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## ASAM criteria updates for adults substance use services

AmeriHealth Caritas Louisiana is sharing information with providers regarding the American Society for Addiction Medicine (ASAM) Criteria Updates for Adult Substance Use Services on behalf of the Louisiana Department of Health (LDH).

Transition to evidence-based practice standards in the ASAM Criteria 4th Edition for Adults for various levels of care is scheduled for 2026, with providers required to be in full compliance with revised rules, regulations, and Medicaid policy criteria by **July 1, 2026**. The updated Medicaid fee schedule, reflective of associated rate increases, went into effect **January 1, 2026**. Providers may review **Medicaid Informational Bulletin 25-31 (PDF)** and the **Specialized Behavioral Health Fee Schedule** for more information.

Providers are encouraged to begin preparations now to comply with the revisions located in the **Medicaid Behavioral Health Services Provider Manual (PDF)**. Please check with AmeriHealth Caritas Louisiana or see page 14 of this newsletter for available ASAM 4th Edition **training opportunities**.

For full details, please see **Informational Bulletin 24-2 (Revised February 19, 2026) (PDF)**.





## Sickle cell disease resources for providers

Individuals living with sickle cell disease (SCD) face lifelong health challenges that require coordinated, comprehensive care. SCD is an inherited blood disorder affecting approximately 100,000 people in the United States, primarily individuals of African descent. Ensuring these patients receive the right support, both inside and outside of clinical settings, is critical to improving health outcomes and quality of life.

As a Medicaid managed care plan, AmeriHealth Caritas Louisiana helps Louisiana families get proper care and stay well. We partner with underserved communities and providers to drive equitable health outcomes statewide.

We work alongside several community-based organizations (CBOs) to support your patients outside traditional medical environments. These organizations are embedded within your patients' communities and offer a culturally responsive, trusted space for individuals to express their concerns, navigate challenges, and connect with helpful resources. Connecting patients with CBOs can provide necessary tools and support for patients to manage their SCD.

### How these regional sickle cell organizations can support your patients:

- Individualized care coordination and case management to support follow-up appointments and screenings tailored to the needs of patients with SCD
- Educational outreach and empowerment to improve health literacy and treatment adherence for infants, children, adolescents, and adults with SCD
- Assistance with social determinants of health, such as transportation, food insecurity, housing, and access to benefits to address non-medical factors impacting health
- Peer support groups comprised of individuals and advocates who understand the lived experience of SCD
- Ongoing accountability and encouragement to help patients manage their health between clinic visits and establish relationships with their primary and specialty providers
- Support for adolescents with SCD in transitioning to adult medical care to ensure continuity of care and reduce gaps in treatment

By referring your patients to these local CBOs, you can extend the circle of care around them and help bridge the gap between medical management and real-life challenges. This approach improves the patient's experience and can lead to better health outcomes, reduced hospital visits, and stronger engagement with treatment plans.

A list of trusted community-based partners in the area can be found in the chart on the next page or **on the LDH website**.

### How AmeriHealth Caritas Louisiana can help:

AmeriHealth Caritas Louisiana offers case management and care coordination services to support your patients with SCD. To refer a patient or speak with a Care Coordinator, please call Member Services at 1-888-756-0004 or complete the **Let Us Know form (PDF)** on our provider website. Use this form to refer a patient, request support, or share feedback so we can better serve you and the sickle cell community.

**Thank you for your commitment to comprehensive, compassionate care. Together, we can help individuals with SCD live fuller, healthier lives.**

## Regional sickle cell foundations

Organization	Executive Director	Address	Phone number	Regions served
Sickle Cell Association of South Louisiana <a href="http://www.scasl.org">www.scasl.org</a>	Aaron Ruffin (Board President)	2301 North Boulevard Baton Rouge, LA 70806	1-225-346-8434	Regions 1, 2, 3, 4, and 9
Etta Pete Sickle Cell Anemia Foundation, LLC <a href="http://www.epsicklecell.org">www.epsicklecell.org</a>	Leticia Pete	1901 Harless Street, Lake Charles, LA 70601	1-337-302-3929	Region 5
Sickle Cell Anemia Research Foundation, Inc. <a href="http://www.scarfcenla.org">www.scarfcenla.org</a>	Shay Hardison	2625 Third Street Alexandria, LA 71302	1-318-625-7266	Region 6
Sickle Cell Disease Association of America, Northwest Louisiana Chapter <a href="http://www.sicklecellnwla.org">www.sicklecellnwla.org</a>	Rosalind Spain	3658 Judson Street Shreveport, LA 71109	1-318-636-5300	Region 7
Northeast Sickle Cell Anemia Foundation <a href="http://www.monrosicklecell.org">www.monrosicklecell.org</a>	Donna Thaxton	1604 Winnsboro Road Monroe, LA 71202	1-318-322-0896	Region 8

### Sources

“Data and Statistics on Sickle Cell Disease,” Centers for Disease Control and Prevention, <https://web.archive.org/web/20250118014305/https://www.cdc.gov/sickle-cell/data/index.html>, accessed May 15, 2024.

“What Is Sickle Cell Disease?” National Heart, Lung, and Blood Institute (NHLBI), <https://web.archive.org/web/20250114023146/https://www.nhlbi.nih.gov/health/sickle-cell-disease>, accessed September 30, 2024.

“Treatment,” National Heart, Lung, and Blood Institute (NHLBI), Updated September 30, 2024, <https://www.nhlbi.nih.gov/health/sickle-cell-disease/treatment>, accessed March 18, 2026.



## Antibiotics aren't always needed

Given the common misunderstanding of antibiotic efficacy in the community, targeted patient education is essential to curb the rise of antimicrobial resistance. Increasing awareness can reduce expectations for antibiotic prescription rates.<sup>1</sup>

Optimizing antibiotic use is crucial for safeguarding public health. The CDC's Be Antibiotics Aware campaign is a national education effort to help improve antibiotic prescribing and combat antibiotic resistance. A Be Antibiotics Aware Partner Toolkit is available to improve antibiotic prescribing and use among consumers.<sup>2</sup> More information, including patient handouts, posters, stickers, and videos, can be found in the toolkit.

### Strategies to reduce antibiotic use<sup>2</sup>

- Viruses versus bacteria: Explain that antibiotics do not work on viruses, and provide examples of each.
- Side effects and risk: Explain common side effects that antibiotics can cause.
- Antibiotic resistance: Explain that taking unnecessary antibiotics helps bacteria learn how to fight them off, making future infections harder to treat.
- Symptoms: Recommend ways to help patients feel better when antibiotics are not prescribed, and when to seek care if they do not feel better.
- Prevention: Promote good hand hygiene and healthy lifestyle habits. Explain that washing hands before eating, after using the bathroom, and after coughing/sneezing, along with a balanced diet, exercise, and stress management, can help prevent the need for antibiotics.

Thank you for your continued support and commitment to the care of our members.

### Sources:

<sup>1</sup>Chloe R. Hunter, Katherine Owen, “Can patient education initiatives in primary care increase patient knowledge of appropriate antibiotic use and decrease expectations for unnecessary antibiotic prescriptions?” *Family Practice*, Vol. 42, Issue 2, April 2025, <https://academic.oup.com/fampra/article/42/2/cmae047/7760418>, accessed March 18, 2026.

<sup>2</sup>“Be Antibiotics Aware Partner Toolkit,” Centers for Disease Control and Prevention (CDC), September 17, 2025, <https://www.cdc.gov/antibiotic-use/php/usaaw-partner-toolkit/index.html>

# Expanding access to cervical cancer screening

Significant gaps in cervical cancer screening persist across different demographic groups. Systemic barriers — including access to care, transport issues, lack of awareness, and low trust — consistently hinder timely screenings. Health care providers play a critical role in closing these gaps by offering evidence-based, patient-centered screening options, such as human papillomavirus (HPV) self-collection. FDA-approved HPV self-collection increases screening access for women facing barriers to traditional in-office exams.

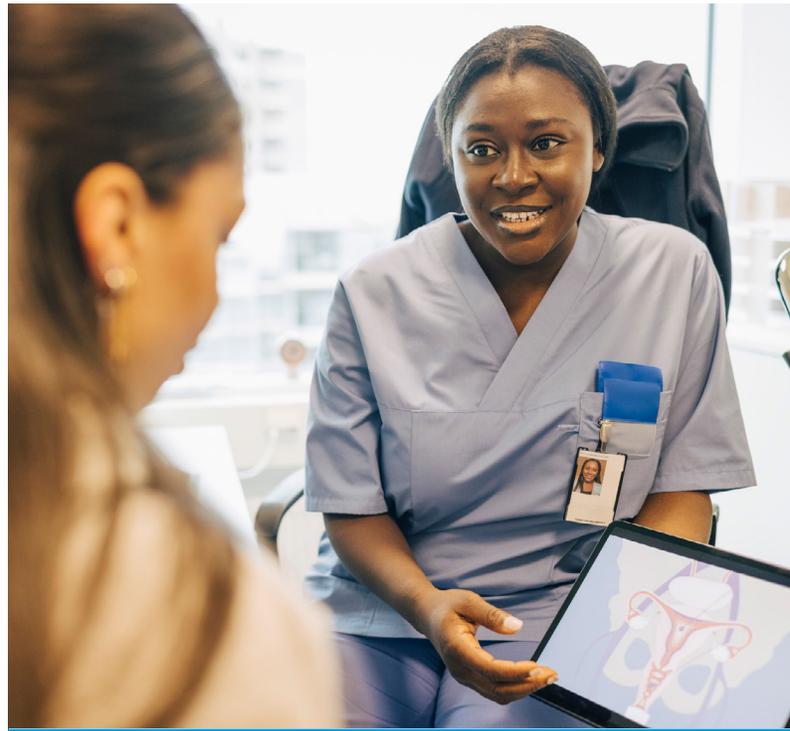
## Why HPV self-collection matters

HPV self-collection offers several advantages that directly address barriers faced by our members, your patients:

- **Increased screening uptake:** Those who decline pelvic exams may accept self-collection.
- **Trauma-informed option:** Self-collection reduces physical and emotional discomfort for patients with prior trauma.
- **Time-efficiency:** The test can be completed quickly during a visit without the need for an exam room setup or additional staff.
- **Equity focus:** Self-collection helps reach under-screened populations, including members who live in rural areas with limited access to OB/GYN care.
- **Improved workflow and access:** Self-collection can be integrated into regular visits (e.g., at urgent care or for other appointments), eliminating the need for separate appointments for cervical cancer screening.
- **Reduced appointment time:** Because a speculum exam is not required, clinicians can save time during patient encounters, allowing them to address other patient concerns.

## How do I order HPV self-collection swabs for my clinic or obtain additional information?

Self-collection kits and educational resources are available for both providers and members. Contact your LabCorp or Quest account executive to order.



**Key point: The FDA-approved HPV self-collection screening method is for use in clinical settings and for women age 30 and older.**

HEDIS measure guidelines for CCS-E: The percentage of women 21 - 64 years of age who were screened for cervical cancer using any of the following criteria:

- Women ages 21 - 64 who had cervical cytology performed within the last three years.
- Women ages 30 - 64 who had cervical high-risk HPV testing performed within the last five years.
- Women ages 30 - 64 who had cervical cytology/high-risk human papillomavirus (hrHPV) cotesting within the last five years.

### Sources:

Nikoletta Daponte, et al., “HPV-Based Self- Sampling in Cervical Cancer Screening: An Updated Review of the Current Evidence in the Literature,” *Cancers* (Basel), March 8, 2023, Vol. 15, Issue 6, Page1669, <https://www.mdpi.com/2072-6694/15/6/1669>, accessed March 20, 2026.

NCQA, “Cervical Cancer Screening (CCS-E),” <https://www.ncqa.org/report-cards/health-plans/state-of-health-care-quality-report/cervical-cancer-screening-ccs-e/>, accessed March 24, 2026.

“Cervical Cancer: Screening,” U.S. Preventive Services Task Force, August 21, 2018, <https://www.uspreventiveservicestaskforce.org/uspstf/recommendation/cervical-cancer-screening>, accessed March 30, 2026.

## HIV screening

Routine HIV screening is an important part of comprehensive preventive care. Providers are encouraged to offer HIV screening to patients as part of regular health visits to support early identification and timely connection to care. Early diagnosis, followed by prompt treatment, plays a critical role in improving health outcomes and reducing the spread of HIV.

Patients at an increased risk for HIV should be screened at least annually, including those who:

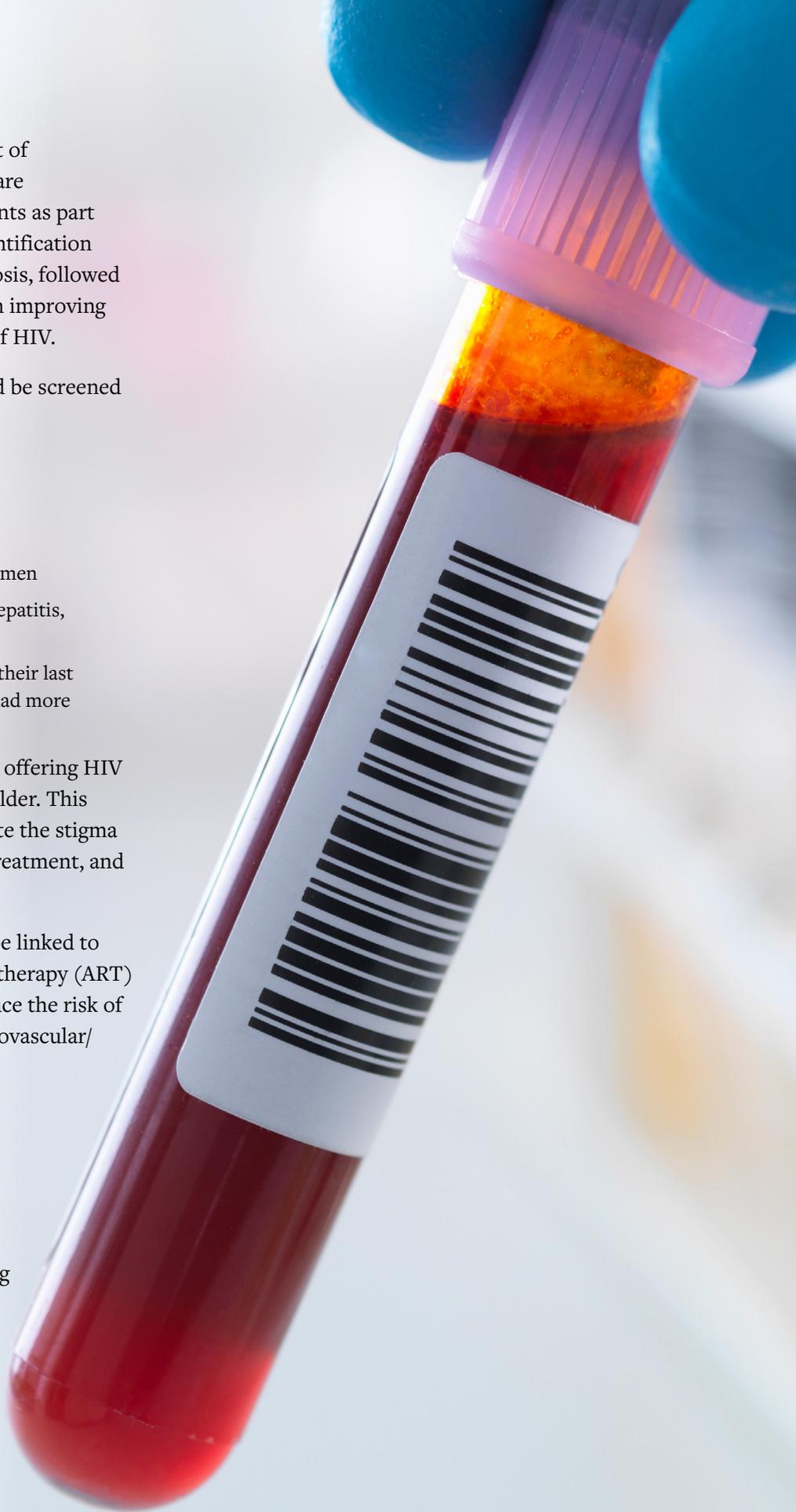
- Inject drugs
- Exchange sex for money or drugs
- Have a sexual partner living with HIV
- Are sexually active men who have sex with men
- Are receiving treatment for tuberculosis, hepatitis, or sexually transmitted infections (STIs)
- Have had more than one sex partner since their last HIV screening, or have a partner who has had more than one sex partner

Use an **opt-out** approach to HIV testing by offering HIV screening to all your patients ages 13 and older. This approach is cost-effective, helps to eliminate the stigma around HIV, fosters earlier diagnosis and treatment, and helps to reduce the risk of transmission.

Patients who test positive for HIV should be linked to care and treatment. Starting antiretroviral therapy (ART) as soon as possible after diagnosis can reduce the risk of serious non-AIDS-related events, like cardiovascular/renal/hepatic disease and cancer, and can lower the risk of mortality.

Assess your HIV-negative patients' needs and risks to collaboratively offer tailored prevention tools, including pre-exposure prophylaxis (PrEP), condoms, and risk-reduction counseling. Patients with ongoing risk factors should remain engaged in prevention services and undergo regular HIV rescreening.

Source: "Clinical Testing Guidance for HIV," Centers for Disease Control and Prevention, February 10, 2025, <https://www.cdc.gov/hivnexus/hcp/diagnosis-testing/index.html>, accessed March 19, 2026.



# Why CPT Category II (CPT-CAT II) codes matter for diabetes and hypertension

CPT-CAT II codes are brief, standardized codes designed to streamline the recording and retrieval of quality-of-care data. CPT-CAT II codes serve as a means to capture clinical measurements, test results, and care events. Examples include recording a patient's most recent HbA1c value range, blood pressure readings, or the completion of a retinal eye exam. The American Medical Association (AMA) states that these codes help collect quality-of-care data by documenting services and test results for performance measures.

Proper use of CPT-CAT II codes offers a high-impact, low-effort approach to enhancing quality measurement and patient care.

## How using CPT-CAT II codes enhances HEDIS data collection:

- 1. Allows faster, more accurate measurement (fewer chart reviews).** The use of CPT-CAT II codes or electronic data feeds for reporting lab and blood pressure results enables automated compliance identification, eliminating the need for full medical record abstraction for care gap closure.
- 2. Improves data integrity and completeness across electronic methods.** NCQA and CMS are shifting quality measurements to prioritize electronic clinical data systems (ECDS) and phase out hybrid methods.
- 3. Enables more actionable population health.** Reliable data on poor glycemic or blood pressure control allows for targeted, timely outreach, including medication management, care coordination, and essential screenings.
- 4. Creates standardization across payers and vendors.** CPT-CAT II codes are national, standardized metrics familiar to coders, ensuring consistent data processing and minimizing misinterpretation by vendors and health plans.

Review AmeriHealth Caritas Louisiana's CPT-CAT II codes for members with diabetes or hypertension in this [July 9, 2025 Provider Alert \(PDF\)](#).



## Actionable strategies for enhancing Medicaid plan performance and provider engagement:

- 1. Map EHR fields to CPT-CAT II codes.** Automate lab and vitals workflows to auto-populate the correct codes based on result bands, reducing human error and improving accuracy.
- 2. Report CPT-CAT II codes on claims and in electronic quality feeds.** To ensure accurate and efficient quality data submission, report CPT-CAT II codes identically to Category I codes in the claim procedure code field. This practice minimizes the administrative burden of health plan record requests.
- 3. Document the diagnosis and measurement in the chart.** HEDIS measures still require clinical documentation (e.g., diagnosis code I10 for hypertension, diabetes diagnosis codes). CPT-CAT II codes do not replace clinical notes — they supplement them for measurement.
- 4. Train clinical staff and coders annually.** Review updated HEDIS code lists annually, as codes and numerator rules are subject to change each measurement year.
- 5. Conduct audit sampling.** Periodic data validation, comparing coded data to chart abstraction, is essential for ensuring accuracy of automatic mappings and staff coding practices.

### Sources:

American Medical Association, "Criteria for CPT Category II Codes," <https://www.ama-assn.org/practice-management/cpt/criteria-cpt-category-ii-codes>, accessed March 19, 2026.

Medicaid.gov, "Summary of Updates to the Adult Core Set Measures," January 2026 <https://www.medicaid.gov/medicaid/quality-of-care/downloads/adult-core-set-updates.pdf>, accessed March 19, 2026.

## Well-child visits

Well-child visits offer an opportunity for providers to impact the health and development of their pediatric population. Additionally, these visits provide critical opportunities for developmental screening, counseling, and immunization administration. Every well-child visit should center on prevention, early detection, and medically necessary treatment.

**W30: Well Child Visits in the First 30 Months:** Children should have at least six well visits by age 15 months and at least two more well visits by the age of 2.5 (30 months).

**WCV: Child and Adolescent Well-Care Visits:**

Children and adolescents ages 3 – 21 should have a yearly well-care visit.

Providers should follow the American Academy of Pediatrics (AAP) **Bright Futures Periodicity Schedule (PDF)** for additional screening and immunization intervals.

Please review the **EPSDT Provider Toolkit** on the AmeriHealth Caritas Louisiana website for more detailed information on billing and coding guidelines.



Sources:

NCQA, “Child and Adolescent Well-Care Visits (WCV),” <https://www.ncqa.org/report-cards/health-plans/state-of-health-care-quality-report/child-and-adolescent-well-care-visits-wcv/>, accessed March 20, 2026.

NCQA, “Well-Child Visits in the First 30 Months of Life (W30),” <https://www.ncqa.org/report-cards/health-plans/state-of-health-care-quality-report/well-child-visits-in-the-first-30-months-of-life-w30/>, accessed March 20, 2026.

Bright Futures and American Academy of Pediatrics, “Recommendations for Preventive Pediatric Health Care,” [https://downloads.aap.org/AAP/PDF/periodicity\\_schedule.pdf](https://downloads.aap.org/AAP/PDF/periodicity_schedule.pdf), accessed March 20, 2026.

## Prenatal and postpartum care tip sheets available

AmeriHealth Caritas Louisiana urges OB/GYNs and other providers to prioritize early prenatal engagement and proactive postpartum follow-up to support improved maternal health outcomes. This recommendation is based on the NCQA HEDIS guidelines for the Prenatal and Postpartum Care (PPC) measure, which emphasizes the importance of comprehensive and timely care for pregnant and postpartum women. By working together, we can support and encourage healthy pregnancies, reduce maternal mortality, and improve neonatal outcomes.



HEDIS tip sheets are available to offer guidance on providing and coding for quality prenatal and postpartum care. Visit our website, where tip sheets can be found under **Handbooks and guides** on the Provider Resources page.

Source:

NCQA, “Prenatal and Postpartum Care (PPC),” <https://www.ncqa.org/report-cards/health-plans/state-of-health-care-quality-report/prenatal-and-postpartum-care-ppc/>, accessed March 20, 2026.

## Notification of Pregnancy (NOP) Form

You can supplement your reimbursement when you complete a **Notification of Pregnancy (NOP) form (PDF)** for each expectant patient who is an AmeriHealth Caritas Louisiana member. Please try to complete these as early as possible and fax them to our Bright Start department at **1-888-877-5925**.

The NOP enables our Bright Start maternity care management team to proactively manage and support our maternity members. Providers will receive a \$15 payment for each completed form submitted, once per member per pregnancy.



## Building patient trust – Provider Change Form

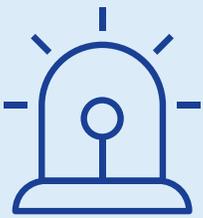
AmeriHealth Caritas Louisiana understands that trust-based patient provider partnerships are essential to removing barriers, allowing providers to deliver more effective care.

Our goal is to support providers in delivering quality care and responding to the needs of diverse patient populations across Louisiana. We offer guidance, tools, and resources to support you and your staff in delivering equitable care during patient visits. We enhance the member experience by facilitating transparent access to providers' spoken language and gender via our website. Members who want additional information on race or ethnicity can contact us directly at **1-888-756-0004** or by email: **network@amerihealthcaritasla.com** to identify a provider who shares a similar cultural background.

To update race, ethnicity, and/or language information for yourself or your staff, please use the **Provider Change Form (PDF)** located on our website or contact your Account Executive for help with this process.

## Member rights and responsibilities

AmeriHealth Caritas Louisiana members have rights that must be honored by all AmeriHealth Caritas Louisiana associates and affiliated providers. AmeriHealth Caritas Louisiana members also have responsibilities. Member rights and responsibilities are outlined in the Member Rights and Responsibilities section on **page 40 of the AmeriHealth Caritas Louisiana Member Handbook (PDF)**.



### Adverse incident reporting requirements

AmeriHealth Caritas Louisiana would like to remind specialized behavioral health providers of the requirement to report adverse incidents. Providers must report allegations of abuse, neglect, exploitation, or extortion of any of our members directly and immediately to the appropriate protective services agency or licensing agency. AmeriHealth Caritas Louisiana must be notified within one business day of the discovery of the incident. Adverse incident reports (PDF) should be faxed to AmeriHealth Caritas Louisiana at 1-844-341-7641.

The following are types of adverse incidents that must be reported to AmeriHealth Caritas Louisiana:

- Abuse
- Exploitation
- Neglect
- Death (regardless of cause or location)
- Extortion

Providers may view the AmeriHealth Caritas Louisiana **policy on adverse incident reporting (PDF)** and access the form.

## Multiple ways you can refer members to our case management services

AmeriHealth Caritas Louisiana provides multiple pathways to help members get prompt access to case management services, including:

- Member Services phone line: **1-888-756-0004**
- Health information 24-hour Nurse Call Line: **1-888-632-0009**
- Hospital discharge planner referrals
- Health plan activity (Utilization Management, Rapid Response, inbound calls, outbound campaigns, and Member Services calls)
- Member/Caregiver requests
- Provider referrals via the **Let Us Know form (PDF)**.
- Data mining: Members with multiple comorbid conditions, high predictive risk scores, and high levels of emergency room and inpatient utilization are referred for complex case management services.

Please use and share these resources to help connect members to the care they need!

## Obtaining Utilization Management (UM) criteria

AmeriHealth Caritas Louisiana provides its Utilization Management (UM) criteria to network providers upon request. To obtain a copy of AmeriHealth Caritas Louisiana UM criteria:

- Call the UM Department at **1-888-913-0350**.
- Identify the specific criteria you are requesting.
- Provide a fax number or mailing address.

You will receive a faxed copy of the requested criteria within 24 hours or a written copy by mail within five business days of the request. Providers may also request prior authorization requirements used to make a medical necessity determination by sending an email to: **HB424Request@amerihealthcaritas.com**.

Please remember that AmeriHealth Caritas Louisiana has Medical Directors and Physician Advisors who are available to address UM issues or answer your questions regarding decisions on prior authorization, DME, home health care, and concurrent review. To contact these resources, call the peer-to-peer hotline at **1-866-935-0251**.





## Stay in touch with us as a partner in care!

As an AmeriHealth Caritas Louisiana provider, you're our partner in member care. **Our goal is to help you** operate effectively and efficiently. Working with providers like you, we can deliver quality, cost-effective care and better health outcomes for our members.

**Get your health plan news via email.** Sign up for our **free Network News** service to receive important health plan communications from AmeriHealth Caritas Louisiana.

**By phone**, we're here to answer your questions or address any concerns at the numbers below:

Provider Services: **1-888-922-0007**

Provider Network Management:  
**1-877-588-2248**

Credentialing: **1-888-913-0349**

## AmeriHealth Caritas Louisiana offers no-cost language interpretation services for our members

Members should be advised that interpretation services from AmeriHealth Caritas Louisiana are available at no cost. When a member uses AmeriHealth Caritas Louisiana interpretation services, the provider must sign, date, and document the services provided in the medical record in a timely manner.

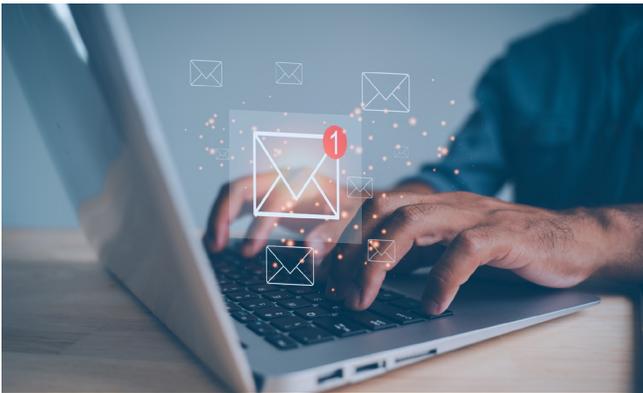
### How to use our interpretation services:

- Inform the member of their right to no-cost interpretation services.
- Make sure a phone is in the room, or use a cell phone.
- Call Member Services at **1-888-756-0004**, 24 hours a day, seven days a week, with the member ID number, and Member Services will connect you to the necessary interpreter.
- Conduct the exam with an interpreter over the phone.

### Interpretation tips:

- Speak directly to the patient, not the interpreter.
- Do not rush. Pause every sentence or two for interpretation.
- Use plain language. Avoid slang and sayings. Jokes do not always translate well.
- Check for understanding occasionally by asking the patient to repeat back what you said. This is better than asking, "Do you understand?"

**In addition, translation services must be provided to assure adherence to providing services in a culturally competent manner. Please review additional details about cultural competency and language services on our website.**



## Sign up for Network News

Get your health plan news via email. Sign up for our free Network News service to receive important health plan communications from AmeriHealth Caritas Louisiana. This will allow you to stay on top of health plan news and updates via email. Or, go to our website and visit Newsletters and Updates. Once you have registered, you will receive a confirmation email. If you feel you registered previously, but did not receive a confirmation email, please try registering again and be sure to check your spam or junk mailbox for your confirmation email. sure to check your spam or junk mailbox for your confirmation email.

## Community Wellness and Opportunity Centers

AmeriHealth Caritas Louisiana has Community Wellness and Opportunity Centers in New Orleans and Shreveport that offer wellness events, health screenings, and other resources for our members and the community. Stop in and see us!

At our wellness centers, members can learn how AmeriHealth Caritas Louisiana can help them with:

- Health screenings
- Activities for the kids
- Health education
- Benefits questions
- And more!



### Shreveport location:

3709 Jewella Avenue  
Shreveport, LA 71109  
1-318-626-6263

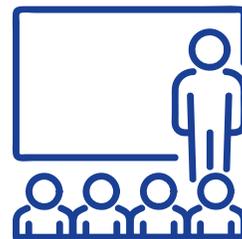
### New Orleans location:

Gentilly Shopping Center  
3155 Gentilly Boulevard  
New Orleans, LA 70122  
1-504-218-2972

All are welcome! For more information and to view the calendar of events for each location, visit the **Community Wellness Center section** of our website.



## Provider trainings



### ASAM 6 Dimension Criteria training

AmeriHealth Caritas Louisiana is facilitating an American Society of Addiction Medicine (ASAM) 6 Dimension Criteria training\* at no cost for psychiatrists, psychologists, advanced practice registered nurses (APRNs) who are clinical nurse specialists in psychiatry or nurse practitioners (NPs) certified in psychiatry or mental health nursing, licensed professional counselors (LPCs), and licensed clinical social workers (LCSWs). The training will:

- Define ASAM Terminology.
- Review the ASAM Levels of Care.
- Explain the ASAM Multidimensional Assessment.
- Demonstrate how to use the ASAM Assessment in addressing a member's identified needs.

Date	Time (CST)	Registration link
June 3, 2026	9 a.m. to noon	<a href="#">June training registration</a>
September 16, 2026	9 a.m. to noon	<a href="#">September training registration</a>
December 9, 2026	9 a.m. to noon	<a href="#">December training registration</a>

**Registration is required.** Please register in advance for your desired training date.

\*No continuing education credits (CEUs) will be given for this training. AmeriHealth Caritas Louisiana will provide Certificates of Attendance to verify completion of the training, which attendees may submit to their licensing board for post-approval consideration.

### ASAM 4th Edition training

At the recommendation of the Louisiana Department of Health, the six managed care organizations (MCOs) have developed standardized training regarding the new standards and criteria associated with the ASAM 4th Edition update. It is vital for providers to be informed of the updates and revisions required by the ASAM 4th Edition. To ensure this, all MCOs will be offering training sessions. During the training sessions, you will have the opportunity to ask questions about the updates and revisions. You do not have to be contracted with the hosting MCO to attend the training.

Date	Time (CT)	MCO	Provider type	MCO registration link
March 30, 2026	10 a.m. to noon	All MCOs	All ASAM providers	<a href="#">Registration link</a>
April 8, 2026	1 p.m. to 3 p.m.	All MCOs	All ASAM providers	<a href="#">Registration link</a>
April 14, 2026	1 p.m. to 3 p.m.	All MCOs	All ASAM providers	<a href="#">Registration link</a>
April 23, 2026	9 a.m. to 11 a.m.	All MCOs	All ASAM providers	<a href="#">Registration link</a>
April 29, 2026	9 a.m. to 11 a.m.	All MCOs	All ASAM providers	<a href="#">Registration link</a>
May 5, 2026	Noon to 2 p.m.	All MCOs	All ASAM providers	<a href="#">Registration link</a>
May 11, 2026	10 a.m. to noon	All MCOs	All ASAM providers	<a href="#">Registration link</a>

### Screening, Brief Intervention, and Referral to Treatment (SBIRT) training

AmeriHealth Caritas Louisiana is facilitating Screening, Brief Intervention, and Referral to Treatment (SBIRT) training\*\* for physical health providers. The goal of this training course is to help participants develop their knowledge, skills, and abilities as SBIRT practitioners.

- Identify SBIRT as a system change initiative.
- Compare and contrast the current system with SBIRT.
- Introduce the public health approach.
- Discuss the need to change how we think about substance use behaviors, problems, and interventions.
- Understand what screening does and does not provide.

Date	Time (CST)	Registration link
June 4, 2026	9 a.m. to 1 p.m.	June training registration
September 17, 2026	9 a.m. to 1 p.m.	September training registration
December 10, 2026	9 a.m. to 1 p.m.	December training registration

\*\*No continuing education credits (CEUs) will be given for this training. AmeriHealth Caritas Louisiana will provide Certificates of Attendance to verify completion of the training for attendees to submit to their licensing board for post-approval consideration

### Cultural Competency training

AmeriHealth Caritas Louisiana is pleased to offer web-based cultural competency training to network providers.

We will discuss:

- Culturally and Linguistically Appropriate Services
- Health equity

Date	Time (CST)	Registration link
April 29, 2026	1 p.m. - 2 p.m.	April meeting link
September 16, 2026	1 p.m. - 2 p.m.	September meeting link

Registration is not required.

### Upcoming AmeriHealth Caritas Louisiana Intellectual and Developmental Disabilities (IDD) eLearning

AmeriHealth Caritas Louisiana is pleased to offer online training courses on intellectual and developmental disabilities:

- **Assessment and Diagnosis of Behavioral Health Conditions for Individuals with IDD**
- **Introduction to IDD and Behavioral Health for Unlicensed Clinical Staff**
- **Modifications for Evidence-based Practices and Treatment for Individuals with IDD**

## Questions

If you have questions about any content in this provider update, please get in touch with your Provider Account Executive or call Provider Services at 1-888-922-0007.





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Louisiana

[www.amerhealthcaritasla.com](http://www.amerhealthcaritasla.com)