

Non-licensed Behavioral Health Provider Training Attestation

When you complete and submit this letter, you attest that you have completed the seven standardized trainings for non-licensed providers that are available at www.LAHealth.CC/bhnonlicensedtraining.

These include:

- Co-occurring disorders
- Crisis intervention
- Cultural and linguistic competency
- Serious mental illness and emotional behavioral disorders
- Suicide and homicide precautions
- System of care overview
- Treatment planning

If you attest to completing all of the aforementioned trainings, please sign and complete the section below:

Date: _____

Name/credentials: _____

Affiliated licensed provider/facility: _____

Signature: _____



Return your completed attestation to Louisiana Healthcare Connections via email to: lhc_bhprov_roster@louisianahealthconnect.com.

A copy of this signed letter of attestation will be maintained in your provider record as verification of completion.