



LOWELL
TREATMENT
CENTER

A Program Of Arbour Health System

Community Services

391 Varnum Avenue, 2nd floor • Lowell, MA 01854

Phone: 800.727.6324 • Fax: 978.703-2494

Please send referrals via FAX to: (978) 703-2494

Referrer must be the child's Outpatient Therapist, In-Home Therapy Clinician, or Intensive Care Coordinator.
Please fax a copy of youth's CANS, comprehensive assessment and individual treatment plan identifying the goals for treatment.

This a referral for (check one)

FST/In-Home Therapy Therapeutic Mentoring

Authorization Information

Authorized dates of service _____ # Units authorized _____

Authorization # _____

Client's name _____ M ____ F ____ DOB _____ Age _____

Insurance (Payer) _____

Policy ID# _____ Social Security # _____

Address _____ Zip: _____

Phone _____ Alternate phone _____

Guardian's name(s) _____ Relationship to client _____

Does the client or guardian speak English? _____ If not, preferred language _____

Has the client/family agreed to services? ____Y ____N

Are there any outstanding 51As with DCF or does the home environment pose a safety risk?
____Y ____N If Yes, Explain _____

Are there any scheduling considerations (e.g., only available after 5:00 pm)? _____

Referring agency _____ Person referring _____

Phone _____ Fax _____ e-mail _____

Reason for referral

Treatment recommendations:

- 1. _____
- 2. _____
- 3. _____

Agency involvement (include name, agency, phone):

Therapist _____

Med Prescriber _____

PCC _____

School _____

DCF / DMH / DDS _____

Court _____

Other _____

Other _____

Current medications with dosages

Current diagnosis if known (please include DSM-IV code)

Axis I _____

Axis II _____

Axis III _____

Axis IV _____

Axis V CGAF _____ HGAF _____

Signature of Referring Provider _____ Date _____

For **In-Home Therapy**, LTC accepts the following insurances: MBHP, Network Health, BMC HealthNet, NHP, and Fallon.

For all insurances, services require prior authorization.

For **Family Stabilization Team Services**, LTC accepts BCBS of MA, HPH, United, Tufts, and Cigna.

For commercial payors, the referrer should obtain prior authorization.

For **Community Support Program**, LTC accepts the following insurances:

MBHP, Network Health, BMC HealthNet, NHP, Fallon

For NHP and Fallon, client must be enrolled in Intensive Clinical Management

For **Therapeutic Mentoring**, LTC accepts the following insurances:

MBHP, Network Health, BMC HealthNet, NHP, Fallon

Thank you for the referral.