

Selected Parish: GRANT

Service Area for Selected Parish: GRANT, LASALLE, NATCHITOCHEs, RAPIDES, AND WINN 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
_____	COMMUNITY ENRICHMENT PROGRAMS, LLC 200 RAPIDES DRIVE NATCHITOCHEs, LA 71457 PH. (318)356-2415 FAX (318)356-2416 SITE # 62563	YURA WRIGHT	CLIF DOPSON, MD	ADULTS AND CHILDREN
_____	FAIRWAY COUNSELING, INC. 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

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	BARBARA WATSON	PHILLIP ROWDEN, 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	KHADAJAH ELI	NABIL GAD, MD	ADULTS AND CHILDREN PSYCHOSOCIAL SKILLS TRAINING-ADULT