Louisiana Medicaid Management Information System (LMMIS)

Louisiana Medicaid Provider Login (Redesign) User Manual

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## PROJECT INFORMATION

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1.0 OVERVIEW

The Louisiana Medicaid Provider Login User Manual has been developed for Louisiana Medicaid Providers to navigate through a First Time Log In as a New or Existing User.

The Louisiana Department of Health (LDH) determines who is an authorized user defining all user access capabilities. Directions for establishing a valid online provider account are available on the Louisiana Medicaid website at www.lamedicaid.com. The Provider Web Account Registration Instructions link located on the left side of the Louisiana Medicaid main menu contains the instructions for setting up an online account.

Providers who are experiencing difficulty in establishing an account or with the application may contact the DXC Technology Technical Support Desk at 1-877-598-8753, Monday – Friday 8:00 a.m. – 5:00 p.m. CT or request support by e-mailing lasupport@molinahealthcare.com.
2.0 ACCESSING THE PROVIDER LOGIN SCREEN

This section provides information on how to access the Provider Login screen via the Louisiana Medicaid website.

Open a web browser and enter the URL for Louisiana Medicaid at www.lamedicaid.com. Click the Provider Login button to continue.
3.0 LOGIN

3.1 Security Page

Read the instructions on the security page then click the Next button to continue. Note: This screen will only be available to Providers for a designated period of time after the initial redesign goes live.
3.2 Provider Login

At the Provider Login screen, users may read through the Notice to Users. In order to continue, New or Existing users must enter their 10-digit National Provider Identifier (NPI) or 7-Digit Medicaid Provider ID in the field provided and enter the characters from the CAPTCHA image before clicking the Next button.
3.3 User Login

At the User Login screen, Existing users must input their Login ID and Password before clicking the Next button to continue. Login ID and Password are case sensitive.

Note: New Users will receive an email with a temporary password to login. Once logged in, they will be prompted to reset their password and complete their profile information.
3.4 Reset Password

Existing Users will be prompted to reset their password if their current password does not meet the new minimum security requirements or it has expired.

New Users will be prompted to reset their password to meet the minimum security requirements.

Once completed, click the Next button to continue.
3.5 Change Profile Information

New and Existing users must complete their profile information upon first time log in. This includes reviewing the Telephone Number and Email Address associated with the current profile and updating if necessary. Fields with an asterisk are required. Once completed, click the Next button to continue.
3.6 Security Questions

New and Existing users must select three security questions and provide an answer for each in the provided fields. Upon completion, click the Next button to continue.
### 3.7 Finish Profile Changes

Click the **Finish** button to update account information or click the **Previous** button to review account information prior to submission.
3.8 Provider Applications

Upon completion of profile information, users will be directed to the Provider Applications page where they can access their authorized applications.
4.0 FORGOT YOUR LOGIN ID

In order to retrieve a forgotten Login ID, users may complete the following steps:

At the Provider Login screen, enter the 10-digit National Provider Identifier (NPI) or 7-Digit Medicaid Provider ID in the field provided and enter the characters from the CAPTCHA image before clicking the Next button.
Click the **Forgot your Login ID?** link.
Enter the **Email** and **User Name** associated with the account in the corresponding fields and then click the **Next** button.

An email will be sent to the corresponding account administrator with the information requested.
5.0 FORGOT YOUR PASSWORD

In order to retrieve a forgotten password, users may complete the following steps:

At the Provider Login screen, enter the 10-digit National Provider Identifier (NPI) or 7-Digit Medicaid Provider ID in the field provided and enter the characters from the CAPTCHA image before clicking the Next button.
Click the **Forgot your Password?** link.
Enter the Login ID associated with the account in the corresponding field and then click the Next button.

Users will be prompted to answer the security questions set in their profile. Fill in the corresponding field and click the Next button to advance.

**Security Question 1**
**Security Question 2**

![Security Question 2](image1)

**Security Question 3**

![Security Question 3](image2)

**Note:** Answering a security question incorrectly three times will lock the account and the user must contact the DXC Technology Help Desk to unlock.
Once all three questions have been answered correctly, users will be directed to the **Reset Password** page.

Enter a new password and confirm by filling in the corresponding fields, and click the **Finish** button to continue.

The password for the account has been reset. Click the **Login** link to return to the Provider Login screen.
6.0 FORGOT LOGIN ID AND PASSWORD

In order to retrieve a forgotten Login ID and password, users may complete the following steps:

At the Provider Login screen, enter the 10-digit National Provider Identifier (NPI) or 7-Digit Medicaid Provider ID in the field provided and enter the characters from the CAPTCHA image before clicking the Next button.
Click the **Forgot Login ID and Password?** link.
Users will be redirected to instructions on how to reset their account information:

**Resetting Account Information**

If you are having any trouble with this process, please contact DXC Technology Technical Support toll-free at 1-877-598-8753.

**Administrator Account:** If a LA Medicaid Provider or BHP needs access to their administrator account and cannot confirm the answers to the 3 security questions on the admin account. The letter and fax must contain at minimum: A brief statement of purpose for the request, on an official letterhead which must include the name of the company, address, and telephone number.

The following process is required:

- **FAX** the request using an official coversheet of the LA Medicaid provider or BHP to the DXC Technology Helpdesk at 562-499-0679
- **MAIL** the same faxed letter using an official letterhead and envelope of the LA Medicaid provider to:
  
  DXC Technology  
  8591 United Plaza Blvd  
  Baton Rouge, LA. 70809  
  ATTN: DXC Technology Help Desk (LAMedicaid.com)

**Change of Administrator:** If a change of Administrator or Point of Contact needs to be requested for a LA Medicaid Provider or BHP Administrator, the requested letter and fax must contain at minimum:

- A. An official letterhead be used
- B. A brief statement of purpose for the request.
- C. List the name of the new administrator or point of contact
  
  First and Last name, email address, phone and fax number
- D. The provider’s 10 digit NPI number or 7 digit provider number
- E. The provider’s signature, or name and title of the person who is giving authority for the new administrator or point of contact

The following process is required:

- **FAX** the request using an official coversheet of the LA Medicaid provider or BHP to the DXC Technology Helpdesk at 562-499-0679
- **MAIL** the same faxed letter using an official letterhead and envelope of the LA Medicaid provider to:
  
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