

Contact Person: *Kim Proutt*, RN

Care Coordinator

Fax# 410-612-9181

Today’s Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Care Coordination Plus***

Have Medicaid, a Qualified Health Plan, Medicare, Other Health Insurance or Uninsured?

Need help finding a doctor or navigating the system?

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Call 410-612-1779, ext. 2302 and mention ***Care Coordination Plus*** or check off your needs below and hand it to a Health Department employee!

Services are provided at no-cost.

□ MEGAN’s Place □ AERS Evaluation

□ Lead and Asthma Programs □ Healthy Families County Wide

□ Health Insurance □ Drug/Alcohol Education

□ Physicians / Doctors □ Mental Health/Depression/Anxiety

□ Cancer Screenings □ Dental

□ Support Groups □ OB/GYN/Birth Control

□ Immunizations □ Smoking

□ Personal Care □ Job Training/Job Corps/GED Programs

□ Food Assistance □ Baby formula

□ Housing Assistance □ HIV/STI testing, treatment and PrEP

□ Transportation □ Vision

□ Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Birthdate: \_\_\_\_\_\_\_\_\_ Phone# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:Street:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Town:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Zip Code:\_\_\_\_\_\_\_\_

SS#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_MA#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Client Signature and Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Referral Source Name and Contact #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_