

## BHRS Provider Choice Form (BHSSBC/TMCA)

**Child's Name:** \_\_\_\_\_ **MAID #:** \_\_\_\_\_ **Today's Date:** \_\_\_\_\_

Please choose the in network provider you wish to receive BHR services from if these services are approved. Each provider that is in network and approved by the county where you/your child's Medical Assistance is registered is listed. Circle to clearly indicate choice- note age ranges. **NOTE: If you have primary commercial insurance and the services are for Autism Spectrum Disorder, these services may be covered under Pa. Act 62. Please check with your primary insurance for coverage and choose a provider who participates in your commercial insurance network and PerformCare.**

Bedford County	Ages
~ Alternative Community Resource Program P: 814-623-1212 F: 814-285-3023	0-21
~ Children's Behavioral Health P: 814-623-1051 F: 814-623-1895	0-21
~ Family Behavioral Resources P: 814-623-5007 F: 814-623-5405	0-21
~ Northwestern Human Services P: 814-472-6105 F: 814-472-6406	0-21
~ Youth Advocate Programs P: 814-624-0000 F: 814-624-0002	0-21

Somerset County	Ages
~ Alliance Health Wraparound/Sebastian LoNigro P: 1-866-626-0988 F: 724-430-0821	0-21
~ Alternative Community Resource Program P: 814-445-1717 F: 814-445-1885	0-21
~ Dennis Kashurba/Assist, Inc. P: 814-536-7313 F: 814-535-2177	0-21
~ Children's Behavioral Health P: 814-445-1358 F: 814-444-0965	0-21
~ Family Behavioral Resources P: 814-444-0620 F: 814-444-0640	0-21
~ Footsteps Psychological Services P: 814-266-5238 F: 814-266-1762	0-21
~ Northwestern Human Services P: 814-472-6105 F: 814-472-6406	0-21
~ Youth Advocate Programs P: 814-443-3956 F: 814-443-3957	0-21

Franklin/Fulton	Ages
~ Children's Behavioral Health P: 814-623-1051 F: 814-623-1895	0-21
~ Family Behavioral Resources Fulton P: 717-325-0223 Fulton F: 717-325-0228 Franklin P: 717-496-8127 Franklin F: 717-504-8962	0-21
~ Franklin Family Services P: 717-267-1515 F: 717-267-2316	0-21
~ Laurel Life Services P: 717-375-1516 F: 717-263-6049	3-21
~ Momentum Services P: 717-262-2183 F: 717-262-2486	0-21
~ PA Counseling P: 717-261-1218 F: 717-263-6571	0-21
~ Youth Advocate Programs P: 717-267-7887 F: 717-267-0787	0-21

~ Indicates Providers who provide ABA services

Member Contact Information (Member & Parent/Guardian name/Contact #): \_\_\_\_\_ Member Diagnosis: \_\_\_\_\_

Special Needs of Member (i.e. hearing-impaired, seeing-impaired, ESL): \_\_\_\_\_

To which Provider was referral information sent: \_\_\_\_\_

Member/Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_