REQUESTING AN APPOINTMENT FOR ADHD

Students interested in having a Student Health Center (SHC) physician manage their ADHD while at Texas State must have an established diagnosis of ADHD. Students seeking medication for the treatment of ADHD are required to provide documentation of at least one of the following types of medical records:

- Neuropsychological testing by a psychologist supporting a diagnosis of ADHD.
- Evaluation by a psychiatrist leading to the diagnosis of ADHD
- Recent treatment by a psychiatrist for ADHD

and must complete a Prescription Insurance Information form (back side) if you will use insurance to cover the cost of prescriptions.

An appointment for ADHD cannot be scheduled until the required documentation has been reviewed by a Student Health Center (SHC) physician and approved.

Medical records should include any testing for ADHD conducted by a psychologist or psychiatrist and treatment noted. Medical records may be submitted to the **Texas State University Student Health Center Medical Records Department** by:

Fax Number: 512.245.9288

Mailing Address: Texas State University

601 University Drive

San Marcos, TX 78666-4538

Hand deliver: The Medical Records Department on the second floor

of the Student Health Center San Marcos campus.

If you have your medical records and Prescription Insurance Information form faxed or mailed to the SHC, you should contact the SHC Medical Records Department at 512.245.8437 to confirm that the records have been received. Allow five business days after the SHC receives the medical records for review. The SHC will contact the student to notify if approved and to schedule an appointment. For more information about requesting an appointment for ADHD please check www.healthcenter.txstate.edu or call the Medical Records Department at 512.245.8437.



Texas State University Student Health Center, 601 University Dr., San Marcos, TX 78666 Phone 512.245.2161 Fax 512.245.9288

Prescription Insurance Information / Intake Information

Patient name:	Date of birth: Best contact phone #:		
TXST ID# (A0):			
Local address	City	State	Zip:
Students seeking medication for the transeded because most of the time your your pharmacy.			
You should review your insurance car help from parents or other individuals Services by calling the number on you	who purchased your insurance cover	age or their employer's Huma	
Do you have health insurance?	YES (fill out <u>ALL</u> sections below)		d Pharmacy Information and Information sections below)
Policy holder's Zip code on file with	your insurance plan?		
Who is your Ph	armacy Benefits Manager (PBM) -		e Information
Name of PBM:	PBM examples: Optum RX, ExpPBM Address:		
Phone #:	Fax#:		
BIN# (if available):	PCN# (if available):		
RX ID# (if available):	RX Group # (if av	vailable):	
	Medical Insurance	Information	
Name of Insured (Policy Holder):			
Relationship of Patient to Insured (Ci	rcle One): Self Child	Spouse Other:	
Insurance Company:	Insurance F	Phone #:	
Insurance Address:			
Insurance ID #:	Insurance (Group #:	
	Preferred Pharmacy Examples: Walgre		
Name of Pharmacy:	Pharma	cy Address:	
	Emergency Contact	Information:	
Emergency Contact Name:	Rela	tionship:	
Emergency Contact Phone #			