



Skilled Nursing Facility Discharge Notification

Please fax completed form to Optum within 24 hours of discharge. Fax to Optum at (888) 687-2515. Thank you.

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

Name of LTC Facility	
Type of LTC Facility	<input type="checkbox"/> CO-SNF <input type="checkbox"/> SNF Patch <input type="checkbox"/> NBU Patch <input type="checkbox"/> CO-SNF + NBU Patch
Name of LTC Facility Contact and Phone Number	
Name of Client	
Date of Admission	
Brief Description of Course of Treatment	
Date of Discharge	
Client Discharged to	
Reason for Discharge	
Check all that apply	<input type="checkbox"/> AWOL <input type="checkbox"/> AMA <input type="checkbox"/> Discharge to Acute Psychiatric Hospital <input type="checkbox"/> Discharge to Physical Health Hospital <input type="checkbox"/> Discharge to Other Locked/Secure Level of Care <input type="checkbox"/> Discharge to Community/Location:
Form Completed by	
Date Completed	