CHAPTER 5: PROFESSIONAL SERVICES

PAGE(S) 2

REVISION HISTORY LOG

Revised/Issued Date	Section	Section Title	Number of Page (s)	Reason for Revision
08/16/24	5.1	Covered Services – Vaccines for Children and Louisiana Immunization Network for Kids	1	Revisions made to incorporate alphanumeric formatting and gender inclusive language; as well as make technical revisions throughout section.
08/16/24	5.1	Covered Services – Vagus Nerve Stimulator	4	Revisions made to incorporate alphanumeric formatting and gender inclusive language; as well as make technical revisions throughout section.
08/16/24	Appendix A	Contact Information	5	Revisions made to incorporate alphanumeric formatting and gender inclusive language; as well as make technical revisions throughout section.
08/16/24	Appendix B	Forms	7	Revisions made to incorporate alphanumeric formatting and gender inclusive language; as well as make technical revisions throughout section.
08/16/24	Appendix C	Restricted Audiology Codes	1	Revisions made to incorporate alphanumeric formatting and gender inclusive language; as well as make technical revisions throughout section.
08/16/24	Appendix D	Reserved	1	Revisions made to incorporate alphanumeric formatting and gender inclusive language; as well as make technical revisions throughout section.

LOUISIANA MEDICAID PROGRAM

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CHAPTER 5: PROFESSIONAL SERVICES

PAGE(S) 2

08/16/24	Appendix E	Claims Related Information	16	Revisions made to incorporate alphanumeric formatting and gender inclusive language; as well as make technical revisions throughout section.
08/16/24	Appendix G	Podiatry Codes	1	Revisions made to incorporate alphanumeric formatting and gender inclusive language; as well as make technical revisions throughout section.