

Required Action: Medicaid Provider Revalidation and Upcoming Claims

Impact

Providers are Required to Revalidate Enrollment Information

All Medicaid-enrolled providers, including ordering and referring providers, are required to revalidate their enrollment information at least every five years, regardless of provider type. Revalidation includes a full screening process appropriate to the provider's assigned risk level and requires submission of complete and accurate enrollment information.

Providers are notified of their revalidation due date via email from the Medicaid Provider Enrollment Portal and by U.S. Postal Service. Providers may also verify their revalidation due date and status at any time using the Provider Enrollment Lookup Tool:

<https://www.lamedicaid.com/portalenrollmentstatus/search>

Providers who have not received notification but believe they are within their revalidation period should contact Gainwell Technologies at:

louisianaprovenroll@gainwelltechnologies.com or call 1 (833) 641-2140.

Claims Denial for Failure to Revalidate

Providers who fail to complete revalidation by the assigned due date will be placed in suspended status, resulting in denied claims.

Additionally, we are implementing a claims system edit that will deny claims for any provider in a disenrolled status due to failure to revalidate. Magellan will not reimburse providers for services rendered during any period of disenrollment.

Notice Regarding Identified Disenrolled Providers

We have identified several providers who are currently in a disenrolled status due to failure to revalidate. Outreach efforts will be conducted to these providers to:

- Update their enrollment status, and
- Obtain documentation demonstrating completed revalidation

If providers do not respond or cannot provide proof of revalidation, claims payment recovery actions may be initiated for services rendered during periods of disenrollment.

Final Reminder – Action Needed

Providers must take the following actions to ensure compliance and avoid disruption to claims payment:

- Review your current roster to confirm that all staff are properly enrolled.
- Provide proof of enrollment for any new or updated roster staff to facilitate prompt affiliation and ensure uninterrupted service delivery.
- Ensure staff have confirmed their affiliation date with Magellan prior to providing any services.

Affiliation begin dates will not be retroactively adjusted. Failure to comply with these requirements may result in claims denial and potential payment recovery for services rendered outside of an approved affiliation period.

This communication is posted on the Magellan of Louisiana website.

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Please reach out to your [Network Management Specialist](#) (NMS) with any questions or concerns. Your NMS is available for support.

Thank you for your continued partnership and for your commitment to providing quality care.

Magellan of Louisiana