Dept. of VT Health Access
NOB 1 South, 280 State Drive
Waterbury, VT 05671-1010

Vermont Chronic Care Initiative Referral Form

The Vermont Chronic Care Initiative (VCCI) is offered by the Department of Vermont Health Access to Vermont Medicaid members at no cost. The VCCI provides short term, holistic, intensive case management to improve individual and population health.

Fax completed referral form to: 802-288-1417

Questions? Call: 1-866-900-5004

Inclusion of current medication list, treatment note (related to referral) and lab information with referral is greatly appreciated. Thank you!

VCCI Quick-Screen

YES to any of the below? ⟹ Refer to VCCI!

Yes	No	
☐	☐	Member has comorbidities (new or prior dx), including mental health/substance use disorder and a need for monitoring of treatment plan or medication adherence; needs coordination with community resources including housing, food.
☐	☐	Member would benefit from community-based visits to support treatment plan, plan of care or redirection to patient centered medical home.
☐	☐	Member is new to Medicaid and needs orientation to the system of healthcare (i.e. PCP) and healthcare related resources (i.e. housing, food).
☐	☐	**For Providers only:** Do you spend more than 50% of your office visit on case management services (low self-management skills, housing, food, low literacy, trauma, or cognitive impairment)?

Member Information

Member aware of referral?	
If <18, is parent/guardian aware?	
Member Name:	
Date of Birth:	
Medicaid ID # (optional):	
Address:	
City, State, Zip:	
Phone Number:	
PCP Name:	
Primary Diagnosis:	
Reason for referral to	

Notes

Provider/Facility Information

Date of Referral:	
Referring Staff Name:	
Facility/Office:	
Address:	
Phone:	
Fax:	