

Selected Parish: CONCORDIA

Service Area for Selected Parish: AVOYELLES, CATAHOULA, CONCORDIA, RAPIDES, AND TENSAS PARISHES

MENTAL HEALTH REHABILITATION SERVICES PROVIDERS

(List Updated 02/03/12 02:30:04 AM)

CLIENT DATA	
Name:	
Address:	
Medicaid #:	Social Security #:
Phone #:	Age:
Responsible Party:	

I am requesting referral for Mental Health Rehabilitation Services. I understand that I am guaranteed the right of Freedom of Choice in regards to the agency which provides me/my child rehab services, and my signature indicates that I have selected referral to the agency checked below.

Client/Responsible Party Signature: _____ Date: _____

Choice	Name/Address/Phone/Fax	Contact Person	Psychiatric Director(s)	Provider Services
_____	COMMUNITY SUPPORT SERVICES, INC 1140 SHIRLEY ROAD BUNKIE, LA 71322 PH. (318)346-8001 FAX (318)346-8005 SITE # 54476	SHELIA DUPAS	SCOTT D. MAYERS, MD PHILLIP C. ROWDEN, MD	ADULTS AND CHILDREN PSYCHOSOCIAL SKILLS TRAINING-ADULT
_____	EXODUS BEHAVIORAL HEALTH CENTER, LLC 118 HWY 605 (S. MAIN STREET) NEWELLTON, LA 71357 PH. (318)467-2399 FAX (318)467-2400 SITE # 66386	BEATRICE BROWN WELLS	RITA AGARWAL, MD	ADULTS AND CHILDREN

Choice	Name/Address/Phone/Fax	Contact Person	Psychiatric Director(s)	Provider Services
_____	JOURNEY REHAB 5612 JACKSON STREET EXT ALEXANDRIA, LA 71303 PH. (318)445-9019 FAX (318)445-1098 SITE # 11118	BRENDA SAMPSON	PHILLIP ROWDEN, MD	ADULTS AND CHILDREN
_____	PHOENIX FAMILY LIFE CENTER 3834 INDEPENDENCE DR. ALEXANDRIA, LA 71303 PH. (318)449-4474 FAX (318)449-4472 SITE # 80387	JOHNSON KIM	RODNEY C. CHARLES, MD	ADULTS AND CHILDREN
_____	POSITIVE CHOICES COUNSELING SERVICES, INC 1644 CARTER ST. # 2, P.O. 614 VIDALIA, LA 71373 PH. (318)336-4700 FAX (318)336-4777 SITE # 56144	CAROLYN BROWN	SCOTT D. MAYERS, MD	ADULTS AND CHILDREN
_____	REHAB SERVICES OF CENLA, LLC 5417 JACKSON SUITE D ALEXANDRIA, LA 71303 PH. (318)473-4328 FAX (318)473-4329 SITE # 14373	LURLEAN HUDSON	NABIL GAD, MD EDWIN R. URBI, MD	ADULTS AND CHILDREN PSYCHOSOCIAL SKILLS TRAINING-ADULT