

**TRICARE South Case Management Referral Form
Behavioral Health – Value Options**

**Value Options
TRICARE South Region Case Management Referral Form
Behavioral Health Referral Guidelines**

To qualify for case management referral, the beneficiary must have a behavioral health diagnosis and at least 1 of the following (please check all that apply):

1. High utilization of services, including multiple providers without coordination of care
2. Congressional or high profile case
3. Repeated non-compliance with recommended treatment resulting in higher levels of care
4. Chronic suicidal, lethal, dangerous behaviors
5. Beneficiaries with support or resource needs who are unable to navigate the system
6. Beneficiaries with insufficient supports causing significant impairment or stress
7. Newly diagnosed patients requiring assistance with education about their illness and resources
8. Medical and mental health co-morbidity needing facilitation of communication between providers
9. Dual diagnosis clients with 2 or more relapses or hospitalizations in a six month period
10. History of discharge against medical advice with no discharge plan
11. Beneficiary transfer requiring the assistance of a case manager to coordinate
12. Eating disorder patient who has exhausted yearly benefit
13. Post-traumatic stress disorder in AD/SM
14. ECHO for behavioral health diagnoses including autism

Exclusions-

- Beneficiary refuses
- TDEFIC beneficiary (Medicare and TRICARE eligible)
- Beneficiary is DEERS ineligible or lives outside of the South Region

To make a Behavioral Health Case Management referral, please fax the completed form to:

**Case Management Department
Value Options-TRICARE
Fax: 866-811-4422**