



PRECERTIFICATION FOR PSYCHOLOGICAL TESTING

In order to be authorized, psychological testing must be needed to establish a differential diagnosis that is crucial to establishing or modifying a treatment plan. Before requesting authorization for neuropsychological testing you must complete a face-to-face evaluation of sufficient detail to answer the questions on the authorization form. Additionally, testing must not be available from any other source, and any previous psychological testing results are either unavailable or more than 18 months old. Testing requested primarily for legal, employment, vocational, or educational purposes is most often not a covered benefit.

Testing is encouraged only when clearly indicated and necessary for treatment. This report must be received and certified by MHNet prior to testing. If testing is deemed clinically urgent and completion must be immediate, the request can be made by calling MHNet at the Customer Service number on the patient's ID card and requesting to speak with one of our Case Managers. In the event a Case Manager is not available you may speak with one of our Outpatient clinical supervisors.

PATIENT NAME _____ D.O.B. _____ AGE _____
INSURANCE PLAN _____ ID # _____
INSURED'S NAME _____ EMPLOYER GROUP _____

Current Diagnoses under evaluation (DSM 5)

Diagnoses _____
R/O diagnoses _____ Current Acute Clinical Symptoms _____

Patient referred to Requesting Psychologist by: (Name, Degree, Specialty, Phone)

Name _____ Degree _____
Phone _____ Specialty _____

1. Clinical interview data: (psycho/social/behavioral history, mental status exam, medications, impairments in functioning, etc.):

2. Purpose of testing (include referral question, differential diagnostic issues to be addressed, how treatment plan will be affected by results of testing):

3. Have resources for psychological evaluation been explored through the patient's place of employment or school?

_____ YES _____ NO
Explain _____

4. Which of the following diagnostic / assessment techniques have been completed?

_____ Diagnostic Interview _____ Mental Status Exam
_____ Clinical Review _____ Comprehensive Psycho-social-behavioral History
_____ Brief Rating Scale (e.g., BDI) _____ Behavioral Observation

