Bed Hold Return Form

This form is used by an LTC facility that receives funding from San Diego County to inform Optum that a client has returned from an approved Bed Hold. This form must be completed within 24 hours of the client's return to the LTC Facility.

Please fax completed form to Optum at (888) 687-2515. Thank you.

Date	
Client Name	
Name of LTC Facility	
Contact Name at LTC Facility	
Contact Phone Number	
Contact Fax Number	
Date Bed Hold Began	
Date Client Returned to LTC Facility (Date bed hold ends)	
Comments (Including reason for bed hold)	

Please note the previous Optum authorization and dates for concurrent reviews remain unchanged.