Warner Robins Center 644 Tallulah Trail Warner Robins, GA 31088 Intake phone number: 678-904-7053

Intake Fax#: 678-302-7342



Physician Referral for ABA Therapy for Autism Spectrum Disorders and Speech Therapy

Please fax completed form to: 678-302-7342 or e-mail to: nicole.irving@goalpointaba.com

Patient Name:		
Patient Date of Birth:		
Patient Diagnosis (ICD-10 code)		
Parent/Guardian Name:		
Patient Phone:		
Physician Name:		
Practice Name & Address:		
Practice Phone:	Fax:	
Service(s) Required (Please check all		
Applied Behavior Analysis (ABA) ☐ Behavior Identification Assessn ☐ Adaptive Behavior Treatment ☐ Family Adaptive Behavior Trea Speech Therapy ☐		
I hereby certify the medical necessity o	f the services listed above.	
XPhysician Signature	Data	Dhysician NDI#
r nysician Signature	Date	Physician NPI#

Accepted insurances for ABA

- GA Medicaid
- Caresource
- Amerigroup
- Peachstate
- BlueCross
- Humana
- Aetna
- United Healthcare