POSITIVE
REINFORCEMENT

ABA Therapy Referral Form

Phone: 703-576-5700 **| Fax:** 571-919-6755 **| Email:** mhambrick@positivereinforcement.net

REFERRAL OVERVIEW

Ready to get started with ABA Therapy at Positive Reinforcement?
We accept Medicaid, Aetna, Anthem, Cigna, Evernorth, Tricare, United Healthcare. Just complete the form below to begin services.

When submitting this form, please also include a copy of the insurance card and diagnostic report, if available - they're not required, but they help us get started faster.

CLIENT INFORMATION

Please provide information about the client being referred.

Full Name:		DOB:	

PARENT/CAREGIVER INFORMATION

Please provide information about the client's parent or caregiver.

Full Name:		Phone:	
Relationship:		Email:	
Address:			

PRIMARY INSURANCE PROVIDER

Please let us know the client's primary insurance provider.

- ☐ Medicaid
- ☐ Aetna
- ☐ Anthem
- ☐ Cigna
- ☐ Evernoth
- ☐ Tricare
- ☐ United Healthcare
- ☐ Other: _____

MEDICAID MANAGED CARE PLAN (MCO)

Select the Medicaid plan (as shown on card), if applicable.

- ☐ Aetna Better Health
- ☐ Anthem HealthKeepers Plus
- ☐ Humana Healthy Horizons
- ☐ Optima Health
- ☐ Other: _____

CLIENT'S DIAGNOSIS

Please let us know the client's current diagnosis or diagnostic status. This helps us better understand your needs.

- ☐ Autism Spectrum Disorder (ASD)
- ☐ ADHD
- ☐ Behavioral Concerns – No Diagnosis
- ☐ Tricare
- ☐ Currently Seeking a Diagnosis
- ☐ Other:_____

AVAILABILITY FOR ABA THERAPY

Please check all that apply. Morning appointments can typically start services right away.

Time	Monday	Tuesday	Wednesday	Thursday	Friday
8 AM - 12 PM	☐	☐	☐	☐	☐
12 PM - 4 PM	☐	☐	☐	☐	☐
4 PM - 8 PM	☐	☐	☐	☐	☐

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HOW DID YOU HEAR ABOUT US?

Please let us know how you found Positive Reinforcement - this helps us connect with more families!

- ☐ Referred by Doctor/Pediatrician
- ☐ School or Teacher Recommendation
- ☐ Case Manager or Support Coordinator
- ☐ Friend or Family Member
- ☐ Google or Online Search
- ☐ Insurance Directory
- ☐ Community Event or Flyer
- ☐ Other:_____