## Are any of your Molina patients diagnosed with alcohol or drug dependency?

Molina Healthcare wants to partner with providers to help members diagnosed with alcohol or drug dependency along their path to recovery.

Our care managers can help with education, referrals, transportation, and finding community resources. Provider offices can use any of the three options below to refer a patient. Please send us the patient's name, date of birth, phone number, address, city, state and zip code, and the type and date of diagnosis.

- Call Molina at (855) 866-5462 and tell the agent you have a patient referral for the Behavioral Health program.
- Fax Molina this referral form to (866) 916-3249.
- Email Molina the required information to <u>CMescalation@MolinaHealthcare.com</u>.

Molina will contact your patient to help them access our care management programs.

## **Referral to Care Management for Alcohol or Drug Use**

Patient's Name*:	Patient's DOB*:	Phone #*: ( )
Address*:		
City*:	State*:	Zip*:
Type of Diagnosis*:	Date of Diagno	sis*:
Provider's Name:		
Provider's Address:		
Provider City:	Provider State:	Provider Zip:
Provider's Phone Number: ()		

\*Required information

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