

Telephonic Health Education Referral Form

Complete all requested information (please print clearly).



Today's Date:

Member Information

Last Name:		First Name:		Member ID/CIN#:	
Address:			City/State:		Zip Code:
Current Phone #:			Preferred Language:		DOB:
Diagnosis:					
Full Name of Guardian (if member is under 18 years of age):					

PCP Information

Provider Name:					
Address:			City/State:		Zip:
Phone Number:		Ext:	Fax Number:		

Referral for Educational Service

To refer a Passport member for the following health education services:

1. Fax or E-mail the completed referral form to Passport at **1 (800) 642-3691** or **MHIHealthEducationMailbox@PassportHealthPlan.Com**
2. Fax required documentation with all referrals.

Case Manager Outreach for:

- | | |
|---|---|
| <input type="checkbox"/> Asthma (2+ years old) | <input type="checkbox"/> Hypertension (18+ years old) |
| <input type="checkbox"/> COPD (35+ years old) | <input type="checkbox"/> SUD (18+ years old) |
| <input type="checkbox"/> Depression (18+ years old) | |
| <input type="checkbox"/> Diabetes (18+ years old) | |

Health Educator Outreach for:

- | |
|--|
| <input type="checkbox"/> Smoking Cessation (18+ years old) |
| <input type="checkbox"/> Adult Weight Management (18+ years old) |

Medical Nutrition Therapy (Consultation with Registered Dietitian)

For all MNT referrals, please attach most recent progress notes and labs

Condition:	Requested Labs:	Other:
<input type="checkbox"/> Diabetes	A1c, Lipid	<input type="checkbox"/> Nutrition Assessment (specify need/goals):
<input type="checkbox"/> Heart Failure	Chem 10, Lipid	
<input type="checkbox"/> High Blood Pressure / Coronary Heart Disease	Chem 10, Lipid	
<input type="checkbox"/> Multiple Food Allergies	Allergy Testing	
<input type="checkbox"/> Renal Disease (Not on dialysis)	Chem 10, GFR	
<input type="checkbox"/> Unintentional Weight Loss	Chem 10	

For additional health education questions, please email us at

MHIHealthEducationMailbox@PassportHealthPlan.Com or call **1 (866) 891-2320**