,553,647	2,272
			Total:	**$137,547,779**	**$18,524,655**	**$1,546,438**	**$325,932**	**$292,608,843**	**$450,553,647**	**2,272**

305 - Medical Vendor Administration

Means of Financing:	Existing Operating Budget	Requested Continuation	Requested NE	Total Requested	Total Recommended
STATE GENERAL FUND (Direct)	$78,157,305	$137,547,779	$0	$137,547,779	$0
STATE GENERAL FUND BY:					
INTERAGENCY TRANSFERS	$18,708,634	$18,524,655	$0	$18,524,655	$0
FEES & SELF-GENERATED	$1,546,440	$1,546,438	$0	$1,546,438	$0
STATUTORY DEDICATIONS	$2,685,174	$325,932	$0	$325,932	$0
FEDERAL FUNDS	$278,709,764	$292,608,843	$0	$292,608,843	$0
TOTAL MEANS OF FINANCING	**$379,807,317**	**$450,553,647**	**$0**	**$450,553,647**	**$0**
Salaries	$44,056,448	$49,518,458	$0	$49,518,458	$0
Other Compensation	$770,551	$968,145	$0	$968,145	$0
Related Benefits	$23,494,922	$23,229,829	$0	$23,229,829	$0
TOTAL PERSONAL SERVICES	**$68,321,921**	**$73,716,432**	**$0**	**$73,716,432**	**$0**
Travel	$129,980	$281,606	$0	$281,606	$0
Operating Services	$2,894,055	$5,984,323	$0	$5,984,323	$0
Supplies	$163,662	$295,153	$0	$295,153	$0
TOTAL OPERATING EXPENSES	**$3,187,697**	**$6,561,082**	**$0**	**$6,561,082**	**$0**
PROFESSIONAL SERVICES	**$113,280,535**	**$100,947,420**	**$0**	**$100,947,420**	**$0**
Other Charges	$127,069,840	$120,206,339	$0	$120,206,339	$0
Debt Service	$0	$0	$0	$0	$0
Interagency Transfers	$67,947,324	$149,122,374	$0	$149,122,374	$0
TOTAL OTHER CHARGES	**$195,017,164**	**$269,328,713**	**$0**	**$269,328,713**	**$0**
Acquisitions	$0	$0	$0	$0	$0
Major Repairs	$0	$0	$0	$0	$0

Department: 09A - LDH
Agency: 305 MEDICAL VENDOR ADMINISTRATION

STATE OF LOUISIANA
Childrens Budget
by Agency

CHILD - AC
Fiscal Year 2027 - 2028
Report Date: 10/31/26

TOTAL ACQ. & MAJOR REPAIRS	**$0**	**$0**	**$0**	**$0**	**$0**
TOTAL EXPENDITURES	**$379,807,317**	**$450,553,647**	**$0**	**$450,553,647**	**$0**
Classified	**2,154**	**2,155**	**0**	**2,155**	**0**
Unclassified	**0**	**0**	**0**	**0**	**0**
TOTAL AUTHORIZED T.O. POSITIONS	**2,154**	**2,155**	**0**	**2,155**	**0**
TOTAL AUTHORIZED OTHER CHARGES POSITION	**0**	**0**	**0**	**0**	**0**
TOTAL NON-T.O. FTE POSITIONS	**118**	**117**	**0**	**117**	**0**
TOTAL POSITIONS	**2,272**	**2,272**	**0**	**2,272**	**0**

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)	$78,157,305	$137,547,779	$0	$137,547,779	$0
STATE GENERAL FUND BY:					
INTERAGENCY TRANSFERS	$18,708,634	$18,524,655	$0	$18,524,655	$0
FEES & SELF-GENERATED	$1,546,440	$1,546,438	$0	$1,546,438	$0
STATUTORY DEDICATIONS	$2,685,174	$325,932	$0	$325,932	$0
FEDERAL FUNDS	$278,709,764	$292,608,843	$0	$292,608,843	$0
TOTAL MEANS OF FINANCING	**$379,807,317**	**$450,553,647**	**$0**	**$450,553,647**	**$0**
Salaries	$44,056,448	$49,518,458	$0	$49,518,458	$0
Other Compensation	$770,551	$968,145	$0	$968,145	$0
Related Benefits	$23,494,922	$23,229,829	$0	$23,229,829	$0
TOTAL PERSONAL SERVICES	**$68,321,921**	**$73,716,432**	**$0**	**$73,716,432**	**$0**
Travel	$129,980	$281,606	$0	$281,606	$0
Operating Services	$2,894,055	$5,984,323	$0	$5,984,323	$0
Supplies	$163,662	$295,153	$0	$295,153	$0
TOTAL OPERATING EXPENSES	**$3,187,697**	**$6,561,082**	**$0**	**$6,561,082**	**$0**
PROFESSIONAL SERVICES	**$113,280,535**	**$100,947,420**	**$0**	**$100,947,420**	**$0**
Other Charges	$127,069,840	$120,206,339	$0	$120,206,339	$0
Debt Service	$0	$0	$0	$0	$0
Interagency Transfers	$67,947,324	$149,122,374	$0	$149,122,374	$0
TOTAL OTHER CHARGES	**$195,017,164**	**$269,328,713**	**$0**	**$269,328,713**	**$0**

Acquisitions	$0	$0	$0	$0	$0
Major Repairs	$0	$0	$0	$0	$0
TOTAL ACQ. & MAJOR REPAIRS	**$0**	**$0**	**$0**	**$0**	**$0**
TOTAL EXPENDITURES	**$379,807,317**	**$450,553,647**	**$0**	**$450,553,647**	**$0**
Classified	**2,154**	**2,155**	**0**	**2,155**	**0**
Unclassified	**0**	**0**	**0**	**0**	**0**
TOTAL AUTHORIZED T.O. POSITIONS	**2,154**	**2,155**	**0**	**2,155**	**0**
TOTAL AUTHORIZED OTHER CHARGES POSITION	**0**	**0**	**0**	**0**	**0**
TOTAL NON-T.O. FTE POSITIONS	**118**	**117**	**0**	**117**	**0**
TOTAL POSITIONS	**2,272**	**2,272**	**0**	**2,272**	**0**

Form ID:	58122
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 Devises 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:
N/A

Form ID:	58168
Form Description:	305 - MVA - SUN Bucks Children's Bu
Service:	MVA01 - Medical Services for Medicaid Eligible Children

Question and Narrative Response
Describe the service:
This continues the SUN Bucks program with the Louisiana Department of Health (LDH). The program started in the summer of 2024 to ensure that children do not go hungry when school is not in session. In the past, DCFS (the prior program administrator) provided nearly $80M to over 665,000 students in the summer of 2024. Each eligible child receives a single payment of $120 for the summer, with benefits being issued in multiple phases. The program provides eligible low-income families with school-aged children, grocery-purchasing benefits funded by a federal grant.
How does this fulfill the program's mission?
This program provides foodstuffs for low-income families, when they are most vulnerable; during the summer when the children are not able to obtain meals at school.
Who are the principal users?
The principal users of this program are families where the children receive free or reduced lunch at school.
Who primarily benefits from the service?
Low-income families with children in school.
Related objectives and performance measures:
None.

Form ID:	58169
Form Description:	305 - MVA - SNAP/FITAP/KCSP
Service:	MVA01 - Medical Services for Medicaid Eligible Children

Question and Narrative Response
Describe the service:
As of October 2025, 45% of the recipients of SNAP benefits are children. This represents the budget to administer the SNAP program for children.
How does this fulfill the program's mission?
The SNAP program helps low-income families purchase food needed to stay healthy. The amount received is based on income and the USDA Thrifty Food Plan, which estimates costs of providing a nutritious diet to the average household.
Who are the principal users?
Benefits are paid directly to beneficiaries by the USDA. This budget only represents the administrative portion of the program.
Who primarily benefits from the service?
Low-income familiies benefit from the service.
Related objectives and performance measures:
N/A



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