



Confidential Fax

To: Secure Facilities/Long Term Care From:
Placement Committee Optum

Fax: 888 687-2515

Fax:

Phone: 800-798-2254 Option # 6

Phone:

Pages:

Date:

Name of client referred:

Client is being referred for:

(Check one box only, separate form needed if requested placement changes)

- IMD
- County Funded SNF
- ARF
- San Diego COUNTY SNF PATCH
- State Hospital

This information is:

- A new referral.
- Additional information for a referral under consideration.
- Change in contact information for facility social worker. Please note new contact information.

NOTE: CONFIDENTIAL INFORMATION TRANSMISSION

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