



Instructions:

Notification must be sent within 24hrs of acute inpatient hospital admission - The preferred method of submission is via PointClickCare (PCC). Use this form only if you are NOT connected to PCC.

If your facility has granted our clinical team full access to your EMR system, it is your responsibility to ensure records are accessible. Please do not fax medical records that are available in EMR.

For discharge notification – this same form may be retained and re-faxed with Section 5 completed.

SECTION 1 – PATIENT INFORMATION
SECTION 2 – FACILITY INFORMATION
SECTION 3 – ADMISSION REQUEST
Form fields include Patient Name, Facility Name, Mailing Address, Date of Admission, and Diagnosis code(s).

SECTION 4 – DOCUMENTATION SUBMISSION FOR ADMISSION

Submit the following documentation, as appropriate, with this request:

- Specific clinical information documenting the applicable medical necessity criteria, **including:**
 - History and physical
 - Lab/Radiology/Testing results
 - Current symptoms and functional impairment
 - Treatment history and chart notes that support medical necessity for the request
 - Anticipated treatment plan/goals
 - Any other supporting documents you would like considered

SECTION 5 – FACILITY INFORMATION

Discharge Date:	Discharge Disposition:
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Primary Diagnosis: