

# Behavioral Health Care Coordination Request Form



**This form is for linkage to CenCal Health Mental Health Providers or County Substance Use Treatment Services.**

**Members may also be referred to [CenCalHealth.org](https://cencalhealth.org) to locate a provider on our provider directory or contact the Behavioral Health Call Center at (800) 421-2560.**

**Referring Providers:** Please fax this form to the Behavioral Health Department (805) 681-3070 or upload to <https://gateway.cencalhealth.org/form/bh>. Questions? Please call (805) 562-1600

## Referring Provider/Agency - Required

Name:  Phone:   
Email:  Fax:   
Agency Name:

## Member Information

Member has been informed that Navigator will be outreaching within 1 business day of form being sent.

**Please complete individual requests for each family member.**

Member Name:   
CenCal Health Member ID:   
Phone:  DoB:   
Language:  Parent/Guardian:   
Best time to reach Member:

### Reason for Care Coordination Request:

- Care Coordination Request for Mental Health Services**
- Psychotherapy
  - Medication Management (psychiatry)
- County Department of Behavioral Health Substance Use Services**

Additional Information To Support Member Care Coordination:

## Member Information (cont.)

If you are a mental health provider and referring a member to County Mental Health Services, please use the **Transition of Care Form**.

If you are referring a member for support due to missed appointments, please use our **Member Education Form**.

All forms are located on CenCal Health's Mental Health Services & Behavioral Health Treatment Page

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CenCal Health will outreach members within 1 business day and support timely access to care. Referring providers will receive an update within 10 business days.