Louisiana Medicaid

Provider UPDATE

Volume 41, Issue 10 | December 2025

Welcome

Both leaves and temperatures have begun to fall, bringing winter and a new year fast on their heels. Soon we will say goodbye to 2025 and hello to 2026. A whole new year is ahead of us. So, it is a pleasure to bring you the **December edition** of the Louisiana Medicaid Provider Update newsletter. This issue is designed to provide important and valuable information about the Louisiana Medicaid program and newsletter to share upcoming information or actions that may be required by the provider community.

Please continue to visit the LDH website and social media platforms to stay informed about program updates and upcoming events.

The Louisiana Department of Health (LDH) 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 (OPH), Office of Aging and Adult Services (OAAS), Office of Behavioral Health (OBH), Office for Citizens with Developmental Disabilities (OCDD), Office on Women's Health and Community Health (OWHCH), and Healthy Louisiana (Medicaid). To learn more, visit ldh.la.gov or follow us on X, Facebook, and Instagram.

We appreciate your steadfast commitment to serving the Louisiana Medicaid population and your role as a valued partner in these efforts.

We hope you find this month's newsletter informational.

Table of Contents

LDH Appoints New Leadership

The Louisiana Department of Health (LDH) is pleased to announce appointment of two new additions to its leadership team: **Seth J. Gold**, who will serve as **Medicaid Director**, and **Camille Conaway**, who will serve as **Chief of the Center for Economic Independence**.

As key additions to the LDH leadership team, their expertise will enhance the Department's ability to provide high-quality, efficient, and people-focused services.

Pharmacy-Based Interventions to Improve Medication Adherence in Patients with Cardiovascular Disease (CVD)

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

Heart disease and stroke remain among the leading causes of death and disability in the United States, according to the American Heart Association. Every 42 seconds, someone experiences a heart attack; every minute, someone dies from one. Similarly, a stroke occurs every 40 seconds, and every four minutes, a life is lost to stroke. Fortunately, individuals can take steps to protect themselves. Lifestyle changes play a critical role in reducing risks, including:

- Maintaining a healthy weight
- Increasing physical activity
- Eating more fruits, vegetables, whole grains, fish, and low-fat dairy products
- Limiting sodium, sugar, animal fats, sugary beverages, and alcohol
- Avoiding or quitting smoking

Risk reduction also involves proactive health management, such as:

- Monitoring and controlling blood pressure and cholesterol levels
- Consulting health care professionals about blood pressure
- Attending medical appointments to track high blood pressure
- Taking prescribed medications as directed

In addition, recognizing the warning signs of heart attack and stroke—and calling 911 immediately when they occur—can greatly improve survival and reduce long-term damage to the heart and brain.

Health care professionals already play a vital role in reducing heart disease and preventing stroke in the United States, yet additional opportunities remain. Pharmacists, in particular, are uniquely positioned to influence outcomes related to cardiovascular health. By proactively identifying patient needs and encouraging healthy behaviors, community pharmacists can make a meaningful impact on population health. Pharmacists may contribute by:

- Raising community awareness about heart disease and stroke
- Delivering patient care services, including promoting lifestyle changes, supporting self-management, counseling patients struggling with medication adherence, ensuring proper medication use, and screening for uncontrolled or undiagnosed hypertension
- Engaging in team-based care and collaborative practice agreements
- Applying evidence-based clinical protocols
- Supporting e-prescribing systems with two-way communication between pharmacists and prescribers to optimize medication management
- Participating in quality improvement initiatives
- Pursuing continuing education opportunities
- Obtaining certifications in chronic disease management

Tailored pharmacy-based interventions are recommended to support adherence to medications prescribed to prevent cardiovascular disease. These interventions are designed to support patients at risk of cardiovascular disease (CVD) in adhering to their prescribed medications. Key components include:

- Assessment: Interviews or structured tools are used to identify barriers to medication adherence.
- Personalized guidance and services: Pharmacists interpret assessment results to create and deliver tailored strategies that address those barriers.
    - *Tailored guidance* may involve targeted medication counseling or motivational interviewing sessions.
    - *Tailored services* can include practical aids such as pillboxes, medication cards, or calendars; synchronization of prescription refills; and enhanced follow-up.

Interventions may be implemented in community or health system pharmacies and can be supplemented with patient education materials or communication between pharmacists and primary care providers. They may function independently or as part of a broader program aimed at lowering patients' overall CVD risk.

> **Medication nonadherence** occurs when patients fail to take prescribed medicines or do not follow their provider's instructions for use. Barriers to adherence can arise at the patient, provider, or health system level. This lack of adherence is linked to uncontrolled blood pressure and increased hospital admissions.

Tailored pharmacy-based interventions **aim** to overcome barriers to medication adherence by identifying and addressing the factors that influence a patient's ability to take their medicines as prescribed. These barriers are often multifaceted, involving socioeconomic challenges, health system structures and processes, the severity of coexisting medical conditions, the complexity of treatment regimens, and patient concerns.

Common factors influencing adherence include:

- Busy schedules that hinder consistent use
- Difficulty scheduling or attending appointments
- Comfort and ease of communication with pharmacists or providers
- Understanding of dosage instructions and timing
- Ability to synchronize prescriptions and access automated 30- or 90-day refills
- Severity of health conditions and personal beliefs about illness
- Expectations regarding medication effects

These challenges may be compounded by poor communication or lack of trust between patients and providers, and minimal patient involvement in shared decision-making.

Benefits of Pharmacy-Based Interventions

- *Studies have shown that patients who were adherent to their antihypertensive medications were 30% to 45% more likely to achieve blood pressure control compared to those who were not.*
- *Nonadherence to medications to prevent CVD has been associated with a significant increase in the risk of premature death from any cause, CVD death, hospitalization for heart attack or heart failure, and coronary revascularization procedures.*

CVD remains a leading driver of health care spending in the United States, accounting for more than **$363.4 billion annually** in medical services, medications, and lost productivity due to premature death. The **Community Preventive Services Task Force (CPSTF)** determined that tailored, pharmacy-based interventions are cost-effective for preventing cardiovascular disease (CVD) among patients with risk factors. For individuals already living with CVD, evidence shows that the savings from reduced health care utilization outweigh the costs of implementing these interventions.

Medication nonadherence contributes significantly to this burden, creating financial strain for health systems, providers, payers, and patients alike. Among individuals with cardiovascular disease (CVD) or related risk factors, nonadherence is linked to poorer health outcomes and higher medical costs. One study found that consistent adherence to therapies for congestive heart failure, hypertension, and elevated low-density lipoprotein (LDL) cholesterol levels reduced annual health care spending per patient by approximately $7,800, $3,900, and $1,250, respectively, compared with those who were less adherent.

Stakeholder Roles in Pharmacy-Led Interventions

Patients

- Engage with pharmacist to identify barriers to adherence.
- Participate in tailored interventions.

Pharmacies

- Deliver tailored interventions to patients with CVD risk factors.
- Train pharmacy staff to deliver tailored interventions.
- Adapt workflow to integrate tailored interventions.
- Ensure patient comfort by delivering tailored interventions in a private area.
- May involve developing a formal relationship with provider.

Providers

- Coordinate patients' care, including prescribing medications.
- Review recommendations from pharmacists and determine if appropriate.
- May involve developing a formal relationship with pharmacy or pharmacist.

Pharmacy-led interventions tailored to patients with CVD risk factors not only improve adherence but also generate significant cost savings by reducing outpatient visits, hospitalizations, and emergency department use.

References

[Pharmacy-Based Interventions to Improve Medication Adherence | Cardiovascular Disease Data, Tools, and Evaluation Resources | CDC]

[Using the Pharmacists' Patient Care Process to Manage High Blood Pressure: A Resource Guide for Pharmacists]

EPSDT Preventive Services Fee Schedule is Retiring

Louisiana Medicaid retired the Type of Service (TOS) 21 and the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) Preventive Services Fee Schedule effective December 20, 2025.

This action supports the ongoing initiative to enhance efficiency and streamline reimbursement methodology by eliminating duplication within current fee schedule categories.

For key details on the retirement of the schedule, visit [IB25-33.pdf]

Holiday Season Triggers for Patients with Asthma

For patients with asthma, the holidays can bring a multitude of unexpected triggers. As this time approaches, providers should ensure that their asthma patients are aware of the following holiday-related asthma triggers and practical solutions to deal with them.

- Artificial holiday scents are a frequent trigger for asthma and COPD flare-ups. Common sources include candles, air fresheners, dried potpourri, and scented pinecones. While these items are popular seasonal decorations, they pose the same risks to individuals with lung disease as air fresheners do year-round. The American College of Allergy, Asthma and Immunology (ACAAI) advises that people with asthma—or those living with someone who has asthma—should avoid air fresheners, scented candles, and scented pinecones. People with asthma should consider using unscented options or battery-operated flameless candles as safer alternatives.

- Both real and artificial Christmas trees can pose challenges for individuals managing asthma or COPD. Live trees may introduce indoor triggers such as mold and pollen, and even the strong scent of pine can provoke symptoms. Artificial trees, on the other hand, often accumulate dust and mold if stored improperly. Real trees should be shaken thoroughly before being brought inside, and once set up, the water should be changed regularly to prevent mold growth. Artificial trees, along with all decorations that have been stored, should be cleaned before decorating to ensure that all dust and mold accumulated during storage have been eradicated. Artificial snow or frosted branches should be avoided as these coatings can irritate the lungs.

- Respiratory infections are the number one asthma trigger during the holidays. Exposure to viruses may occur in crowded or unfamiliar places; therefore, instruct patients to wash their hands frequently and to wear a mask if they are concerned.

- Traveling can also mean visiting or staying overnight with family and friends. When staying in a home with possible triggers, such as pets or smoke, patients should communicate their concerns to their hosts. For example, pets could be kept in a separate part of the house.

- Wood-burning fireplaces, which may be used around the holidays and throughout the winter, can also be a trigger for those with asthma and COPD. Patients should socialize away from any wood fires or request that hosts or family refrain from burning them.

As we head into the holiday season, discuss these concerns with your patients. Ensure that an action plan is in place to treat early warning signs and symptoms. Remind patients to have their quick-relief inhalers easily accessible, assess and track their symptoms, and refer to their action plan if symptoms escalate. With preparation for the holiday season, patients with asthma can have a safe and happy holiday season.

Reference

Holiday Scents and Lung Disease Triggers | American Lung Association

National Impaired Driving Prevention Month
National Safe Toys and Gifts Month

WEEK
December 1 – 7
National Handwashing Awareness Week
Crohn's and Colitis Awareness Week

December 1 – 5
National Influenza Vaccination Week

December 14 - December 22
Hanukkah

December 26 – January 1
Kwanzaa

Upcoming Holiday Observances

State offices will be closed on

December 24, December 25, December 26,

December 31, January 1, and January 2.

DAYS

World AIDS Day	December 1
International Day of Persons with Disabilities	December 3
International Volunteer Day	December 5
Human Rights Day	December 10
Winter Solstice	December 21 at 9:03 A.M. (CST)

Safe Toys and Gifts Month

Prevent Blindness America has declared December as Safe Toys and Gifts Awareness Month. The group encourages everyone to consider if the toys they wish to give suits the age and individual skills and abilities of the individual child who will receive it, especially for infants and children under age three.

This holiday season (and beyond), please consider the following guidelines for choosing safe toys for all ages:

- Inspect all toys before purchasing. Avoid those that shoot or include parts that fly off. The toy should have no sharp edges or points and should be sturdy enough to withstand impact without breaking, being crushed, or being pulled apart easily.

- When purchasing toys for children with special needs try to: Choose toys that may appeal to different senses such as sound, movement, and texture; consider interactive toys to allow the child to play with others; and think about the size of the toy and the position a child would need to be in to play with it.

- Be diligent about inspecting toys your child has received. Check them for age, skill level, and developmental appropriateness before allowing them to be played with.

- Look for labels that assure you the toys have passed a safety inspection – “ATSM” means the toy has met the American Society for Testing and Materials standards.

- Gifts of sports equipment should always be accompanied by protective gear (give a helmet with the skateboard).

- Keep kids safe from lead in toys by: Educating yourself about lead exposure from toys, symptoms of lead poisoning, and what kinds of toys have been recalled; being aware that old toys may be more likely to contain lead in the paint; having your children wash their hands frequently and calling your doctor if you suspect your child has been exposed to lead. Consult the last two websites listed below for more information.

- Do NOT give toys with small parts (including magnets and "button" batteries which can cause serious injury or death if ingested) to young children as they tend to put things in their mouths, increasing the risk of choking. If the piece can fit inside a toilet paper roll, it is not appropriate for kids under age three.

- Do NOT give toys with ropes and cords or heating elements.

- Do NOT give crayons and markers unless they are labeled "nontoxic".

For more information:

Call Prevent Blindness America at 800-331-2020 or visit www.preventblindness.org/safe-toy-checklist

http://kidshealth.org/parent/firstaid_safe/home/safe_toys.html

www.nlm.nih.gov/medlineplus/ency/article/002473.htm

https://child-familyservices.org/december-is-national-safe-toys-and-gifts-month/

Article Source: https://www.apha.org/events-and-meetings/apha-calendar/2021/2021-safe-toys-and-gifts-month

ASAM Criteria 4th Edition Service Updates

Louisiana Medicaid has revised the fee schedule for Specialized Behavioral Health Services (SBHS) fee schedule to reflect updates changes in rates and services following the funding appropriated by the Louisiana Legislature during the 2025 Regular Legislative Session.
The changes associated with the ASAM 4th Edition will take effect on January 1, 2026, for beneficiaries aged 18 and older.

The Louisiana Department of Health (LDH) will implement this rate increase by either adopting new rates developed by third party actuaries in accordance with the 4th Edition of the American Society of Addiction Medicine (ASAM) Criteria or by maintaining the temporary 25% rate increase implemented in State Fiscal Year 2025, effective December 1, 2024, whichever is higher. ASAM 4th Edition changes will be effective January 1, 2026 for beneficiaries who are 18 or older.

For more information, visit IB25-31.pdf.

Accepting Medicaid Health Plan ID Cards with LA Wallet

Louisiana Medicaid members can now present their Medicaid and health plan ID cards electronically through the LA Wallet app. Available in the Apple App Store and Google Play Store at no cost to members, these digital cards are updated daily to reflect the most current coverage and eligibility.
For providers, this means:

- **Valid Proof of Coverage** – Digital Medicaid and health plan ID cards in LA Wallet are accepted the same as physical cards.

- **Accurate, Up-to-Date Information** – Coverage and eligibility are refreshed daily, reducing errors or outdated information.

- **Convenience for Families** – Heads of household can view and present cards for dependents, streamlining check-in and verification.

Members enter their driver's license number, date of birth, and social security number to access their digital ID cards.
If you would like to help spread the word about this convenient resource, download a printable flyer here.

If you would like to help spread the word about this convenient resource, click the flyer to download a printable flyer.

Reminder: Revalidate Enrollment Regularly

*Under federal and state regulations, **ALL** Medicaid-enrolled providers—including those who order or refer services—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.*

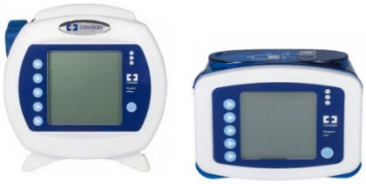
The revalidation process involves a full screening based on the provider's designated risk level. This may include site visits, fingerprint-based criminal background checks, and disclosure of specific information, similar to the process for newly enrolling or reenrolling providers.

Louisiana Medicaid notifies providers when it's time to revalidate through email, sent from the Provider Enrollment web portal, and a letter via U.S. mail. Providers can also check their revalidation due date or track their revalidation status using the Provider Lookup Tool.

Officials advise that if a provider believes they are within the revalidation period but has not received a notification, they should contact Gainwell Technologies by email at **louisianaprovenroll@gainwelltechnologies.com** or by phone at **1 (833) 641-2140**.

Failure to complete revalidation by the deadline could lead to claim denials and the deactivation of Medicaid billing privileges. In such cases, providers must submit a complete re-enrollment application, and Medicaid will not reimburse any services rendered during deactivation.

Discontinuance of Kangaroo Joey e-Pumps, Feeding Sets, and Supplies



For additional information on this discontinuance, contact Cardinal Health Sales Representatives or Cardinal Health Customer Service at (800) 964-5227.

	Schedule	
☒	~~End of Service Support Date Out of Warranty~~	~~December 31, 2024~~
☐	End of Service Support Date Within Warranty	Through Warranty End Date
☒	~~Kangaroo™ ePump Feeding Sets and Accessories Anticipated End of Supply Date~~	~~June 30, 2025~~
☐	Kangaroo™ Joey Feeding Sets and Accessories Anticipated End of Supply Date	September 30, 2027

*All DME providers **must** take essential steps to guarantee continued access to care for beneficiaries who rely on the Kangaroo Joey e-Pump.

Youth Health Transition (YHT) Toolkit

The Youth Health Transition (YHT) Toolkit, developed by the Louisiana Department of Health's Office of Public Health, Bureau of Family Health, through its Pediatric Medical Home Initiative, is a powerful resource for professionals supporting youth and young adults in their journey toward adult healthcare. Designed for physicians, nurses, social workers, clinic managers, and support staff, the toolkit equips providers with best practices to enhance adolescent well-care visits and strengthen existing transition services within their practice.

This web-based toolkit features step-by-step guides and downloadable worksheets, all grounded in a quality improvement framework. It empowers young people to take charge of their long-term health by helping them build essential self-management skills and connecting them to critical resources for a successful transition to adult care.

🔗 Learn more and access the toolkit at 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

The Louisiana Provider-to-Provider Consultation Line (PPCL) is a no-cost provider-to-provider telephone consultation and education program to help pediatric and perinatal health care providers address their patients' behavioral and mental health needs.

How Does PPCL Work?

- Mental Health Consultants are available 8:00 am to 4:30 pm, Monday through Friday.
- You may speak to a Resource Specialist for resource and referral information.
- For clinical questions, including questions regarding psychiatric medications, you will be connected with a psychiatrist.
- Receive a written summary of your consultation.
- We can also connect with you via telehealth, e-mail, or submitted requests by clicking here

Call us at (833)721-2881 or email us at ppcl@la.gov.

Stay connected! It takes about 2 minutes to enroll in PPCL. Enrolling helps us contact you, ensures we have the data our funder (HRSA) needs, and gives us information about what our partners need.

Missed our presentations? Click on the links to view our Perinatal Mental Health webinars or the Pediatric Mental Health TeleECHO recordings.

Website and Resources:
Check out our Web site here and share with colleagues. We look forward to hearing from you soon!

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

Want more information? Email DevScreen@la.gov with any questions.

Louisiana Chapter American Academy of Pediatrics · Partnership for Family Health Louisiana · Louisiana Department of Health

Louisiana Compliance Corner Medicaid

Remittance Advice Corner

ATTENTION PROVIDERS:

LDH has updated its payment processing method to "Same Day ACH" as of March 18, 2025. For Same Day ACH payments, processing may occur at different times throughout the business day due to bank processing windows. Be aware that payment may be delayed if federal funds are not received by distribution date/time.

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 under the "Provider Manual" link:

Manual Chapter	Section(s)	Date of Revision(s)
Children's Choice Waiver (CC)	Appendix E – Billing Codes	11/19/25
New Opportunities Waiver (NOW)	Appendix E – Service Procedure Codes/Rates	11/19/25
Pharmacy	Section 37.1 – Covered Services, Limitations, and Exclusions	11/14/25
Residential Options Waiver (ROW)	Appendix E – Billing Codes	11/19/25
Supports Waiver (SW)	Appendix B – Service Procedure Codes/Rates	11/19/25

Medicaid Public Notice and Comment Procedure

In accordance with La. R.S. 46:460.51, *et seq.*, prior to adopting, approving, amending, or implementing certain policies or procedures, the Department will publish the proposed policy or procedure for public comment. This requirement applies to managed care policies and procedures, systems guidance impacting edits and payment, and Medicaid provider manuals.

Proposed policy or procedure will be published on the LDH website for the purpose of soliciting public comments for a period of 45 days, unless the change(s) are deemed of imminent peril to the public health, safety, or welfare and requires immediate approval.

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

1. Louisiana Medicaid (Title XIX) 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

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

Health Plan Advisories | La Dept. of Health
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 Facts Newsletter:
https://ldh.la.gov/page/3036

Louisiana Medicaid Fee Schedules:
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** 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

Provider FAQs

- Where is there a listing of Parish Office phone numbers?
- If a recipient comes back with a retroactive Medicaid card, is the provider required to accept the card?
- Does a recipient's 13-digit Medicaid number change if the CCN changes?
- Are State Medicaid cards interchangeable? If a recipient has a Louisiana Medicaid card, can it be used in other states?
- Can providers request a face-to-face visit when we have a problem?
- For recipients in Medicare HMOs that receive pharmacy services, can providers collect the Medicaid pharmacy co-payment?
- 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?
- Who should be contacted if a provider is retiring?
- If providers bill Medicaid for accident-related services, do they have to use the annotation stamp on our documentation?
- What if a Lock-In recipient tries to circumvent the program by going to the ER for services?
- Does the State print a complete list of error codes for provider use?
- 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 4th Street
Baton Rouge, LA 70802

Directions from Lafayette

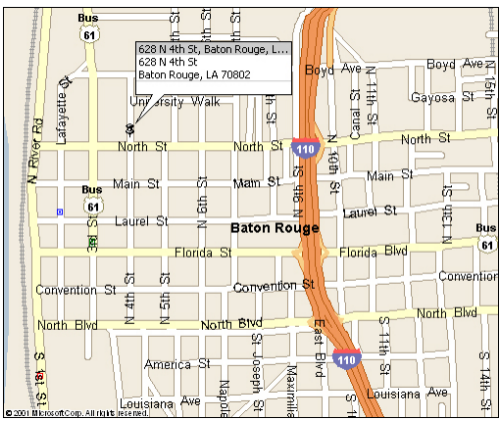
Take I-10 East to Baton Rouge.
At I-10 Exit 155B turn onto the ramp that merges onto I-110 North.
Take the North Street exit on your left.
Continue down North Street to the Bienville Building at the corner of North and 4th Streets.

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 4th Streets.



Parking Options:

Option 1

Galvez Parking Garage
504 North 5th Street (Located at the corner of North and 5th 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/EPSDT – 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