

CHAPTER 22: FEDERALLY QUALIFIED HEALTH CENTERS**APPENDIX A: CONTACT INFORMATION****PAGE(S) 1****CONTACT INFORMATION**

OFFICE NAME	TYPE OF ASSISTANCE	CONTACT INFORMATION
Department of Health and Hospitals	Receives annual notice of grant award from FQHC	Department of Health and Hospitals Bureau of Health Services Financing Program Operations P.O. Box 91020 Baton Rouge, LA 70821-0546
Molina – PA Unit	Receives prior authorization requests	Molina Medicaid Solutions Prior Authorization Unit P.O. Box 14919 Baton Rouge, LA 70898-4919
Molina – Provider Relations Unit	Provides assistance with questions regarding billing information	Molina Medicaid Solutions Provider Relations Unit P. O. Box 91024 Baton Rouge, LA 70821
Molina – Claims Processing Unit	Processes Medicare crossover claims	Molina Medicaid Solutions P. O. Box 91023 Baton Rouge, LA 70821
MEVS/REVS	Verifies recipient eligibility	www.lamedicaid.com
Bureau of Appeals	Receives appeal requests	Department of Health & Hospitals Bureau of Appeals PO Box 4183 Baton Rouge, LA 70821-4183
Cypress Audit Team	Receives annual cost reports	Cypress Audit Team 5555 Hilton Avenue, Suite 605 Baton Rouge, LA 70808
Professional Services Fee Schedule	Reimbursement information relative to adjunct codes	www.lamedicaid.com following “Fee Schedules” then “Professional Services” links

See <http://www.cms.hhs.gov/Manuals/PBM/list.asp> for information concerning the Health Insurance Manual 15 (HIM-15)