

**Selected Parish: ALLEN**

**Service Area for Selected Parish: ACADIA, ALLEN, BEAUREGARD, EVANGELINE, JEFFERSON DAVIS,  
RAPIDES, AND VERNON PARISHES**

**MENTAL HEALTH REHABILITATION SERVICES PROVIDERS**

**(List Updated 09/03/10 11:16:04 PM)**

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
_____	<b>FAIRWAY COUNSELING, INC.</b> 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
_____	<b>JOURNEY REHAB</b> 5612 JACKSON STREET EXT ALEXANDRIA, LA 71303 PH. (318)445-9019 FAX (318)445-1098 SITE # 11118	BARBARA WATSON	PHILLIP ROWDEN, MD	ADULTS AND CHILDREN

Choice	Name/Address/Phone/Fax	Contact Person	Psychiatric Director(s)	Provider Services
_____	<b>NEW WAY OF SOUTHWEST LOUISIANA, LLC</b> 1769 WEST MAIN ST. VILLE PLATTE, LA 70586 PH. (337)363-3703 FAX (337)363-4008 SITE # 14259	TERI BROWN	OLADAPO B. FOLARIN, MD	ADULTS AND CHILDREN
_____	<b>REHAB SERVICES OF CENLA, LLC</b> 5417 JACKSON SUITE D ALEXANDRIA, LA 71303 PH. (318)473-4328 FAX (318)473-4329 SITE # 14373	KHADAJAH ELI	NABIL GAD, MD	ADULTS AND CHILDREN PSYCHOSOCIAL SKILLS TRAINING-ADULT