



Special Treatment Program Admission Verification and Request for Initial Authorization

Please fax completed form to Optum at (888) 687-2515 after client has been admitted. Thank you.

Name of County Funded Facility Admitting Client	.
Type of LTC Facility	STP
Address of County Funded Facility	
Contact Person at County Funded Facility	
Contact Phone Number	
Client Name	
Client's Date of Birth	
Date Client Admitted	
Admitting Title 9, DSM Diagnosis	
Requested Authorization Dates	
Comments	

Contact Information for Optum:

LTC Phone Line: (800) 798-2254, Option 3, then 5

LTC Fax: (888) 687-2515