#### LOUISIANA MEDICAID PROGRAM

06/01/19

**ISSUED:** 

**REPLACED:** 

# CHAPTER 22: FEDERALLY QUALIFIED HEALTH CENTERS

## **REVISION HISTORY LOG**

Revised/ Issued Date	Section	Section Title	Number of Page (s)	Reason for Revision
06/01/19		Table of Contents	3	Revised to reflect revisions in the revised sections.
06/01/19	22.0	Overview	2	Revised to reflect name change to the Louisiana Department of Health.
06/01/19	22.1	Covered Services	12	Revised section as a result of the approved Behavioral Health State Plan amendment to include revisions to the section on encounters and add sections on multiple same day visits service limits, and service delivery.
06/01/19	22.4	Reimbursement	11	Revised section as a result of the approved Behavioral Health State Plan amendment to include revisions encounter visits and encounter billing guidelines.
06/01/19	Appendix A	Contact Information	1	Revised to reflect change from "Molina" to "DXC Technology".
06/01/19	Appendix B	Forms and Links	1	Renamed section for consistency across <i>Medicaid Services Manual</i> . Updated to remove sample form and include link to the 158-A form and instructions on lamedicaid.com.

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06/01/19	Appendix C	Glossary	3	Revised to reflect name change to the Louisiana Department of Health.
06/01/19	Appendix D	Claims Related Information	32	Renamed section for consistency across <i>Medicaid Services Manual</i> . Section revised to change "Molina Medicaid Solutions" references to "DXC Technologies". Revised to remove references to ICD- 9 language. Revised to add behavioral health encounter visit code H2020. Technical edits made throughout document for clarity.