

To: AmeriHealth Caritas Louisiana Providers

Date: June 7, 2024

Subject: [Informational Bulletin 24-19](#): Process for Requesting Consideration of Policy Changes and New Benefit Coverage

Informational Bulletins that summarize policies and/or procedures are intended for quick reference and are accurate on the date they are issued.

Process for Requesting Consideration of Policy Changes and New Benefit Coverage

Requests for new medical and dental benefit coverage as well as requests for changes to Medicaid policy should be submitted utilizing the below links as this is the formal process established by Louisiana Medicaid:

Request for NEW Consideration of Medical and Dental Benefit Coverage for Louisiana Medicaid

<https://ldh.la.gov/index.cfm/form/153>

Request for Consideration of a Medicaid Policy Change

<https://ldh.la.gov/index.cfm/form/164>

Upon submission, the requests will be reviewed by designated Medicaid staff and the Medical Director.

For full details, please see [Informational Bulletin 24-19](#).

Questions regarding this message should be directed to AmeriHealth Caritas Louisiana Provider Services at 1-888-922-0007. The Provider Services Department can be reached between 7:00 am – 7:00 pm daily.

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Need to update your provider information? Send full details to: network@amerihealthcaritasla.com.