Louisiana Medicaid | Provider UPDATE

Volume 41, Issue 3 | March 2025

Welcome

Welcome to the March issue of the **Louisiana Medicaid Provider Update** newsletter. This month marks the arrival of spring and Daylight Savings Time. Although there is a change of season and a spring forward in time, the thing that remains consistent is the strength and resiliency of healthcare professionals like you.

We greatly appreciate your ongoing partnership and support for the Louisiana Medicaid Program. As a valued provider, your continued collaboration's efforts to coordinate care and deliver the highest quality healthcare for our members, your patients are greatly appreciated.

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Louisiana Medicaid Launches New Provider Enrollment Rebaseline

In October 2024, Louisiana Medicaid began its Provider Enrollment Rebaseline initiative to streamline the enrollment process for new Managed Care Organization (MCO) credentialed providers. Rebaselines for additional providers will occur every two months moving forward.

As part of the process, invitation letters are sent to providers not enrolled with Louisiana Medicaid. These letters include detailed instructions and specific provider information required for enrollment. Providers must complete enrollment within 120 days of receiving the letter to avoid claim denials and potential deactivation from the Medicaid program.

Providers who admit, order, refer, or prescribe services and out-of-state providers billing Louisiana Medicaid must enroll. Those with multiple provider types must complete separate enrollments for each type.

Providers can check their enrollment status using the Provider Portal Enrollment Lookup Tool to assist with the process. Results indicate whether the enrollment is complete, action is required, the application is in progress, or no action is currently necessary. Providers not listed will receive an invitation at a later date.

For those who misplace their invitation letters, a reprint can be requested via email at **LouisianaProvEnroll@gainwelltechnologies.com**. Requests must be submitted by email only.

Providers are urged to act quickly, as delays beyond the 120-day deadline will result in denied claims and removal from the Medicaid system.

For further assistance, providers can contact Louisiana Medicaid by email at **LouisianaProvEnroll@gainwelltechnologies.com** or by phone at **1-833-641-2140** (Monday–Friday, 8 a.m.–5 p.m. CST).

This initiative underscores Louisiana Medicaid's efforts to ensure all eligible providers are correctly enrolled, helping to maintain seamless care for Medicaid recipients across the state. For more details, visit the official informational bulletin.

Recent FDA Drug Safety Communications

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

9-12-2024: FDA adds warning about rare occurrence of serious liver injury with use of Veozah (fezolinetant) for hot flashes due to menopause

The U.S. Food and Drug Administration (FDA) issued a warning that Veozah (fezolinetant), a medicine used to treat hot flashes due to menopause, can cause rare but serious liver injury. If there are signs and symptoms suggesting liver injury, stopping the medicine could prevent worsening liver injury and potentially return liver function to normal.

Veozah (fezolinetant) is a nonhormonal prescription medicine approved in May 2023 to reduce the frequency and severity of moderate to severe hot flashes caused by menopause. The medicine is in a drug class called neurokinin 3 (NK3) receptor antagonists and works to restore the balance between estrogen hormones and a brain chemical called neurokinin B (NKB) by blocking the activities of the NK3 receptor, which plays a role in the brain's control of body temperature.

In September of 2024, the FDA announced that a warning about the risk of liver injury would be added to the existing warning about elevated liver blood test values and required liver blood testing in the prescribing information for Veozah. This update was made after the FDA reviewed a postmarketing report of a patient with elevated liver blood test values and signs and symptoms of liver injury after taking the medicine for about 40 days. New recommendations for patients and health care professionals were also added, including recommendations about increasing the frequency of liver blood testing, adding monthly testing for the next 2 months after starting Veozah, and then at months 3, 6, and 9 of treatment as already recommended. The updated prescribing information also instructs patients to stop the medicine immediately and contact the health care professional who prescribed the medicine if signs and symptoms of liver injury occur.

Health care professionals should conduct hepatic laboratory testing before prescribing Veozah, then every month for the first three months after patients start treatment, and then at months 6 and 9 of treatment. When prescribing Veozah, providers should inform their patients about the risk of elevated liver blood test values that may occur during treatment and the rare but serious risk of liver injury and advise them of the need for regular liver blood testing. The signs and symptoms of liver injury should be discussed, and patients should be instructed to stop Veozah immediately and contact the health care professional who prescribed the medicine if they develop these any time during treatment.

On December 16, 2024, the FDA added a Boxed Warning, the FDA's most prominent warning, to highlight the known risk of rare but serious liver injury associated with the use of Veozah (fezolinetant).

12-12-2024: Serious liver injury being observed in patients without cirrhosis taking Ocaliva (obeticholic acid) to treat primary biliary cholangitis

On May 26, 2021, the FDA restricted the use of the liver disease medicine Ocaliva (obeticholic acid) in patients having primary biliary cholangitis (PBC) with advanced cirrhosis of the liver because it can cause serious harm, adding a new contraindication to the prescribing information. On December 12, 2024, the FDA notified health care professionals of updated safety information for Ocaliva (obeticholic acid) regarding the risk of serious liver injury being observed in patients without cirrhosis. The FDA stated that liver tests should be monitored often for early identification of worsening liver function.

Based on its review of postmarket clinical trial data, the FDA identified cases of serious liver injury among patients being treated for primary biliary cholangitis (PBC) with Ocaliva (obeticholic acid) who did not have cirrhosis of the liver. The FDA previously identified that PBC patients with advanced cirrhosis were at risk of serious liver injury when taking Ocaliva and updated the prescribing information to restrict its use in these patients. FDA's review of this required clinical trial found that some cases of liver injury in patients without cirrhosis resulted in liver transplant. This risk was notably higher for patients taking Ocaliva compared with a placebo.

Frequent liver test monitoring is necessary to identify worsening liver function and ensure appropriate discontinuation of Ocaliva.

The FDA is notifying health care professionals and patients of this new safety information, and that frequent liver test monitoring is necessary to identify worsening liver function and ensure appropriate discontinuation of Ocaliva. The agency will continue to monitor the medicine's safety and will follow up if additional information becomes available. Health care professionals should monitor liver tests frequently in patients being treated with Ocaliva to detect and address worsening liver function early. Based on the current data, it is not clear if this monitoring will be sufficient to address the risk of serious liver injury. Ocaliva treatment should be discontinued with any evidence of liver disease progression or if efficacy is not established. The signs and symptoms of worsening liver injury should be explained to patients receiving Ocaliva with instructions for them to contact their health care provider immediately if they develop any signs or symptoms of worsening liver injury

Symptoms Which May Indicate Worsening Liver Injury	
ANY of these specific symptoms…	**ANY of these general symptoms if they are severe or do not go away after a few days…**
• **Swollen belly** • **Yellow eyes or skin** • **Bloody or black stools** • **Coughing up or vomiting blood** • **Mental status changes such as confusion, slurred speech, mood swings, changes in personality, or increased sleepiness or difficulty waking up**	• **Belly pain** • **Nausea, vomiting, or diarrhea** • **Loss of appetite or weight loss** • **New or worsening tiredness** • **Weakness** • **Fever and chills** • **Lightheadedness** • **Less frequent urination**

1-22-2025: FDA adds Boxed Warning about a rare but serious allergic reaction called anaphylaxis with the multiple sclerosis medicine glatiramer acetate (Copaxone, Glatopa)

The U.S. Food and Drug Administration (FDA) is warning about the risk of a rare but serious allergic reaction with the medicine glatiramer acetate (Copaxone, Glatopa), which is used to treat patients with multiple sclerosis (MS).

Glatiramer acetate is an FDA-approved medicine to treat patients with relapsing forms of MS. It works by lessening the immune system's abnormal attack on nerves in the brain and spinal cord. This medicine helps decrease the number of MS relapses. Glatiramer acetate is available as an injectable medicine administered daily or three times per week, depending on dosage, under the brand name Copaxone, branded generic name Glatopa, and as other generic glatiramer acetate products.

The FDA is warning about the risk of anaphylaxis with the medicine glatiramer acetate (Copaxone, Glatopa). Anaphylaxis can occur at any time while on treatment, after the first dose or after doses administered months or years after starting the medicine. For most patients who experienced anaphylaxis with glatiramer acetate use, the symptoms appeared within one hour of injection. In some cases, anaphylaxis resulted in hospitalization and death. The initial symptoms of anaphylaxis can overlap with those of a common reaction called immediate post-injection reaction that is temporary and can start soon after a shot is given. Symptoms of post-injection reaction (such as flushing, chest pain, palpitations, anxiety, shortness of breath, rash, or hives) typically occur within minutes after an injection and are generally transient, self-limited, and resolve without specific treatment within 30 minutes. Those associated with anaphylaxis are typically more severe, worsen, or last longer, requiring urgent medical attention. While immediate post-injection reaction is common, anaphylaxis is rare and its symptoms are typically more severe, worsen over time, and require treatment. Patients experiencing a reaction after the medicine is administered should seek immediate medical attention if the symptoms are more than mild, get worse over time, or do not go away within a brief time.

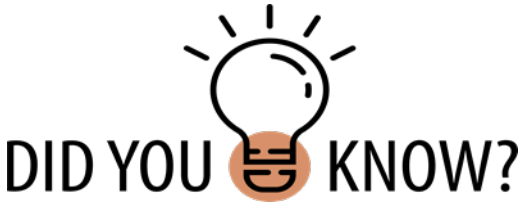
The FDA is adding the risk of anaphylaxis to a new Boxed Warning, FDA's most prominent warning, and to the Warnings and Precautions section of the glatiramer acetate prescribing information. These warnings include information that anaphylaxis can occur at any time, from as early as after the first dose or after doses administered years after starting the medicine. The FDA is also adding new recommendations for patients and health care professionals about the critical importance of quickly recognizing and treating symptoms of anaphylaxis. The updated prescribing information also instructs patients to stop taking the medicine and seek immediate medical attention by going to an emergency room or calling 911 if symptoms of anaphylaxis occur.

Patients receiving glatiramer acetate should receive education about the signs and symptoms of anaphylaxis and immediate post-injection reactions. Patients should be instructed to seek immediate medical attention by going to an emergency room or calling 911 if they experience any symptoms of anaphylaxis, and to contact their prescriber if they experience an immediate post-injection reaction.

References

FDA adds Boxed Warning about a rare but serious allergic reaction called anaphylaxis with the multiple sclerosis medicine glatiramer acetate (Copaxone, Glatopa) | FDA
FDA adds warning about rare occurrence of serious liver injury with use of Veozah (fezolinetant) for hot flashes due to menopause | FDA
Serious liver injury being observed in patients without cirrhosis taking Ocaliva (obeticholic acid) to treat primary biliary cholangitis | FDA

Drug File Search Tool



Drug File Search Tool

The Louisiana Medicaid Pharmacy Program has implemented a drug file search tool. By using this enhancement tool along with the Single Preferred Drug List (PDL), providers can check the status of drugs and agents.

The **Outpatient Pharmacy Drug Search** is available on lamedicaid.com under the "Provider Tools" section, and it will allow providers and external users to search for payable drugs submitted as pharmacy claims.

Here are the links to the resources:

- **Drug File Search Tool**: Public Drug Inquiry Tool
- **Single Preferred Drug List (PDL)**: PDL PDF

For more detailed information, refer to **Drug File Search Tool**.

ER Utilization Pilot Program

ER Utilization Pilot Program

Did you know that approximately 20 percent of Louisiana Medicaid patients visit local emergency rooms (ER) on average 17 times per year? These visits are often for non-life-threatening situations. Our members often go to the ER because they are unsure of where to go or they may not have transportation.

In partnership with Acadian Health, the Louisiana Department of Health's Medicaid program launched a pilot program this month with a goal to reduce ER utilization. The program, in partnership with the six MCOs and Acadian Health, an in-home healthcare services provider, is designed to minimize unnecessary ambulance calls and ER visits while ensuring access and quality care for the state's most vulnerable health population.

The six-month program extends medical services to patient residences via urgent mobile care provided by Acadian Health. The program treats sick but stable Medicaid patients at home, allowing providers to address non-medical drivers of health and reducing emergency room costs and crowding. Patients are referred to the program by their provider, hospital or managed care organization.

The pilot is being introduced in Region 4 (Acadiana) and Region 5 (Southwest Louisiana). You can learn more at ldh.la.gov/healthathome.

Applications open for the Louisiana Doula Registry

The Louisiana Department of Health is accepting applications to the Louisiana Doula Registry. This registry will include a list of approved doulas eligible for insurance reimbursement and verification for insurance companies, as outlined in **Louisiana Revised Statute 22:1059.2**.

LDH's Bureau of Family Health, which falls within the Office of Public Health, in collaboration with the Louisiana Doula Registry Board developed the Louisiana Doula Registry which will serve as a database of individuals with registered doula status in Louisiana. For doulas registered with the Louisiana Doula Registry, this support includes non-medical support and education but not medical or midwifery care.
Once registered, doulas can be reimbursed by insurance providers, including Louisiana Medicaid, for up to $1,500 per pregnancy.

Doulas seeking inclusion in the registry must complete the application at **ldh.la.gov/page/DoulaRegistry**.

The application will collect the following information:

Identifying information/demographics: Legal name, date of birth, address, phone number, email address, recent photograph, National Provider Identifier (NPI)

Education: High School Equivalency Test (HISET), GED, high school, college, graduate school
Qualifications: Experience and training pathways, duration of practice

The Louisiana Doula Registry Board will review applications, granting approval or issuing rejections for inclusion on the Louisiana Doula Registry, quarterly beginning in March 2025.

The public listing of the Louisiana Doula Registry is expected to be published in April at **ldh.la.gov/page/DoulaRegistry**.

For more information, please visit **ldh.la.gov/page/DoulaRegistry** or email **DoulaRegistryBoard@la.gov**.

Protect your Information from Phone Scams

The Louisiana Department of Health (LDH) has been notified that Louisiana residents have received phone calls requesting their Medicare ID number as part of a suspected attempt to steal personal information.

Residents have reported receiving calls from a Louisiana phone number from someone claiming to be with LDH wanting to update their Medicare information. Louisiana Medicaid will never request Medicare ID numbers. Medicare is not operated by the LDH. LDH is responsible for operating the Medicaid Program.

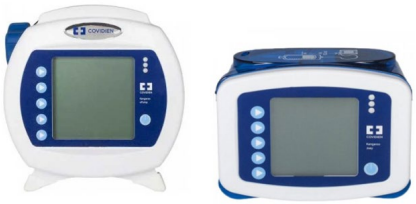
All Medicaid recipients are reminded never to give out personal information unless they are able to confirm that the person with whom they are speaking is a genuine representative of an organization with a legitimate need for it.

2025 Healthcare Common Procedure Coding System (HCPCS) Update

Louisiana Medicaid is updating the Medicaid fee-for-service (FFS) files to reflect new and deleted procedure codes for 2025.

For more information, refer to 2025_HCPCS_Update.pdf.

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



Cardinal Health has discontinued the supply and distribution of the Kangaroo e-Pump and Kangaroo Joey capital equipment, as well as the associated feeding sets. The revised timeline is provided below.

	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.

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

TLP Portal – Third Party Referral Module Enhancement

Click HERE to learn more about the Third Party Referral (TPR) component of the Health Management Systems Third Party Liability Portal (LDH GWT-HMS TPL Portal). The component enhances the existing self-service capabilities by enabling authorized users to submit new lead requests, submit reverification requests, and monitor the status of their submitted requests.

On the Calendar in…March 2025


March 2025

Bleeding Disorders Awareness Month
Multiple Sclerosis Education and Awareness Month
Multiple Myeloma Awareness Month
National Colorectal Cancer Awareness Month
National Developmental Disabilities Awareness Month
National Endometriosis Awareness Month
National Kidney Month
National Nutrition Month
National Traumatic Brain Injury Awareness Month
Save Your Vision Month
Trisomy Awareness Month
Workplace Eye Wellness Month

Weeks to Note:

March 2-8: Bone Marrow Failure Awareness Week; Dental Assistants Recognition Week™
March 9-15: National Pulmonary Rehabilitation Week; Patient Safety Awareness Week; National Sleep Awareness Week
March 10-16: Brain Awareness Week
March 18-21: Medical Genetics Awareness Week |
March 16-22: National Poison Prevention Week
March 17-21: Health Care HR Week |
March 17-23: National Drug and Alcohol Facts Week

Days to Note:

March 1: Self Injury Awareness Day
March 2: World Teen Mental Wellness Day
March 3: World Birth Defects Day ; World Hearing Day
March 5: Multiple Personality Day
March 6: National Dentist Day
March 10: National Women and Girls HIV/AIDS Awareness Day
March 12: Registered Dietitian Nutritionist Day |
March 13: World Kidney Day; Nutrition and Dietetics Technician, Registered Day
March 14: World Sleep Day
March 18: Health Workforce Well-Being Day |
March 19: Certified Nurses Day
March 20: National Native American HIV/AIDS Awareness Day ; World Oral Health Day; International Day of Happiness
March 21: World Down Syndrome Day
March 24: World Tuberculosis Day
March 25: American Diabetes Alert Day
March 26: Epilepsy Awareness - Purple Day
March 30: National Doctors' Day; World Bipolar Day
March 31: Anesthesia Tech Day

State Office Holiday Closure

State offices will be closed Tuesday, March 4, in observance of MARDI GRAS.

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!

Provider Developmental Screening Survey

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 | Partners for Family Health Louisiana | Louisiana Department of Health

Louisiana Compliance Corner Medicaid

Remittance Advice Corner

2024 Annual 1099 Notice for Providers

Louisiana Medicaid 2024 1099's will be distributed by U.S. Mail on or before January 31, 2025. Electronic copies are now available for download by going to the Louisiana Medicaid website, 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.

Reminder to All Providers

To ensure timely and accurate processing of claims please follow these guidelines for claim submission.

CLAIM FORMS must comply with CMS standard size an ink color. (INK-Flint, OCR red J6983).

KEY GUIDELINES: Black ink only; no copied, faxed, or black and white claims; align data within each field; no highlighting, staples, tape, or clips.

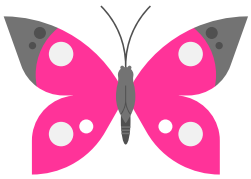
CMS 1500 MARGINS-top .35", Bottom 0.3", Left 0.13", right 0.1".

UB-04 MARGINS- A standard UB-04 form is 8.5x11 paper and printed edge to edge. The exact margin measurements may vary depending on the vendor or software used to generate the form.

Refer to the CMS website for additional information.

Beginning March 3, 2025, non-compliant claims will be returned for correction and resubmission.

For questions, contact Gainwell Provider Relations at 1-800-473-2783 or 225-924-5040.



Medicaid Services (Provider) Manual Chapter 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	Sections(s)	Date of Revision(s)
Behavioral Health	• Section 2.3 – Outpatient Services – Peer Support Services (PSS)	02/03/25
Applied Behavior Analysis (ABA)	• Section 4.1 – Covered Services • Section 4.6 – Coordination of Care	02/14/25
Durable Medical Equipment (DME)	• Section 18.2.1.7 – Specific Coverage Criteria – Ventilator Assist Devices • Section 18.2.10 – Specific Coverage Criteria – Breast Milk and Supplies • Section 18.4 – Provider Requirements	02/04/25 02/14/25
Residential Options Waiver (ROW)	• Section 38.0 – Overview • Section 38.1 – Covered Services • Section 38.2 – Self-Direction Option • Section 38.3 – Beneficiary Requirements • Section 38.4 – Rights and Responsibilities • Section 38.5 – Service Access and Authorization • Section 38.6 – Provider Requirements • Section 38.7 – Staffing Requirements • Section 38.8 – Record Keeping • Section 38.9 – Reimbursement • Section 38.10 – Program Monitoring • Section 38.11 – Incidents, Accidents, and Complaints • Section 38.12 – Support Coordination • Appendix A – Developmental Disability Law • Appendix B – Glossary • Appendix C – Contact Information • Appendix D – Forms/Websites	02/25/25
American Indian 638 Clinics	• Section 39.0 – Overview • Section 39.1 – Covered Services • Section 39.4 – Reimbursement • Appendix A – Message for All EPSDT Eligibles and Their Parents	02/14/25
Rural Health Clinics (RHC)	• Table of Contents • Section 40.0 – Overview • Section 40.1 – Covered Services • Section 40.2 – Provider Requirements • Section 40.3 – Record Keeping • Section 40.4 – Reimbursement • Appendix A – Contact Information • Appendix B – Forms • Appendix C – Glossary	02/13/25

Manual Chapter	Section(s)	Date of Revisions
Supports Waiver	• Section 43.0 – Overview • Section 43.1 – Beneficiary Requirements • Section 43.2 – Rights and Responsibilities • Section 43.3 – Service Access and Authorization • Section 43.4 – Covered Services • Section 43.5 – Program Monitoring • Section 43.6 – Incidents, Accidents, and Complaints • Section 43.7 – Provider Requirements • Section 43.8 – Support Coordination • Appendix A – Developmental Disability Law • Appendix B – Service Procedure Codes/Rates • Appendix C – Contact Information • Appendix D – Forms and Links	02/06/25

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

Louisiana Medicaid Updates and Authorities

Keeping you informed

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

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 4th Street
Baton Rouge, LA 70802

Directions From Lafayette

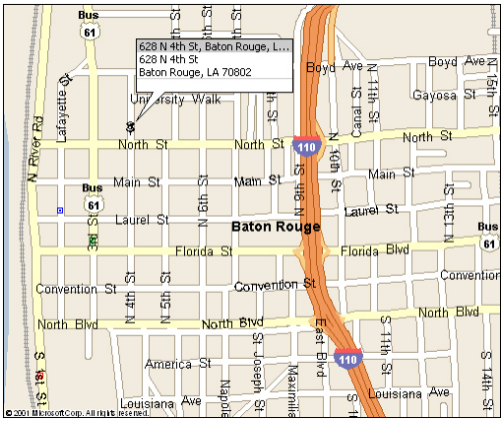
Take I-10 East to Baton Rouge.
At I-10 Exit 155B turn onto the ramp that merges onto I-110 North.
Take the North Street exit on your left.
Continue down North Street to the Bienville Building at the corner of North and 4th Streets.

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 2 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