

## Welcome



Welcome to the May edition of the Provider Update Newsletter.

As we continue through the year of 2026, we will continue to focus on our key priorities of ensuring that our members have access to the care and services they need, as well as ensuring we assist you to do what you do best – providing quality care to your patients and our members.

Please continue to visit the Louisiana Department of Health (LDH) website and social media platforms to stay informed about program updates and upcoming events.

The Louisiana Department of Health strives to protect and promote health statewide and to ensure access to medical, preventive, and rehabilitative services for all state residents. The Louisiana Department of Health includes the Office of Public Health, Office of Aging and Adult Services, Office of Behavioral Health, Office for Citizens with Developmental Disabilities, Office of Economic Stability, Office of Rural Health Transformation and Sustainability, Office on Women’s Health and Community Health, and Healthy Louisiana (Medicaid). To learn more, visit [ldh.la.gov](http://ldh.la.gov) or follow us on [X](#), [Facebook](#), and [Instagram](#).

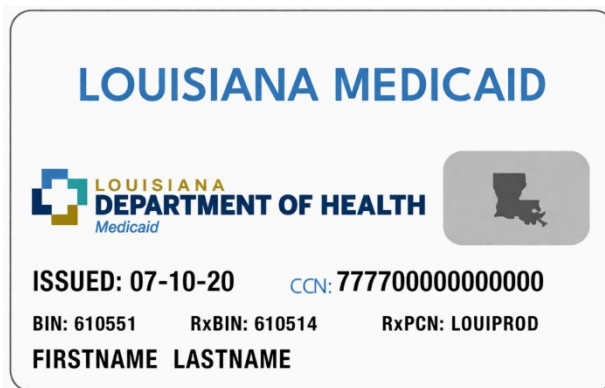
We hope you find this month's newsletter informational.

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## Medicaid ID Card Redesign



The Louisiana Department of Health has revised the Medicaid identification card to improve clarity for members and providers, replacing the term “Healthy Louisiana” with “Louisiana Medicaid.”

Along with the card update, the department has also revised the [brochure](#) mailed to members with their Medicaid ID card. LDH is currently notifying members that their Medicaid ID card and health plan ID cards are available digitally through LA Wallet, offering an additional, convenient way to access identification when seeking care.

**Providers are encouraged to continue verifying member eligibility and to be aware of the distinction between the Medicaid ID card and plan-specific ID cards when processing services.**

## FDA Drug Safety Communications – March 2026

*Compiled by:  
Office of Outcomes Research and Evaluation  
College of Pharmacy  
The University of Louisiana Monroe*

**3-20-2026: The FDA is requiring a warning about vitamin B6 deficiency and associated seizures for drug products containing carbidopa/levodopa.**

The U.S. Food and Drug Administration (FDA) is requiring the addition of a warning to the prescribing information for drug products containing carbidopa/levodopa to state that these medications, approved to treat symptoms of Parkinson’s disease, can cause vitamin B6 deficiency and vitamin B6 deficiency-associated seizures. The warning directs healthcare professionals to evaluate baseline vitamin B6 levels prior to starting treatment with carbidopa/levodopa therapies and periodically while on treatment and to supplement with vitamin B6 as necessary.

Levodopa is the metabolic precursor to dopamine, a neurotransmitter in the brain that declines in patients with Parkinson's disease, leading to motor symptoms such as tremors, rigidity and bradykinesia. Carbidopa inhibits the decarboxylation of peripheral levodopa, making more levodopa available for delivery to the brain. Drug products containing carbidopa/levodopa approved to treat symptoms of Parkinson's disease may contain both carbidopa and levodopa, carbidopa/levodopa/entacapone, or foscarnidopa/foslevodopa, which is converted to active carbidopa/levodopa in the body. These products are available in multiple formulations and may be administered by several different routes, including oral tablets, an enteral suspension, and a subcutaneous injection for continuous infusion. Drug products containing carbidopa/levodopa can deplete vitamin B6 levels during the process by which levodopa is converted to dopamine. Additionally, carbidopa binds to the active form of vitamin B6, which creates additional functional loss of vitamin B6.

To monitor for vitamin B6 deficiency, health care professionals should evaluate vitamin B6 levels before starting patients on treatment with drug products containing carbidopa/levodopa, periodically during treatment, and if symptoms of vitamin B6 deficiency appear during treatment. These symptoms include seizures, as well as depression; confusion; inflammation of the lips, tongue, and skin; and nerve damage causing numbness, tingling, sharp pain, or muscle weakness. Health care professionals should consider whether vitamin B6 supplementation is necessary. Higher doses of carbidopa/levodopa may increase the risk of vitamin B6 deficiency. Health care professionals should be aware that seizures associated with the use of a product containing carbidopa and levodopa do not respond to traditional anti-seizure medications but resolve after vitamin B6 administration. Furthermore, select anti-seizure medications may further worsen a vitamin B6 deficiency.

#### What Patients Need to Know

- ✓ Inform your patients about the risk of vitamin B6 deficiency when taking drug products containing carbidopa/levodopa.
- ✓ Educate patients about vitamin B6 deficiency symptoms, such as seizures, confusion, depression, etc.
- ✓ Instruct patients to take their vitamin B6 supplements as recommended by their health care professional.

#### FDA Findings

The FDA conducted a safety review and identified 14 cases of seizures linked to vitamin B6 deficiency in patients using drug products containing carbidopa/levodopa. The 14 cases included postmarketing reports submitted to the FDA (13 reports) or found in the medical literature (1 report), so there may be additional cases that the FDA is not aware of. All of the reviewed cases involved levodopa doses exceeding 1,000 mg daily, with higher doses (>1,500 mg levodopa) associated with shorter duration from treatment initiation to identification of vitamin B6 deficiency. The seizure cases were split among oral formulations and an enteral suspension, with latency periods ranging from 23 to 132 months. The seizures have typically presented as focal onset seizures with secondary generalization, consistent with seizures observed with vitamin B6-dependent epilepsy, and progression to status epilepticus was observed in some cases, indicating an urgent need for rapid identification and treatment. In these cases of reported seizures, there was additional clinical evidence supportive of vitamin B6 deficiency, including elevated homocysteine levels in four cases, microcytic or normocytic anemia in three cases, and neuropsychiatric symptoms in four cases. Of the nine patients treated with vitamin B6 supplementation, all nine had resolution of their seizures, despite the majority of these patients previously demonstrating a lack of response to multiple anti-seizure medications. Two fatalities occurred, both with documented low vitamin B6 levels and poorly controlled seizures. The review found no cases of vitamin B6-associated seizures associated with carbidopa/levodopa/entacapone products or with the injectable carbidopa/levodopa product, which may reflect lower usage patterns, more recent approval dates, and/or different dosing and administration requirements. However, biological plausibility suggests there may be a similar risk across all

drug products containing carbidopa/levodopa, as vitamin B6 deficiency was also observed in the clinical trials that supported the original approval of the injectable carbidopa/levodopa product. Based on the available data, the FDA concluded there is reasonable evidence of a causal association between drug products containing carbidopa/levodopa and vitamin B6 deficiency-associated seizures.

### 3-31-2026: The FDA identifies cases of serious liver injury in patients taking Tavneos (avacopan) for severe active anti-neutrophil cytoplasmic autoantibody (ANCA)-associated vasculitis.

The FDA is alerting patients and health care professionals about serious postmarketing cases, including fatal cases, of drug-induced liver injury (DILI) associated with Tavneos (avacopan). Some cases involved vanishing bile duct syndrome

#### What Patients Need to Know

- ✓ Tell patients to contact their health care professional immediately if they develop any signs or symptoms that may indicate liver injury, such as: feeling more tired than usual; nausea; vomiting; unusual itching; light-colored stools; yellowing of skin or eyes; dark urine; swelling in the stomach or abdomen; or pain in the right upper abdomen.
- ✓ Talk to patients about the safety risks associated with Tavneos and whether to continue therapy or switch to alternative treatments.

(VBDS), which is characterized by progressive destruction and disappearance of the bile ducts in the liver. This condition can slow or stop the flow of bile and may lead to permanent liver damage. VBDS is often accompanied by the yellowing of skin or eyes (jaundice), itchiness, and tiredness. Although hepatotoxicity is a serious adverse reaction for Tavneos identified in premarket clinical trials and described in product labeling, VBDS and DILI cases with fatal outcomes represent new safety concerns. The FDA is continuing to monitor postmarketing cases of DILI, including VBDS, involving Tavneos and will provide updates as appropriate.

Tavneos was approved on October 7, 2021, and is used together with glucocorticoids and other standard-of-care medications to treat adults with severe active anti-neutrophil cytoplasmic autoantibody (ANCA)-associated vasculitis (granulomatosis with polyangiitis and microscopic polyangiitis), a group of rare diseases that cause inflammation in small-to-medium-sized blood vessels. The use of Tavneos does not eliminate glucocorticoid use.

When treating patients who take Tavneos, health care professionals should:

- Conduct liver panel testing every 2 weeks in the first month of treatment, monthly for the next 5 months, and then as clinically indicated.
- Promptly discontinue Tavneos treatment, evaluate patients, and consider alternative treatments for patients with severe active ANCA-associated vasculitis if:
  - Alanine aminotransferase (ALT) or aspartate aminotransferase (AST) is >3 times the upper limit of normal (ULN) or alkaline phosphatase (ALP) is >2 times the ULN
  - A patient presents with evidence of symptomatic cholestasis such as jaundice or pruritus.
- If liver test abnormalities or symptoms of liver injury do not improve, patients should be referred to a hepatologist for further evaluation. Professionals should consult the [American College of Rheumatology 2021 ACR/VF ANCA-Associated Vasculitis Guideline](#) for more information.

#### FDA Findings

After reviewing postmarketing data, the literature, and the FDA Adverse Event Reporting System (FAERS) database, the FDA identified 76 cases of DILI with reasonable evidence of a causal association with avacopan use. A total of 74 cases reported a serious outcome, including hospitalization (n=54) and death (n=8).

The FDA is continuing to monitor postmarketing cases of DILI, including VBDS, involving avacopan and will provide updates as appropriate.

### Reporting Medication Side Effects

To help the FDA monitor safety issues with medicines, patients and health care professionals are encouraged to report side effects involving drug products to [MedWatch: The FDA Safety Information and Adverse Event Reporting Program | FDA](#).

### References

[FDA Identifies Cases of Serious Liver Injury in Patients Taking Tavneos \(avacopan\) for Severe Active Anti-neutrophil Cytoplasmic Autoantibody \(ANCA\)-associated Vasculitis | FDA](#)

[FDA Is Requiring Warning about Vitamin B6 Deficiency and Associated Seizures for Drug Products Containing Carbidopa/Levodopa | FDA](#)

## 26 ASAM 4.0 Training Calendar

A standardized training regarding the new standards and criteria associated with the American Society of Addiction Medicine 4th Edition is available. The hosting managed care organizations does not require you to be under contract to attend the tra

### May 5, 2026

**Time:** 12:00pm-2:00pm

**Who can participate:** All MCOs

**Provider type:** All ASAM Providers

**MCO registration link:**

<https://events.teams.microsoft.com/event/3a866f04-977a-41d8-98ce-5764f6443947@047afd16-a725-4e2f-9260-fce3985944dc>External Link

### May 11, 2026

**Time:** 10:00am-12:00am

**Who can participate:** All MCOs

**Provider type:** All ASAM Providers

**MCO registration link:**

<https://events.teams.microsoft.com/event/01bff2ab-ac7c-4f6d-9245-5d7322fb9c70@047afd16-a725-4e2f-9260-fce3985944dc>

## Coding Forward: What's New in HCPCS 2026?

Following the auto-refresh on April 10, 2026, providers can expect to see the new Healthcare Common Procedure Coding System (HCPCS) procedure codes displayed on the Professional Services, Outpatient Hospital, and Ambulatory fee schedules.

Please continue to monitor the Louisiana Medicaid website for updates concerning implementation timelines or potential delays to the fee-for-service (FFS) file updates regarding the new and discontinued HCPCS codes for 2026.

Direct questions related to FFS claims, Gainwell Technologies Provider Services at (800) 473-2783 or (225) 924-5040.

Direct MCO claim inquiries to the appropriate managed care organization.

Click on the [links](#) for existing, new, revised and discontinued HCPCS codes in the table below to access the current program fee schedule.

<a href="#">Ambulance Fee Schedule</a>	<a href="#">Anesthesia Fee Schedules</a>
<a href="#">Applied Behavior Analysis Fee Schedule</a>	<a href="#">Dental Fee Schedules</a>
<a href="#">Durable Medical Equipment (DME) Fee Schedule</a>	<a href="#">EPSDT Fee Schedule</a> <b>Early Preventative (EPSDT) Health Services</b>
<a href="#">Free Standing Birthing Centers Fee Schedule</a>	<a href="#">Home Health Services Fee Schedule</a>
<a href="#">Hospice Fee Schedules</a>	<a href="#">Immunization Fee Schedules</a>
<a href="#">Inpatient Hospital Per Diems</a>	<a href="#">LSU Enhanced Professional Services Fee Schedules</a>
<a href="#">Mary Bird Perkins Fee Schedule</a>	<a href="#">Non-Emergency Medical Transportation (NEMT) Fee Schedules</a>
<a href="#">OAAS Services Fee Schedules</a> <b>Adult Day Health Care Waiver (ADHC) Services</b> <b>Community Choices Waiver (CCW) Services</b>	<a href="#">OCDD Services Fee Schedules</a> <b>Supports Waiver</b>
<a href="#">Other Fee Schedules</a> <b>American Indians 638 Facilities (Provider Type 95)</b> <b>OPH – Family Planning Clinic (Provider Type 71)</b>	<a href="#">Outpatient Hospital Ambulatory Surgery</a>
<a href="#">Outpatient Hospital Services</a>	<a href="#">Pediatric Day Health Care Services Fee Schedule</a>
<a href="#">Professional Services, Lab, X-Ray, Radiology and ASC</a>	<a href="#">Rehabilitation Services Reimbursement Fee Schedule</a> <b>Free Standing Rehabilitation Centers</b>
<a href="#">Specialized Behavioral Health Fee Schedule</a>	<a href="#">Take Charge Plus Fee Schedule</a>
<a href="#">TPN Fee Schedule</a>	<a href="#">Vision (Eye-wear) Fee Schedule</a>

## May 2026 Health Observances

### Month-Long (May 1-31)

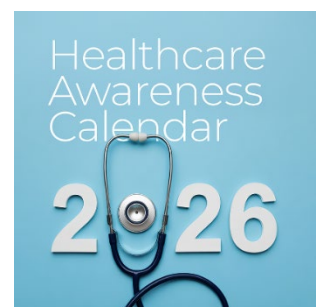
- **Mental Health Awareness Month:** Promoting emotional well-being and awareness.
- **National Women’s Health Month:** Encouraging women to make health a priority.
- **Skin Cancer Prevention and Awareness Month:** Dedicated to educating the public on prevention, early detection, and the dangers of the most common form of cancer in the U.S.
- **Arthritis Awareness Month:** As the leading cause of disability in the nation, this month aims to promote prevention, highlight treatment options, and support research.
- **National Stroke Awareness Month:** Focusing on prevention and symptoms.
- **Older Americans Month:** Honoring the contributions of seniors.
- **Oncology Nursing Month:** A time to honor the dedicated professionals who provide specialized care, hope, and support to patients navigating cancer.
- **National Physical Fitness and Sports Month:** Aimed at promoting active lifestyles and highlighting the health benefits of regular exercise, sports participation, and movement for all ages.
- **Better Sleep Month:** Promoting the importance of quality sleep.

### Weeks

- **National Physical Education and Sport Week:** May 1-7
- **Maternal Mental Health Awareness Week:** May 4-10
- **National Nurses Week:** May 6-12
- **National Women’s Health Week:** May 10-16
- **National Hospital Week:** May 10-16
- **Emergency Medical Services (EMS) Week:** May 17-23

### Key Days

- **Melanoma Monday:** May 4
- **World Hand Hygiene Day:** May 5
- **National Children’s Mental Health Awareness Day:** May 7
- **International Nurses Day:** May 12
- **World Hypertension Day:** May 17
- **National Trauma Survivors Day:** May 20
- **World Multiple Sclerosis (MS) Day:** May 30



## National Women’s Health Week: May 2026

Every May, beginning on Mother's Day, the U.S. Department of Health and Human Services (HHS), Office on Women's Health (OWH) leads National Women's Health Week (NWHW). This year, NWHW takes place from May 10-16. This observance aims to highlight women's health issues and priorities, and to encourage women of all ages to prioritize their physical, mental, and emotional well-being.

### Health at Every Age: Eating Disorder Awareness, Prevention, and Recovery

National Women's Health Week 2026 encourages women to focus on their whole health—mind and body. This year's theme, aligned with the Office on Women’s Health initiatives, is “Health at Every Age: Eating Disorder Awareness, Prevention, and Recovery”.

### Background

This year’s theme, “Health at Every Age: Eating Disorder Awareness, Prevention, and Recovery,” aligns with federal priorities, including the Make America Healthy Again (MAHA) Strategy and the 2025-2030 Dietary Guidelines for Americans, by promoting evidence-based nutrition education; and emphasizing prevention, early identification, and recovery in ways that supports mental and lifelong health. The theme highlights the importance of addressing eating disorders at every stage of life, particularly in relation to women’s health, aging, and hormonal transitions, while promoting whole-person wellness.

By recognizing the connections between eating disorders and chronic conditions such as cardiovascular disease, diabetes, and osteoporosis, this observance supports integrated approaches to prevention and long-term health, empowering women and girls to achieve optimal well-being for themselves, their families, and their communities.

**Article Sources:** <https://womenshealth.gov/nedaw/theme>

## Mental Health Awareness Month: May 2026`

Mental Health Awareness Month (MHAM) has been observed since 1949. For more than 20 years, SAMHSA has joined that tradition every May, raising awareness, sharing resources, and supporting the individuals and communities who need it most.

### Overall Theme: See the Person. Support the Journey.

Mental health is part of everyday life. It shapes how we think, feel, connect with others, and move through the world. This year’s theme highlights the importance of:

- Noticing early signs of mental health concerns
- Strengthening the support around us
- Responding with care and compassion during challenging moments

Mental health touches every part of life — from housing and work to relationships and community. When mental health challenges arise, they often intersect with substance use, and whole person care that addresses both is essential to lasting recovery and well-being.

## Week 1 (May 1 – 8): Understanding Mental Illness, Including Serious Mental Illness: Awareness Leads to Compassion

- Mental illnesses are medical conditions involving changes in emotion, appetite, thinking, or behavior that can affect daily functioning.
- Serious mental illness can substantially interfere with major life activities, including work, school, relationships, and self-care.
- Economic instability, housing insecurity, unemployment, and limited access to healthcare can increase stress and worsen mental health conditions.
- Chronic stress related to financial hardship or unstable housing can contribute to the development or worsening of serious mental illness.
- Early support, including access to stable housing, employment assistance, healthcare, and community programs, improves long-term stability and well-being.
- When people feel respected and understood, they are more likely to seek care and remain connected to services.

## Week 2 (May 11 – 15): Early Support Matters: Recognizing Signs in Children and Youth

- Parents and caregivers are often the first to notice changes. Paying attention to patterns, having open conversations, and connecting children and teens to support early can make a meaningful difference.
- Changes in mood, sleep, appetite, thinking, or behavior may signal the need for support.
- Most serious mental illnesses begin in young adulthood.
- Exposure to trauma can affect long-term mental health.
- Timely assessment and access to services improve outcomes.
- Community awareness strengthens early identification and support.
- Young people thrive when support comes early. Asking for help on behalf of a child, teen, or young adult is an act of protection and advocacy.

## Week 3 (May 18 – 22): Words Matter and Words Can Heal

- Language that recognizes the whole person helps people feel respected and valued.
- When we choose our words thoughtfully, we create space for connection to care.
- Respectful communication is especially important during times of transition, including housing instability or reentry into the community.
- Coordinated, compassionate support helps reduce disruptions in care.
- Trust grows through clear and thoughtful conversation.

## Week 4 (May 25 – 29): Supporting Loved Ones: Connection Is a Powerful Form of Care

- Understanding serious mental illness helps you respond with empathy and confidence.
- Feeling heard and respected can be deeply supportive. Listening with compassion makes a difference.
- When someone you love is living with a serious mental illness, steady presence and compassion matter most.
- Maintaining healthy, clear boundaries protects both you and your loved one.
- Caring for yourself matters. Seeking support when you need it helps you show up with steadiness and compassion.

Article Source: <https://www.samhsa.gov/about/digital-toolkits/mental-health-awareness-month>



## Medicare Savings Program

The Medicare Savings Program (MSP) helps people with limited income cover Medicare-related costs. Depending on which category someone qualifies for, the program can help pay for:

- **Medicare Part B premiums**
- **Medicare Part D (prescription drug) costs**
- In some cases:
  - **Part A premiums**
  - **Deductibles**
  - **Copayments**

The Medicare Savings Program groups are:

- [Qualified Medicare Beneficiaries \(QMB\)](#)
- [Specified Low-Income Medicare Beneficiaries \(SLMB\)](#)
- [Qualifying Individuals \(QI\)](#)
- [Qualified Disabled and Working Individual \(QDWI\)](#)

Click on this link to view a video that explains the benefits, eligibility requirements, and application process available on the LDH public website:

MEDICARE SAVINGS PROGRAM



## Don't Wait, Enroll Today as a LaHIPP Provider!




The LaHIPP program assists eligible Medicaid recipients by paying some or all of their portion of employer-sponsored insurance (ESI) or Individual health insurance (IHI) premiums, as long as it is more cost-effective for the state than full Medicaid coverage.

To qualify for the LaHIPP program, individuals must have access to ESI, have a dependent that is certified to receive Medicaid and is enrolled in ESI or IHI, and have their case determined as cost effective.



Providers can benefit from this program by receiving a higher reimbursement rate from the employer-sponsored insurance and by billing Medicaid secondary for patient out-of-pocket costs such as copays and deductibles.

Providers can increase LaHIPP enrollment by telling their Medicaid patients about the program. Applications and brochures that can be displayed in the provider's office are available for download on the LDH LaHIPP [website](#).

 <p><b>Expanded Patient Network</b></p> <p><i>Gain access to more Medicaid-eligible patients</i></p>	 <p><b>Improved Continuity of Care</b></p> <p><i>Helping families to maintain private health insurance and ensure coverage for services that may not be covered</i></p>	 <p><b>Reimbursements</b></p> <p><i>Higher reimbursement rates</i></p>
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**Provider Enrollment**

☎ (833)641-2140

✉ louisianaprovenroll@gainwelltechnologies.com

**Provider Relations**

☎ (225) 924-5040 or

☎ 1-800-473-2783

**Claims**

☎ (225) 342-3855 (Option 2)

✉ MMISClaims@la.gov



## LaHIPP Provider Q&A

### What is the difference between a Basic Medicaid Provider and a LaHIPP Only Provider?

A sub-specialty group has been created to enroll Medicaid providers to service only Louisiana Health Insurance Premium Payment (LaHIPP) recipients. The creation of this group will ensure that LaHIPP recipients will have access to their commercial health care provider network and Medicaid enrolled providers. Please note that the panel of providers servicing only LaHIPP recipients will only be accessible to LaHIPP recipients. The provider locator tool (PLT) has been updated with the service type *Providers Servicing Only LaHIPP*.

### What are the benefits of enrolling as a LaHIPP Provider?

Enrolling as a 'LaHIPP Only' Provider allow providers access a LaHIPP member's TPL, ensuring you can bill claims directly to the appropriate commercial insurer and receive the commercial insurance payments, which can be higher than the Medicaid contracted rate.

If the LaHIPP member's commercial insurer deny claims, LDH will pay for the claim and any other patient liability related expenses when the member follows the policies of the primary plan.

### How do I apply to become a LaHIPP Only Provider?

You must fully complete the [LaHIPP Only - Entity/Business Provider Enrollment Form](#) or [LaHIPP Only - Individual Provider Enrollment Form](#) and agree to the Medicaid terms and conditions which include the Provider Agreement Addendum.

### Who do I contact for more information?

- For information on how to enroll as a LaHIPP Provider, visit [https://www.lamedicaid.com/Provweb1/Provider Enrollment/ProviderEnrollmentIndex.htm](https://www.lamedicaid.com/Provweb1/Provider%20Enrollment/ProviderEnrollmentIndex.htm)
- Already an FFS or LaHIPP Provider and have a claims question? Contact: [MMISClaims@la.gov](mailto:MMISClaims@la.gov)
- To learn more about this program or to refer a member to apply to LaHIPP go to: <https://www.ldh.la.gov/lahipp>



## Understanding LaHIPP – A Provider’s Guide to Participation



[Understanding LaHIPP: A Provider’s Guide to Participation](#) video is now available in the Provider section. Watch to learn key program details, requirements, and how to successfully support eligible members through the Louisiana Health Insurance Premium Payment Program (LaHIPP).



## Accepting Medicaid Health Plan ID Cards with LA Wallet

Your **Medicaid & Health Plan ID** is now in



# LA Wallet

Keep your health coverage information right at your fingertips with the LA Wallet app.

### Why You Should Use **LA Wallet**

**All-in-One Access:**  
View your Medicaid ID and all MCO/Health Plan IDs electronically.

**Always Up to Date:**  
Cards refresh daily to show your most current health plan coverage and eligibility.

**Family Coverage:**  
If you’re the head of household, you can also access the digital health cards of everyone in your household.

**Easy Proof of Coverage:**  
Show providers your digital ID anytime; no need to carry a physical card.

**GET STARTED TODAY!**  
Download LA Wallet for **FREE** on your mobile device!



## REMINDER: Stay Compliant: Don't Miss Your Medicaid Revalidation Deadline

*Under federal and state regulations, **ALL** Medicaid-enrolled providers must revalidate their enrollment at least once every five years. However, providers of Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) face a stricter timeline and must revalidate every three years.*

Louisiana Medicaid requires providers to complete periodic evaluations. This process includes a comprehensive review based on your assigned risk level and may involve site visits, fingerprint-based criminal background checks, and updated disclosures—similar to what's required for new enrollments or reenrollments.

### How you will be notified:

Providers will receive notification when it is time to revalidate through:

- Email from the Provider Enrollment Portal; and
- A letter sent via the U.S. Postal Service.

You can also stay ahead by checking your revalidation due date and status anytime using the [Provider Lookup Tool](#).

### Did not receive a notice?

If you believe your revalidation is due but have not received a notification, contact Gainwell Technologies for assistance:

- Email: [louisianaprovenroll@gainwelltechnologies.com](mailto:louisianaprovenroll@gainwelltechnologies.com)
- Phone: (833) 641-2140.

### Avoid Disruptions to Your Payments

*Failure to complete revalidation by the deadline may result in claim denials and the deactivation of Medicaid billing privileges.* If this occurs, you will need to submit a full re-enrollment application—and Medicaid will not reimburse services provided during any period of deactivation.

Stay proactive to ensure uninterrupted participation in the Medicaid program.

## Important Information Regarding UnitedHealthcare Closeout

As of March 31, 2026, LDH's contract with UnitedHealthcare has ended. As part of this transition to ensure uninterrupted access to care, Medicaid members previously enrolled with UnitedHealthcare were moved to other participating managed care organizations (MCOs). You can read more [here](#).

## Youth Health Transition (YHT) Toolkit

Healthcare teams can now access a web-based resource designed to support youth as they transition to adult care. Featuring step-by-step guidance and practical tools, the platform helps providers strengthen care coordination while equipping young people with essential self-management skills for greater independence.

➦ Explore the toolkit: [ldh.la.gov/page/youth-health-transition-toolkit](https://ldh.la.gov/page/youth-health-transition-toolkit).

## Provider-to-Provider Consultation Line



# PPCL

PROVIDER TO PROVIDER CONSULTATION LINE

Pediatric and Perinatal Mental Health Support

### Need Behavioral Health Support for Your Pediatric Patients?

The [Louisiana Provider-to-Provider Consultation Line \(PPCL\)](#) offers free, expert support to help you manage behavioral and mental health concerns for patients ages 0–21. Connect directly with Mental Health Consultants and on-call psychiatrists for real-time guidance on diagnosis, treatment and medication management.

Plus, expand your expertise and earn CEUs/CMEs through PPCL's [TeleECHO](#) sessions.

Get started today and learn more at [ldh.la.gov/ppcl](https://ldh.la.gov/ppcl).

Call: (833) 721-2881 | Email: [ppcl@la.gov](mailto:ppcl@la.gov)

Do you provide  
healthcare services to  
children and families?

We want to  
hear from you!



*Take our survey! Help make the Louisiana developmental health system work for all!*

[Do you work with children or pregnant and parenting families in Louisiana?](#) Tell us about your experiences! Our survey will collect information from health care providers across the state about the developmental screening process.

As integral decision-makers in the healthcare system and the lives of your patients, your input on this 10-15-minute survey will help inform the resources we create to address your needs and improve screening and follow-up services for all Louisiana health care providers, children, and families.

Your participation will provide valuable insights about current screening practices, challenges, and opportunities for collaboration related to the system of care that supports children's health and development.



**You will answer questions about:**

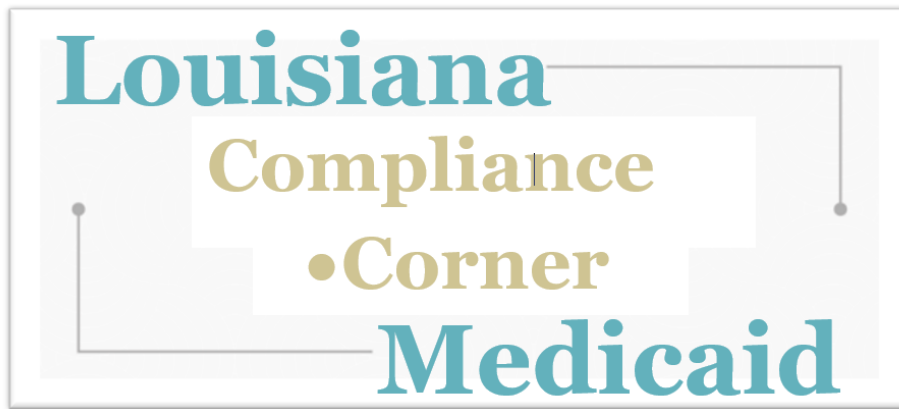
- Pediatric developmental screening at well-child visits
- Caregiver depression screening at well-visits
- Care coordination practices with families during and after well-child visits

**You can complete the survey by:**

- Using your phone to scan the QR code
- Accessing the survey online at [bit.ly/4cc6zZ5](https://bit.ly/4cc6zZ5)

Want more information? Email [DevScreen@la.gov](mailto:DevScreen@la.gov) with any questions.





## Remittance Advice Corner

### 2025 Annual 1099 Notice for Providers

Louisiana Medicaid 2025 1099's will be distributed by U.S. Mail on or before January 31, 2026. Electronic copies are now available for download by going to the Louisiana Medicaid website, [www.lamedicaid.com](http://www.lamedicaid.com), Secure Portal, application link, Online 1099. If replacement copies or additional copies are needed, providers must print them from the website. If you feel there is an error on your 1099, please contact Gainwell Provider Enrollment at 225-216-6370. Prior year 1099's will be stored in the archive on [www.lamedicaid.com](http://www.lamedicaid.com).

## Provider Manual Revision Log

A recent revision has been made to the following Medicaid Provider Manual chapters. Providers should review the revisions in their entirety at [www.lamedicaid.com](http://www.lamedicaid.com) under the "Provider Manual" link:

Manual Chapter	Section(s)	Date of Revision(s)
<a href="#">Children's Choice Waiver (CC)</a>	<ul style="list-style-type: none"> <li>Section 14.2 – Beneficiary Requirements</li> </ul>	04/17/26
<a href="#">Durable Medical Equipment (DME)</a>	<ul style="list-style-type: none"> <li>Appendix B – Claims Filing</li> </ul>	04/08/26
<a href="#">Free-Standing Birthing Centers (FSBCs)</a>	<ul style="list-style-type: none"> <li>Section 28.1 – Covered Services</li> </ul>	04/27/26
<a href="#">New Opportunities Waiver (NOW)</a>	<ul style="list-style-type: none"> <li>Section 32.3 – Beneficiary Requirements</li> </ul>	04/17/26
<a href="#">Residential Options Waiver (ROW)</a>	<ul style="list-style-type: none"> <li>Section 38.3 – Beneficiary Requirements</li> </ul>	04/17/26
<a href="#">Supports Waiver (SW)</a>	<ul style="list-style-type: none"> <li>Section 43.1 – Beneficiary Requirements</li> </ul>	04/17/26

## Medicaid Public Notice and Comment Procedure

In accordance with La. R.S. 46:460.51, et seq., before adopting, approving, amending, or implementing certain policies or procedures, the Louisiana Department of Health (LDH) will make the proposed policy or procedure available on the LDH website for 45 days for the purpose of gathering public feedback.

In cases where there is an urgent threat to public health, safety, or welfare that necessitates immediate implementation of the proposed change, the Department may proceed to adopt the change prior to the public comment period or its expiration. A statement explaining the determination of imminent peril to public safety or welfare will be provided.

Refer to the link below the table containing changes to the provider services manual that are open for public comment.

1. [Louisiana Medicaid \(Title jyXIX\) State Plan and amendments](#)
2. [Louisiana Medicaid Administrative Rulemaking activity](#)
3. [Medicaid provider manuals \(Medicaid Services Manual\)](#)
4. [Contract amendments](#)
5. [Managed care policies and procedures](#)
6. [Demonstrations and waivers](#)

<http://www.ldh.la.gov/index.cfm/page/3616>

## Updated Authorities

**Keeping you informed**

Keep up to date with all provider news and updates on the Louisiana Department of Health website:

[Informational Bulletins | La Dept. of Health](#)

Subscribe to Informational Bulletin Updates by email:

<https://ldh.la.gov/index.cfm/communication/signup/3>

Louisiana Medicaid State Plan amendments and Rules are available at:

[Medicaid Policy Gateway | La Dept. of Health](#)

Pharmacy Benefits Management (PBM) Program Information:

<https://www.lamedicaid.com/provweb1/Pharmacy/pharmacyindex.htm>

Louisiana Medicaid Fee Schedules:

[https://www.lamedicaid.com/provweb1/fee\\_schedules/feeschedulesindex.htm](https://www.lamedicaid.com/provweb1/fee_schedules/feeschedulesindex.htm)

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 residents of the state of Louisiana.

LDH is committed to the highest standards of conducting its affairs in full compliance with state and federal laws, regulations and policies. To report fraud, or other violations of federal and state laws and regulations or violations of LDH policies, send an email to [LDHreportfraud@la.gov](mailto:LDHreportfraud@la.gov) or call the **Internal Audit Unit** at **(225) 342-7498**. When making a report, particularly if you choose to remain anonymous, please provide as much information about the alleged activity as possible. Try to answer the questions of **who, what, when, where and how**.

LOUISIANA DEPARTMENT OF HEALTH

[ldh.la.gov](http://ldh.la.gov)



## Provider FAQs

1. [Where is there a listing of Parish Office phone numbers?](#)
2. [If a recipient comes back with a retroactive Medicaid card, is the provider required to accept the card?](#)
3. [Does a recipient's 13-digit Medicaid number change if the CCN changes?](#)
4. [Are State Medicaid cards interchangeable? If a recipient has a Louisiana Medicaid card, can it be used in other states?](#)
5. [Can providers request a face-to-face visit when we have a problem?](#)
6. [For recipients in Medicare HMOs that receive pharmacy services, can providers collect the Medicaid pharmacy co-payment?](#)
7. [Do providers have to accept the Medicaid card for prior services if the recipient did not inform us of their Medicaid coverage at the time of services?](#)
8. [Who should be contacted if a provider is retiring?](#)
9. [If providers bill Medicaid for accident-related services, do they have to use the annotation stamp on our documentation?](#)
10. [What if a Lock-In recipient tries to circumvent the program by going to the ER for services?](#)



11. [Does the State print a complete list of error codes for provider use?](#)
12. [If providers do not want to continue accepting Medicaid from an existing patient, can they stop seeing the patient?](#)

## We Are Here!

### [Directions, Map, and Instructions](#)

Louisiana Department of Health  
Bienville Building  
628 North 4<sup>th</sup> Street  
Baton Rouge, LA 70802



### [Directions from Lafayette](#)

Take I-10 East to Baton Rouge.

At I-10 Exit 155B turn onto the ramp that merges onto I-110 North.

Take the North Street exit on your left.

Continue down North Street to the Bienville Building at the corner of North and 4<sup>th</sup> Streets.

### [Directions from New Orleans](#)

Take I-10 West from New Orleans to Baton Rouge.

At I-10/I-110 Exit, merge onto I-110 North.

Take the North Street exit on your left.

Continue down North Street to the Bienville Building at the corner of North and 4<sup>th</sup> Streets.

### Directions from North Baton Rouge

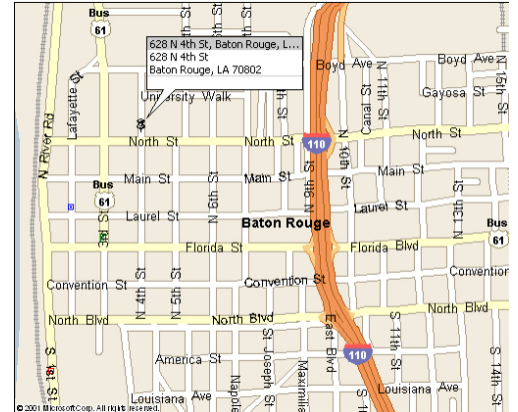
Take I-110 South.

After passing Capitol Access Road exit, take North 9th Street exit.

Follow service road alongside interstate.

Turn right onto North Street.

Continue down North Street to the Bienville Building at the corner of North and 4<sup>th</sup> Streets.



### Parking Options:

#### **Option 1**

Galvez Parking Garage

504 North 5th Street (Located at the corner of North and 5<sup>th</sup> Streets)

Baton Rouge, LA 70802

***[Know your license plate number for validation purposes]***

#### **Option 2**

Street parking around the Bienville Building is available at a cost of \$0.25 every 15 minutes. This can be paid several ways:

1. [Flowbird USA app](#),
2. Kiosks located on every block, and
3. Signs with QR codes and texting options throughout the downtown area.

***[There is a maximum limit of two hours daily to park on the street.]***

### Checking In and Parking Validation Procedures:

Proceed to the Bienville Building Front Security Desk to:

#### 1. Check In and Receive Visitor Identification Badge

- a) You are required to provide official government-issued identification to obtain a visitor identification badge.
- b) Inform the security guard of the meeting name and the phone number associated with your scheduled visit. The security guard will contact someone to escort you up to the designated area.
- c) Please wait in the main lobby for your escort.

#### 2. Validate your Parking in the Galvez Parking Garage

***Note: You have a limited timeframe of 30 minutes from the moment you park to complete the validation process; otherwise, a citation will be issued.***

Use your cellular phone and scan the QR code by the Front Security Desk in the Bienville Building.

- a) Retrieve the passcode from the security guard.
- b) Enter the passcode.
- c) Enter your license plate number.
- d) A green check will show on your screen to confirm validation for 12 hours.

## For Information or Assistance, Call Us!



**General Medicaid Eligibility Hotline**  
1-888-342-6207

**Provider Relations**  
1-800-473-2783

(225) 294-5040  
[Medicaid Provider Website](#)

**Prior Authorization:**  
**Home Health/EPSTD – PCS - Dental**  
1-800-807-1320  
1-855-702-6262  
[MCNA Provider Portal](#)

**DME and All Other**  
1-800-488-6334  
(225) 928-5263

**Hospital Pre-Certification**  
1-800-877-0666

**REVS Line**  
1-800-776-6323  
(225) 216-(REVS)7387  
[REVS Website](#)

**Medicare Savings**  
1-888-544-7996  
[Medicare Provider Website](#)

**Point of Sale Help Desk**  
1-800-648-0790  
(225) 216-6381

**MMIS Claims Processing Resolution Unit**  
(225) 342-3855  
MMISClaims@la.gov  
[MMIS Claims Reimbursement](#)

**MMIS/Recipient Retroactive Reimbursement**  
(225) 342-1739  
1-866-640-3905  
Medicaid.RecipientReimbursement@LA.gov  
[MMIS Claims Reimbursement](#)

**MES Long Term Care Claims Resolution Unit**  
[MESLTCClaims@LA.gov](#)  
(225)342-3855

**For Hearing Impaired**  
1-877-544-9544

**Pharmacy Hotline**  
1-800-437-9101  
[Medicaid Pharmacy Benefits](#)

**Medicaid Fraud Hotline**  
1-800-488-2917  
[Report Medicaid Fraud](#)

