Crime Victims Reparations Board State of Louisiana

JOHN BEL EDWARDS
GOVERNOR



JIM GRAFT
EXECUTIVE DIRECTOR

BOARD MEETING MINUTES

Tuesday, February 18, 2020

Louisiana Commission on Law Enforcement

Member Attendees

Linda Gautier, Angela Henderson, Carla Shorty, Carolyn Stapleton, Audrey Thibodeaux, Amanda Tonkovich, Tameka White

Member Absentees

Gary "Stitch" Guillory, Rena Hebert, Lisa Kiper, Catalene Theriot

Staff Attendees

Robert Wertz, Carla Trahan, Lakisha Harris, Sarah Hayden

Guest Attendees

Erich Duchmann, Jeddie Smith, Jane Wood, Rikee Ruffin, Stephanie Minto-Gibson, Sachiri Henderson, Dawn Huddleston, Natalie Brown

CALL TO ORDER

Ms. Tonkovich called the meeting of the Crime Victims Reparations Board to order at 9:32 a.m.

APPROVAL OF MINUTES OF PREVIOUS MEETING

Ms. Gautier made a motion to approve the minutes of the two previous meetings. Ms. White seconded the motion and the motion passed unanimously. Ms. Thibodeaux made a motion to approve the previous month's emergency awards and to waive repayment of the awards. Ms. Tameka seconded the motion and the motion passed unanimously.

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			EMERGENCY
Parish	CVR#	Claim #	Resolution
CADDO	CADD19-063	200901	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for WAGE to Claimant
EAST BATON RO	U CADD19-068	201039	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for WAGE to Claimant
EAST BATON RO	U EBAT19-135	200872	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for FUNERAL to Seale Funeral Home
EAST BATON RO	U EBAT19-137	200903	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for FUNERAL to Resting Place Funeral Home
EAST BATON RO	U EBAT19-138	200886	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for FUNERAL to Carney & Mackey Funeral Home
EAST BATON RO	U EBAT19-140	200936	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for FUNERAL to Hall Davis & Sons Funeral Service, LLC
EAST BATON RO	U EBAT19-141	200937	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for FUNERAL to MJR Friendly Service Funeral Home, Inc.
EAST BATON RO	U EBAT20-001	200957	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for FUNERAL to Resthaven Funeral Home
EAST BATON RO	U EBAT20-002	200983	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for FUNERAL to Hall Davis & Sons Funeral Service, LLC
EAST BATON RO	J EBAT20-003	200987	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for Relocation to Claimant
EAST BATON ROL	J EBAT20-004	201030	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for FUNERAL to Carney & Mackey Funeral Home
EAST BATON ROL	J EBAT20-005	201038	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for FUNERAL to Miller & Daughter Mortuary
EAST BATON ROL	J EBAT20-006	201042	Claim Eligibility APPROVED. EMERGENCY Payment of \$300.00 APPROVED for MENTAL HEALTH to Brandon Ramano and Associates
EAST BATON ROL	J EBAT20-010	201162	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for CHILD CARE to First Name Basis Home Care Payment of \$0.00 APPROVED for CHILD CARE to First Name Basis Home Care
ORLEANS	ORLE19-129	200137	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for FUNERAL to Duplain W. Rhodes Funeral Home

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Parish	CVR#	Claim #	EMERGENCY Resolution
ORLEANS	ORLE19-177	200906	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for Relocation to Thea Gegenheimer
ORLEANS	ORLE19-178	200907	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for WAGE to Claimant
ORLEANS	ORLE19-180	200908	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for FUNERAL to Little John's Funeral Home
ORLEANS	ORLE20-001	201001	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for Relocation to Claimant
ORLEANS	ORLE20-002	200990	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for FUNERAL to Charbonnet-Labat-Glapion Funeral Homes, Inc.
ORLEANS	ORLE20-004	200989	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for Relocation to Claimant
ORLEANS	ORLE20-005	201002	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for FUNERAL to Craft Funneral Home, Inc.
ORLEANS	ORLE20-007	201037	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for FUNERAL to Professional Funeral Services
ORLEANS	ORLE20-008	201036	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for FUNERAL to Professional Funeral Services
ORLEANS	ORLE20-009	201035	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for FUNERAL to Charbonnet-Labat-Glapion Funeral Homes, Inc.
SABINE	SABI19-006	200940	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for FUNERAL to Rose-Neath Funeral Home (S'port)
ST. CHARLES	CHAR19-031	200904	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for SUPPORT to Claimant
			STANDARD
Parish	CVR#	Claim #	Resolution
ACADIA	ACAD19-001	190437	Claim Eligibility APPROVED. Payment of \$809.85 APPROVED for FUNERAL to Claimant
			Payment of \$4,190.15 APPROVED for FUNERAL to Myers Colonial Funeral Home
ACADIA	ACAD19-327	201003	Claim Eligibility APPROVED. Payment of \$800.00 APPROVED for MEDICAL to Hearts of Hope -SANE

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			STANDARD
Parish	CVR#	Claim #	Resolution
Allen	ALLE18-001	182165	Claim Eligibility DENIED - Not a Compensable Expense. Payment of \$0.00 APPROVED for FUNERAL to White Oaks Funeral Home
Ascension	ASCE17-004	170268	Claim Eligibility APPROVED. Payment of \$965.00 APPROVED for FUNERAL to Hambrick's Family Mortuary
Ascension	ASCE18-321	181988	Claim Eligibility APPROVED. Payment of \$196.90 APPROVED for MEDICAL to University Medical Center Mgt Corp
ASCENSION	ASCE19-001	190484	Claim Eligibility APPROVED. Payment of \$1,383.66 APPROVED for FUNERAL to Claimant
ASCENSION	ASCE19-306	200965	Claim Eligibility APPROVED. Payment of \$691.00 APPROVED for MEDICAL to CARE Center
ASCENSION	ASCE19-307	200966	Claim Eligibility APPROVED. Payment of \$691.00 APPROVED for MEDICAL to CARE Center
ASCENSION	ASCE19-308	200963	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to East Baton Rouge Parish Coroner's Office
ASCENSION	ASCE19-325	200669	Claim Eligibility APPROVED. Payment of \$314.78 APPROVED for MEDICAL to CARE Center
ASCENSION	ASCE19-326	201048	Claim Eligibility APPROVED. Payment of \$330.00 APPROVED for MEDICAL to CARE Center
ASCENSION	ASCE19-327	201049	Claim Eligibility APPROVED. Payment of \$691.00 APPROVED for MEDICAL to CARE Center
ASCENSION	ASCE20-300	201018	Claim Eligibility APPROVED. Payment of \$650.00 APPROVED for MEDICAL to East Baton Rouge Parish Coroner's Office
ASCENSION	ASCE20-301	201137	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to East Baton Rouge Parish Coroner's Office
ASSUMPTION	ASSU19-303	200873	Claim Eligibility APPROVED. Payment of \$468.82 APPROVED for MEDICAL to Our Lady of the Lake R.M.C.
AVOYELLES	AVOY19-001	190452	Claim Eligibility APPROVED. Payment of \$5,000.00 APPROVED for FUNERAL to Claimant
Beauregard	BEAU17-040	171082	Claim Eligibility APPROVED.
Bienville	BIEN18-303	182227	Claim Eligibility APPROVED.
BIENVILLE	BIEN18-303	201186	Claim Eligibility APPROVED. Payment of \$631.96 APPROVED for MEDICAL to Ochsner LSU Health Shreveport

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			STANDARD
Parish	CVR#	Claim #	Resolution
BOSSIER	BOSS15-005	150291	Claim Eligibility APPROVED. Payment of \$522.50 APPROVED for MEDICAL to Bossier Parish EMS
Bossier	BOSS16-715	160919	Claim Eligibility APPROVED. Payment of \$247.81 APPROVED for MEDICAL to Willis Knighton Pierremont (ED)
Bossier	BOSS17-003	171035	Claim Eligibility APPROVED.
BOSSIER	BOSS19-001	190445	Claim Eligibility APPROVED. Payment of \$5,000.00 APPROVED for FUNERAL to Grace Countryside Funeral Home
BOSSIER	BOSS19-002	190504	Claim Eligibility APPROVED. Payment of \$260.50 APPROVED for FUNERAL to Claimant
BOSSIER	BOSS19-003	190505	Claim Eligibility APPROVED. Payment of \$1,468.00 APPROVED for FUNERAL to Claimant
BOSSIER	BOSS19-004	190503	Claim Eligibility APPROVED.
BOSSIER	BOSS19-004	190507	Claim Eligibility APPROVED. Payment of \$5,000.00 APPROVED for FUNERAL to Claimant
BOSSIER	BOSS19-331	201055	Claim Eligibility APPROVED. Payment of \$711.71 APPROVED for MEDICAL to Minden Medical Center
BOSSIER	BOSS19-816	200948	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Forensic Nurse Examiners
BOSSIER	BOSS19-817	200949	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Forensic Nurse Examiners
Caddo	CADD16-723	160638	Claim Eligibility APPROVED. Payment of \$563.37 APPROVED for MEDICAL to Willis Knighton Medical Center
Caddo	CADD17-002	170237	Claim Eligibility APPROVED. Payment of \$919.03 APPROVED for FUNERAL to Claimant
Caddo	CADD17-004	171219	Claim Eligibility APPROVED.
Caddo	CADD17-006	170388	Claim Eligibility APPROVED.
Caddo	CADD17-009	170605	Claim Eligibility APPROVED.
Caddo	CADD17-012	170641	Claim Eligibility APPROVED.

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			STANDARD
Parish	CVR#	Claim #	Resolution
Caddo	CADD17-014	170861	Claim Eligibility APPROVED.
Caddo	CADD17-024	171115	Claim Eligibility APPROVED.
Caddo	CADD17-028	171133	Claim Eligibility APPROVED.
Caddo	CADD17-031	171375	Claim Eligibility APPROVED.
Caddo	CADD17-041	172653	Claim Eligibility APPROVED.
CADDO	CADD17-042	190382	Claim Eligibility APPROVED. Payment of \$1,563.14 APPROVED for FUNERAL to Aulds Funeral Home
CADDO	CADD17-799	200934	Claim Eligibility APPROVED. Payment of \$150.00 APPROVED for MENTAL HEALTH to Claimant
Caddo	CADD18-005	180301	Claim Eligibility APPROVED. Payment of \$155.91 APPROVED for MEDICAL to LSUHSC Shreveport Faculty Group Practice Payment of \$45.00 APPROVED for MEDICAL to Claimant Payment of \$100.00 APPROVED for AMBULANCE TRANSPORT (MEDICAL) to City of Shreveport EMS Payment of \$110.00 APPROVED for MEDICAL to Willis Knighton Medical Center Payment of \$82.50 APPROVED for MEDICAL to University Health - Shreveport
			Payment of \$44.84 APPROVED for MEDICAL to Regional Retina / DRDHR INC
Caddo	CADD18-008	180258	Claim Eligibility APPROVED.
Caddo	CADD18-011	180482	Claim Eligibility APPROVED. Payment of \$233.83 APPROVED for MEDICAL to Ochsner LSU Health Shreveport
Caddo	CADD18-032	181796	Claim Eligibility APPROVED. Payment of \$96.00 APPROVED for MEDICAL to WK Emergency Dept. Group Payment of \$2,666.00 APPROVED for MEDICAL to Claimant Payment of \$113.56 APPROVED for MEDICAL to Willis Knighton Bossier Health Center Payment of \$69.00 APPROVED for MEDICAL to Ronald C. Hermes D.D.S.
Caddo	CADD18-034	182087	Claim Eligibility APPROVED. Payment of \$750.55 APPROVED for MEDICAL to Ochsner LSU Health Shreveport Payment of \$525.00 APPROVED for MEDICAL to Claimant
Caddo	CADD18-037	181951	Claim Eligibility APPROVED. Payment of \$3,490.00 APPROVED for FUNERAL to Heavenly Gates Funeral Home
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			STANDARD
Parish	CVR #	Claim #	Resolution
CADDO	CADD18-064	200377	Claim Eligibility APPROVED.
Caddo	CADD18-306	181927	Claim Eligibility APPROVED. Payment of \$1,185.99 APPROVED for MEDICAL to Willis Knighton Medical Center
Caddo	CADD18-310	181942	Claim Eligibility APPROVED. Payment of \$797.91 APPROVED for MEDICAL to Willis Knighton Medical Center
CADDO	CADD18-371	200869	Claim Eligibility APPROVED. Payment of \$130.00 APPROVED for MEDICAL to WK Emergency Dept. Group
CADDO	CADD18-371	200870	Claim Eligibility APPROVED. Payment of \$1,039.73 APPROVED for MEDICAL to Willis Knighton Medical Center
CADDO	CADD18-381	201136	Claim Eligibility APPROVED. Payment of \$739.93 APPROVED for MEDICAL to Ochsner LSU Health Shreveport
Caddo	CADD18-388	182601	Claim Eligibility APPROVED. Payment of \$761.48 APPROVED for MEDICAL to Willis Knighton Medical Center
CADDO	CADD19-001	200378	Claim Eligibility APPROVED. Payment of \$4,875.00 APPROVED for FUNERAL to Claimant
CADDO	CADD19-010	190412	Claim Eligibility DENIED - Contribution.
CADDO	CADD19-031	191236	Claim Eligibility APPROVED.
CADDO	CADD19-317	200655	Claim Eligibility APPROVED. Payment of \$285.00 APPROVED for MEDICAL to Willis Knighton Pierremont (ED)
CADDO	CADD19-319	200657	Claim Eligibility APPROVED. Payment of \$641.00 APPROVED for MEDICAL to Willis Knighton South
CADDO	CADD19-329	200968	Claim Eligibility APPROVED. Payment of \$434.00 APPROVED for MEDICAL to Willis Knighton South
CADDO	CADD19-330	200970	Claim Eligibility APPROVED. Payment of \$623.33 APPROVED for MEDICAL to Willis Knighton Pierremont (ED)
CADDO	CADD19-331	201058	Claim Eligibility APPROVED. Payment of \$768.55 APPROVED for MEDICAL to Willis Knighton Medical Center
CADDO	CADD19-400	200971	Claim Eligibility APPROVED. Payment of \$838.11 APPROVED for MEDICAL to Willis Knighton Medical Center
CADDO	CADD19-417	200874	Claim Eligibility APPROVED. Payment of \$1,720.53 APPROVED for MEDICAL to Willis Knighton Medical Center

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			STANDARD
Parish	CVR #	Claim #	Resolution
CADDO	CADD19-860	200943	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Forensic Nurse Examiners
CADDO	CADD19-861	200944	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Forensic Nurse Examiners
CADDO	CADD19-862	200945	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Forensic Nurse Examiners
CADDO	CADD19-863	200946	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Forensic Nurse Examiners
CADDO	CADD19-864	200947	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Forensic Nurse Examiners
Calcasieu	CALC14-026	140376	Claim Eligibility APPROVED. Payment of \$322.38 APPROVED for MEDICAL to R.A.S.L. d/b/a Access Radiology
Calcasieu	CALC17-002	170240	Claim Eligibility DENIED - Not a Compensable Expense.
Calcasieu	CALC17-003	170390	Claim Eligibility APPROVED.
Calcasieu	CALC17-008	170391	Claim Eligibility APPROVED.
Calcasieu	CALC17-009	172279	Claim Eligibility APPROVED.
Calcasieu	CALC17-013	170552	Claim Eligibility DENIED - Lack of Cooperation.
Calcasieu	CALC17-015	170443	Claim Eligibility APPROVED.
Calcasieu	CALC17-016	170447	Claim Eligibility APPROVED.
Calcasieu	CALC17-022	170642	Claim Eligibility APPROVED.
Calcasieu	CALC17-024	170779	Claim Eligibility APPROVED.
Calcasieu	CALC17-025	170609	Claim Eligibility APPROVED.
Calcasieu	CALC17-026	170733	Claim Eligibility APPROVED.

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		75	STANDARD
Parish	CVR#	Claim #	Resolution
Calcasieu	CALC17-032	170856	Claim Eligibility APPROVED.
Calcasieu	CALC17-033	170893	Claim Eligibility APPROVED.
Calcasieu	CALC17-036	170957	Claim Eligibility APPROVED.
Calcasieu	CALC17-044	171086	Claim Eligibility APPROVED.
Calcasieu	CALC17-052	171250	Claim Eligibility APPROVED.
Calcasieu	CALC17-056	171740	Claim Eligibility APPROVED.
Calcasieu	CALC17-063	171998	Claim Eligibility APPROVED.
Calcasieu	CALC17-066	171981	Claim Eligibility APPROVED.
Calcasieu	CALC17-073	172389	Claim Eligibility APPROVED.
CALCASIEU	CALC19-003	190476	Claim Eligibility APPROVED. Payment of \$5,000.00 APPROVED for FUNERAL to Claimant
CALCASIEU	CALC19-007	190477	Claim Eligibility APPROVED. Payment of \$373.00 APPROVED for MEDICAL to Claimant Payment of \$419.69 APPROVED for MEDICAL MILEAGE to Claimant Payment of \$438.81 APPROVED for MEDICAL to Claimant Payment of \$44.22 APPROVED for MEDICAL to Claimant Payment of \$51.98 APPROVED for MEDICAL to Claimant Payment of \$59.99 APPROVED for MEDICAL to Claimant Payment of \$74.53 APPROVED for MEDICAL to Claimant Payment of \$2,716.00 APPROVED for MEDICAL to Claimant
CALCASIEU	CALC19-008	190495	Claim Eligibility APPROVED. Payment of \$5,000.00 APPROVED for FUNERAL to Claimant
CALCASIEU	CALC19-319	200654	Claim Eligibility APPROVED. Payment of \$1,245.39 APPROVED for MEDICAL to Lake Charles Memorial Hospital
CALCASIEU	CALC19-391	201063	Claim Eligibility APPROVED. Payment of \$833.69 APPROVED for MEDICAL to Lake Charles Memorial Hospital

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Parish	CVR#	Claim #	STANDARD Resolution

CALCASIEU	CALC19-392	201064	Claim Eligibility APPROVED. Payment of \$255.00 APPROVED for MEDICAL to Lake Charles Memorial Hospital
CALCASIEU	CALC19-418	200975	Claim Eligibility APPROVED. Payment of \$1,208.52 APPROVED for MEDICAL to Lake Charles Memorial Hospital
CALCASIEU	CALC19-466	201005	Claim Eligibility APPROVED. Payment of \$1,225.03 APPROVED for MEDICAL to Lake Charles Memorial Hospital
CALCASIEU	CALC19-467	201006	Claim Eligibility APPROVED. Payment of \$831.03 APPROVED for MEDICAL to Lake Charles Memorial Hospital
CONCORDIA	CONC19-001	191218	Claim Eligibility APPROVED. Payment of \$5,000.00 APPROVED for FUNERAL to Tennant Funeral Home, Inc.
De Soto	DESO17-002	170859	Claim Eligibility APPROVED.
E. FELICIANA	EFEL19-301	201008	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to East Baton Rouge Parish Coroner's Office
EAST BATON ROL	J EBAT14-081	140144	Claim Eligibility APPROVED. Payment of \$4,168.00 APPROVED for FUNERAL to Claimant
EAST BATON ROL	J EBAT16-077	161039	Claim Eligibility APPROVED. Payment of \$754.00 APPROVED for FUNERAL to Claimant
EAST BATON ROL	J EBAT16-103	161270	Claim Eligibility APPROVED.
EAST BATON ROL	J EBAT17-007	170265	Claim Eligibility APPROVED. Payment of \$3,719.50 APPROVED for FUNERAL to A. Hamilton Platinum Funeral Services
EAST BATON ROL	J EBAT17-010	170279	Claim Eligibility APPROVED.
EAST BATON ROL	J EBAT17-056	171102	Claim Eligibility APPROVED. Payment of \$5,000.00 APPROVED for FUNERAL to Claimant
EAST BATON ROL	J EBAT17-131	172492	Claim Eligibility APPROVED. Payment of \$4,500.00 APPROVED for FUNERAL to Claimant
EAST BATON ROL	J EBAT17-800	171520	Claim Eligibility APPROVED. Payment of \$1,011.15 APPROVED for MEDICAL to Our Lady of the Lake RegMedCent
EAST BATON ROL	J EBAT17-811	200992	Claim Eligibility APPROVED. Payment of \$2,031.99 APPROVED for MEDICAL to Our Lady of the Lake RegMedCent
EAST BATON ROL	J EBAT17-906	171663	Claim Eligibility APPROVED. Payment of \$510.00 APPROVED for MEDICAL to Our Lady of the Lake Regional Medical Center

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	STANDARD			
Parish C	VR#	Claim #	Resolution	
EAST BATON ROUE	BAT18-048	181244	Claim Eligibility APPROVED. Payment of \$6,550.53 APPROVED for WAGE to Claimant	
EAST BATON ROUE	BAT18-052	181709	Claim Eligibility APPROVED.	
EAST BATON ROUE	BAT18-064	181513	Claim Eligibility APPROVED. Payment of \$150.00 APPROVED for MENTAL HEALTH to Brandon P. Romano & Associates	
EAST BATON ROUE	BAT18-084	182031	Claim Eligibility APPROVED. Payment of \$205.29 APPROVED for AMBULANCE TRANSPORT (MEDICAL) to City of Baton Rouge EMS	
EAST BATON ROUE	BAT18-104	182498	Claim Eligibility APPROVED. Payment of \$2,245.00 APPROVED for MEDICAL to Claimant Payment of \$2,800.00 APPROVED for WAGE to Claimant	
EAST BATON ROUE	BAT18-372	181218	Claim Eligibility DENIED - Not a Compensable Expense. Payment of \$0.00 APPROVED for MEDICAL to Our Lady of the Lake RegMedCent	
EAST BATON ROUE	BAT19-003	190181	Claim Eligibility APPROVED. Payment of \$4,500.00 APPROVED for FUNERAL to Claimant	
EAST BATON ROUE	BAT19-012	190413	Claim Eligibility APPROVED. Payment of \$4,500.00 APPROVED for FUNERAL to A. Wesley's Funeral Home	
EAST BATON ROUE	BAT19-025	190516	Claim Eligibility APPROVED. Payment of \$5,000.00 APPROVED for FUNERAL to Claimant	
EAST BATON ROUE	BAT19-026	190508	Claim Eligibility APPROVED. Payment of \$4,500.00 APPROVED for FUNERAL to Claimant	
EAST BATON ROUE	BAT19-032	190528	Claim Eligibility APPROVED. Payment of \$4,500.00 APPROVED for FUNERAL to Claimant	
EAST BATON ROUE	BAT19-036	190593	Claim Eligibility APPROVED. Payment of \$5,000.00 APPROVED for FUNERAL to Claimant	
EAST BATON ROUE	BAT19-051	191289	Claim Eligibility APPROVED. Payment of \$4,060.70 APPROVED for FUNERAL to Claimant	
EAST BATON ROUE	BAT19-114	200468	Claim Eligibility APPROVED. Payment of \$4,500.00 APPROVED for FUNERAL to Claimant	
EAST BATON ROUE	BAT19-313	190274	Claim Eligibility APPROVED. Payment of \$2,795.41 APPROVED for MEDICAL to OLOL Regional Medical Center	
EAST BATON ROUE	BAT19-329	190404	Claim Eligibility APPROVED. Payment of \$1,924.45 APPROVED for MEDICAL to Our Lady of the Lake RegMedCent	

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			STANDARD
Parish	CVR#	Claim #	Resolution
EAST BATON RO	OU EBAT19-377	201065	Claim Eligibility APPROVED. Payment of \$756.00 APPROVED for MEDICAL to Our Lady of the Lake Regional Medical Center
EAST BATON RO	OU EBAT19-379	201067	Claim Eligibility APPROVED. Payment of \$753.00 APPROVED for MEDICAL to Our Lady of the Lake Regional Medical Center
EAST BATON RO	DU EBAT19-380	201068	Claim Eligibility APPROVED. Payment of \$691.00 APPROVED for MEDICAL to CARE Center
EAST BATON RO	OU EBAT19-535	201057	Claim Eligibility APPROVED. Payment of \$1,426.71 APPROVED for MEDICAL to Our Lady of the Lake Regional Medical Center
EAST BATON RO	DU EBAT19-571	200220	Claim UNABLE TO PROCESS - Closed/Unable to Process. Payment of \$0.00 APPROVED for MEDICAL to CARE Center
EAST BATON RO	OU EBAT19-579	200295	Claim Eligibility APPROVED. Payment of \$613.75 APPROVED for MEDICAL to CARE Center
EAST BATON RO	OU EBAT19-589	200917	Claim Eligibility APPROVED. Payment of \$691.00 APPROVED for MEDICAL to CARE Center
EAST BATON RO	OU EBAT19-590	200918	Claim Eligibility APPROVED. Payment of \$691.00 APPROVED for MEDICAL to CARE Center
EAST BATON RO	OU EBAT19-593	200921	Claim Eligibility APPROVED. Payment of \$691.00 APPROVED for MEDICAL to CARE Center
EAST BATON RO	OU EBAT19-709	200961	Claim Eligibility APPROVED. Payment of \$650.00 APPROVED for MEDICAL to East Baton Rouge Parish Coroner's Office
EAST BATON RO	OU EBAT19-713	200962	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to East Baton Rouge Parish Coroner's Office
EAST BATON RO	OU EBAT19-715	200964	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to East Baton Rouge Parish Coroner's Office
EAST BATON RO	OU EBAT19-716	201007	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to East Baton Rouge Parish Coroner's Office
EAST BATON RO	OU EBAT19-717	201009	Claim Eligibility APPROVED. Payment of \$650.00 APPROVED for MEDICAL to East Baton Rouge Parish Coroner's Office
EAST BATON RO	OU EBAT19-718	201010	Claim Eligibility APPROVED. Payment of \$650.00 APPROVED for MEDICAL to East Baton Rouge Parish Coroner's Office
EAST BATON RO	OU EBAT19-719	201011	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to East Baton Rouge Parish Coroner's Office

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THE STATE OF THE S			STANDARD
Parish	CVR #	Claim #	Resolution
EAST BATON R	OU EBAT19-720	201012	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to East Baton Rouge Parish Coroner's Office
EAST BATON R	OU EBAT19-721	201013	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to East Baton Rouge Parish Coroner's Office
EAST BATON R	OU EBAT19-722	201014	Claim Eligibility APPROVED. Payment of \$650.00 APPROVED for MEDICAL to East Baton Rouge Parish Coroner's Office
EAST BATON R	OU EBAT19-723	201015	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to East Baton Rouge Parish Coroner's Office
EAST BATON R	OU EBAT19-724	201017	Claim Eligibility APPROVED. Payment of \$650.00 APPROVED for MEDICAL to East Baton Rouge Parish Coroner's Office
EAST BATON RO	OU EBAT20-300	201016	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to East Baton Rouge Parish Coroner's Office
EAST BATON RO	OU EBAT20-301	201019	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to East Baton Rouge Parish Coroner's Office
EAST BATON RO	OU EBAT20-302	201020	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to East Baton Rouge Parish Coroner's Office
EAST BATON RO	OU EBAT20-303	201021	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to East Baton Rouge Parish Coroner's Office
EAST BATON RO	OU EBAT20-304	201032	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to East Baton Rouge Parish Coroner's Office
EAST BATON RO	OU EBAT20-305	201033	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to East Baton Rouge Parish Coroner's Office
EAST BATON RO	OU EBAT20-306	201139	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to East Baton Rouge Parish Coroner's Office
EAST BATON RO	OU EBAT20-307	201140	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to East Baton Rouge Parish Coroner's Office
EAST BATON RO	OU EBAT20-308	201141	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to East Baton Rouge Parish Coroner's Office
EAST BATON RO	OU EBAT20-309	201142	Claim Eligibility APPROVED. Payment of \$650.00 APPROVED for MEDICAL to East Baton Rouge Parish Coroner's Office
EAST BATON RO	OU EBAT20-310	201143	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to East Baton Rouge Parish Coroner's Office
EAST BATON RO	OU EBAT20-311	201144	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to East Baton Rouge Parish Coroner's Office

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Iberia	IBER17-002	170232	
IDella	IBEN 17-002	170232	Claim Eligibility APPROVED.
Iberia	IBER17-003	170271	Claim Eligibility APPROVED.
Iberia	IBER17-005	170542	Claim Eligibility APPROVED.
Iberia	IBER17-006	170382	Claim Eligibility APPROVED.
Iberia	IBER17-007	170619	Claim Eligibility APPROVED.
Iberia	IBER17-012	170950	Claim Eligibility APPROVED.
Iberia	IBER17-018	171752	Claim Eligibility APPROVED.
IBERIA	IBER19-002	190834	Claim UNABLE TO PROCESS - Closed/Unable to Process. Payment of \$0.00 APPROVED for FUNERAL to Claimant Payment of \$0.00 APPROVED for FUNERAL to Heritage Rowe Funeral Home
IBERIA	IBER19-326	201022	Claim Eligibility APPROVED. Payment of \$800.00 APPROVED for MEDICAL to Hearts of Hope -SANE
Iberville	IBEV15-002	150276	Claim Eligibility APPROVED. Payment of \$123.75 APPROVED for MEDICAL to Radiology Associates (BR) Payment of \$184.25 APPROVED for MEDICAL to Radiology Associates (BR) Payment of \$19.25 APPROVED for MEDICAL to Radiology Associates (BR) Payment of \$46.75 APPROVED for MEDICAL to Radiology Associates (BR)
IBERVILLE	IBEV19-002	190573	Claim Eligibility APPROVED. Payment of \$2,256.70 APPROVED for FUNERAL to Pugh's Mortuary LLC Payment of \$2,243.30 APPROVED for FUNERAL to Claimant
IBERVILLE	IBEV19-328	201073	Claim Eligibility APPROVED. Payment of \$691.00 APPROVED for MEDICAL to CARE Center
Jackson	JACK17-001	170895	Claim Eligibility APPROVED.
JACKSON	JACK19-300	201074	Claim Eligibility APPROVED. Payment of \$691.00 APPROVED for MEDICAL to CARE Center
Jefferson	JEFF16-002	160310	Claim Eligibility APPROVED. Payment of \$1,735.00 APPROVED for MEDICAL to UMCMC-New Orleans ATTN: Hospital Commercial Pay
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	The state of the s		STANDARD
Parish	CVR#	Claim #	Resolution
JEFFERSON	JEFF17-700	201138	Claim Eligibility APPROVED. Payment of \$300.00 APPROVED for AMBULANCE TRANSPORT (MEDICAL) to Acadian Ambulance Payment of \$516.58 APPROVED for MEDICAL to Acadian Ambulance
Jefferson	JEFF18-466	180877	Claim Eligibility APPROVED. Payment of \$214.30 APPROVED for MEDICAL to CARE Center
Jefferson	JEFF18-471	180885	Claim Eligibility APPROVED. Payment of \$497.06 APPROVED for MEDICAL to CARE Center
Jefferson	JEFF18-533	181327	Claim Eligibility DENIED - Not a Compensable Expense. Payment of \$0.00 APPROVED for MEDICAL to UMCMC-New Orleans ATTN: Hospital Commercial Pay
JEFFERSON	JEFF19-303	200999	Claim Eligibility APPROVED. Payment of \$2,244.61 APPROVED for MEDICAL to University Medical Center New Orleans Payment of \$210.00 APPROVED for MEDICAL to University Medical Center New Orleans
JEFFERSON	JEFF19-303	201245	Claim Eligibility APPROVED.
JEFFERSON	JEFF19-329	200693	Claim Eligibility APPROVED. Payment of \$3,463.03 APPROVED for MEDICAL to University Medical Center New Orleans
JEFFERSON	JEFF19-330	200694	Claim Eligibility APPROVED. Payment of \$543.17 APPROVED for MEDICAL to CARE Center
JEFFERSON	JEFF19-331	200695	Claim Eligibility APPROVED. Payment of \$607.00 APPROVED for MEDICAL to CARE Center
JEFFERSON	JEFF19-332	200696	Claim Eligibility APPROVED. Payment of \$691.00 APPROVED for MEDICAL to CARE Center
JEFFERSON	JEFF19-333	200697	Claim Eligibility APPROVED. Payment of \$586.71 APPROVED for MEDICAL to CARE Center
JEFFERSON	JEFF19-335	200698	Claim Eligibility APPROVED. Payment of \$575.12 APPROVED for MEDICAL to CARE Center
JEFFERSON	JEFF19-338	200701	Claim Eligibility APPROVED. Payment of \$300.00 APPROVED for MEDICAL to CARE Center
JEFFERSON	JEFF19-339	200704	Claim Eligibility APPROVED. Payment of \$691.00 APPROVED for MEDICAL to CARE Center
JEFFERSON	JEFF19-341	200711	Claim Eligibility APPROVED. Payment of \$325.67 APPROVED for MEDICAL to CARE Center
JEFFERSON	JEFF19-352	200721	Claim Eligibility APPROVED. Payment of \$330.00 APPROVED for MEDICAL to CARE Center

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Davish	CVD #	Claim #	STANDARD
Parish	CVR#	Claim #	Resolution
JEFFERSON	JEFF19-353	200722	Claim Eligibility APPROVED. Payment of \$575.12 APPROVED for MEDICAL to CARE Center
JEFFERSON	JEFF19-355	200724	Claim Eligibility APPROVED. Payment of \$691.00 APPROVED for MEDICAL to CARE Center
JEFFERSON	JEFF19-357	201076	Claim Eligibility APPROVED. Payment of \$547.30 APPROVED for MEDICAL to CARE Center
JEFFERSON	JEFF19-358	201078	Claim Eligibility APPROVED. Payment of \$575.12 APPROVED for MEDICAL to CARE Center
JEFFERSON	JEFF19-361	201081	Claim Eligibility APPROVED. Payment of \$411.13 APPROVED for MEDICAL to CARE Center
JEFFERSON	JEFF19-362	201082	Claim Eligibility APPROVED. Payment of \$691.00 APPROVED for MEDICAL to CARE Center
JEFFERSON	JEFF19-363	201083	Claim Eligibility APPROVED. Payment of \$691.00 APPROVED for MEDICAL to CARE Center
JEFFERSON	JEFF19-365	201085	Claim Eligibility APPROVED. Payment of \$300.00 APPROVED for MEDICAL to CARE Center
JEFFERSON	JEFF19-366	201087	Claim Eligibility APPROVED. Payment of \$691.00 APPROVED for MEDICAL to CARE Center
JEFFERSON	JEFF19-367	201088	Claim Eligibility APPROVED. Payment of \$691.00 APPROVED for MEDICAL to CARE Center
JEFFERSON	JEFF19-368	201090	Claim Eligibility APPROVED. Payment of \$330.00 APPROVED for MEDICAL to CARE Center
JEFFERSON	JEFF19-403	191272	Claim Eligibility APPROVED. Payment of \$1,507.10 APPROVED for MEDICAL to LCMS Service Area
JEFFERSON	JEFF19-676	200315	Claim Eligibility APPROVED. Payment of \$575.12 APPROVED for MEDICAL to CARE Center
JEFFERSON	JEFF19-677	200316	Claim Eligibility APPROVED. Payment of \$598.30 APPROVED for MEDICAL to CARE Center
JEFFERSON	JEFF19-678	200317	Claim Eligibility APPROVED. Payment of \$598.30 APPROVED for MEDICAL to CARE Center
JEFFERSON	JEFF19-684	200320	Claim Eligibility APPROVED. Payment of \$575.12 APPROVED for MEDICAL to CARE Center
JEFFERSON	JEFF19-685	200321	Claim Eligibility APPROVED. Payment of \$691.00 APPROVED for MEDICAL to CARE Center

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			STANDARD
Parish	CVR#	Claim #	Resolution
JEFFERSON	JEFF19-687	200282	Claim Eligibility APPROVED. Payment of \$691.00 APPROVED for MEDICAL to CARE Center Payment of \$80.00 APPROVED for MEDICAL to CARE Center
JEFFERSON	JEFF19-688	200322	Claim Eligibility APPROVED. Payment of \$300.00 APPROVED for MEDICAL to CARE Center
JEFFERSON	JEFF19-691	200323	Claim Eligibility APPROVED. Payment of \$691.00 APPROVED for MEDICAL to CARE Center
JEFFERSON	JEFF19-693	200324	Claim Eligibility APPROVED. Payment of \$465.82 APPROVED for MEDICAL to CARE Center
JEFFERSON	JEFF19-697	200300	Claim Eligibility APPROVED. Payment of \$401.16 APPROVED for MEDICAL to CARE Center
JEFFERSON	JEFF19-700	200302	Claim Eligibility APPROVED. Payment of \$575.12 APPROVED for MEDICAL to CARE Center
JEFFERSON	JEFF19-711	200725	Claim Eligibility APPROVED. Payment of \$598.30 APPROVED for MEDICAL to CARE Center
JEFFERSON DAVI	JEFD19-001	190472	Claim Eligibility APPROVED. Payment of \$2,850.00 APPROVED for FUNERAL to Bourque-Smith-Woodard Memorials Payment of \$2,150.00 APPROVED for FUNERAL to Claimant
JEFFERSON DAVI	JEFD19-002	190473	Claim Eligibility APPROVED. Payment of \$2,850.00 APPROVED for FUNERAL to Bourque-Smith-Woodard Memorials Payment of \$2,150.00 APPROVED for FUNERAL to Claimant
JEFFERSON DAVI	JEFD19-302	201023	Claim Eligibility APPROVED. Payment of \$1,225.03 APPROVED for MEDICAL to Lake Charles Memorial Hospital
LAFAYETTE	LAFA15-021	150934	Claim Eligibility APPROVED. Payment of \$56.10 APPROVED for MEDICAL to Wayne T. Lindemann MD Payment of \$27.50 APPROVED for MEDICAL to Advanced Medical Supplies
Lafayette	LAFA18-016	182071	Claim Eligibility APPROVED. Payment of \$549.50 APPROVED for MEDICAL to Claimant
LAFAYETTE	LAFA18-025	200303	Claim Eligibility APPROVED. Payment of \$568.70 APPROVED for MEDICAL to Lafayette General Medical Center Payment of \$13.75 APPROVED for MEDICAL to Green Door Urgent Care
LAFAYETTE	LAFA19-429	200727	Claim UNABLE TO PROCESS - Closed/Unable to Process. Payment of \$0.00 APPROVED for MEDICAL to Our Lady of Lourdes Regional Medical Center

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Parish	CVR#	Claim #	Resolution
LAFAYETTE	LAFA19-430	200728	Claim UNABLE TO PROCESS - Closed/Unable to Process. Payment of \$0.00 APPROVED for MEDICAL to Our Lady of Lourdes Regional Medical Center
LAFAYETTE	LAFA19-431	200729	Claim Eligibility APPROVED. Payment of \$691.00 APPROVED for MEDICAL to CARE Center
LAFAYETTE	LAFA19-440	201024	Claim Eligibility APPROVED. Payment of \$800.00 APPROVED for MEDICAL to Hearts of Hope -SANE
LAFAYETTE	LAFA19-441	201025	Claim Eligibility APPROVED. Payment of \$800.00 APPROVED for MEDICAL to Hearts of Hope -SANE
LAFAYETTE	LAFA19-442	201026	Claim Eligibility APPROVED. Payment of \$800.00 APPROVED for MEDICAL to Hearts of Hope -SANE
Lafourche	LAFO17-001	170639	Claim Eligibility APPROVED.
Lafourche	LAFO17-014	172014	Claim Eligibility APPROVED.
Lafourche	LAFO17-015	172015	Claim Eligibility APPROVED.
LAFOURCHE	LAFO19-405	200737	Claim Eligibility APPROVED. Payment of \$586.71 APPROVED for MEDICAL to CARE Center
LAFOURCHE	LAFO19-406	200738	Claim Eligibility APPROVED. Payment of \$843.05 APPROVED for MEDICAL to CARE Center
LAFOURCHE	LAFO19-507	200326	Claim Eligibility APPROVED. Payment of \$691.00 APPROVED for MEDICAL to CARE Center
Livingston	LIVI17-732	171954	Claim Eligibility APPROVED. Payment of \$1,000.00 APPROVED for MEDICAL to Our Lady of the Lake RegMedCent
Livingston	LIVI18-367	181671	Claim Eligibility APPROVED. Payment of \$1,500.11 APPROVED for MEDICAL to Our Lady of the Lake Livingston
LIVINGSTON	LIVI19-008	190490	Claim Eligibility APPROVED. Payment of \$917.98 APPROVED for FUNERAL to Church Funeral Services LLC (walker)
LIVINGSTON	LIVI19-303	200741	Claim Eligibility APPROVED. Payment of \$691.00 APPROVED for MEDICAL to CARE Center
LIVINGSTON	LIVI19-304	200868	Claim Eligibility APPROVED. Payment of \$691.00 APPROVED for MEDICAL to CARE Center
LIVINGSTON	LIVI19-533	200327	Claim Eligibility APPROVED. Payment of \$797.06 APPROVED for MEDICAL to CARE Center

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Parish	CVR#	Claim #	Resolution
LIVINGSTON	LIVI19-534	200328	Claim Eligibility APPROVED. Payment of \$851.00 APPROVED for MEDICAL to CARE Center
LIVINGSTON	LIVI19-535	200329	Claim Eligibility APPROVED. Payment of \$575.12 APPROVED for MEDICAL to CARE Center
Madison	MADI17-004	172255	Claim Eligibility APPROVED.
MADISON	MADI19-453	200261	Claim Eligibility DENIED - Not a Compensable Expense. Payment of \$0.00 APPROVED for MEDICAL to Ochsner LSU Health Shreveport
MADISON	MADI19-454	200259	Claim Eligibility DENIED - Not a Compensable Expense.
Natchitoches	NATC18-002	180483	Claim Eligibility APPROVED. Payment of \$1,000.00 APPROVED for MEDICAL to Dr. Larry R. Burke
			Payment of \$220.26 APPROVED for MEDICAL to Natchitoches Regional Medical Center
			Payment of \$261.30 APPROVED for AMBULANCE TRANSPORT (MEDICAL) to Natchitoches Regional Medical Center
NATCHITOCHES	NATC19-001	190483	Claim Eligibility APPROVED. Payment of \$3,750.00 APPROVED for FUNERAL to Claimant
NATCHITOCHES	NATC19-420	200938	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Forensic Nurse Examiners
ORLEANS	ORLE13-157	200982	Claim Eligibility APPROVED. Payment of \$25,000.00 APPROVED for WAGE to Claimant
Orleans	ORLE15-111	150136	Claim Eligibility APPROVED. Payment of \$475.86 APPROVED for MEDICAL to University Medical Center Mgt Corp Payment of \$66.00 APPROVED for MEDICAL to LSU Healthcare Network - Dallas
ORLEANS	ORLE16-010	160159	Claim Eligibility APPROVED. Payment of \$8,362.50 APPROVED for WAGE to Claimant
ORLEANS	ORLE16-041	200976	Claim Eligibility APPROVED. Payment of \$163.55 APPROVED for MEDICAL to City of New Orleans EMS Payment of \$300.00 APPROVED for AMBULANCE TRANSPORT (MEDICAL) to City of New Orleans EMS Payment of \$660.00 APPROVED for MEDICAL to University Medical Center Mgt Corp
Orleans	ORLE16-101	160612	Claim Eligibility APPROVED. Payment of \$5,000.00 APPROVED for FUNERAL to Claimant
Orleans	ORLE17-037	170785	Claim Eligibility APPROVED. Payment of \$578.15 APPROVED for FUNERAL to Professional Funeral Services Inc.

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Orleans	ORLE17-042	171373	Claim Eligibility APPROVED.
Orleans	ORLE17-103	170898	Claim Eligibility APPROVED.
Orleans	ORLE17-108	170961	Claim Eligibility APPROVED. Payment of \$176.77 APPROVED for MEDICAL to Claimant
ORLEANS	ORLE17-120	200980	Claim Eligibility APPROVED. Payment of \$96.93 APPROVED for MEDICAL to LSU ED Billing
ORLEANS	ORLE17-711	200935	Claim Eligibility APPROVED. Payment of \$227.78 APPROVED for MEDICAL to University Medical Center
ORLEANS	ORLE18-006	180086	Claim Eligibility APPROVED.
Orleans	ORLE18-010	180144	Claim Eligibility APPROVED. Payment of \$3,400.00 APPROVED for FUNERAL to Claimant
Orleans	ORLE18-019	180781	Claim Eligibility APPROVED. Payment of \$385.00 APPROVED for CRIME SCENE CLEANUP to Hometown Construction
Orleans	ORLE18-026	181056	<no decision=""> Payment of \$0.00 APPROVED for FUNERAL to Heritage Funeral Directors, Inc.</no>
Orleans	ORLE18-081	182252	Claim Eligibility APPROVED.
Orleans	ORLE18-091	182338	Claim Eligibility APPROVED. Payment of \$4,500.00 APPROVED for FUNERAL to Claimant
ORLEANS	ORLE18-110	200308	Claim Eligibility APPROVED.
ORLEANS	ORLE18-140	190318	Claim Eligibility DENIED - Not a Compensable Expense. Payment of \$0.00 APPROVED for MEDICAL to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE18-143	190330	Claim Eligibility APPROVED. Payment of \$1,000.00 APPROVED for MEDICAL to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE18-145	190333	Claim Eligibility APPROVED. Payment of \$1,818.12 APPROVED for MEDICAL to University Medical Center New Orleans
ORLEANS	ORLE18-149	190337	Claim Eligibility APPROVED. Payment of \$2,359.32 APPROVED for MEDICAL to UMCMC-New Orleans ATTN: Hospital Commercial Pay

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ORLEANS	ORLE18-151	190340	Claim Eligibility APPROVED. Payment of \$1,679.80 APPROVED for MEDICAL to University Medical Center New Orleans
ORLEANS	ORLE18-155	190364	Claim Eligibility APPROVED.
			Payment of \$213.76 APPROVED for MEDICAL to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE18-156	190365	Claim Eligibility APPROVED.
			Payment of \$210.00 APPROVED for MEDICAL to UMCMC-New Orleans ATTN: Hospital Commercial Pay Payment of \$1,504.21 APPROVED for MEDICAL to University Medical Center New Orleans
ORLEANS	ORLE18-160	190369	
ORLEANS	ORLE 10-100	190309	Claim Eligibility APPROVED. Payment of \$2,192.26 APPROVED for MEDICAL to University Medical Center New Orleans
ODLEANC	ODI E40 464	400270	
ORLEANS	ORLE18-161	190370	Claim Eligibility APPROVED. Payment of \$210.00 APPROVED for MEDICAL to UMCMC-New Orleans ATTN: Hospital
			Commercial Pay
			Payment of \$4,471.97 APPROVED for MEDICAL to UMCMC-New Orleans ATTN: Hospital Commercial Pay
Orleans	ORLE18-281	190101	Claim Eligibility APPROVED.
			Payment of \$668.11 APPROVED for MEDICAL to UMCMC-New Orleans ATTN: Hospital Commercial Pay
Orleans	ORLE18-296	190146	Claim Eligibility APPROVED.
			Payment of \$2,332.78 APPROVED for MEDICAL to UMCMC-New Orleans ATTN: Hospital Commercial Pay
Orleans	ORLE18-307	180019	Claim Eligibility APPROVED.
			Payment of \$335.97 APPROVED for MEDICAL to UMCMC-New Orleans ATTN: Hospital Commercial Pay
Orleans	ORLE18-348	180290	Claim UNABLE TO PROCESS - Closed/Unable to Process.
			Payment of \$0.00 APPROVED for MEDICAL to CARE Center
ORLEANS	ORLE18-348	201034	Claim UNABLE TO PROCESS - Closed/Unable to Process.
			Payment of \$0.00 APPROVED for MEDICAL to University Medical Center New Orleans
Orleans	ORLE18-438	180728	Claim Eligibility APPROVED. Payment of \$367.76 APPROVED for MEDICAL to CARE Center
Orleans	ORLE18-445	180725	Claim Eligibility APPROVED.
Officialis	OKEE TO THO	100720	Payment of \$111.13 APPROVED for MEDICAL to CARE Center
Orleans	ORLE18-450	180768	Claim Eligibility APPROVED. Payment of \$191.12 APPROVED for MEDICAL to CARE Center
Orleans	ODI E40 500	101050	
Orleans	ORLE18-582	181350	Claim Eligibility APPROVED. Payment of \$366.85 APPROVED for MEDICAL to University Medical Center New Orleans
ORLEANS	ORLE18-648	200363	Claim UNABLE TO PROCESS - Closed/Unable to Process. Payment of \$0.00 APPROVED for MEDICAL to CARE Center

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ORLEANS	ORLE18-697	200767	Claim Eligibility APPROVED. Payment of \$380.16 APPROVED for MEDICAL to UMCMC-New Orleans ATTN: Hospital Commercial Pay
Orleans	ORLE18-721	181450	Claim Eligibility APPROVED. Payment of \$346.00 APPROVED for MEDICAL to University Medical Center Mgt Corp Payment of \$715.00 APPROVED for MEDICAL to University Medical Center Mgt Corp Payment of \$308.00 APPROVED for MEDICAL to University Medical Center Mgt Corp
Orleans	ORLE18-725	181438	Claim Eligibility APPROVED. Payment of \$1,126.40 APPROVED for MEDICAL to University Medical Center New Orleans
Orleans	ORLE18-735	181465	Claim Eligibility DENIED - Not a Compensable Expense. Payment of \$0.00 APPROVED for MEDICAL to UMCMC-New Orleans ATTN: Hospital Commercial Pay
Orleans	ORLE18-775	181681	Claim Eligibility APPROVED. Payment of \$1,000.00 APPROVED for MEDICAL to UMCMC-New Orleans ATTN: Hospital Commercial Pay
Orleans	ORLE18-777	181698	Claim Eligibility APPROVED. Payment of \$1,000.00 APPROVED for MEDICAL to UMCMC-New Orleans ATTN: Hospital Commercial Pay
Orleans	ORLE18-781	181686	Claim Eligibility APPROVED. Payment of \$0.00 APPROVED for MEDICAL to University Medical Center New Orleans Payment of \$978.38 APPROVED for MEDICAL to UMCMC-New Orleans ATTN: Hospital Commercial Pay
Orleans	ORLE18-801	181775	Claim Eligibility APPROVED. Payment of \$0.00 APPROVED for MEDICAL to CARE Center
Orleans	ORLE18-815	181931	Claim Eligibility APPROVED. Payment of \$3,592.13 APPROVED for MEDICAL to UMCMC-New Orleans ATTN: Hospital Commercial Pay Payment of \$260.70 APPROVED for MEDICAL to UMCMC-New Orleans ATTN: Hospital Commercial Pay Payment of \$0.00 APPROVED for MEDICAL to UMCMC-New Orleans ATTN: Hospital Commercial Pay
Orleans	ORLE18-816	181928	Claim Eligibility APPROVED.
Orleans	ORLE18-822	181977	Claim Eligibility APPROVED. Payment of \$115.50 APPROVED for MEDICAL to UMCMC-New Orleans ATTN: Hospital Commercial Pay Payment of \$1,910.52 APPROVED for MEDICAL to UMCMC-New Orleans ATTN: Hospital Commercial Pay
Orleans	ORLE18-823	181982	Claim Eligibility APPROVED. Payment of \$389.40 APPROVED for MEDICAL to UMCMC-New Orleans ATTN: Hospital Commercial Pay Payment of \$1,749.91 APPROVED for MEDICAL to UMCMC-New Orleans ATTN: Hospital Commercial Pay

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Parish	CVR#	Claim #	Resolution	
Orleans	ORLE18-830	181972	Claim Eligibility APPROVED. Payment of \$1,813.17 APPROVED for MEDICAL to UMCMC-New Orleans ATTN: Hospital Commercial Pay	
			Payment of \$115.50 APPROVED for MEDICAL to UMCMC-New Orleans ATTN: Hospital Commercial Pay	
Orleans	ORLE18-831	181964	Claim Eligibility APPROVED.	
			Payment of \$1,966.62 APPROVED for MEDICAL to UMCMC-New Orleans ATTN: Hospital Commercial Pay	
Orleans	ORLE18-836	181968	Claim Eligibility APPROVED.	
			Payment of \$115.50 APPROVED for MEDICAL to UMCMC-New Orleans ATTN: Hospital Commercial Pay	
Orleans	ORLE18-843	181998	Claim Eligibility APPROVED.	
			Payment of \$222.22 APPROVED for MEDICAL to UMCMC-New Orleans ATTN: Hospital Commercial Pay	
Orleans	ORLE18-907	182224	Claim Eligibility APPROVED.	
			Payment of \$1,626.58 APPROVED for MEDICAL to University Medical Center New Orleans	
			Payment of \$469.15 APPROVED for MEDICAL to University Medical Center New Orleans	
Orleans	ORLE18-909	182250	Claim Eligibility APPROVED.	
			Payment of \$50.00 APPROVED for MEDICAL to UMCMC-New Orleans ATTN: Hospital Commercial Pay	
ORLEANS	ORLE18-995	201071	Claim Eligibility APPROVED. Payment of \$990.55 APPROVED for MEDICAL to University Medical Center New Orleans	
Orleans	ORLE18-999	182430	Claim Eligibility APPROVED. Payment of \$825.00 APPROVED for MEDICAL to University Medical Center New Orleans	
Orleans	ORLE19-009	190162	Claim Eligibility APPROVED. Payment of \$3,549.00 APPROVED for FUNERAL to Little John's Funeral Home	
ORLEANS	ORLE19-015	190430	Claim Eligibility APPROVED. Payment of \$2,329.50 APPROVED for FUNERAL to Claimant	
ORLEANS	ORLE19-016	200859	Claim Eligibility APPROVED. Payment of \$5,000.00 APPROVED for FUNERAL to Claimant	
ORLEANS	ORLE19-020	190378	Claim Eligibility APPROVED. Payment of \$1,209.00 APPROVED for FUNERAL to Claimant	
ORLEANS	ORLE19-023	190431	Claim Eligibility APPROVED. Payment of \$5,000.00 APPROVED for FUNERAL to Claimant	
ORLEANS	ORLE19-044	190917	Claim Eligibility APPROVED. Payment of \$4,084.00 APPROVED for FUNERAL to Claimant	
ORLEANS	ORLE19-053	191000	Claim Eligibility APPROVED. Payment of \$4,500.00 APPROVED for WAGE to Claimant	

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			STANDARD
Parish	CVR#	Claim #	Resolution
ORLEANS	ORLE19-064	191044	Claim Eligibility APPROVED. Payment of \$5,000.00 APPROVED for FUNERAL to Claimant
ORLEANS	ORLE19-117	191783	Claim Eligibility APPROVED.
ORLEANS	ORLE19-306	190351	Claim Eligibility APPROVED. Payment of \$1,559.21 APPROVED for MEDICAL to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE19-310	190356	Claim Eligibility APPROVED. Payment of \$555.00 APPROVED for MEDICAL to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE19-312	190342	Claim Eligibility APPROVED. Payment of \$115.50 APPROVED for MEDICAL to UMCMC-New Orleans ATTN: Hospital Commercial Pay Payment of \$2,881.12 APPROVED for MEDICAL to University Medical Center
ORLEANS	ORLE19-316	200554	Claim UNABLE TO PROCESS - Closed/Unable to Process. Payment of \$0.00 APPROVED for MEDICAL to CARE Center
ORLEANS	ORLE19-317	200647	Claim Eligibility APPROVED. Payment of \$2,458.23 APPROVED for MEDICAL to Tulane Lakeside Hospital
ORLEANS	ORLE19-318	200556	Claim Eligibility APPROVED. Payment of \$1,036.30 APPROVED for MEDICAL to University Medical Center New Orleans
ORLEANS	ORLE19-319	200557	Claim Eligibility APPROVED. Payment of \$1,643.22 APPROVED for MEDICAL to University Medical Center New Orleans
ORLEANS	ORLE19-352	200362	Claim Eligibility APPROVED. Payment of \$873.72 APPROVED for MEDICAL to CARE Center
ORLEANS	ORLE19-365	200361	Claim Eligibility APPROVED. Payment of \$575.12 APPROVED for MEDICAL to CARE Center
ORLEANS	ORLE19-373	200576	Claim Eligibility APPROVED. Payment of \$6,228.57 APPROVED for MEDICAL to University Medical Center New Orleans
ORLEANS	ORLE19-387	200588	Claim Eligibility APPROVED. Payment of \$1,824.60 APPROVED for MEDICAL to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE19-389	200590	Claim Eligibility APPROVED. Payment of \$3,231.48 APPROVED for MEDICAL to University Medical Center New Orleans
ORLEANS	ORLE19-391	200591	Claim Eligibility APPROVED. Payment of \$3,550.21 APPROVED for MEDICAL to University Medical Center Mgt Corp
ORLEANS	ORLE19-392	200638	Claim Eligibility APPROVED. Payment of \$843.05 APPROVED for MEDICAL to CARE Center

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			STANDARD
Parish	CVR#	Claim #	Resolution
ORLEANS	ORLE19-393	200592	Claim Eligibility APPROVED. Payment of \$2,218.25 APPROVED for MEDICAL to University Medical Center New Orleans
ORLEANS	ORLE19-394	200593	Claim Eligibility APPROVED. Payment of \$0.00 APPROVED for MEDICAL to University Medical Center New Orleans
ORLEANS	ORLE19-394	201069	Claim Eligibility APPROVED. Payment of \$1,513.01 APPROVED for MEDICAL to University Medical Center New Orleans
ORLEANS	ORLE19-400	200639	Claim Eligibility APPROVED. Payment of \$691.00 APPROVED for MEDICAL to CARE Center
ORLEANS	ORLE19-401	200640	Claim Eligibility APPROVED. Payment of \$575.12 APPROVED for MEDICAL to CARE Center
ORLEANS	ORLE19-404	200641	Claim Eligibility APPROVED. Payment of \$598.30 APPROVED for MEDICAL to CARE Center
ORLEANS	ORLE19-416	200642	Claim Eligibility APPROVED. Payment of \$541.00 APPROVED for MEDICAL to CARE Center
ORLEANS	ORLE19-443	200643	Claim Eligibility APPROVED. Payment of \$411.13 APPROVED for MEDICAL to CARE Center
ORLEANS	ORLE19-445	200644	Claim Eligibility APPROVED. Payment of \$691.00 APPROVED for MEDICAL to CARE Center
ORLEANS	ORLE19-447	200646	Claim Eligibility APPROVED. Payment of \$598.30 APPROVED for MEDICAL to CARE Center
ORLEANS	ORLE19-677	200094	Claim Eligibility APPROVED. Payment of \$1,907.50 APPROVED for MEDICAL to CARE Center
ORLEANS	ORLE19-689	200832	Claim Eligibility APPROVED. Payment of \$691.00 APPROVED for MEDICAL to CARE Center
ORLEANS	ORLE19-807	200923	Claim Eligibility APPROVED. Payment of \$586.71 APPROVED for MEDICAL to CARE Center
ORLEANS	ORLE19-808	200924	Claim Eligibility APPROVED. Payment of \$344.31 APPROVED for MEDICAL to CARE Center
ORLEANS	ORLE19-809	200925	Claim Eligibility APPROVED. Payment of \$691.00 APPROVED for MEDICAL to CARE Center
ORLEANS	ORLE19-810	200926	Claim Eligibility APPROVED. Payment of \$691.00 APPROVED for MEDICAL to CARE Center
ORLEANS	ORLE19-815	200330	Claim Eligibility APPROVED. Payment of \$330.00 APPROVED for MEDICAL to CARE Center

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Parish	CVR#	Claim #	Resolution
ORLEANS	ORLE19-817	200274	Claim Eligibility APPROVED. Payment of \$1,361.31 APPROVED for MEDICAL to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE19-818	200332	Claim Eligibility APPROVED. Payment of \$598.30 APPROVED for MEDICAL to CARE Center
ORLEANS	ORLE19-819	200927	Claim Eligibility APPROVED. Payment of \$691.00 APPROVED for MEDICAL to CARE Center
ORLEANS	ORLE19-820	200333	Claim Eligibility APPROVED. Payment of \$586.71 APPROVED for MEDICAL to CARE Center
ORLEANS	ORLE19-821	200334	Claim Eligibility APPROVED. Payment of \$479.94 APPROVED for MEDICAL to CARE Center
ORLEANS	ORLE19-822	200335	Claim Eligibility APPROVED. Payment of \$575.12 APPROVED for MEDICAL to CARE Center
ORLEANS	ORLE19-823	200336	Claim Eligibility APPROVED. Payment of \$586.71 APPROVED for MEDICAL to CARE Center
ORLEANS	ORLE19-824	200337	Claim Eligibility APPROVED. Payment of \$797.06 APPROVED for MEDICAL to CARE Center
ORLEANS	ORLE19-825	200338	Claim Eligibility APPROVED. Payment of \$691.00 APPROVED for MEDICAL to CARE Center
ORLEANS	ORLE19-826	200339	Claim Eligibility APPROVED. Payment of \$598.30 APPROVED for MEDICAL to CARE Center
ORLEANS	ORLE19-827	200340	Claim Eligibility APPROVED. Payment of \$691.00 APPROVED for MEDICAL to CARE Center
ORLEANS	ORLE19-828	200342	Claim Eligibility APPROVED. Payment of \$320.00 APPROVED for MEDICAL to CARE Center
ORLEANS	ORLE19-829	200343	Claim Eligibility APPROVED. Payment of \$691.00 APPROVED for MEDICAL to CARE Center
ORLEANS	ORLE19-830	200344	Claim Eligibility APPROVED. Payment of \$480.86 APPROVED for MEDICAL to CARE Center
ORLEANS	ORLE19-832	200345	Claim Eligibility APPROVED. Payment of \$691.00 APPROVED for MEDICAL to CARE Center
ORLEANS	ORLE19-833	200346	Claim Eligibility APPROVED. Payment of \$754.32 APPROVED for MEDICAL to CARE Center
ORLEANS	ORLE19-834	200271	Claim Eligibility DENIED - Not a Compensable Expense. Payment of \$0.00 APPROVED for MEDICAL to University Medical Center New Orleans

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			STANDARD
Parish	CVR#	Claim #	Resolution
ORLEANS	ORLE19-835	200270	Claim Eligibility APPROVED. Payment of \$2,737.58 APPROVED for MEDICAL to University Medical Center New Orleans
ORLEANS	ORLE19-850	200833	Claim Eligibility APPROVED. Payment of \$1,662.61 APPROVED for MEDICAL to University Medical Center New Orleans
ORLEANS	ORLE19-851	200834	Claim Eligibility APPROVED. Payment of \$541.00 APPROVED for MEDICAL to CARE Center
ORLEANS	ORLE19-853	200836	Claim Eligibility APPROVED. Payment of \$598.30 APPROVED for MEDICAL to CARE Center
ORLEANS	ORLE19-854	200837	Claim Eligibility APPROVED. Payment of \$691.00 APPROVED for MEDICAL to CARE Center
ORLEANS	ORLE19-855	200838	Claim Eligibility APPROVED. Payment of \$598.30 APPROVED for MEDICAL to CARE Center
ORLEANS	ORLE19-856	200839	Claim Eligibility APPROVED. Payment of \$691.00 APPROVED for MEDICAL to CARE Center
ORLEANS	ORLE19-863	200846	Claim Eligibility APPROVED. Payment of \$691.00 APPROVED for MEDICAL to CARE Center
ORLEANS	ORLE19-865	200929	Claim Eligibility APPROVED. Payment of \$575.12 APPROVED for MEDICAL to CARE Center
ORLEANS	ORLE19-866	200930	Claim Eligibility APPROVED. Payment of \$727.00 APPROVED for MEDICAL to CARE Center
ORLEANS	ORLE19-867	200952	Claim Eligibility APPROVED. Payment of \$691.00 APPROVED for MEDICAL to CARE Center
ORLEANS	ORLE19-868	200953	Claim Eligibility APPROVED. Payment of \$586.71 APPROVED for MEDICAL to CARE Center
ORLEANS	ORLE19-869	200954	Claim Eligibility APPROVED. Payment of \$575.12 APPROVED for MEDICAL to CARE Center
ORLEANS	ORLE19-870	200955	Claim Eligibility APPROVED. Payment of \$691.00 APPROVED for MEDICAL to CARE Center
ORLEANS	ORLE19-871	200956	Claim Eligibility APPROVED. Payment of \$586.71 APPROVED for MEDICAL to CARE Center
ORLEANS	ORLE19-872	200958	Claim Eligibility APPROVED. Payment of \$691.00 APPROVED for MEDICAL to CARE Center
ORLEANS	ORLE19-874	200960	Claim Eligibility APPROVED. Payment of \$325.00 APPROVED for MEDICAL to CARE Center

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			STANDARD
Parish	CVR#	Claim #	Resolution
ORLEANS	ORLE19-881	201000	Claim Eligibility APPROVED. Payment of \$854.50 APPROVED for MEDICAL to CARE Center
OUACHITA	OUAC19-325	201027	Claim Eligibility APPROVED. Payment of \$400.00 APPROVED for MEDICAL to Ouachita Parish Coroner's Office
OUACHITA	OUAC19-408	200880	Claim Eligibility DENIED - Not a Compensable Expense.
OUACHITA	OUAC19-844	200260	Claim Eligibility DENIED - Not a Compensable Expense.
OUACHITA	OUAC19-876	200939	Claim Eligibility APPROVED. Payment of \$400.00 APPROVED for MEDICAL to Ouachita Parish Coroner's Office
OUACHITA	OUAC20-301	200993	Claim Eligibility APPROVED. Payment of \$400.00 APPROVED for MEDICAL to Ouachita Parish Coroner's Office
OUACHITA	OUAC20-302	200994	Claim Eligibility APPROVED. Payment of \$400.00 APPROVED for MEDICAL to Ouachita Parish Coroner's Office
OUACHITA	OUAC20-303	201134	Claim Eligibility APPROVED. Payment of \$400.00 APPROVED for MEDICAL to Ouachita Parish Coroner's Office
OUACHITA	OUAC20-304	201135	Claim Eligibility APPROVED. Payment of \$400.00 APPROVED for MEDICAL to Ouachita Parish Coroner's Office
PLAQUEMINES	PLAQ19-606	200750	Claim UNABLE TO PROCESS - Closed/Unable to Process. Payment of \$0.00 APPROVED for MEDICAL to CARE Center
PLAQUEMINES	PLAQ19-607	200751	Claim Eligibility APPROVED. Payment of \$691.00 APPROVED for MEDICAL to CARE Center
POINT COUPEE	POIN20-300	201145	Claim Eligibility APPROVED. Payment of \$650.00 APPROVED for MEDICAL to East Baton Rouge Parish Coroner's Office
Pointe Coupee	POIN17-001	170259	Claim Eligibility APPROVED.
RAPIDES	RAPI16-708	160091	Claim Eligibility APPROVED. Payment of \$905.00 APPROVED for MENTAL HEALTH to Shirley H. Ryland
RAPIDES	RAPI17-732	200959	Claim Eligibility APPROVED. Payment of \$2,474.19 APPROVED for MEDICAL to Christus St. Frances Cabrini Hospital
RICHLAND	RICH19-005	200941	Claim Eligibility APPROVED. Payment of \$400.00 APPROVED for MEDICAL to Ouachita Parish Coroner's Office
ST. BERNARD	BERN19-321	200763	Claim Eligibility APPROVED. Payment of \$330.00 APPROVED for MEDICAL to CARE Center

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			STANDARD
Parish	CVR#	Claim #	Resolution
ST. BERNARD	BERN19-324	200768	Claim Eligibility APPROVED. Payment of \$598.30 APPROVED for MEDICAL to CARE Center
ST. BERNARD	BERN19-326	200967	Claim Eligibility APPROVED. Payment of \$691.00 APPROVED for MEDICAL to CARE Center
St. Charles	CHAR18-026	190002	Claim Eligibility APPROVED. Payment of \$450.00 APPROVED for MENTAL HEALTH to YNG Counseling/Consulting
St. Charles	CHAR18-301	180344	Claim Eligibility APPROVED. Payment of \$150.00 APPROVED for MENTAL HEALTH to Allyson Bodin O'Connor, LCSW, ACSW
St. Charles	CHAR18-302	180370	Claim Eligibility APPROVED. Payment of \$750.00 APPROVED for MENTAL HEALTH to Allyson Bodin O'Connor, LCSW, ACSW
St. Charles	CHAR18-309	181666	Claim Eligibility APPROVED. Payment of \$1,093.75 APPROVED for MEDICAL to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ST. CHARLES	CHAR18-312	200766	Claim Eligibility APPROVED. Payment of \$1,622.88 APPROVED for MEDICAL to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ST. CHARLES	CHAR18-601	190487	Claim Eligibility APPROVED.
ST. CHARLES	CHAR19-013	190909	Claim Eligibility APPROVED. Payment of \$600.00 APPROVED for MENTAL HEALTH to YNG Counseling/Consulting
ST. CHARLES	CHAR19-356	200871	Claim Eligibility APPROVED. Payment of \$340.00 APPROVED for MEDICAL to CARE Center
ST. CHARLES	CHAR19-603	200978	Claim Eligibility APPROVED. Payment of \$465.82 APPROVED for MEDICAL to CARE Center
ST. CHARLES	CHAR19-604	200979	Claim Eligibility APPROVED. Payment of \$691.00 APPROVED for MEDICAL to CARE Center
ST. CHARLES	CHAR19-605	200981	Claim Eligibility APPROVED. Payment of \$480.86 APPROVED for MEDICAL to CARE Center
ST. CHARLES	CHAR19-606	200986	Claim Eligibility APPROVED.
St. Helena	HELE17-001	171879	Claim UNABLE TO PROCESS - Closed/Unable to Process.
St. Helena	HELE17-002	171966	Claim Eligibility APPROVED. Payment of \$938.98 APPROVED for MEDICAL to Our Lady of the Lake RegMedCent

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			STANDARD
Parish	CVR #	Claim #	Resolution
St. James	JAME17-001	170970	Claim Eligibility APPROVED.
St. James	JAME19-002	190178	Claim Eligibility APPROVED. Payment of \$2,468.00 APPROVED for FUNERAL to Brazier-Watson Funeral Home Payment of \$2,032.00 APPROVED for FUNERAL to Claimant
ST. JAMES	JAME19-301	200772	Claim Eligibility APPROVED. Payment of \$691.00 APPROVED for MEDICAL to CARE Center
ST. JAMES	JAME19-307	200773	Claim Eligibility APPROVED. Payment of \$598.30 APPROVED for MEDICAL to CARE Center
ST. JOHN THE BA	JOHN19-607	200774	Claim Eligibility APPROVED. Payment of \$1,634.00 APPROVED for MEDICAL to University Medical Center New Orleans
ST. JOHN THE BA	JOHN19-705	200325	Claim Eligibility APPROVED. Payment of \$598.30 APPROVED for MEDICAL to CARE Center
ST. JOHN THE BA	JOHN19-709	200776	Claim Eligibility APPROVED. Payment of \$691.00 APPROVED for MEDICAL to CARE Center
St. Landry	LAND18-002	182039	Claim Eligibility APPROVED. Payment of \$93.75 APPROVED for MEDICAL to Healthcare Associates- SMART NEW YOU Payment of \$0.00 APPROVED for MEDICAL to Opelousas Emergency Group LLC Payment of \$143.06 APPROVED for MEDICAL to Healthcare Associates- SMART NEW YOU Payment of \$17.23 APPROVED for MEDICAL to Nightrays Payment of \$302.50 APPROVED for MEDICAL to Opelousas General Hospital Payment of \$790.01 APPROVED for MEDICAL to Claimant
St. Martin	MART15-004	150056	Claim Eligibility APPROVED. Payment of \$55.00 APPROVED for MEDICAL to LSUHN Billing, LLC
St. Martin	MART16-005	160034	Claim Eligibility APPROVED. Payment of \$4,500.00 APPROVED for FUNERAL to Claimant
St. Martin	MART17-002	172042	Claim Eligibility APPROVED.
St. Martin	MART17-003	172041	Claim Eligibility APPROVED.
St. Martin	MART17-004	172033	Claim Eligibility APPROVED.
St. Martin	MART17-005	172043	Claim Eligibility APPROVED.

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			STANDARD
Parish	CVR#	Claim #	Resolution
St. Martin	MART17-006	172044	Claim Eligibility APPROVED.
St. Martin	MART17-007	172394	Claim Eligibility APPROVED.
St. Martin	MART18-309	182027	Claim Eligibility APPROVED. Payment of \$800.00 APPROVED for MEDICAL to Hearts of Hope -SANE
ST. MARTIN	MART19-001	190373	Claim UNABLE TO PROCESS - Closed/Unable to Process. Payment of \$0.00 APPROVED for FUNERAL to Kinchen Funeral Home, Inc.
ST. MARTIN	MART19-320	201028	Claim Eligibility APPROVED. Payment of \$800.00 APPROVED for MEDICAL to Hearts of Hope -SANE
ST. MARTIN	MART19-321	201029	Claim Eligibility APPROVED. Payment of \$800.00 APPROVED for MEDICAL to Hearts of Hope -SANE
St. Mary	MARY17-004	171712	Claim Eligibility APPROVED.
ST. TAMMANY	TAMM16-700	200933	Claim Eligibility APPROVED. Payment of \$133.72 APPROVED for MEDICAL to University Medical Center
St. Tammany	TAMM18-365	181163	Claim Eligibility APPROVED. Payment of \$275.12 APPROVED for MEDICAL to CARE Center
ST. TAMMANY	TAMM19-002	191343	Claim Eligibility APPROVED. Payment of \$220.99 APPROVED for MEDICAL to Claimant Payment of \$33.35 APPROVED for MEDICAL MILEAGE to Claimant
ST. TAMMANY	TAMM19-438	200866	Claim Eligibility APPROVED. Payment of \$691.00 APPROVED for MEDICAL to CARE Center
ST. TAMMANY	TAMM19-445	200359	Claim Eligibility APPROVED. Payment of \$691.00 APPROVED for MEDICAL to CARE Center
ST. TAMMANY	TAMM19-446	200358	Claim Eligibility APPROVED. Payment of \$843.05 APPROVED for MEDICAL to CARE Center
ST. TAMMANY	TAMM19-447	200352	Claim Eligibility APPROVED. Payment of \$598.30 APPROVED for MEDICAL to CARE Center
ST. TAMMANY	TAMM19-448	200353	Claim Eligibility APPROVED. Payment of \$613.75 APPROVED for MEDICAL to CARE Center
ST. TAMMANY	TAMM19-449	200354	Claim Eligibility APPROVED. Payment of \$44.00 APPROVED for MEDICAL to CARE Center Payment of \$691.00 APPROVED for MEDICAL to CARE Center

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Parish	CVR#	Claim #	Resolution
ST. TAMMANY	TAMM19-450	200356	Claim Eligibility APPROVED. Payment of \$598.30 APPROVED for MEDICAL to CARE Center
ST. TAMMANY	TAMM19-451	200357	Claim Eligibility APPROVED. Payment of \$598.30 APPROVED for MEDICAL to CARE Center
ST. TAMMANY	TAMM19-452	200785	Claim Eligibility APPROVED. Payment of \$300.00 APPROVED for MEDICAL to CARE Center
ST. TAMMANY	TAMM19-453	200786	Claim Eligibility APPROVED. Payment of \$691.00 APPROVED for MEDICAL to CARE Center
ST. TAMMANY	TAMM19-454	200788	Claim Eligibility APPROVED. Payment of \$658.70 APPROVED for MEDICAL to CARE Center
ST. TAMMANY	TAMM19-455	200789	Claim Eligibility APPROVED. Payment of \$820.06 APPROVED for MEDICAL to CARE Center
ST. TAMMANY	TAMM19-456	200790	Claim Eligibility APPROVED. Payment of \$325.00 APPROVED for MEDICAL to CARE Center
ST. TAMMANY	TAMM19-457	200792	Claim Eligibility APPROVED. Payment of \$2,462.17 APPROVED for MEDICAL to University Medical Center New Orleans
ST. TAMMANY	TAMM19-459	200794	Claim Eligibility APPROVED. Payment of \$691.00 APPROVED for MEDICAL to CARE Center
ST. TAMMANY	TAMM19-460	200795	Claim Eligibility APPROVED. Payment of \$691.00 APPROVED for MEDICAL to CARE Center
ST. TAMMANY	TAMM19-461	200796	Claim Eligibility APPROVED. Payment of \$800.99 APPROVED for MEDICAL to CARE Center
ST. TAMMANY	TAMM19-462	200797	Claim Eligibility APPROVED. Payment of \$711.00 APPROVED for MEDICAL to CARE Center
ST. TAMMANY	TAMM19-463	200798	Claim Eligibility APPROVED. Payment of \$575.12 APPROVED for MEDICAL to CARE Center
ST. TAMMANY	TAMM19-465	200800	Claim Eligibility APPROVED. Payment of \$598.30 APPROVED for MEDICAL to CARE Center
Tangipahoa	TANG17-001	170453	Claim Eligibility APPROVED.
TANGIPAHOA	TANG19-004	191157	Claim Eligibility APPROVED. Payment of \$4,500.00 APPROVED for FUNERAL to Claimant
TANGIPAHOA	TANG19-311	200803	Claim Eligibility APPROVED. Payment of \$598.30 APPROVED for MEDICAL to CARE Center

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			STANDARD
Parish	CVR#	Claim #	Resolution
TANGIPAHOA	TANG19-404	191705	Claim Eligibility APPROVED. Payment of \$5,407.09 APPROVED for MEDICAL to North Oaks Medical Center
TANGIPAHOA	TANG19-501	191544	Claim Eligibility APPROVED.
TANGIPAHOA	TANG19-501	201004	Claim Eligibility APPROVED. Payment of \$4,586.00 APPROVED for MEDICAL to Our Lady of the Lake Regional Medical Center
TANGIPAHOA	TANG19-504	200804	Claim Eligibility APPROVED. Payment of \$586.71 APPROVED for MEDICAL to CARE Center
TANGIPAHOA	TANG19-506	200806	Claim Eligibility APPROVED. Payment of \$598.30 APPROVED for MEDICAL to CARE Center
TERREBONNE	TERR18-007	200310	Claim Eligibility APPROVED. Payment of \$300.00 APPROVED for AMBULANCE TRANSPORT (MEDICAL) to Acadian Ambulance Payment of \$114.95 APPROVED for MEDICAL to Acadian Ambulance
UNION	UNIO19-618	200942	Claim Eligibility APPROVED. Payment of \$400.00 APPROVED for MEDICAL to Ouachita Parish Coroner's Office
VERMILLION	VERM18-001	190486	Claim Eligibility APPROVED. Payment of \$5,000.00 APPROVED for FUNERAL to Kinchen Funeral Home (Abbeville)
VERMILLION	VERM19-409	200813	Claim UNABLE TO PROCESS - Closed/Unable to Process. Payment of \$0.00 APPROVED for MEDICAL to Our Lady of Lourdes Regional Medical Center
Vernon	VERN18-001	182304	Claim Eligibility DENIED - Contribution. Payment of \$0.00 APPROVED for FUNERAL to Labby Memorial Funeral Homes, Inc.
Washington	WASH18-326	181722	Claim Eligibility APPROVED. Payment of \$2,045.18 APPROVED for MEDICAL to Our Lady of The Angels
WASHINGTON	WASH19-310	200814	Claim Eligibility APPROVED. Payment of \$594.44 APPROVED for MEDICAL to CARE Center
WASHINGTON	WASH19-311	200124	Claim UNABLE TO PROCESS - Closed/Unable to Process. Payment of \$0.00 APPROVED for MEDICAL to CARE Center
WASHINGTON	WASH19-313	200351	Claim Eligibility APPROVED. Payment of \$598.30 APPROVED for MEDICAL to CARE Center
WASHINGTON	WASH19-314	200349	Claim Eligibility APPROVED. Payment of \$547.30 APPROVED for MEDICAL to CARE Center
WASHINGTON	WASH19-315	200828	Claim Eligibility APPROVED. Payment of \$547.30 APPROVED for MEDICAL to CARE Center

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			STANDARD
Parish	CVR#	Claim #	Resolution
WASHINGTON	WASH19-316	200829	Claim Eligibility APPROVED. Payment of \$575.12 APPROVED for MEDICAL to CARE Center
WEBSTER	WEBS19-408	200950	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Forensic Nurse Examiners
West Baton Rouge	WBAT17-003	171751	Claim Eligibility APPROVED.
West Baton Rouge	WBAT17-004	172461	Claim Eligibility APPROVED.
West Baton Rouge	WBAT18-306	181494	Claim Eligibility APPROVED.
WEST BATON RO	WBAT19-401	200830	Claim Eligibility APPROVED. Payment of \$598.30 APPROVED for MEDICAL to CARE Center
WEST CARROLL	WCAR19-001	190491	Claim Eligibility APPROVED. Payment of \$5,000.00 APPROVED for FUNERAL to Claimant
WEST FELICIANA	WFEL19-301	200348	Claim Eligibility APPROVED. Payment of \$771.00 APPROVED for MEDICAL to CARE Center
WINN	WINN19-006	200951	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Forensic Nurse Examiners

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Board Date: 02/18/2020

ADJOURNMENT / OTHER BUSINESS

The Board set the date for the following two meeting as March 10, 2020 and April 14, 2020.

Ms. Thibodeaux made a motion to adjourn the meeting at 12:54 p.m. Ms. Shorty seconded the motion. Ms. Tonkovich adjourned the meeting at 12:54 p.m.