



Notification of Admission Mental Health Inpatient or Residential

FYI *Incomplete, illegible or inaccurate forms will be returned to sender.* Please complete the entire form and allow 14 calendar days for decision.

☎ For questions, call Mental Health and Substance Use Disorder Services at: **612-676-6533** or **1-833-276-1185**



To **fax** form and any relevant documentation:

For **initial** admission notifications:
612-884-2033 or **1-855-260-9710**



Submit Request: [UCare's Secure Email Site](#)
Intake: MHSUDservices@ucare.org

MEMBER INFORMATION

UCare ID _____ PMI _____

Member Name _____ DOB _____

Address _____

City, State, Zip _____ Phone _____

SERVICING FACILITY INFORMATION

Facility _____ NPI Number _____

Service Location Address _____

City, State, Zip _____

Contact Phone _____ Fax _____

REQUESTER INFORMATION

Request Sent By _____ Email _____

Phone _____ Total Pages Faxed _____

SERVICE/PROCEDURE ITEMS REQUESTED

Initial Admission **Concurrent Review** (Previously Approved Notification Number) _____

Admit Date _____ Anticipated/Discharge Date _____

ICD-10 _____

Required only for Residential Facilities

Procedure Code _____ Units/Days Requested _____

Procedure Code _____ Units/Days Requested _____

Procedure Code _____ Units/Days Requested _____

UCare Case Managers may assist in the coordination of services to provide the quality care that is customize

Mental Health Inpatient or Residential (Continued)

REQUIRED INFORMATION

Confirm service and attach the following applicable documents:

- Children's Mental Health Residential Treatment (*Non-IMD Facility*)**
 - Diagnostic Assessment, CASII or ECSII, Individual Treatment Plan, Progress Notes (from past 60 days), Discharge Summary and County out of home placement screening
- Crisis Residential**
 - Crisis Assessment & Crisis Stabilization Plan, Discharge Plan, Progress (daily) Notes & Discharge Summary
- Eating Disorder Residential**
 - H&P, Treatment Plan, Medication Administration Record, Social Work, Practitioner & Nursing Progress Notes (from the past 7 days) and Discharge Summary
- Inpatient Mental Health Admission (*Non-IMD Facility*)**
 - H&P, Treatment Plan, Medication Administration Record, Social Work, Practitioner & Nursing Progress Notes (from the past 24 – 48 hours) and Discharge Summary
- Intensive Residential Treatment Services**
 - Diagnostic Assessment; Progress Notes from past 30 days; and the most current Functional Assessment, Individual Treatment Plan, and Level of Care Assessment per 2451.23 statute timeline

Additional Information that may support medical necessity:

UCare Case Managers may assist in the coordination of services to provide the quality care that is customized accordingly to aid members to their recovery.