



Blackfeet Tribal Behavioral Health

#12 Starr School Road
Browning, MT. 59417
P: (406) 338-2160 / F: (406)338-2006

Collaborative Referral Form

Referring Party: ☐ Tribal Court ☐ Journey to Recovery ☐ Crystal Creek Lodge ☐ Probation/Parole
☐ Family Services/CPS ☐ Napi Elementary ☐ BMS ☐ BHS ☐ Buffalo Hide Academy
☐ Blackfeet Veterans Alliance ☐ Heart Butte School ☐ Other: _____

Name of client: _____ Phone: _____

Requested Service(s): *Check all that apply*

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<input type="checkbox"/> Substance Use Disorder (SUD) Assessment	<input type="checkbox"/> ASAM 1.0 – Outpatient Treatment (OP)
<input type="checkbox"/> Peer Support	<input type="checkbox"/> ASAM 2.1 – Intensive Outpatient (IOP)
<input type="checkbox"/> Mental Health Evaluation	<input type="checkbox"/> Mental Health Therapy
<input type="checkbox"/> Other _____	<input type="checkbox"/> Case Management

Describe the reason for referral:

Referred by:

Name & Position Title

Date

Phone # or Email

Prohibition on re-disclosure: This information has been disclosed to you from records whose confidentiality is protected by Federal Law. Federal regulations **42 C.F.R. Part 2** prohibits you from disclosing this information further except with the specific written consent of the person to whom it pertains. There needs to be more than a general authorization to release medical or other information held by another party. **Federal Regulations** state that any person who violates this law's provision shall be fined no more than \$500.00 in any case of a first offense and not more than \$5,000.00 in the cases of each subsequent offense. **Health Insurance Portability and Accountability Act of 1966 ("HIPAA"), 45 C.F.R. PTS 160 & 164**, cannot be disclosed without my written consent unless otherwise provided for by the regulations. I also understand that I may revoke this consent in writing at any time except to the extent that action has been taken in reliance on it and that, in any event, this consent expires automatically as follows. Prohibit you from further disclosing this information except with the specific permission of the person to whom it pertains. A general authorization for the release of medical or other information, if helped by another party, is not sufficient for this purpose. Federal regulations state that any person who violates any provision of this law shall be fined not more than \$500.00 in any case of the first offense and not more than \$5,000.00 in the case of each subsequent violation.

Revised 7/25/2024