

**BJCSM BEHAVIORAL HEALTH
CONTRACT PROVIDER SERVICE AUTHORIZATION**

Multiple Referrals
BJC Behavioral Health

Medical Record # 21212121212

Vendor #

Patient: Tom Jones

Provider:

Address: 1234 Street
Anytown, MO 63100

Insurance: MEDICAID

Medicare: No

Patient Eligibility Date:

CPR: Yes

Authorization Start Date:

Phone: (314) 555-1234

Benefits/Co-Pay:

Case Manager: 2038 Smith, Mike (NORTH-CTT TEAM C)

Service Code: 90862k 90862 Med. Serv. 3/1/05

Level of Care: 2 Supportive/Medium

Start Date: 1/1/2006

Reason: 60 Min Per Mo

Effective Date	Units	Add Date
1/1/2006	4	7/28/2005

Oper Name
177 McDaniels, Kathy

Change Date: Oper Name