



**Louisiana Department of Health  
Informational Bulletin 18-3  
April 26, 2018**

**Open Enrollment for Healthy Louisiana Plans**

This bulletin outlines the details and dates of the 2018 open enrollment period for existing Louisiana Medicaid Healthy Louisiana members.

You may download the [Open Enrollment Informational Flyer](#) and display it in your office.

**Dates and Mailings:**

The open enrollment period will begin **Friday, June 15** and will close **Tuesday, July 31** with enrollment changes becoming effective Sept. 1, 2018. Beginning on or about May 21, letters containing information on this process will be mailed to all members that are included in this open enrollment period. Members can make a change to their health care coverage on the Healthy Louisiana mobile app, online at [www.myplan.healthy.la.gov](http://www.myplan.healthy.la.gov) or by calling toll free 1-855-229-6848. The Healthy Louisiana mobile app is free and available for download to [Apple](#) and [Android](#) devices.

If members receiving physical and/or specialized behavioral health services want to **keep** their current managed care organization (MCO), they do not need to do anything. The member will stay with their MCO for another year, as long as they are still qualified for Medicaid.

The MCOs will begin receiving information on their new members on Aug. 1. All MCO assignments will be made by Aug. 2. Confirmation letters will be mailed to members on or about Aug. 14 to be effective Sept. 1, 2018.

**Reminder to Providers**

As a provider, it is important to let your patients know which MCOs you are accepting. There are limitations on what you can tell a member – when you enroll with an MCO, your provider services representative should explain these limitations to you. In general, you can inform members which MCOs you accept, and the benefits, services and specialty care offered. However, you cannot:

- recommend one MCO over another or incentivize a patient to select one MCO over the other.
- change a member's MCO for him/her, or request a disenrollment on a member's behalf. Members who wish to change MCOs must make this request themselves to Medicaid. These prohibitions against patient steering apply to participation in the Healthy Louisiana and the legacy Medicaid programs.

The MCO Continuity of Care provisions remain applicable and the MCO shall provide continuation of such services for up to 90 calendar days or until the member is reasonably transferred without interruption of care, whichever is less, including specialized behavioral health.

You can reference [Informational Bulletin 12-31](#), for additional details on communications with your members. Providers may also speak directly with MCO provider relations contacts.