

CARE STRATEGIES

Required Authorization Information (RAI)

Referral Information

Referral Date:

Referral (Coordinator's Name):

Organization (Coordinator's Organization):

Please choose one:

Type of Services (Mentoring/Therapy/Massage/Etc.):

Service Code: Authorization Number: Hours (Monthly/Annual):

Service Code: Authorization Number: Hours (Monthly/Annual):

Duration of Authorized Services (Monthly/Annual):

Goal(s)/Objective(s):

Consumer Contact Information

Name:

Address:

Date of Birth:

Phone:

Email:

Parent/Guardian (if appropriate):

Provider Contact Information

Name: Eddie Jones

Phone: 512-689-1607

Email: eddie.cstrategies@gmail.com

Please Fax RAI to: 1-855-527-8728

Or Email RAI to: info@cstrategies.org

Please note: RAI needed to schedule initial visit.

Mailing: 4300 Speedway
Unit 4404
Austin, TX 78765

855-527-8728
info@cstrategies.org

Physical: 6901 N. Lamar Blvd.
Suite 124
Austin, TX 78752