



- If the patient has Medicaid please include a Medicaid referral with updated EPSDT. If patient needs a cascading referral, please include this to ensure timely scheduling with our doctors. Please note we accept only Morgan and Lawrence County Medicaid patients.
- If the patient has BCBS with the prefix of BEG, BGL, BEL, PGX or TCA please include a referral in order for our office to schedule the appointment. This referral must be from the assigned PCP, per BCBS guidelines for payment.
- If the patient has had any scans done for the area being treated, please include them along with any recent office notes.
- Your office's demographic form is acceptable. Please ensure it includes the information on our referral form.
- Please allow no more than 48 hours for the appointment to be scheduled.
- Once the appointment is scheduled, we will call the patient with appointment date and time. We will also fax the appointment information to your office.
- We appreciate your referral and if you encounter any issues with this process, please contact Sue Hennessy, RN – Practice Manager, at 256-355-6200.

**Thank you!**