



CENTERSTONE

Centerstone's Fellowship House Residential Referral Form

Centerstone's Fellowship House Campus, a treatment facility in Anna for those who suffer with substance use disorders and co-occurring problems, offers residential treatment for men who are 18 years or older.

Please complete the following form and fax to (618) 833-2371 or (618) 833-6930. Then, call (618) 833-4456 to speak with Fellowship House staff for brief screening for admission and confirmation of documents faxed.

Referral Date: _____ Referring Worker: _____

Referring Organization: _____ City: _____

Phone Number: _____ Email: _____

Patient Name: _____ Primary Language: _____

Date of Birth: _____ Gender: _____ Race: _____

Social Security Number: _____ Type of Insurance: _____

Phone: _____ Best time to contact: _____ Ok to leave message? Yes No

Permanent Address: _____

Does the patient meet the following criteria:

- Is a male Illinois resident and at least 18 years old
- Is not actively experiencing mental health-related hallucinations that interfere with their functioning
- Is not currently experiencing suicidal or homicidal ideations or expressing intent to harm themselves or anyone else or engage in risky behaviors
- Diagnosed with a substance use disorder
- Willing to participate in services, including assessment, treatment planning, groups and individual sessions
- Meets ASAM Criteria:
 - Dimension 1: Minimal risk for severe withdrawal, does not need medical support
 - Dimension 2: No medical conditions or they are stable and being monitored
 - Dimension 3: Demonstrates repeated inability to control impulses, mental health requires structured environment, functional deficits require 24 hour setting to teach coping skills
 - Dimension 4: Marked difficulty or opposition to treatment with dangerous consequences, (or high severity in this dimension but not others)
 - Dimension 5: Has no recognition of the skills needed to prevent continued use with imminently dangerous consequences
 - Dimension 6: Environment is dangerous and the client lacks skills to cope outside of highly structured 24 hour setting
- Has Illinois Medicaid / Illinois Medicaid-Managed Care or no insurance and no/low income
- Possesses or can gain access to the following:
 - Government-issued ID

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- Insurance card (if applicable)

Please provide the following documentation to Centerstone:

- Medications prescribed
- Insurance card (if applicable)
- If transferring care from a hospital:
 - Labs
 - Vitals
 - Hospital discharge summary with diagnosis
 - Notes
 - Physical exam
 - Crisis screen

Next steps:

- Fax this form and the above documentation to (618) 833-2371 or (618) 833-6930.
- Call Centerstone's Fellowship House at (618) 833-4456 to begin the referral process and confirm your documents were received. The phone is answered 24/7.
- Get an assessment scheduled.
 - Assessments for Centerstone's Fellowship House residential services are scheduled Monday-Friday from 8 a.m. – 4:30 p.m.
 - It is important to schedule the assessment appointment **with** the patient for Centerstone's Fellowship House to ensure care is continued uninterrupted.
- If admitted, patient's medication must be brought to FH in original bottle.
 - Patient must bring 30 days of medication or 1 weeks' worth of medication and a prescription for refills.
 - All medications must be in the correct prescription bottles.
 - A doctor's orders for all medication samples must be included.

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