



## Case Management Current Diagnosis

Please refer to the attached release of information allowing you to provide your client's most recent mental health diagnosis to assist to determine eligibility, make necessary referrals and coordinate ongoing services. In order to qualify for case management services, a client must have a Primary Mental Health Diagnosis that is considered active within one year from today's date. This is time-sensitive and we appreciate your prompt response:

**Please forward this information to Attention:**

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### Diagnostic Information (DSM 5):

<b>Client's Full Name:</b>
<b>Client D.O.B:</b>
<b>Primary Mental Health Diagnosis Code and Description:</b>
<b>Other Disorders of Clinical Attention:</b>
<b>Date of Diagnosis:</b>
<b>Name and Credentials of Clinician:</b>
<b>Name of Organization:</b>
<b>Clinician's Signature:</b>
<b>Signature Date:</b>
<b>If Clinician is conditionally licensed, Signature of Supervisor:</b>