

# Undocumented Patients Financial Assessment/Specialty Referral Form

Key to Financial Class Codes	
PB	Administrative Override
PJ	ED Visit - Undocumented Patients
PK	Inpatient - Undocumented Patients
PO	Private Pay Patients Without Health Coverage

## Section I - Patient Information (To be completed by a Financial Counselor)

_____ Last Name	_____ First Name	_____ Medical Record Number		
_____ Admit Date	_____ Financial Class for Inpatient or ED Only	<table border="1"><tr><td>Financial Class Upon Discharge</td></tr><tr><td> </td></tr></table>	Financial Class Upon Discharge	
Financial Class Upon Discharge				
<b>REFER PATIENT TO PRIMARY CARE</b>	Community Clinic name: _____			
	Community Clinic phone #: _____			
_____ Financial Counselor	_____ Phone Number	_____ Date		

## Section II: Patients Referred to CCHS for Specialty Care (To be completed by Physician)

For Undocumented/Low Income patients in need of specialty follow-up at CCHS

- Indications:**
- Authorization can be used for select patients who have medical or surgical issues that cannot be effectively managed by the community clinic and require **temporary** treatment by a CCHS specialty physician.
  - Authorization can also be granted as a temporary effort to reduce hospital admission/readmission rates, frequent ER visits or prolonged inpatient stay.
  - If unclear as to whether the community clinic can provide necessary follow-up care, call and consult with the community clinic physician. A list of physicians and their contact information is on reverse side of this form.
  - **MUST** be signed by inpatient attending or ER physician. If signed, patient will be eligible to receive medications, lab and radiology studies, and specialty clinic visits through CCHS for up to 30 days.

**REFER PATIENT TO SPECIALTY CARE**

Subspecialty at CCHS	_____
Name of Treating Physician	_____
Name of Attending Physician	_____
Signature of Attending/Treating Physician	_____

Indication for subspecialty referral:

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

## Section III: Discharge Information

<b>Discharge Clerk:</b>	<ul style="list-style-type: none"><li>• For <b>inpatient</b> discharges, fax all prescriptions to pharmacy of patient's choice unless Section II has been completed, and for <b>ED</b> discharges give prescription to patient and give patient low-cost generic options</li><li>• If Section II is completed fax prescriptions to Walgreen's or direct the patient to take the prescriptions to Walgreen's</li></ul>
<b>Medical records staff:</b>	Send discharge summary, labs and medication list to community clinic named in Section I

## COMMUNITY CLINICS CLINICIAN CONTACT INFORMATION

Clinic	Clinic Contact	Clinician	Clinician Contact	Email
<b>Brookside Community Richmond</b>	Main: 510.231.5001	<b>Teresa Rodriguez, MA</b> <i>Clinic Manager</i>	O: 510.776.9526	trodriguez@brooksideclinic.org
		<b>Robyn Dixon</b> <i>Medical Records</i>	Use main line	rdixon@brooksideclinic.org
<b>Brookside Community San Pablo</b>	Main: 510.231.9800 Fax: 510.412.9867	<b>Norman L. Banks, MD</b> <i>Medical Director</i>	Use main line	nbanks@brooksideclinic.org
		<b>Azucena Barocio</b> <i>Physician Assistant</i>	Use main line	abarocio@brooksideclinic.org
		<b>Tamara Landers</b>	O: 510.231.980x351	tlanders@brooksideclinic.org
<b>La Clinica de la Raza Monument</b>	Main: 925.363.2000 Fax: 925.363.2006	<b>Chika Akera, MD</b> <i>Assoc. Medical Director</i>	O: 925.246.4836 C: 925.580.8953	cakera@laclinica.org
<b>La Clinica de la Raza Pittsburg</b>	Main: 925.431.1230 Fax: 925.431.1234	<b>Gustavo Curbelo</b> <i>Asso. Medical Director</i>	O: 925.431.2132 Best by main line	
		<b>Juan O'Mearny</b> <i>Physician Assistant</i>	O: 925.431.2106 C: 925.580.9892	
		<b>Irene Salceda</b> <i>Physician Assistant</i>	O: 925.431.2106 C: 510.459.6101	
<b>Planned Parenthood Antioch</b>	Main: 925.754.4550 Fax: 925.754.5931	<b>Flore Djang Estill, NP</b> <i>Lead Clinician</i>	O: 925.754.4558	FDjangEstill@ppshastadiablo.org
<b>Planned Parenthood Central Richmond</b>	Main: 510.232.1250 Fax: 510.232.6837	<b>Debbie Bamberger, NP</b> <i>Lead Clinician</i>	O: 510.232.1263	DBamberger@ppshastadiablo.org
<b>Planned Parenthood Concord</b>	Main: 925.676.0300 Fax: 925.676.0300	<b>Pascale Coucy, NP</b> <i>Lead Clinician</i>	O: 925.887.5265	Pcoucy@ppshastadiablo.org
<b>Planned Parenthood Hilltop</b>	Main: 510.222.5290 Fax: 510.222.9231	<b>Chris Costa, NP</b> <i>Lead Clinician</i>	O: 510.222.5871	ccosta@ppshastadiablo.org
<b>Planned Parenthood Pittsburg</b>	Main: 925.439.1237 Fax: 925.439.8974	<b>Michelle Fahlsing, NP</b> <i>Lead Clinician</i>	O: 925.439.1314	mfahlsing@ppshastadiablo.org
<b>Planned Parenthood San Ramon</b>	Main: 925.838.2108 Fax: 925.838.9265	<b>Janet Elder, NP</b> <i>Lead Clinician</i>	O: 925.838.2119	jelder@ppshastadiablo.org
<b>Planned Parenthood Walnut Creek</b>	Main: 925.935.3010 Fax: 925.932.2231	<b>Gail Cipolla, NP</b> <i>Lead Clinician</i>	O: 925. 935.4181	GCipolla@ppshastadiablo.org