LAM5Y011 LOUISIANA MEDICAID MANAGEMENT INFORMATION SYSTEM REPORT NO: RF-0-76AI RUN: 01/17/18 08:41:39 DEPARTMENT OF HEALTH AND HOSPITALS - BUREAU OF HEALTH SERVICES - FINANCING PAGE: 1

AMERICAN INDIAN 638 HEALTH FACILITIES FEE SCHEDULE - PT 95

FEES EFFECTIVE FOR DOS BETWEEN JANUARY 01, 2017 AND DECEMBER 31, 2017

PROV NAME ADDR CITY ST ZIP PROC NPI RATE RATE EFF 3231 CHITIMACHA TRAIL LA 000070523 1154477909 D0999 391.00 01/01/17 CHITIMACHA HEALTH CLINIC CHARENTON LA 000070523 1154477909 T1015 CHITIMACHA HEALTH CLINIC 3231 CHITIMACHA TRAIL CHARENTON 391.00 01/01/17