**ADULT**

 **RSUD AUTH REQUEST FAX COVER SHEET**

(To be faxed to 855-244-9359)

|  |  |  |
| --- | --- | --- |
| Date Faxed:  | Program Name:  | Point of Contact: |
| Phone Number: | Fax Number: | # of Pages Included: |
| **All Requests:** Requested Level of Care: 3.1 [ ]  3.5 [ ]  Requested Start Date:  PO Referral for Assessment/Treatment? Yes [ ]  No [ ]  Court Order for Residential? Yes [ ]  No [ ]  |  **Other Health Coverage:**If this is 1st request with client having other health coverage (OHC)/ private insurance, which of the following has been included?[ ]  Evidence of Coverage or Letter of Non-Coverage**OR**[ ]  A signed AOB and 42 CFR Part 2 compliant Release of Information (ROI) Form**OR** [ ]  Client refused to sign ROI to bill OHC |
|   **Initial:** Date & Time Request Called In: [ ]  SUD Residential Authorization Request |  **Continuing:** [ ]  Adult ASAM Criteria Assessment   **&** [ ]  Date of Birth:  **OR** [ ]  SUD Residential Authorization Request |
|  **Extension:**[ ]  SUD Residential Authorization Request |  **Level of Care Change:** [ ]  Adult ASAM Criteria Assessment  **&** [ ]  Date of Birth:  **OR** [ ]  SUD Residential Authorization Request |
| **Discharge:**[ ]  Discharge Plan/Summary[ ]  Discharge Date: |

**Notice of Disclosure and Confidentiality**

This information has been disclosed to you from records whose confidentiality is protected by Federal and State laws and regulations. You may be prohibited from further disclosing this information without the specific written authorization from the person to whom such information pertains, or as otherwise permitted by State/Federal law. THE INFORMATION CONTAINED IN THIS FACSIMILE IS CONFIDENTIAL AND/OR PRIVILEGED AND IS INTENDED ONLY FOR THE USE OF THE DESIGNATED RECIPIENT NAMED ABOVE. If the reader of this message is not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error, and that any review, disclosure, dissemination, distribution or copying of this message, or the taking of any action in reliance on its contents, is strictly prohibited. If you have received this communication in error, you must notify us immediately and inform us of the return or destruction of the documents.