

**CHAPTER 1: GENERAL INFORMATION AND ADMINISTRATION****SECTION 1.5: BENEFITS FOR CHILDREN AND YOUTH PAGE(S) 7**

**THE FOLLOWING SERVICES ARE AVAILABLE TO CHILDREN AND YOUTH  
WITH  
DEVELOPMENTAL DISABILITIES**

**TO REQUEST THEM - CALL THE OFFICE FOR CITIZENS WITH  
DEVELOPMENTAL DISABILITIES  
(OCDD)/DISTRICT/AUTHORITY IN YOUR AREA  
(See listing of numbers on attachment)**

*Per Chisholm v Department of Health and Hospitals*, it is required that the following language concerning services to persons under 21 and children with disabilities be published in this manual.

**DEVELOPMENTAL DISABILITIES MEDICAID WAIVER SERVICES**

The following services are available to children and youth with developmental disabilities. To apply for services, contact your Local Governing Entity (LGE). Phone numbers are listed on the attachment or on the Louisiana Department of Health (LDH) website.

For those with developmental disabilities, who are able to live at home and not in an institution, waiver programs are available. To sign up for "waiver programs" that offer Medicaid and additional services to eligible persons, including individuals whose income may be too high for traditional Medicaid, you can request a screening to be added to the Developmental Disabilities Request for Services Registry (DDRFSR).

To sign up for "waiver programs" that offer Medicaid and additional services to eligible persons (including those whose income may be too high for other Medicaid programs), ask to be added to the Developmentally Disabled (DD) Request for Services Registry (RFSR-DDRFSR). The **New Opportunities Waiver (NOW)** and the **Children's Choice (CC) Waiver** both provide services in the home, instead of in an institution, to persons who have intellectual disabilities and/or other developmental disabilities. Both waivers cover fFamily sSupport, cCenter-bBased rRespite, eEnvironmental aAccessibility mModifications, and specialized medical equipment and supplies. In addition, **NOW** covers services to help individuals live alone in the community or to assist with employment, and professional and nursing services beyond those that Medicaid usually covers. Expanded dental benefits are available for adult NOW beneficiaries. The NOW is only available to individuals who cannot be supported in another Office for Citizens with Developmental Disabilities (OCDD) waiver ((Children's ChoiceCC, Supports Waiver, or Residential Options Waiver (ROW)).

The Children's Choice WaiverCC Waiver also includes Family-family Trainingtraining. Children remain eligible for the Children's ChoiceCC Waiver until their nineteenth-twenty-first birthday, at which time they are moved to an age-appropriate waiver for people with

**CHAPTER 1: GENERAL INFORMATION AND ADMINISTRATION****SECTION 1.5: BENEFITS FOR CHILDREN AND YOUTH****PAGE(S) 7**

~~developmental disabilities will be transferred to an appropriate Developmentally Disabled (DD) Waiver.~~

The **Supports Waiver** provides specific, activity focused services rather than continuous custodial care. This waiver offers ~~sSupported eEmployment, dDay hH habilitation, pPre-vVocational Services services, rRespite, hH habilitation, permanent supportive housing stabilization, permanent supportive housing stabilization transition, and the pPersonal eEmergency rResponse sSystems, and expanded dental services for individuals age 18 and older.~~

~~The **ROW The Residential Options Waiver (ROW)** is **only** appropriate for those individuals **of all ages** whose health and welfare can be assured **via-by** the support plan with a cost limit based on their level of support need. This waiver offers ~~cCommunity lLiving sSupports, cCompanion cCare, hHost hHome, sShared lLiving, one-time transitional services, eEnvironmental mModifications, aAssistive tTechnology/specialized medical equipment, personal emergency response systems, cCenter-bBased rRespite, nNursing, dDental, pProfessional (dietary, speech therapy, occupational therapy, physical therapy, social work, psychology), tTransportation-cCommunity aAccess, sSupported eEmployment, pPre-vVocational sServices, and dDay hH habilitation, housing stabilization, housing stabilization transition services, monitored in home caregiving, and adult day health care (ADHC). Expanded dental benefits are available for adult ROW beneficiaries.~~~~

~~**Although not a waiver, services are also available for children ages birth to 3 years.**~~

~~**EarlySteps contacts for each parish are listed on this web page:**~~

~~**<https://ldh.la.gov/index.cfm/directory/detail/609>** (If you are accessing services for someone 0-3, please contact Early Steps at 1-866-327-5978).~~

**SUPPORT COORDINATION**

~~A support coordinator works with you to develop a full list of all the services you need and then helps you get them. This can include things like medical care, therapies, personal care services, equipment, social services and educational services. If you are a Medicaid beneficiary under the age of 21 and if support coordination is medically necessary, you may be eligible to receive support coordination services immediately. Contact Statistical Resources, Inc. (SRI) at 1-800-364-7828. Support coordination is also provided through EarlySteps for eligible children. A support coordinator works with you to develop a comprehensive list of all needed services (such as medical care, therapies, personal care services, equipment, social services, and educational services) then assists you in obtaining them. **If you are a Medicaid beneficiary and under the age of 21 and it is medically necessary, you may be eligible to receive support coordination services immediately.** Contact Statistical Resources, Inc. (SRI) at 1-800-364-7828.~~

---

**CHAPTER 1: GENERAL INFORMATION AND ADMINISTRATION**

---

**SECTION 1.5: BENEFITS FOR CHILDREN AND YOUTH PAGE(S) 7**

---

**CHAPTER 1: GENERAL INFORMATION AND ADMINISTRATION****SECTION 1.5: BENEFITS FOR CHILDREN AND YOUTH****PAGE(S) 7**

**THE FOLLOWING BENEFITS ARE AVAILABLE TO ALL MEDICAID ELIGIBLE CHILDREN AND YOUTH UNDER THE AGE OF 21 WHO HAVE A MEDICAL NEED**

**~~TO ACCESS THESE SERVICES -- CALL  
MAGELLAN HEALTH SERVICES (TOLL FREE) 1-800-424-4399 (or TTY 1-800-424-4416)~~**

**Transportation**

Non-Emergency Medical Transportation (NEMT) to and from medical appointments is covered under the Medicaid Managed Care Program. Medicaid eligible children are enrolled in the Medicaid Managed Care Program for their Medicaid transportation services even if they have Legacy Medicaid for their physical health services.

Arrangements for transportation should always be made at least 48 hours in advance by calling the numbers shown below.

<u>Aetna Better Health</u>	<u>1-877-917-4150</u>
<u>AmeriHealth Caritas</u>	<u>1-888-913-0364</u>
<u>Healthy Blue</u>	<u>1-866-430-1101</u>
<u>Humana Healthy Horizons</u>	<u>1-844-613-1638</u>

Louisiana Healthcare Connections 1-855-369-3723 ~~1-866-430-1101~~  
~~1-844-613-1638~~  
1-855-369-3723

UnitedHealthcare Community 1-866-726-1472

If you are not sure who your Managed Care Organization (MCO) is, you can contact the Medicaid Managed Care Program Line at 1-855-229-6848 to find out under which Managed Care Organization MCO you are covered.

**Applied Behavioral Analysis- Based Therapy Services (ABA)**

ABA therapy is the design, implementation and evaluation of environmental modification using behavioral stimuli and consequences to produce socially significant improvement in human behavior, including the direct observation, measurement, and functional analysis of the relations between environment and behavior. ABA-based therapies teach skills through the use of behavioral observation and reinforcement or prompting to teach each step of targeted behavior. ABA-based therapies are based on reliable evidence of their success in alleviating autism and are not experimental. This service is available through Medicaid for persons 0 to 21 years of age. For

**CHAPTER 1: GENERAL INFORMATION AND ADMINISTRATION**

**SECTION 1.5: BENEFITS FOR CHILDREN AND YOUTH PAGE(S) 7**

Medicaid to cover ABA services through a licensed provider they must be ordered by a physician and be prior authorized by Medicaid.

ABA is accessed through your ~~MCO Managed Care Organization~~. All Medicaid eligible children are enrolled in the Medicaid Managed Care Pprogram for their Sspecialized Bbehavioral Hhealth Sservices, even if they may have ~~Legacy~~ Legacy Medicaid for their Pphysical Hhealth Sservices.

<u>Aetna Better Health</u>	<u>1-855-242-0802</u>
<u>AmeriHealth Caritas</u>	<u>1-888-756-0004</u>
<u>Healthy Blue</u>	<u>1-844-406-2389</u>
<u>Humana Healthy Horizons</u>	<u>1-800-448-3810</u>
<u>Louisiana Healthcare Connections</u>	<u>1-866-595-8133</u>
<u>UnitedHealthcare Community</u>	<u>1-866-658-5499</u>

If you are not sure who your ~~MCO Managed Care Organization~~ is, you can contact the Medicaid Managed Care Program Line at 1-855-229-6848 to find out under which ~~MCO Managed Care Organization~~ you are covered.

**Mental Health and Substance Use Services**

Children and youth may receive mental health and substance use services if it is medically necessary. These services include necessary assessments and evaluations; individual, group and/or family therapy; medication management; crisis services; community psychiatric support and treatment; psychosocial rehabilitation; multi-systemic therapy; functional family therapy; homebuilders; assertive community treatment for youth ages 18-20; therapeutic group home; psychiatric residential treatment facility; inpatient psychiatric treatment; and substance use disorder treatment services. In addition, eligible at-risk children and youth may access specialized services, including peer support, short-term respite, and independent living skills building, through the Coordinated System of Care (CSoC) program.

**How to Access Mental Health and Substance Use Care**

How a person gets these services depends on the type of coverage they have.

If the member is enrolled in a Medicaid Managed Care Pprogram, they can access services toll free by calling their plan using the numbers listed below. All Medicaid eligible children are enrolled in Medicaid Managed Care Pprogram for their Sspecialized Bbehavioral Hhealth Sservices even if they may have ~~Legacy~~ Legacy Medicaid for their Pphysical Hhealth Sservices.

**CHAPTER 1: GENERAL INFORMATION AND ADMINISTRATION****SECTION 1.5: BENEFITS FOR CHILDREN AND YOUTH****PAGE(S) 7**

<u>Aetna Better Health</u>	<u>1-855-242-0802</u>
<u>AmeriHealth Caritas</u>	<u>1-888-756-0004</u>
<u>Healthy Blue</u>	<u>1-844-521-6941</u>
<u>Humana Healthy Horizons</u>	<u>1-800-448-3810</u>

<u>Louisiana Healthcare Connections</u>	<u>1-866-595-8133</u>
<u>1-844-521-6941</u>	
<u>1-800-448-3810</u>	
<u>1-866-595-8133</u>	
<u>UnitedHealthcare Community</u>	<u>1-866-658-5499</u>

If you are not sure who your MCO Managed Care Organization is you can contact the Medicaid Managed Care Program Line at 1-855-229-6848 to find out under which MCO Managed Care Organization you are covered.

If a member is part of the the Coordinated System of Care (CSoC) that helps at-risk children and youth who have serious behavioral health challenges, they can access services by contacting Magellan at 1-800-424-4489/TTY 1-800-424-4416. CSoC offers services and supports that help children and youth return remain at home. Services include youth support and training; parent support and training; independent living skill building services; and short-term respite, as well as all other Medicaid State Plan behavioral health services. Parents and guardians will be assisted in selecting a provider in their area to best meet the needs of the child or youth and the family. Members may apply for CSoC by contacting their MCO Managed Care Organization and requesting referral to CSoC. The MCO Managed Care Organization will transfer the caller to Magellan for a brief Child and Adolescent Needs Assessment (CANS) screening. If the youth screens positive on the brief CANS assessment, Magellan will connect you to the regional Wraparound Agency for further assessment.

The rest of your medical services will either be accessed through Legacy Legacy Medicaid if you have Legacy Legacy Medicaid for your physical health services or through your MCO Managed Care Organization if you chose to “opt in” to the Medicaid Managed Care Program for your physical health services.

Chisholm Class Mmembers (Medicaid eligible children who are on the DD Request for Services Registry) DD RFSR are allowed to participate in the Medicaid Managed Care Program if they “opt in.” For more information about these options, contact the Medicaid Managed Care Program hotline toll free at 1-855-229-6848.

Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) ~~(Early and Periodic Screening, Diagnostic, and Treatment)~~ Exams and Checkups

---

**CHAPTER 1: GENERAL INFORMATION AND ADMINISTRATION**

---

**SECTION 1.5: BENEFITS FOR CHILDREN AND YOUTH****PAGE(S) 7**

---

Medicaid beneficiaries under the age of 21 are eligible for checkups ("EPSDT preventive screening"). These screenings include a health history; physical exam; immunizations; laboratory tests, including lead blood level assessment; vision and hearing checks; developmental screening; autism screenings; perinatal depression screening; and dental screenings. They are available both on a regular basis and whenever additional health treatment or services are needed.

EPSDT preventive screening may help to find problems which need other health treatment or additional services. Beneficiaries under 21 years of age are entitled to receive all medically necessary health care, screening, diagnostic services, treatment, and other measures covered under federal Medicaid statutes and regulations to correct or improve physical or mental conditions. Services may include those not otherwise covered by Louisiana Medicaid for beneficiaries age 21 and older, unless prohibited or excluded.

**Personal Care Services**

Personal Care Services (PCS) are provided by direct service workers (DSWs) and defined as tasks that are medically necessary when physical or cognitive limitations due to illness or injury necessitate assistance with eating, toileting, bathing, bed mobility, transferring, dressing, locomotion, personal hygiene, and bladder or bowel requirements. PCS does not include medical tasks such as medication administration, tracheostomy care, or feeding tube or catheter management. The Medicaid Home Health program or Extended Home Health program provides those medical services. PCS must be ordered by a practitioner (physician, advance practice nurse, or physician assistant). The PCS provider must request approval for the service from Medicaid or the ~~MCO~~Managed Care Organization.

**Extended Skilled Nursing Services**

Children and youth may be eligible to receive skilled nursing (over ~~3~~three hours per day) in the home. These services are provided by a home health agency. A physician must order this service. Once ordered by a physician, the home health agency must request approval for the service from Medicaid or the ~~MCO~~Managed Care Organization.

**Intermittent Nursing Services**

Nursing visits to EPSDT individuals that do not exceed three hours per day may be provided without a prior authorization request unless more than one nursing visit a day is needed. These services must still be ordered by a physician and provided by a home health agency.

**Pediatric Day Health Center**

---

**CHAPTER 1: GENERAL INFORMATION AND ADMINISTRATION**

---

**SECTION 1.5: BENEFITS FOR CHILDREN AND YOUTH****PAGE(S) 7**

---

These centers serve medically fragile individuals under the age of 21, including technology dependent children, who require nursing supervision and possibly therapeutic interventions all or part of the day due to a medically complex condition. These facilities offer an alternative or supplement to receiving in-home nursing care. Pediatric day health care (PDHC) may be provided up to seven days per week and up to 12 hours per day as documented by the beneficiary's Pplan of Ccare (POC).

**Physical Therapy, Occupational Therapy, Speech Therapy, and Audiology Services**

If a child or youth requires rehabilitation services such as physical, occupational or speech therapy, psychology, or audiology services, these services can be provided at school, through the EarlySteps early intervention program, in an outpatient facility, in a rehabilitation center, at home, or in a combination of settings, depending on the child's needs.

For Medicaid to cover these services at school (ages 3 to 21), or through the early intervention program with EarlySteps (ages birth to 3), the services must be part of the Individualized Education Plan (IEP) or Individualized Family Service Plan (IFSP). For Medicaid to cover the services through an outpatient facility, rehabilitation center, or home health, they must be ordered by a physician and be prior-authorized by Medicaid or the MCOManaged-Care Organization.

For information on receiving these therapies contact your school or early intervention center or other providers. EarlySteps contacts for each parish are listed on this web page: <https://ldh.la.gov/index.cfm/directory/detail/609>. Call the Specialty Care Resource Line for referral assistance at 1-877-455-9955 for LegacyLegacy Medicaid or call your Managed-Care OrganizationMCO using the contacts listed above under Mental Health to locate other therapy providers.

**Medical Equipment and Supplies**

Children and youth can obtain any medically necessary medical supplies, equipment and appliances needed to correct, or improve physical or mental conditions. Medical equipment and supplies must be ordered by a physician. Once ordered by a physician, the supplier of the equipment or supplies must request approval for them from Medicaid or the Managed-Care OrganizationMCO.

If you need a service that is not listed above contact the Specialty Care Resource Line toll-free at 1-877-455- 9955 or TTY 1-877-544-9544 or the participant's Managed-Care OrganizationMCO Member Services or Medicaid Mmanaged Ccare Ccase Mmanager.PSYCHOLOGICAL AND BEHAVIORAL HEALTH SERVICES



---

**CHAPTER 1: GENERAL INFORMATION AND ADMINISTRATION**

---

**SECTION 1.5: BENEFITS FOR CHILDREN AND YOUTH**

~~Children and youth may receive behavioral health services if it is medically necessary. These services include necessary assessments and evaluation; individual and/or group therapy; medication management; individual and parent/family intervention; supportive and group counseling; individual and group psychosocial skills training; behavior intervention plan development and service integration. All behavioral health services must be approved by Magellan Health Services.~~

~~Coordinated System of Care (CSoC) helps at-risk children and youth who have serious behavioral health challenges and their families. It offers services and supports that help these children and youth return to or remain at home. Services include: Youth Support and Training, Parent Support and Training, Independent Living Skill Building Services, Short Term Respite, and Crisis Stabilization.~~

~~Parents/guardians will be assisted in selecting a provider in their area to best meet the needs of the child/youth and family.~~

~~THE FOLLOWING BENEFITS ARE AVAILABLE TO ALL MEDICAID ELIGIBLE CHILDREN AND YOUTH UNDER THE AGE OF 21 WHO HAVE A MEDICAL NEED~~

~~Chisholm Class Members (Medicaid eligible children who are on the DD Request for Services Registry) can opt in for Healthy Louisiana.~~

~~Children enrolled in Healthy Louisiana can access the listed services below through their individual health plan.~~

~~EPSDT EXAMS AND CHECKUPS~~

~~Medicaid beneficiaries under the age of 21 are eligible for checkups (EPSDT screens). These checkups include a health history; physical exam; immunizations; laboratory tests, including lead blood level assessment; vision and hearing checks; and dental services. They are available both on a regular basis, and whenever additional health treatment or services are needed. EPSDT screens may help to find problems, which need other health treatment or additional services. Children under 21 are entitled to receive all medically necessary health care, diagnostic services, and treatment and other measures covered by Medicaid to correct or improve physical or mental conditions. This includes a wide range of services not covered by Medicaid for beneficiaries over the age of 21.~~

~~PERSONAL CARE SERVICES~~

---

**CHAPTER 1: GENERAL INFORMATION AND ADMINISTRATION**

---

**SECTION 1.5: BENEFITS FOR CHILDREN AND YOUTH****PAGE(S) 7**

---

~~Personal care services (PCS) are provided by attendants when physical limitations due to illness or injury require assistance with eating, bathing, dressing, toileting and personal hygiene. PCS do not include medical tasks such as medication administration, tracheostomy care, feeding tubes or catheters. The Medicaid Home Health Program or Extended Home Health Program covers those medical services. PCS must be ordered by a physician. The PCS provider must request approval for the service from Medicaid.~~

~~**EXTENDED SKILLED NURSING SERVICES**~~

~~Children and youth may be eligible to receive skilled nursing services in the home. These services are provided by a home health agency. A physician must order this service. Once ordered by a physician, the home health agency must request approval for the service from Medicaid.~~

~~**PHYSICAL THERAPY, OCCUPATIONAL THERAPY, SPEECH THERAPY and AUDIOLOGY SERVICES**~~

~~If a child or youth wants rehabilitation services such as Physical, Occupational, or Speech Therapy, or Audiology Service; these services can be provided at school, in an early intervention center, in an outpatient facility, in a rehabilitation center, at home, or in a combination of settings, depending on the child's needs. For Medicaid to cover these services at school (ages 3 to 21), or early intervention centers and EarlySteps (ages 0 to 3), they must be part of the Individualized Education Program (IEP) or Individualized Family Service Plan (IFSP). For Medicaid to cover the services through an outpatient facility, rehabilitation center, or home health, they must be ordered by a physician and be prior authorized by Medicaid.~~

~~FOR INFORMATION ON RECEIVING THESE THERAPIES CONTACT YOUR SCHOOL OR EARLY INTERVENTION CENTER OR OTHER PROVIDERS—EARLYSTEPS CAN BE CONTACTED (toll free) AT 1-866-327-5978—CALL SPECIALTY RESOURCE LINE REFERRAL ASSISTANCE AT 1-877-455-9955 TO LOCATE OTHER THERAPY PROVIDERS~~

~~**MEDICAL EQUIPMENT AND SUPPLIES**~~

~~Children and youth can obtain any medically necessary medical supplies, equipment and appliances needed to correct, or improve physical or mental conditions. Medical equipment and supplies must be ordered by a physician. Once ordered by a physician, the supplier of the equipment or supplies must request approval for them from Medicaid.~~

**CHAPTER 1: GENERAL INFORMATION AND ADMINISTRATION**

**SECTION 1.5: BENEFITS FOR CHILDREN AND YOUTH**

**TRANSPORTATION**

Transportation to and from medical appointments, if needed, is provided by Medicaid. These medical appointments do not have to be with Medicaid providers for the transportation to be covered. Arrangements for non-emergency transportation must be made at least 48 hours in advance.

The “Friends and Family” Program allows family members/friends to become Medicaid-funded transportation providers for specific family members. To assist someone that may benefit from this arrangement, call Medical Dispatch at 1-800-259-1944.

**Other Services Available to Medicaid Eligible Children Under 21**

If you are a Medicaid beneficiary under the age of 21, you may be eligible for the following services and any other medically necessary health care, diagnostic services, treatment, and other measures which are coverable by Medicaid, which includes a wide range of services not covered for beneficiaries over the age of 21:

- \*Doctor’s Visits
- \*Hospital (inpatient and outpatient) Services
- \*Lab and X-ray Tests
- \*Family Planning
- \*Home Health Care
- \*Dental Care
- \*Rehabilitation Services
- \*Prescription Drugs
- \*Medical Equipment, Appliances and Supplies (DME)
- \*Support Coordination
- \*Speech and Language Evaluations and Therapies
- \*Occupational Therapy
- \*Physical Therapy
- \*Psychological Evaluations and Therapy
- \*Psychological and Behavior Services
- \*Podiatry Services
- \*Optometrist Services
- \*Hospice Services
- \*Extended Skilled Nurse Services
- \*Mental Health Clinic Services
- \*Ambulatory Care Services, Rural Health Clinics, and Federally Qualified Health Centers
- \*Residential Institutional Care or Home and Community Based (Waiver) Services
- \*Medical, Dental, Vision and Hearing Screenings, both Periodic and Interperiodic
- \*Immunizations
- \*Eyeglasses
- \*Hearing Aids
- \*Psychiatric Hospital Care
- \*Personal Care Services
- \*Audiological Services
- \*Necessary Transportation: Ambulance Transportation, Non-ambulance Transportation
- \*Appointment Scheduling Assistance
- \*Substance Abuse Clinic Services
- \*Chiropractic Services
- \*Prenatal Care
- \*Certified Nurse Midwives
- \*Certified Nurse Practitioners
- \*Mental Health Clinic Services
- \*Ambulatory Surgery Services

**CHAPTER 1: GENERAL INFORMATION AND ADMINISTRATION**

**SECTION 1.5: BENEFITS FOR CHILDREN AND YOUTH**

- ~~\*Developmental and Behavioral Clinic Services~~ — ~~\*Early Intervention Services~~
- ~~\*Nursing Facility Services~~ — ~~\*Prenatal Care Services~~
- ~~\*Sexually Transmitted Disease Screening~~ — ~~\*Pediatric Day Health Care~~

~~If you need a service that is not listed above you can call the referral assistance coordinator at SPECIALTY RESOURCE LINE (toll free) 1-877-455-9955 (or TTY 1-877-544-9544). If they cannot refer you to a provider of the service, you need call 225-342-5774.~~

~~If you are a Medicaid beneficiary, under age 21, and are on the waiting list for the DD Request for Services Registry, you may be eligible for support coordination services. To access these services, you must contact your regional Office for Citizens with Developmental Disabilities office. If you are a Medicaid beneficiary under age 21, and it is medically necessary, you may be able to receive support coordination services immediately by calling SRI (toll free) at 1-800-364-7828.~~

~~Some of these services must be approved by Medicaid in advance. Your medical provider should be aware of which services must be pre-approved and can assist you in obtaining those services. Also, SPECIALTY RESOURCE LINE can assist you or your medical provider with information as to which services must be pre-approved.~~

~~Whenever health treatment or additional services are needed, you may obtain an appointment for a screening visit by contacting SPECIALTY RESOURCE LINE. Such screening visits also can be recommended by any health, developmental, or educational professional. To schedule a screening visit, contact SPECIALTY RESOURCE LINE at (toll free) 1-800-259-4444 (or 928-9683, if you live in the Baton Rouge area), or you may contact your physician if you already have a SPECIALTY RESOURCE LINE provider. If you are deaf or hard of hearing, please call the TTY number, (toll free) 1-877-544-9544. If you have a communication disability or are non-English speaking, you may have someone else call SPECIALTY RESOURCE LINE and the appropriate assistance can be provided.~~

~~Louisiana Medicaid encourages you to contact the SPECIALTY RESOURCE LINE office and obtain a SPECIALTY RESOURCE LINE provider so that you may be better served.~~