

## Maternity Notification Form

Fax to 1-800-964-3627

**Important note:** This is not an authorization for hospital admission. Only completed referrals will be processed. Notification is not a guarantee that benefits will be paid. Payment of claims is subject to member eligibility, plan benefits and limitations, and requirements of federal and state law.

Member information					
Member name:					
Amerigroup ID #:				Medicaid/CHIP #:	
Address:					
City/State/ZIP:					
Date of birth:					
Home phone:		Cellphone:			
Emergency contact:		Phone:			
EDC:	Gravida:	Para:	(Term:      Preterm:      )	AB:	
WT:		HT:			
Current medications:					
Planned delivery site:					
Provider information					
Date of initial office visit:					
Provider name:					
NPI:		TIN:			
Name of office/clinic:					
Address:					
City/State/ZIP:					
Phone:		Fax:			
Please check all that apply:					
<input type="checkbox"/> Current preterm labor <input type="checkbox"/> Hypertension <input type="checkbox"/> Multiple gestation <input type="checkbox"/> Diabetes <input type="checkbox"/> Gestational diabetes <input type="checkbox"/> Current or history of substance use Specify substance: <div style="border: 1px solid black; height: 40px; margin-top: 5px;"></div> <input type="checkbox"/> Uterine/cervical abnormalities: <div style="border: 1px solid black; height: 60px; margin-top: 5px;"></div>			<input type="checkbox"/> History of PTL <input type="checkbox"/> History of PIH/pre-eclampsia <input type="checkbox"/> History of IUGR <input type="checkbox"/> History of GDM <input type="checkbox"/> Psychosocial risk (specify): <div style="border: 1px solid black; height: 70px; margin-top: 5px;"></div> <input type="checkbox"/> Other (specify): <div style="border: 1px solid black; height: 60px; margin-top: 5px;"></div>		
Form completed by:				Date:	

Amerigroup members in the Medicaid Rural Service Area and the STAR Kids program are served by Amerigroup Insurance Company; all other Amerigroup members in Texas are served by Amerigroup Texas, Inc.