



STATE OF WEST VIRGINIA  
DEPARTMENT OF HEALTH AND HUMAN RESOURCES

Bob Wise  
Governor

Paul Nusbaum  
Secretary

**REFERRAL FOR SOCIALLY NECESSARY SERVICES**

**Client's Name:** Johnnie Doe  
**FACTS Client Number:** 1578  
**FACTS Referral/Case Number:** 20001234  
**Medical Card Number:**  
**Client's Address:** 100 Main Street, Anytown, WV 25301  
**Provider Name:** ASO Provider  
**Provider Address:** P.O. Box \*1 Anytown, WV 25301  
**FACTS Provider Number:** 30000000

**SSN:** 222-22-2222  
**Date of Birth:** 01/01/1990

To whom it may concern:

This is to inform you that the above named individual is being referred for the following Socially Necessary Services:

**Reason for referral:**

Youth has a noted deficit in school functioning on a formalized assessment of role performance in a core subject; however, the youth does not qualify for an IEP or 504 plan. Youth's service plan identifies this deficit for a specific area of improvement. MDT recommends the service. There is documentation from educational staff is present to substantiate the need. Youth's caregiver is unable to meet the educational needs of the child. This service cannot be met appropriately through other community resources, family support system and/or agency.

Services requested and persons referred to receive those services:

**FACTS Control Number**                      **ASO Service**  
2004-01-987654                              ASO Tutoring

**AUTHORIZATION FOR SERVICE: THIS REFERRAL IS NOT AN AUTHORIZATION FOR THESE SERVICES NOR IS IT A GUARANTEE OF PAYMENT.** An Authorization for services must be obtained from APS Health Care. In order to secure the authorization the provider must submit all required information to APS Health Care for their review and approval.

Please notify the worker when the authorization has been received so that the worker can discuss with you the manner in which services will be provided to the client.

Worker Signature: \_\_\_\_\_ Date of referral: \_\_\_\_\_

Worker Title: Youth Services Worker  
Worker Name: Jane Doe

Worker Address: 123 Main Street  
Anytown, WV 25555

Worker Phone Number: (304) 555-5555  
Worker e-mail address: jane@wvdhhr.org