

Behavioral Health Co- Management Agreement among Primary Care Provider and Behavioral Health Provider

(Primary Care Provider/Practice Name)

Is initiating this Co-Management Agreement with the following Specialist/Practice

The practices listed above will establish a set of explicit co-management roles and clarify who will take the lead with each one.

The Primary Care Provider/Practice will provide all necessary information regarding all patients referred to the specialist in a timely and collaborative manner.

The Specialist/Practice will provide all necessary information regarding the patient and their recommended treatment to the Primary Care Provider/Practice in a timely and collaborative manner.

The Primary Care Provider/Practice and the Specialist/Practice will establish a mutually agreed upon method to evaluate the effectiveness of the treatment

This Co-Management Agreement is between the following primary care and specialty providers (include signatures):

Primary Care Provider (please print)

Primary Care Provider (signature)

Practice

Date

Specialist (please print)

Specialist (signature)

Practice/Department

Date