

## Welcome



Welcome to the June edition of the Provider Update Newsletter.

As we continue through the year and begin to enter the summer months, 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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## Cognitive Assessment Services Now Covered for Eligible Adults

CPT® CODE

**99483**

**Cognitive Assessment  
and Care Plan Services**



Eligible beneficiaries ages 21 and older who show signs or symptoms of cognitive impairment — including conditions such as Alzheimer's disease or dementia — may now receive coverage for cognitive assessment and care plan services.

These services must be medically necessary and properly documented in the patient's medical record. Reimbursement is limited to two services per beneficiary per calendar year.

## Foundations of Appropriate Prescribing of Behavioral Health Medications

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

People living with behavioral health (BH) conditions can achieve meaningful, productive lives when they receive appropriate care. Because treatment needs vary from person to person, there is no single approach that works for everyone. Effective treatment plans may involve nonpharmacologic strategies (such as social support services, wellness initiatives, and psychotherapy), behavioral health medications, or a combination of both. With the wide range of psychotropic therapies currently available, prescribing behavioral health medications can be complex, particularly for healthcare providers in primary care settings. Establishing a strong foundational approach is essential to support safe and appropriate prescribing practices.

### ***Evaluate the Appropriateness of Behavioral Health Medication Treatment***

- Assess for possible underlying medical or metabolic causes of behavioral health symptoms, such as hormonal imbalances, nutritional deficiencies, viral illnesses, or cognitive changes, which may require laboratory evaluation or additional diagnostic workup. Using open-ended questions can also help patients identify stressors, triggers, or circumstances contributing to their symptoms or emotional distress.
- Consider nonpharmacologic alternatives, the risks associated with withholding medication treatment, and the potential impact of either decision on patient outcomes.
- Ensure that the potential benefits of a medication exceed its associated risks. When considering pharmacologic treatment, the anticipated improvement in symptoms and the overall clinical value of that improvement should outweigh the possibility of adverse effects. The overall risk–benefit profile of the medication should be more favorable than alternatives such as no treatment, watchful waiting, other medications, or psychological interventions. Evaluating the risk–benefit balance requires sound clinical judgment, familiarity with the available evidence supporting treatment options, and consideration of the patient’s preferences and perspectives.
- Review concurrent medications used to manage comorbid conditions to identify possible drug interactions or contraindications that may require closer monitoring.

### ***Initiate with a Low Therapeutic Dose and Gradual Titration***

- Most psychotropic medications have a therapeutic dosing range, and the dose at which a particular patient will respond cannot be predicted in advance. In contrast, adverse effects generally become more common and more severe as the dose increases.
- For this reason, doses should be increased gradually, particularly in older adults. However, care should be taken to ensure that cautious titration does not unintentionally leave the patient on a chronically subtherapeutic dose.

### ***Use the Simplest Effective Medication Regimen***

- Whenever possible, prescribe the fewest medications necessary to effectively manage behavioral health conditions and comorbidities.
- Minimizing medication burden may improve treatment adherence, reduce adverse effects, and enhance overall tolerability.

### ***Allow an Adequate Duration for a Therapeutic Trial***

- Response to some behavioral health medications is often gradual, and may take weeks before clinically meaningful improvement is observed. Therefore, treatment should not be discontinued prematurely based on an assumption of inefficacy.
- For certain medications, if no measurable improvement has occurred after an appropriate amount of time, the likelihood of subsequent response may be low, and treatment may need to be reconsidered.
- Always refer to the medication’s prescribing information for therapeutic dosing guidelines and anticipated time to achieve maximum effects.

### ***Ensure Prescribing Is Part of a Comprehensive Treatment Plan***

- Develop and carry out a treatment plan through collaboration among primary care providers, behavioral health clinicians, and psychiatric consultants.
- Pharmacological treatment should be integrated with social and psychological interventions, the complexity of which may vary depending on the patient's needs.
- A team-based approach can help guide medication selection and establish clear expectations with patients regarding treatment goals and outcomes.

### ***Involve the Patient in Treatment Decisions***

- Whenever feasible, patients should participate in selecting their treatment and be offered appropriate options. Clinicians play an important role in providing accurate information and addressing patient misconceptions regarding psychiatric illness and its treatment.
- Depending on the condition and its severity, options may include psychological therapy, pharmacotherapy, combined treatment, or watchful waiting without medication. Shared decision-making is associated with improved adherence and greater patient satisfaction.

### ***Discuss Adverse Effects Before and During Treatment***

- Psychotropic medications can produce a broad range of adverse effects in multiple body systems. These effects are clinically significant because they may reduce quality of life, impair adherence, and increase the risk of relapse.
- Common adverse effects, along with rare but serious reactions, should be reviewed before treatment with medication begins.
- Ongoing assessment for adverse effects should occur at follow-up visits, with clinicians actively asking about symptoms rather than relying solely on the patient to self-report.
- For some medications, the use of structured adverse-effect checklists may support systematic monitoring. Depending on the type of medication prescribed, monitoring may also include physical examination and laboratory testing, such as tracking body mass index, glucose levels, and lipid profiles. If adverse effects are identified, their impact should be assessed and management options discussed. Some adverse effects may respond to lifestyle adjustments, while others may require dose reduction, switching medications, or targeted treatment of the adverse effect itself.

### ***Assess Adherence Regularly***

- Nonadherence to psychotropic medications is common, often goes unrecognized, and is a frequent contributor to perceived treatment failure.
- Identifying and addressing barriers to adherence can improve treatment outcomes.

### ***Taper Medications Gradually when Discontinuing Treatment***

- When a psychiatric medication that has been taken for four weeks or longer is being discontinued without a plan to replace it with another medication in the same class, gradual tapering over several weeks is generally recommended. This approach helps reduce the risk of discontinuation or withdrawal symptoms, which may emerge within days of abrupt cessation and are often related to pharmacologic rebound effects.

- Symptoms of withdrawal are well recognized with antidepressants, antipsychotics, and benzodiazepines. In contrast, when switching directly between medications within the same class, tapering may not be necessary because overlapping pharmacologic effects reduce the likelihood of withdrawal symptoms.

### ***Foster Trust and Strengthen Collaboration Among Patients and Members of the Healthcare Team***

- Approach discussions about mental health treatment with confidence and compassion so that patients are more likely to feel comfortable, supported, and engaged in their care.
- Express appreciation for the patient's willingness to participate in care and explain your commitment to comprehensive, integrated treatment.
- Acknowledge and validate the patient's emotions and experiences so they feel heard and understood.
- Build rapport by speaking in clear, understandable terms. Avoid overly clinical or stigmatizing language, and communicate in a respectful, nonjudgmental manner.
- Offer treatment choices rather than directives. Encourage patients to participate actively in treatment planning. Provide recommendations based on clinical history, symptoms, and evidence-based considerations while incorporating the patient's preferences and goals.
- Present psychopharmacology in a positive, supportive way. Some patients may feel discouraged or embarrassed about needing medication. Reinforce that psychotropic medications can be one helpful tool in managing BH conditions and improving quality of life.

#### **Expectations**

Along with partnering with patients, it is important to establish and manage clear expectations. Doing so helps patients understand what to expect regarding symptom improvement and potential side effects, supports confidence in the treatment approach, and promotes adherence to therapy. Key topics to review when setting expectations include:

**Medication effectiveness** - Discuss the expected benefits of the medication and what a meaningful response may look like.

**Treatment plan** - Review the initial treatment approach, the likelihood of improvement, and possible next steps if the first strategy is not effective. It can also be helpful to explain that psychotropic medications do not work the same way for every individual, and treatment adjustments may be necessary over time.

**Side effects** - Prepare patients to recognize potential side effects and understand how to respond if they occur. Be sure to discuss which side effects are temporary, how long they may last, and when to seek additional guidance.

## Additional Resources

- [Clinical practice guideline recommendations on tapering and discontinuing antidepressants for depression: a systematic review - PMC](#)
- [How to stop antidepressants - Therapeutics Letter - NCBI Bookshelf](#)
- [Psychiatry.org - Clinical Practice Guidelines](#)
- [Psychopharmacology guide on prescribing psychotropic medications | American Medical Association](#)
- [Recommendations for the Deprescribing of Psychotropic Medications: A Consensus Statement From the American Society of Clinical Psychopharmacology Task Force | Clinical Pharmacy and Pharmacology | JAMA Network Open | JAMA Network](#)
- [SAMHSA - Substance Abuse and Mental Health Services Administration](#)

## References

American Medical Association. (2024, May 8). *Psychopharmacology guide on prescribing psychotropic medications*. American Medical Association. <https://www.ama-assn.org/delivering-care/behavioral-health/psychopharmacology-guide-prescribing-psychotropic-medications>

Haddad, P. M. (2024). *Ten principles of good psychiatric prescribing*. *Medicine*, 52(9), 569–572.



## Early Steps



EarlySteps provides services to families with infants and toddlers from birth through age 2 (35 months) who have a medical condition likely to result in a developmental delay or who have developmental delays. Children with delays in cognitive, motor, vision, hearing, communication, social-emotional or adaptive development may be eligible for EarlySteps services designed to improve the family's capacity to enhance their child's development. These services are provided for children between the ages of birth and 2 (35 months) in the child's natural environment, such as the child's home, childcare, or any other community setting.

## Hurricane Season - Get a Game Plan

Be ready for hurricane season! By the books, hurricane season kicks off June 1.

Take action **TODAY** to be better prepared for when the worst happens. Visit [Home - Get a Game Plan](#), the official emergency preparedness information provided by the Louisiana Governor's Office of Homeland Security and Emergency Preparedness (GOHSEP).

To help individuals and families prepare for hurricane season, there are also resources available on the Federal Emergency Management Agency's (FEMA) websites in English at [www.Ready.gov](http://www.Ready.gov) and in Spanish at [www.Listo.gov](http://www.Listo.gov).

## 988 Day Fact Sheet



**CALL. TEXT. CHAT.  
988 IS HERE FOR YOU—  
ANYTIME, ANYWHERE.**

The 988 Suicide & Crisis Lifeline (988 Lifeline) provides judgment-free, compassionate support for anyone experiencing:

- Emotional distress
- Mental health challenges
- Problems with substance use
- Loneliness
- Thoughts of suicide or self-harm

You'll be connected with a caring, skilled 988 counselor who can provide culturally-competent support.

**WHY 988 MATTERS**

The 988 Lifeline connects people to 988 counselors across a network of more than 200 local crisis contact centers, offering support rooted in local communities.

**WHEN YOU CONTACT 988, YOU RECEIVE:**

- Support from someone who cares
- Help planning next steps
- Information about local resources and option for follow-up



Compassionate Help. Anytime. Anywhere.  
Call or Text **988**, or Chat [988lifeline.org](http://988lifeline.org)

**988** | SUICIDE & CRISIS LIFELINE



Compassionate Help.  
Anytime. Anywhere.

## Medicaid Policy Inbox

### NEWSLETTER

# Medicaid Policy Inbox



The Medicaid Policy Inbox is accessible through the **Send Questions and Comments** link at the bottom of the Medicaid Policy Gateway page of the LDH website.



The purpose of the mailbox is to provide an avenue for the user to **ask questions** or **provide comments** about Louisiana Medicaid policy by connecting them to appropriate resource to address their concerns.



Working together for a healthy Louisiana



Your questions and comments help us improve communication and support Louisiana Medicaid providers and stakeholders.



Thank you for your partnership in providing quality care to Louisiana residents.

## Medicaid Work Requirements Begin in 2027

Medicaid has begun mailings of the first round of notices related to the new federal rules on community engagement, which most of us know as work requirements. This “general notice” will only go to members due for renewal in January 2027 who must meet the new requirements.

Mailings will continue monthly on a staggered schedule to ensure all impacted members receive notification six months prior to the start of their renewal period.

Starting **January 1, 2027**, some Louisiana Medicaid members will have to report community engagement activities, commonly known as **work requirements**, to keep their health coverage. Most people on Medicaid will not need to meet these requirements.

These new rules only apply to some adults between the ages of 19 and 64 who do not have a disability or a **qualifying medical condition**. To keep their coverage, these members will need to show Medicaid they are participating in at least 80 hours of community engagement activities or earning at least \$580 each month. Community engagement activities can include work, job training, education and volunteering. A mix of approved community engagement activities can count. Medicaid will check this activity for new applicants and during member renewals.

Most people are exempt from these rules, meaning they do not have to participate. This includes pregnant or postpartum women, caregivers of young children or a disabled individual, medically frail people, disabled veterans, foster youth, and others.

**Medicaid will send a notice** (see a sample [here](#)) to impacted members several months before they need to renew their coverage to give them time to understand the expectations and meet the required timelines. For example, members with January 2027 renewal dates will be mailed a notice in May 2026. Their renewal packet will be mailed in November 2026. About half of the people affected won't have to do any extra paperwork. Medicaid will check records like job history and Social Security to see if they already meet the requirements.

Members should **keep their contact information up to date** with Louisiana Medicaid so they do not miss these important updates. For more information, including a communications toolkit and a list of frequently asked questions, visit [ldh.la.gov/Medicaid/work-requirements](https://ldh.la.gov/Medicaid/work-requirements)



**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.








## 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](#).

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

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

**Provider Relations**

(225) 924-5040 or  
 1-800-473-2783

**Claims**

(225) 342-3855 (Option 2)  
[MMISClaims@la.gov](mailto: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).



## June 2026 Health Observances

### Month-Long (June 1-30)

- **Men’s Health Month:** Focuses on raising awareness about preventable health problems and encouraging early detection and treatment for men and boys.
- **Alzheimer’s and Brain Awareness Month:** A global movement spearheaded by the Alzheimer's Association to raise awareness about brain health and dementia.
- **National PTSD Awareness Month:** Highlights the importance of treatment, resources, and support for those impacted by Post-Traumatic Stress Disorder.
- **National Safety Month:** Promoted by the National Safety Council, it focuses on reducing leading causes of injury and death at work, on the road, and in our homes.
- **Other key month-long campaigns:** National Migraine & Headache Awareness Month, Aphasia Awareness Month, and Cataract Awareness Month.

### Weeks

- **National CPR and AED Awareness Week** (June 1-7): Highlights the life-saving importance of bystander CPR and Automated External Defibrillators (AEDs).
- **Men’s Health Week** (June 8-14): Often culminating in "Wear Blue for Men's Health" day, this week emphasizes regular physicals and men's wellness.
- **CNA Week** (June 12-18): Celebrates and recognizes Certified Nursing Assistants for their vital role in the healthcare ecosystem.

### Key Days

- **National Cancer Survivors Day** (June 7): Celebrates cancer survivors and inspires those recently diagnosed, highlighting survivorship resources.

- **World Blood Donor Day** (June 14): Sponsored by the World Health Organization, it raises awareness of the need for safe blood and thanks voluntary, unpaid donors for their life-saving gifts.
- **World Sickle Cell Day** (June 19): Increases public knowledge about sickle cell disease and the challenges patients and their families face.
- **National HIV Testing Day** (June 27): Encourages individuals to get tested for HIV, know their status, and link to care and prevention services.



## Men's Health Month: Closing the Gaps in Preventive Care

June is Men's Health Month, an opportunity for healthcare providers to spotlight the unique challenges men face in accessing preventive care and managing chronic conditions. Despite advances in healthcare delivery, men remain less likely than women to seek routine medical care, engage in preventive screenings, or address mental health concerns early.

This gap has measurable consequences. Men continue to experience higher rates of hypertension, heart disease, substance misuse, and suicide, while often presenting later in the progression of disease. Delayed care not only impacts outcomes but also increases the long-term burden on healthcare systems.

For providers, Men's Health Month is a reminder that engagement strategies matter. Many men interact with the healthcare system episodically — often only when symptoms become disruptive. Primary care teams can help shift that pattern by integrating preventive conversations into every encounter, including urgent care, occupational medicine, and specialty visits.

Key focus areas this month include:

- Cardiovascular health screening, including blood pressure, cholesterol, and diabetes risk assessment
- Cancer prevention and early detection, particularly colorectal, prostate, skin, and testicular cancers
- Mental health awareness, with attention to stress, depression, isolation, and suicide risk
- Lifestyle counseling related to nutrition, physical activity, sleep, alcohol use, and tobacco cessation
- Encouraging establishment of an ongoing primary care relationship

Communication style also plays an important role. Research continues to show that concise, action-oriented messaging and practical goal setting can improve patient participation and adherence. Framing preventive care around performance, longevity, family responsibilities, and quality of life may resonate more strongly with some male patients than traditional risk-focused messaging alone.

Healthcare organizations can support Men’s Health Month through workplace wellness campaigns, community-screening events, patient education materials, and targeted digital outreach. Even small interventions — appointment reminders, portal messages, or brief screening questionnaires — can help normalize preventive care and reduce barriers to engagement.

Ultimately, Men’s Health Month is about more than awareness. It is an opportunity for providers to strengthen trust, encourage earlier intervention, and help patients build sustainable habits that improve long-term health outcomes.

## Louisiana Medicaid’s New Focus on Maternal Health: Why “Project M.O.M.” Matters



Louisiana Medicaid is moving beyond traditional health coverage and investing in something that could have a major long-term impact on families across the state: coordinated care for pregnant and postpartum women struggling with substance use disorders.

This year, the Louisiana Department of Health launched [Project M.O.M.](#) — short for *Maternal Overdose Mortality* — a statewide initiative aimed at reducing overdose-related maternal deaths and improving outcomes for both mothers and babies.

The program is especially significant because accidental overdose has become one of the leading causes of pregnancy-associated deaths in Louisiana SINCE 2018. Instead of treating addiction, prenatal care, and behavioral health as separate systems, Project M.O.M. attempts to connect them into one coordinated pathway.

Eleven hospitals across Louisiana were selected as inaugural “catalyst sites,” including facilities in Baton Rouge, New Orleans, Lafayette, Alexandria, Bogalusa, and Lake Charles. These hospitals are implementing several new practices, including:

- Universal verbal screening for substance use
- Better coordination for medication-assisted treatment
- Expanded behavioral health navigation
- Naloxone education and distribution
- Enhanced postpartum follow-up support

Another noteworthy development is Louisiana Medicaid’s approval of **doula services as a covered benefit** under the State Plan. Beginning in 2026, eligible Medicaid recipients can receive support services from trained doulas during pregnancy and childbirth.

This shift reflects a broader trend in Medicaid policy nationwide: states are increasingly recognizing that maternal health outcomes are influenced not only by hospital care, but also by social support, behavioral health access, transportation, nutrition, and continuity of care after delivery.

These changes could represent an important turning point. Louisiana Medicaid now covers more than 1.8 million residents, giving the program enormous influence over public health outcomes statewide.

These maternal health initiatives represent an important turning point for the state; Louisiana could become an example of how Medicaid programs can move from simply paying medical bills to actively improving community health and family stability.

## June Dates to Note

The first day of summer is: June 21



State offices will be closed for the following:

- Juneteenth – June 19



## 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](#).

## 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.

## 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

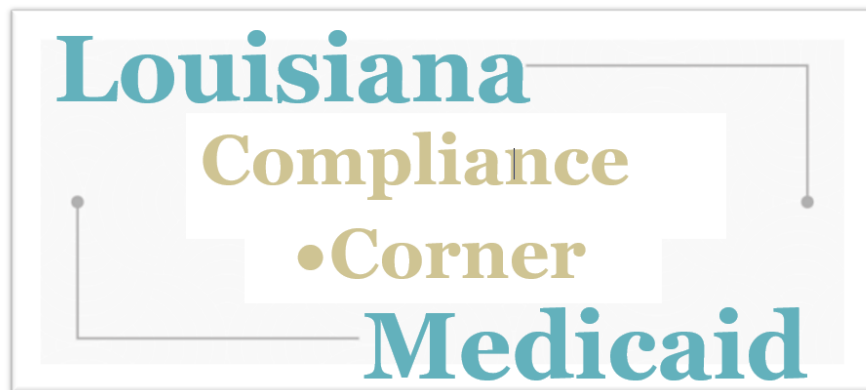
### Need Behavioral Health Support for Your Pediatric Patients?

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)



## 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="#">Professional Services</a>	<ul style="list-style-type: none"> <li>Section 5.1 – Covered Services – Cognitive Assessment and Care Plan Services</li> </ul>	05/04/26

## 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.

- [Louisiana Medicaid \(Title jyXIX\) State Plan and amendments](#)
- [Louisiana Medicaid Administrative Rulemaking activity](#)
- [Medicaid provider manuals \(Medicaid Services Manual\)](#)
- [Contract amendments](#)
- [Managed care policies and procedures](#)
- [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 4th Streets.

### Directions from North Baton Rouge

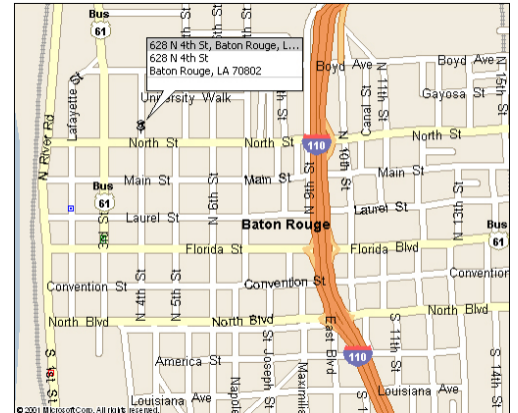
Take I-110 South.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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