LOUISIANA MEDICAID PROGRAM

03/01/11

ISSUED: REPLACED:

CHAPTER 9: ADULT DAY HEALTH CARE WAIVER

REVISION HISTORY LOG

Revised/ Issued Date	Section	Section Title	Number of Page (s)	Reason for Revision
03/01/11	Appendix B	Forms	3	Web address changed for <i>Quality</i> Enhancement Plan Handbook and OAAS Critical Incident Reporting Policies and Procedures manual (changes made on page 1)