**Recovery Services Unlimited-**

**Referral Process**

**In Order to Provide A Referral for Services We Will Need the Following Documentation:**

1. Signed Release of Information: MDHHS- Consent to Provide Behavioral Health Information for Care Coordination Purposes

\*\*\*Must minimally include SWMBH, Referral Agency and Recovery Services Unlimited\*\*\*

1. RSU- Referral Form (Please include treatment recommendations such as Recovery Housing, Recovery Coaching and/or Outpatient Services. We would appreciate any additional information that you think will be helpful)
2. SUD Assessment- With a Primary Diagnosis of an SUD Disorder
3. Treatment Plan with Signature Page

**Please FAX all 4 pieces of Documentation to:**

**Recovery Services Unlimited**

**at (269) 397-2261**

**If you have any questions or need any assistance,**

**please call Brandi Clanton, Director of Recovery Services**

**directly at (269) 364-0663 or email bclanton@recoveryservicesunlimited.com**