



Louisiana Medicaid Management Information System (LMMIS)

Submitter Linked Providers User Manual

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PROJECT INFORMATION

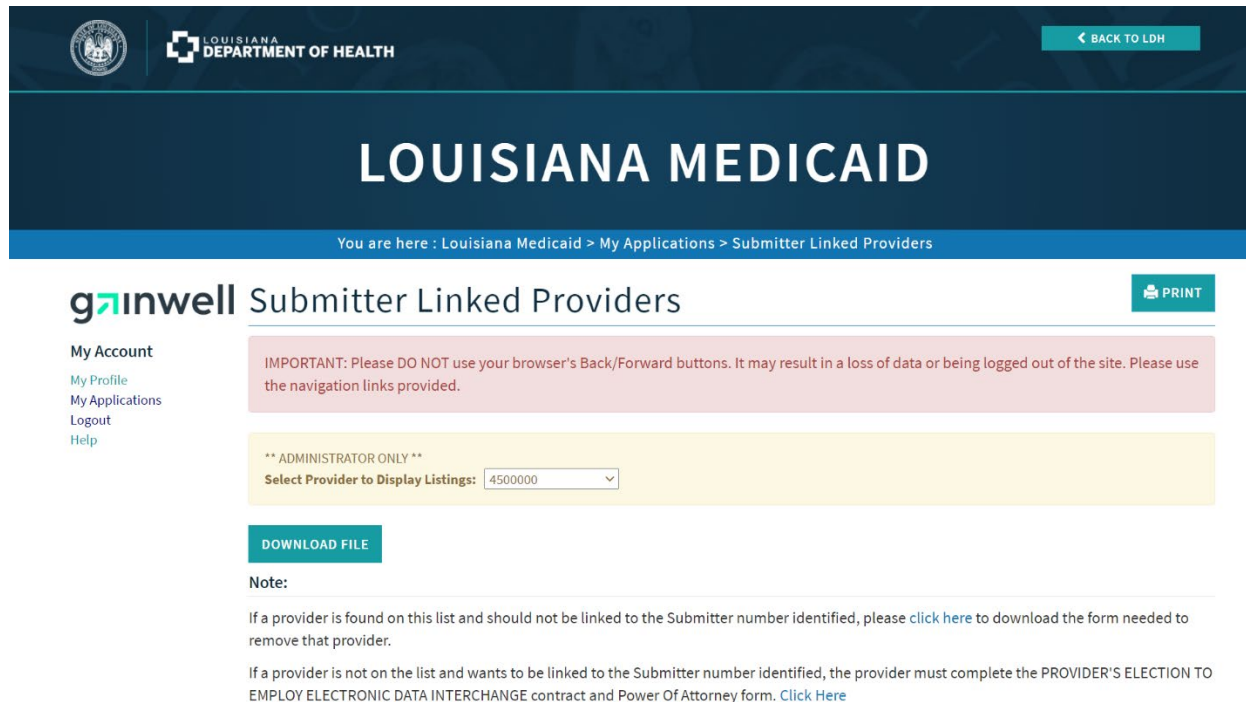
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08/09/2018	Updated as per LAMedicaid Secure Redesign	10733	J. Lavigne
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07/16/2020	Updated screenshots for LAMedicaid Unsecure Redesign	11689	J. Lavigne
11/12/2020	Updated document as per Gainwell Rebrand.	12081	J. Lavigne
06/06/2023	Updated document to change support email address.	N/A	J. Lavigne

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1.0 OVERVIEW

The **Submitter Linked Providers** application enables a Submitter to download a spreadsheet showing providers that are linked to the submitter.



The screenshot displays the 'Louisiana Medicaid' application interface. At the top, there is a header with the Louisiana Department of Health logo and a 'BACK TO LDH' button. Below the header, the title 'LOUISIANA MEDICAID' is prominently displayed. A breadcrumb trail indicates the user's location: 'You are here : Louisiana Medicaid > My Applications > Submitter Linked Providers'. The main content area is titled 'Submitter Linked Providers' and includes a 'PRINT' button. A sidebar on the left lists 'My Account' options: 'My Profile', 'My Applications', 'Logout', and 'Help'. A red warning box states: 'IMPORTANT: Please DO NOT use your browser's Back/Forward buttons. It may result in a loss of data or being logged out of the site. Please use the navigation links provided.' Below this, a yellow box labeled '** ADMINISTRATOR ONLY **' contains a dropdown menu for 'Select Provider to Display Listings:' with the value '4500000'. A 'DOWNLOAD FILE' button is located below the dropdown. A 'Note:' section follows, providing instructions on how to handle providers found on the list and how to link new providers.

My Account

- My Profile
- My Applications
- Logout
- Help

Submitter Linked Providers PRINT

IMPORTANT: Please DO NOT use your browser's Back/Forward buttons. It may result in a loss of data or being logged out of the site. Please use the navigation links provided.

**** ADMINISTRATOR ONLY ****

Select Provider to Display Listings: 4500000

DOWNLOAD FILE

Note:

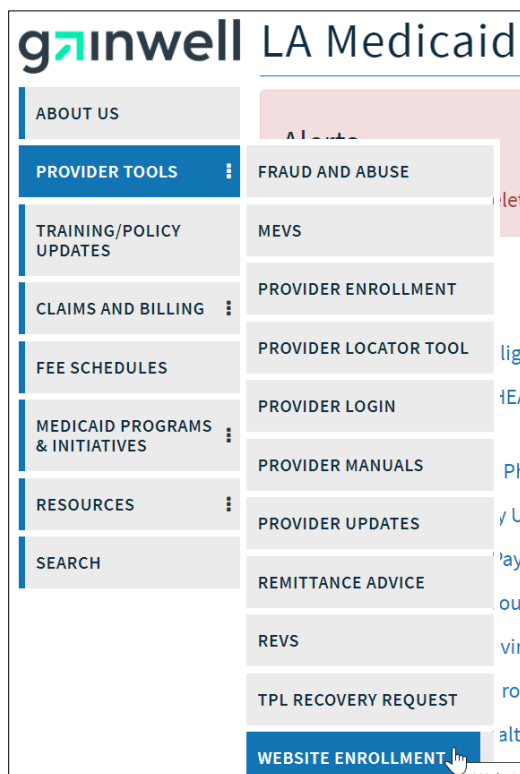
If a provider is found on this list and should not be linked to the Submitter number identified, please [click here](#) to download the form needed to remove that provider.

If a provider is not on the list and wants to be linked to the Submitter number identified, the provider must complete the PROVIDER'S ELECTION TO EMPLOY ELECTRONIC DATA INTERCHANGE contract and Power Of Attorney form. [Click Here](#)

2.0 ACCESSING THE APPLICATION

This section provides information on how to access the **Submitter Linked Providers** application via Provider Login. It includes instructions on how to establish an online account with Louisiana Medicaid and complete the Login ID and password process.

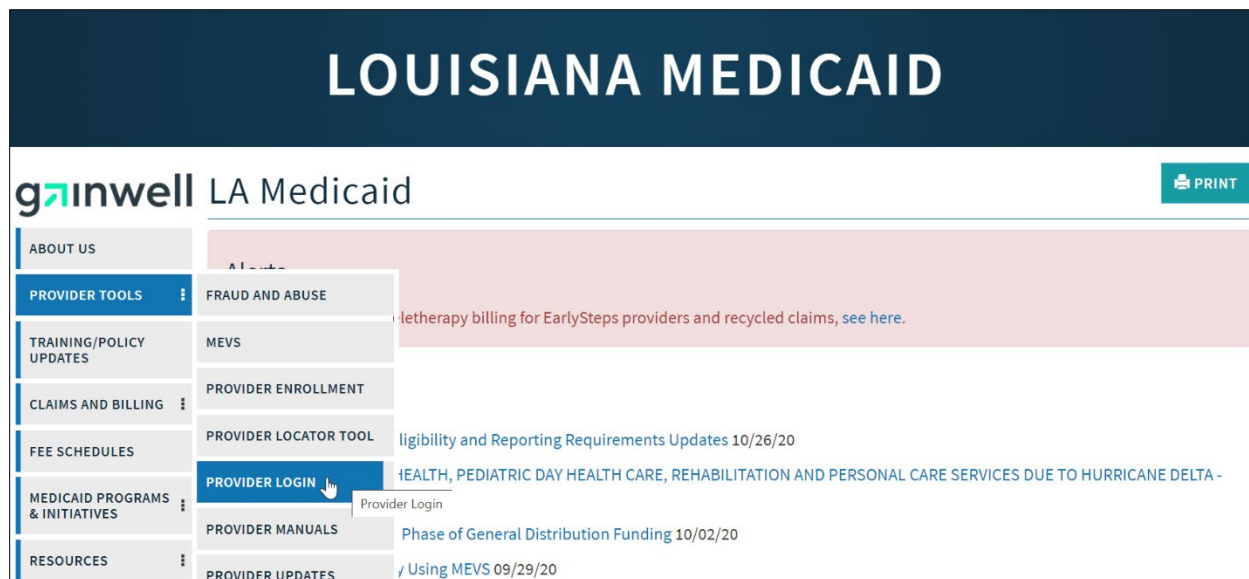
The Louisiana Department of Health (LDH) determines who is an authorized user defining all user access capabilities. Directions for establishing a valid online provider account are available on the Louisiana Medicaid website at www.lamedicaid.com under the **Website Enrollment** link located under **Provider Tools** on the left side of the main menu.



Providers who are experiencing difficulty in establishing an account or with the application may contact the Gainwell Technologies **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 lamedicaid@gainwelltechnologies.com.

In order to access the **Submitter Linked Providers** application, or any other secure application, users must navigate through the Provider Login section of the Louisiana Medicaid web site.

Open a web browser and enter the URL for Louisiana Medicaid at www.lamedicaid.com. Click the **Provider Login** link under **Provider Tools** on the left side of the main menu to continue.



At the Provider Login screen, users may read through the Notice to Users. In order to continue, 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.

LOUISIANA MEDICAID

You are here : Louisiana Medicaid > Provider Login


 Provider Login 

[Help](#)

Please enter your 10-digit National Provider Identifier (NPI) or 7-Digit Medicaid Provider ID

Note: Non-FFS Behavioral Health Providers should use their NPI to login.

For security purposes, please enter the characters from the CAPTCHA image



NOTICE TO USERS

This is Louisiana's Medicaid information and is the property of Gainwell Technologies and Louisiana Department of Health. It is for authorized use only. **Users (authorized or unauthorized) have no explicit or implicit expectation of privacy.**

Any or all uses of this website and all files on this system may be intercepted, monitored, recorded, copied, audited, inspected, and disclosed to authorized site, Louisiana Department of Health, and law enforcement personnel, as well as authorized officials of other agencies, both domestic and foreign. **By using this system, the user consents to such interception, monitoring, recording, copying, auditing, inspection, and disclosure at the discretion of authorized site or Louisiana Department of Health.**

Unauthorized or improper use of this website may result in administrative disciplinary action and civil and criminal penalties. **By continuing to access this website you indicate your awareness of and consent to these terms and conditions of use. LOG OFF IMMEDIATELY if you do not agree to the conditions stated in this warning.**

NEXT

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

Note: Login ID and Password are case sensitive.

LOUISIANA MEDICAID

You are here : LAMedicaid.com

User Login


Please enter your Restricted Applications' Login ID and Password.
Remember the Login ID and Password are case sensitive.

Login ID

Password

Need help?

- [Forgot Your Login ID?](#)
- [Forgot Your Password?](#)
- [Forgot login ID and Password?](#)

[PREVIOUS](#) [NEXT](#) 

Users will be directed to the Provider Applications page where they can access their authorized applications.

You are here : LAMedicaid.com

Provider Applications

PRINT

The application(s) listed below are for authorized use only. Click on an application link to access the application.

Provider Applications

LAMEDICAID.COM Fact Sheet

Claim Check

Clear Claim Connection

Restricted Provider Applications

Batch Eligibility Verification System

Batch Eligibility Verification System Pilot

Claim Status Inquiry (5010 Version)

EFT Authorization

Electronic Clinical Data Inquiry - ICD10

Electronic Clinical Data Inquiry - ICD9

Electronic Prior Authorization

Electronic Remit 835

Friends and Family

Healthy Louisiana (Previously Bayou Health) Applications

Medicaid Eligibility Verification System

National Provider Identifier

NPI Legacy Search

Online 1099

OSS Checks

PA Requests for Case Managers

PACE 820 Report System

Prescriber Practices and Diabetes Management Admin

Provider Locator Information

SMO Applications

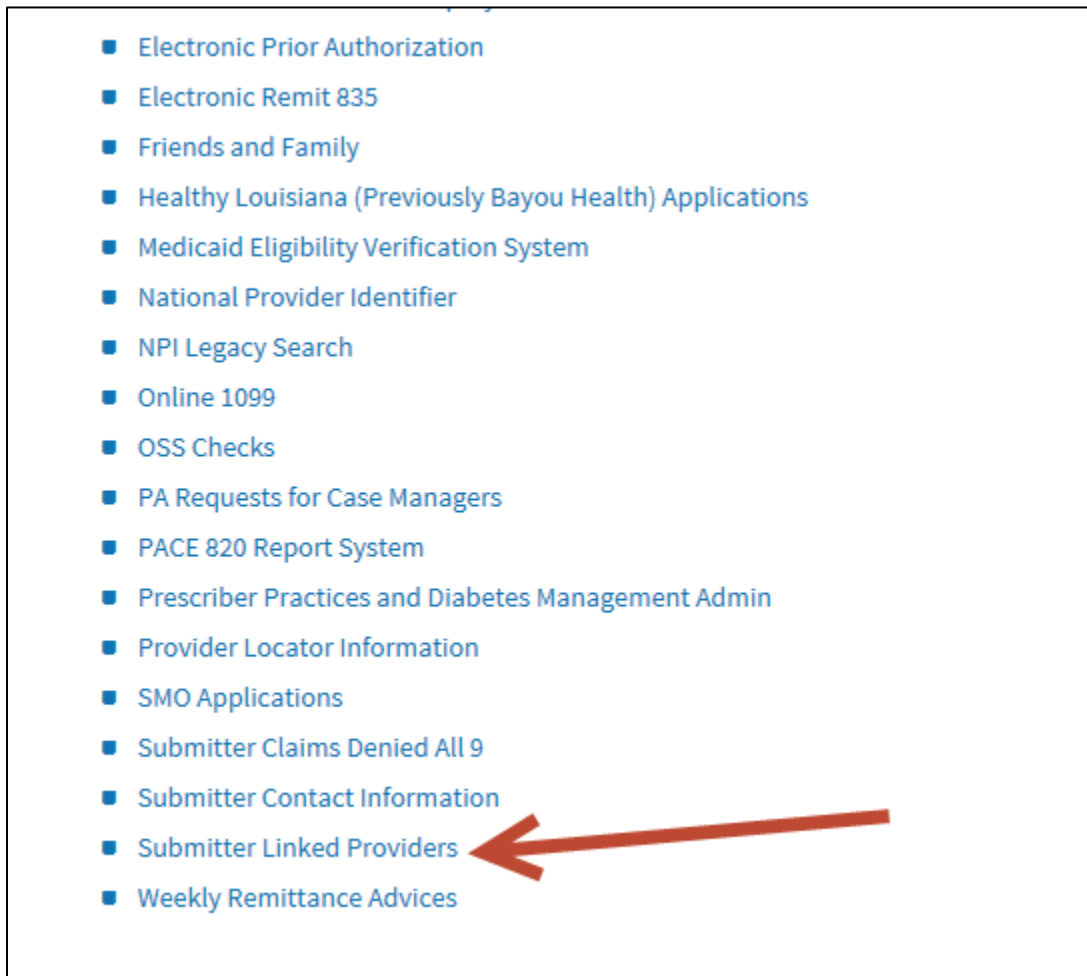
Submitter Claims Denied All 9

Submitter Contact Information

Submitter Linked Providers

Weekly Remittance Advices

Click the **Submitter Linked Providers** link to continue.



Note: The list of applications shown here is comprehensive; therefore you may not see as many options on the Provider Applications page.

3.0 USING THE APPLICATION

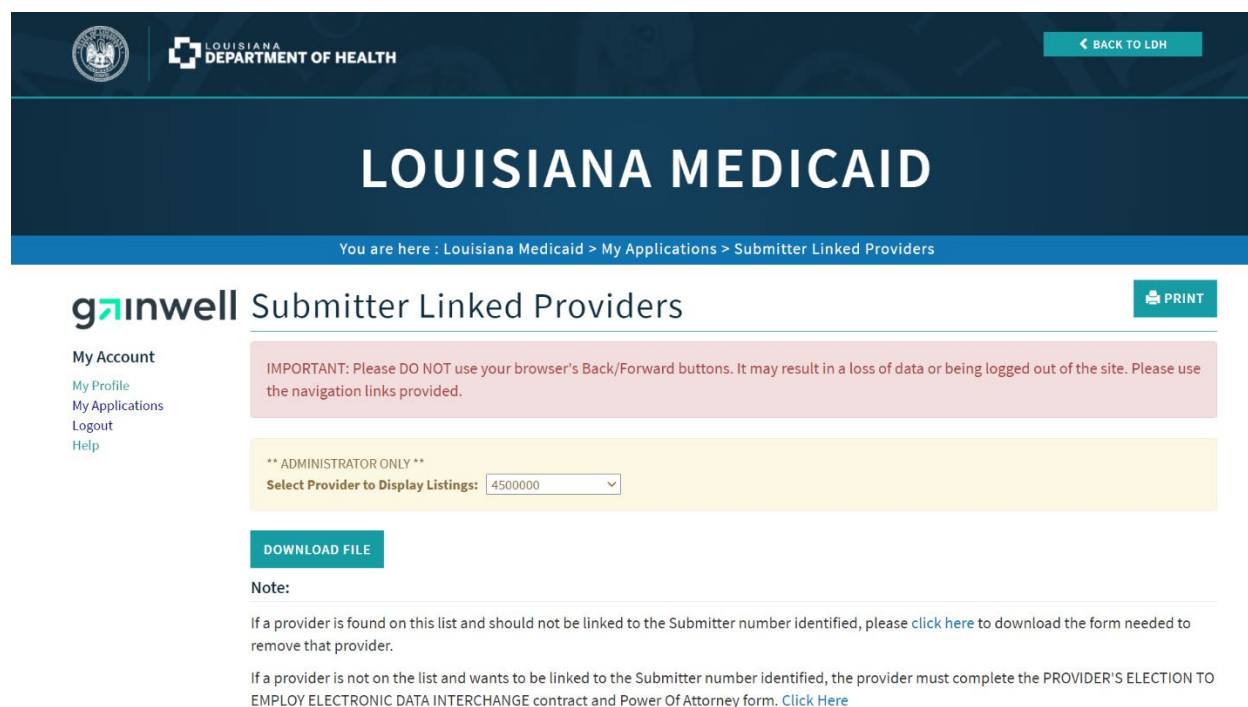
New Functionality

Please note that with the new redesign, backwards navigation throughout any application can be done by clicking on the breadcrumb trail located on the blue ribbon at the top of any screen.

Users also have access to a Print screen button located on the top right hand corner of every screen.



The **Submitter Linked Providers** application enables a Submitter to download a spreadsheet showing providers that are linked to the submitter.



Click on the **DOWNLOAD FILE** button.

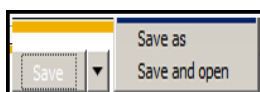
A bar similar to the one shown below will be displayed at the bottom of the screen:



Click on the **Open** button to view the spreadsheet immediately. The spreadsheet will open in your default spreadsheet software (usually MS Excel).

Click on the **Save** button to store the spreadsheet on your local computer's hard drive. The Save button will change to an **Open Folder** button. Click it to see the file in the local computer's Downloads folder.

The down arrow to the right of the **Save** button provides two other options, "Save as" and "Save and open".



"Save as" enables you to save the file in a directory of your choosing (instead of the Downloads directory).

"Save and open" saves the file in the Downloads directory and opens it in your default spreadsheet software.

The **Cancel** button clears the download bar from the bottom of the screen.

The report will be similar to the one shown below.

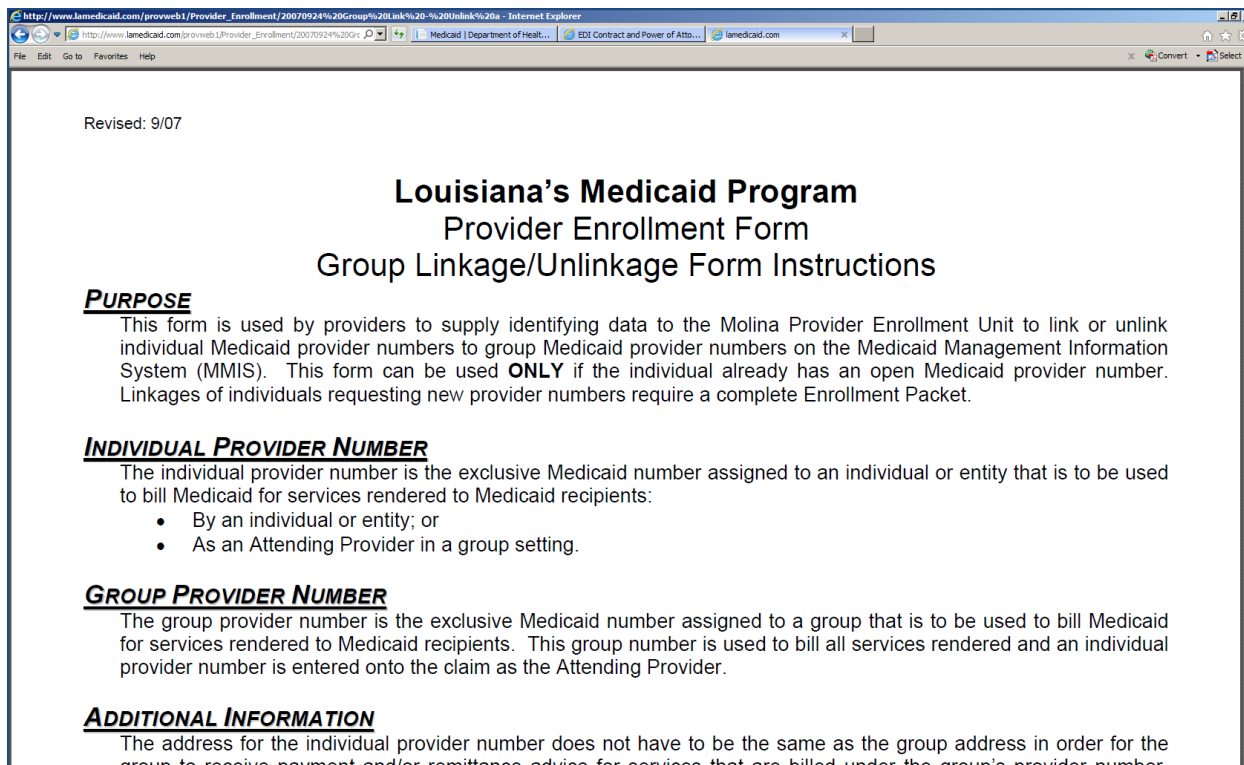
	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	U	V
1	Provider ID	NPI	Tie Breaker	Tie Breaker																		
2	1234567	1234567890	Zip Plus Four 70816-1111																			
3	1234568	1234567891	Zip Plus Four 70816-2222																			
4	1234569	1234567892	Zip Plus Four 70816-3333																			
5																						
6																						

3.1 Removing A Provider

If a provider is linked to the submitter inappropriately, use the first **click here** link to access the form used to terminate the linkage:

If a provider is found on this list and should not be linked to the Submitter number identified, please [click here](#) to download the form needed to remove that provider.

A new window will open containing a printable version of the form with Instructions.

A screenshot of a web browser window displaying the Louisiana's Medicaid Program Provider Enrollment Form instructions. The browser's address bar shows the URL: http://www.lamedicaid.com/provweb1/Provider_Enrollment/20070924%20Group%20Link%20-%20Unlink%20a... Internet Explorer. The page content includes a revision date of 9/07, the title "Louisiana's Medicaid Program Provider Enrollment Form Group Linkage/Unlinkage Form Instructions", and sections for PURPOSE, INDIVIDUAL PROVIDER NUMBER, GROUP PROVIDER NUMBER, and ADDITIONAL INFORMATION. The PURPOSE section states the form is used to link or unlink individual Medicaid provider numbers to group Medicaid provider numbers on the Medicaid Management Information System (MMIS). The INDIVIDUAL PROVIDER NUMBER section defines the exclusive Medicaid number assigned to an individual or entity. The GROUP PROVIDER NUMBER section defines the exclusive Medicaid number assigned to a group. The ADDITIONAL INFORMATION section notes that the individual provider number does not have to be the same as the group address.

Revised: 9/07

Louisiana's Medicaid Program Provider Enrollment Form Group Linkage/Unlinkage Form Instructions

PURPOSE

This form is used by providers to supply identifying data to the Molina Provider Enrollment Unit to link or unlink individual Medicaid provider numbers to group Medicaid provider numbers on the Medicaid Management Information System (MMIS). This form can be used **ONLY** if the individual already has an open Medicaid provider number. Linkages of individuals requesting new provider numbers require a complete Enrollment Packet.

INDIVIDUAL PROVIDER NUMBER

The individual provider number is the exclusive Medicaid number assigned to an individual or entity that is to be used to bill Medicaid for services rendered to Medicaid recipients:

- By an individual or entity; or
- As an Attending Provider in a group setting.

GROUP PROVIDER NUMBER

The group provider number is the exclusive Medicaid number assigned to a group that is to be used to bill Medicaid for services rendered to Medicaid recipients. This group number is used to bill all services rendered and an individual provider number is entered onto the claim as the Attending Provider.

ADDITIONAL INFORMATION

The address for the individual provider number does not have to be the same as the group address in order for the group to receive payment and/or remittance advice for services that are billed under the group's provider number.

Print the form and the instructions, fill out the form, and mail it.

3.2 Adding A Provider

Use the second **Click here** link to access the form used to add a linkage:

If a provider is not on the list and wants to be linked to the Submitter number identified, the provider must complete the PROVIDER'S ELECTION TO EMPLOY ELECTRONIC DATA INTERCHANGE contract and Power Of Attorney form. [Click Here](#)

A new window will open on the **EDI Contract and Power of Attorney Forms** page of lamedicaid.com. Open, print, and mail the forms as instructed on the page.