

Physician Reviewer Record

This form is to be completed by physicians interested in reviewing for eQHealth Solutions (formerly Louisiana Health Care Review, Inc.). For more information, please contact Lynnie Smith at (225) 926-6353 or lsmith@eqhs.org.

After your information has been received, you will be sent a Physician Reviewer Packet that will include an application, "Confidentiality Attestation Statement" and an "Agreement for Physician Reviewers" via the United States Postal System.

Please complete the forms in the packet and return to eQHealth with copies of documents to support the following information: (1) Board Certification; and (2) A letter of validation of admitting privileges from at least one hospital.

This form may be printed from the Internet browser and faxed or mailed to eQHealth. All information gathered here is for private use only.

Name:

Address:

City:

State:

Zip Code:

Office Telephone:

Office Fax:

E-mail Address:

Do you treat Medicare patients? Yes No

eQHealth Solutions
<http://louisianaqio.eqhs.org>

8591 United Plaza Blvd., Suite 270
Baton Rouge, LA 70809
Phone: 225-926-6353
Fax: 225-925-0342
lsmith@lhcr.org