Instructions for Referral Forms

Form #1 – Behavioral Health Request for Information

When to use this form:
• When the Behavioral Health Provider wants to notify the Primary Care Provider that a patient who they mutually treat is receiving behavioral health services.
• When the Behavioral Health Provider is requesting medical information from the Primary Care Provider on a patient both parties treat.

How to use this form:
• The Behavioral Health Provider faxes the completed from to the Primary Care Provider.
• The Primary Care Provider then faxes the requested information (see last checklist on form) to the Behavioral Health Provider.

Form #2 – Referral to Behavioral Health Services Section I

When to use this form:
• When the Primary Care Provider wants to refer a patient to a Behavioral Health Provider for a behavioral health assessment and/or treatment.

How to use this form:
• The Primary Provider Care Provider faxes the following to the Behavioral Health Provider:
  1. Form #2 (completed and signed)
  2. The Medical information indicated in the checked boxes on Form #2
  3. Form #3: Behavioral Health Feedback to Primary Care - Section II (not filled out)

Form #3 – Behavioral Health Request for Information

When to use this form:
• When the Behavioral Health Provider receiving the referral wants to provide the Primary Care Provider with information and patient findings following the referral.

How to use this form:
• The Behavioral Health Provider faxes the completed and signed form #3 back to the referring Primary Care Provider.