Louisiana Medicaid | Provider UPDATE

Volume 41, Issue 4 | April 2025

Welcome

Welcome!

We appreciate your visit to the **April issue** of the **Louisiana Medicaid Provider Update** newsletter.

As a valued provider, your ongoing collaboration with the Louisiana Medicaid program's efforts to coordinate care and deliver the highest quality healthcare for our members and your patients are greatly appreciated.

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In the Spotlight

Louisiana Department of Health Announces Interim Secretary

March 20, 2025

The Louisiana Department of Health (LDH) has announced that Drew Maranto will serve as the interim secretary of the department, following the retirement of Michael Harrington. Maranto, who has been with LDH since January 2024, originally joined as chief of staff before being promoted to undersecretary in June 2024. Governor Jeff Landry plans to appoint a permanent secretary for the department within the next few weeks.

Medicaid to Continue Bimonthly Rebaseline Provider Enrollment

Jeff Landry
GOVERNOR

Michael Harrington, MBA, MA
SECRETARY

State of Louisiana
Louisiana Department of Health
Bureau of Health Services Financing

MEMORANDUM

DATE: March 12, 2025

TO: Louisiana Medicaid Providers

FROM: Louisiana Medicaid

SUBJECT: **Medicaid to Continue Bimonthly Rebaseline Provider Enrollment**

In October 2024, Louisiana Medicaid launched its Provider Enrollment Rebaseline effort, which facilitates Medicaid enrollment for newly credentialed managed care organization (MCO) providers. Enrollment with the state Medicaid agency is required, and separate and apart from the credentialing process with any MCO.

Every two months, Louisiana Medicaid will send invitation letters to new providers not yet 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.

For the latest rebaseline information, including details on the provider portal and contacts for additional assistance, see Informational Bulletin 24-22.

Bienville Building · 628 N. Fourth St. · P.O. Box 91030 · Baton Rouge, Louisiana 70821-9030
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Now Recruiting Pediatric Healthcare Providers

Caregiver Perinatal Depression Screening Learning Collaborative

Background: The Louisiana Perinatal Quality Collaborative (LaPQC) is recruiting pediatric providers, including family practices that provide care for infants, to participate in the next 10-month Caregiver Perinatal Depression Screening (CPDS) Learning Collaborative, beginning in Spring/Summer 2025. The CPDS Learning Collaborative is focused on perinatal depression screening in pediatric practices and identifying resources for those who screen positive.

Why Should You Join? The CPDS Learning Collaborative supports clinics in improving caregiver depression screening rates by using a validated tool at well-child visits as recommended by the American Academy of Pediatrics. Participating teams are required to commit to quality improvement activities including monthly calls, data submission, as well as small tests of change (Plan-Do-Study-Act cycles) throughout the course of the Collaborative.

The LaPQC will provide participating practices with access to high-quality improvement coaching, subject matter experts, a data platform and tools to accelerate the implementation of caregiver perinatal depression screening and warm referral processes for clinics.

Participating clinics will received a $7,000 stipend for participating and completed required activities. Additionally, participation provides the opportunity to earn MOC Part 4 credits while simultaneoulsy addressing the needs of your clinic's caregivers and infants.

How To Participate:

- Clinics interested in participating in the Learning Collaborative should complete an interest form. Please click the link to the interest form here or scan the QR code to the right.
- If you have questions, please contact lapqc@la.gov.
- To learn more about the LaPQC, please visit lapqc.org.
- DEADLINE to apply: April 23rd, 2025

SCAN HERE

LaPQC
Louisiana Perinatal Quality Collaborative

LOUISIANA
DEPARTMENT OF
HEALTH

PARTNERS FOR
FAMILY HEALTH
LOUISIANA

Overview of Conjunctivitis (Pink Eye)

- Conjunctivitis, also known as pink eye, is extremely common, resulting in 3 million missed school days each year for public school kids in the U.S.
- Conjunctivitis may be caused by viruses, bacteria, or allergens.
- Symptoms of conjunctivitis include redness or swelling, watery eyes, itchiness, irritation, burning, and crusting of the eyelids or eyelashes.
- Prescribers should advise patients to remain at home if they have viral or bacterial conjunctivitis with systemic signs of illness.
- Infected students should not attend school if they cannot avoid close contact with others.

Viral Conjunctivitis	
Causes	- Adenoviruses (one of the most common causes) - Rubella virus - Rubeola (measles) virus - Herpes viruses, including: - Herpes simplex virus - Varicella-zoster virus (also causes chickenpox and shingles) - Epstein-Barr virus (also causes infectious mononucleosis or mono) - Picornaviruses, such as coxsackievirus A24 and enterovirus 70 (which has caused outbreaks in other countries)
How It Spreads	Viral conjunctivitis is very contagious and mostly spread through hand-to-eye contact by hands or objects that are contaminated with the virus. Other ways include contact with: - Infectious tears - Eye discharge - Fecal matter - Respiratory discharge and large respiratory tract droplets
Clinical Features	Depending on the cause of viral conjunctivitis, some patients may have additional symptoms or conditions, such as the following: *Respiratory infections* – such as the common cold or flu. *Pharyngoconjunctival fever* – a syndrome that can produce conjunctivitis as well as a fever and sore throat and is most commonly caused by infection with adenovirus serotypes 3, 4, and 7. *Epidemic keratoconjunctivitis (EKC)* – a more severe type of conjunctivitis, commonly caused by infection with adenovirus serotypes 8, 19, and 37. EKC causes severe inflammation of the conjunctiva and cornea and can result in vision loss. It can spread by direct contact with an infected person and has been associated with equipment used during eye exams. *Acute hemorrhagic conjunctivitis* – a type of conjunctivitis that is often associated with large epidemics worldwide, especially in the tropical and subtropical regions. The viruses most commonly associated with it include enterovirus 70, coxsackievirus A24, and adenoviruses. *Herpetic keratoconjunctivitis* – a type of conjunctivitis associated with herpes simplex virus and blister-like lesions on the skin; it may affect only one eye. *Rubella and rubeola (measles)* – conjunctivitis can occur with these viral rash illnesses which are usually accompanied by rash, fever, and cough.

Treatment and Recovery	Most cases of acute, infectious conjunctivitis in adults are viral and self-limited; these cases do not require antimicrobial treatment. Antiviral medication may be used to treat more serious forms of conjunctivitis. This can include conjunctivitis caused by herpes simplex virus or varicella-zoster virus.
<td colspan="2" align="center">**Bacterial Conjunctivitis**</td>	
Causes	Many species of bacteria can cause bacterial conjunctivitis including: • *Haemophilus influenzae* • *Streptococcus pneumoniae* • *Moraxella catarrhalis* • *Chlamydia trachomatis* • *Staphylococcus aureus* • *Moraxella lacunata* • *Neisseria gonorrhea* • *Neisseria meningitides*

How It Spreads	• Bacterial conjunctivitis is very contagious and can spread from person to person in many ways. These include:
	  o Hand-to-eye contact
	  o Contact of eye with contaminated objects
	  o Sexual encounters with eye to genital contact, or vertically from mother to baby
	  o Large respiratory tract droplets
	• Alternatively, changes in the usual bacteria that live on the conjunctiva can also cause conjunctivitis.

Clinical Features	• Signs and symptoms of bacterial conjunctivitis overlap with other causes of conjunctivitis, which can make diagnosis difficult. • Acute bacterial conjunctivitis is the most common form of bacterial conjunctivitis. In children, it is often caused by *Haemophilus influenzae*, *Streptococcus pneumoniae*, or *Moraxella catarrhalis.* • Hyperacute bacterial conjunctivitis is a very rare and severe type of conjunctivitis with rapid onset and progression. Symptoms are severe and include massive exudate, severe chemosis, eyelid swelling, marked hyperemia, pain, and decreased vision. The condition can progress to corneal infiltrates, melting and perforation, and vision loss if not treated promptly by an ophthalmologist. Causes include *Neisseria gonorrhea* or *Neisseria meningitidis.* • Chronic bacterial conjunctivitis is defined as having symptoms lasting for at least 4 weeks and often occurs with blepharitis (inflammation of the eyelid), which can cause flaky debris and warmth along the lid. Patients with this condition should see an ophthalmologist. Causes include *Staphylococcus aureus* or *Moraxella lacunata.*
Treatment and Recovery	• Acute bacterial conjunctivitis is typically self-limited within 1 to 2 weeks, but topical antibiotic therapy may reduce the duration of disease. • Hyperacute bacterial conjunctivitis requires both parenteral and topical antibiotic therapy. • Chronic bacterial conjunctivitis is treated with antibiotic eye drops / ointment, topical antibiotic therapy, and systemic antibiotics in more serious cases. • Contact lens wearers with bacterial conjunctivitis are at higher risk of bacterial keratitis. They should be asked to remove their contact lenses; treated with topical antibiotics; and promptly evaluated by an ophthalmologist.

Allergic Conjunctivitis

Causes	Allergic conjunctivitis is common in people who have other signs of allergic disease, such as hay fever, asthma, and eczema. It is caused by the body's reaction to certain substances and allergens like: • Pollen from trees, plants, grasses, and weeds • Dust mites • Animal dander • Molds • Contact lenses and lens solution • Cosmetics
How It Spreads	Allergic conjunctivitis is not contagious. It is common in people who have other signs of allergic disease, such as hay fever, asthma, and eczema.
Clinical Features	Symptoms are usually bilateral, with minimal crusting in the morning. The most common discharge is clear and watery. Patients with simple allergic conjunctivitis often experience transient acute or subacute episodes of redness, watery discharge, and itching. These episodes are commonly associated with sneezing, nasal discharge, and other symptoms of allergic rhinitis.
Treatment and Recovery	To control symptoms and reduce the reliance on steroids, mast cell stabilizers, such as cromolyn and nedocromil, are critical medications in managing acute exacerbations of allergic conjunctivitis. Antihistamines, NSAIDs, and topical steroids are also used to alleviate symptoms and relieve acute exacerbations of allergic conjunctivitis quickly.

Patient Counseling

- Advise patients to remain home if they have viral or bacterial conjunctivitis with systemic signs of illness, especially if they cannot avoid close contact with others. Patients may return to work or school after any indicated therapy is implemented.
- Counsel patients with viral conjunctivitis to prevent transmission by washing their hands frequently, using separate towels, avoiding touching / rubbing their eyes, and avoiding close contact with others.

FDA Warnings Regarding Unapproved Eye Drops - Some Were Marketed for Conjunctivitis

- In September of 2023, the U.S. Food and Drug Administration (FDA) issued warning letters to eight companies for manufacturing or marketing unapproved ophthalmic drug products in violation of federal law. Eye products addressed in the eight warning letters are illegally marketed to treat conditions such as conjunctivitis, cataracts, glaucoma and others. Some of the FDA warning letters also cite the companies involved for quality issues related to product sterility.
- Later that same year, the FDA warned that twenty-seven eye drop products sold at popular retailers could potentially cause eye infections that may lead to vision issues. The FDA is asking consumers to stop using these eye drop products over concerns that they are not sterile and could cause eye infections as a result. The FDA investigators said that the products—which are supposed to be sterile—were manufactured in an "insanitary" facility. They found that multiple production areas in the facility tested positive for bacteria during environmental sampling tests. Eye infections are usually treatable but, in severe cases, can cause partial vision loss or blindness.

References
Allergic Conjunctivitis - StatPearls - NCBI Bookshelf
CDC - Conjunctivitis: Protect yourself
Clinical Overview of Pink Eye (Conjunctivitis) | Conjunctivitis (Pink Eye) | CDC
FDA Issues Warning Letters to Firms Marketing Unapproved Eye Products | FDA
FDA warns consumers not to purchase or use certain eye drops from several major brands due to risk of eye infection | FDA

Medically Necessary Service(s)

Medically Necessary Service(s) are those that are in accordance with generally accepted, evidence-based medical standards or are considered by most physicians (or other independent licensed practitioners) within the community of their respective professional organizations to be the standard of care. In order to be considered medically necessary, services must be:

1. Deemed reasonably necessary to diagnose, correct, cure, alleviate or prevent the worsening of a condition or conditions that endanger life, cause suffering or pain or have resulted or will result in a handicap, physical deformity or malfunction; and

2. Those for which no equally effective, more conservative and less costly course of treatment is available or suitable for the beneficiary.

Such services must be individualized, specific and consistent with symptoms or confirmed diagnosis of the illness or injury under treatment, and neither more nor less than what the beneficiary requires at that specific point in time

While a service may be classified as medically necessary, this classification does not guarantee coverage under the Louisiana Medicaid Program. Specifically, services that are experimental, not approved by the Food and Drug Administration (FDA), investigational, or cosmetic are explicitly excluded from Medicaid coverage and are considered "not medically necessary."

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.

LaMEDS Adds Office of Motor Vehicles Interface

Louisiana Medicaid is strengthening its commitment to accurate eligibility by adding a new interface with the Office of Motor Vehicles (OMV). This will allow the Louisiana Medicaid Eligibility Determination System (LaMEDS) to securely exchange data with the OMV to identify Medicaid beneficiaries who hold out-of-state driver's licenses and may not be residents of Louisiana.

Residency Verification
LaMEDS will begin routine data exchanges with the OMV.

Request for Information (RFI)
If OMV data indicates a beneficiary has an out-of-state driver's license, LaMeds will send an RFI to the beneficiary requesting documentation or self-attestation confirming Louisiana residency.

Impact on Medicaid Benefits
Failure to respond to the RFI by the deadline or confirmation of out-of-state residency will result in the termination of Medicaid benefits.

If an out-of-state driver's license is detected, beneficiaries with continuous eligibility will receive an RFI; however, benefits will not be terminated for failure to respond by the deadline. If a beneficiary with continuous eligibility confirms out of state residency, their benefits will be terminated.

Timeline
The first data exchange is scheduled for August 4 and August 5, 2025.

Recurring exchanges will be every August and February, on the second and third business days of the month.

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

REMINDER...

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.

Prime Enhances Security Measures for Pharmacy Bank Account Changes

Louisiana Medicaid's pharmacy benefit manager, Prime Therapeutics State Government Solutions, LLC, has strengthened its security measures regarding changes to pharmacy bank account information through its online finance portal, www.lamcopbmpharmacy.com.

These measures have been introduced in response to fraud alerts from the Department of Health and Human Services Office of the Inspector General (HHS-OIG), which highlighted incidents of fraudulent electronic funds transfer (EFT) diversions. Several pharmacies within Louisiana Medicaid have already experienced attempts at such fraudulent efforts unauthorized attempts to modify their bank account information, including bank account changes not initiated by pharmacy owners.

Effective immediately, any changes to pharmacy bank account information made online in the finance portal will require verification by Prime's Provider Relations team before any EFTs or checks are issued. Following an update request, the Provider Relations team will reach out to the pharmacy personnel to verify before updating the bank account information.

If you have any questions or concerns, please get in touch with Prime's pharmacy help desk at **(800) 424-1664** or **Providerrelations@primetherapeutics.com**.

Third Party Liability 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.
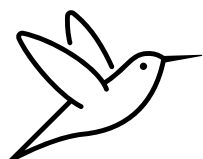
On the Calendar - April 2025 Health Observances

2025 HEALTH OBSERVANCES

Alcohol Awareness Month - Community Anti-Drug Coalitions of America (CADCA)
www.cadca.org/resource/get-involved-alcohol-awareness-month/

Cancer Prevention and Early Detection Month
2025-early-detection-toolkit.pdf

Irritable Bowel Syndrome (IBS) Awareness Month

National Autism Acceptance Month - Autism Society
www.autism-society.org/

National Donate Life Month - Donate Life America
donatelife.net/how-you-can-help/national-observances-celebrations/ndlm

National Minority Health Month - Office of Minority Health
www.minorityhealth.hhs.gov

National Stress Awareness Month - The American Institute of Stress
www.stress.org/april-is-stress-awareness-month

Parkinson's Awareness Month - American Parkinson Disease Association
www.apdaparkinson.org/article/dd-s20-article-4/

Weeks to Note:
April 7-13:	**National Public Health Week**
April 11-17:	**Black Maternal Health Week**
April 20–26:	**National Infertility Awareness Week**
	Pediatric Sepsis Week
April 21-26:	**Neurodiagnostic Week**
April 28-May 2:	**Patient Experience Week**

Days to Note:
April 2:	**World Autism Awareness Day**
April 7:	**World Health Day**
April 11:	**National Donate Life Blue & Green Day**
	World Parkinson's Day
April 16:	**Annual National Healthcare Decisions Day**
April 17:	**World Hemophilia Day**
April 19:	**Congenital Diaphragmatic Hernia Action Day**
April 22:	**Earth Day**
April 25`	**DNA Day**

Louisiana Provider-to-Provider Consultation Line

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!

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

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

Louisiana Chapter
INCORPORATED IN LOUISIANA
American Academy of Pediatrics
DEDICATED TO THE HEALTH OF ALL CHILDREN

PARTNERS FOR FAMILY HEALTH LOUISIANA

LOUISIANA DEPARTMENT OF HEALTH

Remittance Advice Corner

All Providers: Same Day ACH Payments

 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 Notification

Over the course of 2024, Gainwell and HMS undertook several projects to consolidate duplicative or transitioned Carrier Codes (Other Payer identifiers). As a part of the consolidation, LDH was informed that many claims were being denied. Billing providers checking eligibility verification at the time the service was rendered may have identified the "old" carrier code as the code to use, without realizing the carrier code had changed. As a result, many billing providers reporting third party payments using the "old" carrier code have been experiencing claim denials. This is due to the carrier code on the claim not matching the carrier code on file. LDH has been working closely with Gainwell and HMS to correct the system issues.

The current consolidations applied to:

- H99090 – Humana Choice → Humana Medicare Advantage (H19510)
- H19610 – Peoples Health → UHC (H39210)
- 356100 – Peoples Health → UHC (185100)
- UHC (H39210) → Peoples Health, A UHC Company (H50260)
- UHC (185100) → Peoples Health, A UHC Company (438600)

Please begin using the updated Carrier Code at your earliest convenience. Claims that have been previously denied with Edit 032, 291, 296, or 590 will be recycled along with the current pended claims for 296.

Note: IB 24-36 was issued on October 14, 2024. Please refer to the link for an in depth explanation of the Carrier Code update.

Medicaid Services (Provider) Manual Chapter Revision Log

Manual Chapter	Sections(s)	Date of Revision(s)
Home Health	• Section 23.4 – Provider Requirements	03/05/25
Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF-IID)	• Section 26.8 – Income Consideration in Determining Payment	03/21/25
Family Planning Clinics (FPCs)	• Table of Contents • Section 33.0 – Overview • Section 33.1 – Covered Services • Section 33.2 – Beneficiary Requirements • Section 33.3 – Provider Requirements • Section 33.4 – Claims Related Information	03/27/25
Program of All-Inclusive Care for the Elderly (PACE)	• Table of Contents • Section 35.0 – Overview • Section 35.1 – Services • Section 35.2 – Beneficiary Requirements • Section 35.3 – Beneficiary Rights and Responsibilities • Section 35.4 – Service Access and Authorization • Section 35.5 – Provider Requirements • Section 35.6 – Staffing and Training • Section 35.7 – Record Keeping • Section 35.8 – Reimbursement • Section 35.10 – Program Quality and Oversite • Section 35.11 – Grievances and Complaints • Section 35.12 – Administrative Sanctions • Appendix A – Glossary • Appendix B – Contact Information • Appendix C – Forms and Links	03/21/25
Portable X-Ray	• Section 36.0 – Overview • Section 36.1 – Covered Services • Section 36.3 – Provider Requirements • Section 36.4 – Reimbursement • Appendix A – Fee Schedule • Appendix B – Contact Information	03/17/25

Manual Chapter	Sections(s)	Date of Revision(s)
Pharmacy	• Section 37.0 – Overview • Section 37.2 – Provider Requirements and Participation Guidelines • Section 37.3 – Reimbursement • Section 37.5 – Appendixes • Section 37.5.1 – Forms and Links • Section 37.5.3 – Glossary and Acronyms • Section 37.5.4 – Contact Information • Section 37.5.6 – Prescribers • Section 37.5.7 – Medicare Prescription Drug Coverage • Section 37.5.8 – Claims Submission and Processing Payments • Section 37.5.9 – Public Health Services 340B Drug Pricing Program • Section 37.5.10 – Total Parenteral Nutrition (TPN) • Section 37.5.11 – Medication Administration • Section 37.5.12 – Patient Counseling and Drug Utilization Review (DUR) • Section 37.5.13 – Lock-In Program • Section 37.5.15 – Third Party Liability/Coordination of Benefits	03/07/25
Vision (Eyewear)	• Section 46.1 – Covered Services	03/31/25

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.
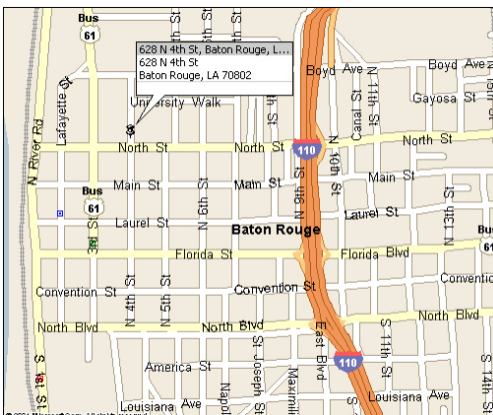
Directions From North Baton Rouge
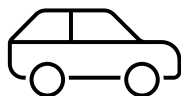Take I-110 South.
After passing Capitol Access Road exit, take North 9th Street exit.
Follow service road alongside interstate.
Turn right onto North Street.
Continue down North Street to the Bienville Building at the corner of North and 4th Streets.

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.
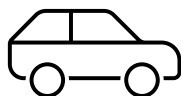
For Information or Assistance, Call Us!

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