LOUISIANA MEDICAID PROGRAM

ISSUED: REPLACED:

12/1/18

CHAPTER 5: PROFESSIONAL SERVICES

PAGE(S) 1

REVISION HISTORY LOG

Revise Issue Date		n Section Title	Number of Page (s)	Reason for Revision
12/1/1	5.1	Covered Services – Preventive Medicine Evaluation and Management Services (Adult)	2	Revisions were made on page 1 of 2 to outline the requirements for the well-woman gynecological examination.

Chapter 5 Professional Services Revision History Log