MD/NP Managed Care Assessment - Authorization Request

CONFIDENTIAL PATIENT INFORMATION: "See California Welfare and Institutions Code Section 5328."

Fax to 650-596-8065 or mail to Access Call Center: 310 Harbor Blvd., Bldg. E, Belmont, CA 94002

DIRECTIONS – Submit after initial authorization for assessment or if on-going treatment is being requested, prior to expiration of initial authorization. Incomplete information may result in delay of authorization for services. **Please complete all information requested on this form. Any services provided without prior authorization will be denied.**

Provider (Print) _____ Phone _____ Fax _____

Client Name _____ MH #: _____ DOB _____ Date _____

Current Clinical Issues:

Substance Abuse ☐ **Current** ☐ **Past** ☐ **None** **Describe type, amount, frequency (incl Nicotine, Caffeine, and OTC):**

History, Relevant Clinical or Other Information (Include present &/or previous physical &/or sexual abuse – victim &/or perpetrator):

Medications (for Medical and Psychiatric Conditions):

SAN MATEO COUNTY HEALTH
BEHAVIORAL HEALTH & RECOVERY SERVICES

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Provider (Print):_____ Client Name:_____

Diagnosis Use **"P"** and **"S"** to specify one **Primary** and one **Secondary** Mental Health Diagnosis. You may report up to three additional diagnoses. Do not enter the Code for a "Rule Out" Diagnosis.					
DSM5 Diagnosis	**ICD -10**	**P/S**	**DSM5 Diagnosis**	**ICD-10**	**P/S**
General Medical Conditions:					
Other Factors Significantly Affecting Mental Health					
Substance Abuse	☐ Yes	☐ No	☐ Unknown		
Developmental Disabilities	☐ Yes	☐ No	☐ Unknown		
Physical Health Disorders	☐ Yes	☐ No	☐ Unknown		

Treatment Goals

1)_____ Target Date_____

2)_____ Target Date_____

These goals have been formulated in conference with, and have the approval of, the Mental Health Plan member/parent or guardian.

Provider Signature_____ Date_____

Client/Parent Signature _____ Date_____

CPT Code	Bilingual Differential Yes/No	Number of Services	Frequency	Authorization Begin Date

SAN MATEO COUNTY HEALTH
BEHAVIORAL HEALTH & RECOVERY SERVICES