



## SELF REFERRAL

### ALASKA MEDICAID COORDINATED CARE INITIATIVE (AMCCI)

The Division of Health Care Services (Division) is proud to announce an exciting new program, the Alaska Medicaid Coordinated Care Initiative (AMCCI).

The AMCCI is designed to assist Alaska Medicaid members to navigate the health care system and appropriately use the benefits of the Alaska Medicaid program. Members will receive one-on-one case management services such as coordination of services, scheduling appointments, addressing barriers, and getting referrals to specialists. Our goal is to help our members receive health care in the appropriate setting.

To participate in the AMCCI, please complete the form and send it by mail or fax to the address listed below. Thank you in advance for taking the time to complete this form.

Information Requested	
Name ( <i>first, middle, last</i> )	
Medicaid ID#	
Address	
City	
State/Zip	
Telephone Number	
Email Address	
Comments: Please describe the reason for this referral.	
<b>Please check ONE of the boxes and sign below.</b> If you are the legal guardian, you may sign for the member.	
<input type="checkbox"/> I want to participate in the AMCCI <input type="checkbox"/> I do not want to participate in the AMCCI	
Signature: _____ Date: _____	
Please check this box if you are signing as the legal guardian of this member <input type="checkbox"/>	

**To send the referral by mail:**

Alaska Medicaid Coordinated Care Initiative (AMCCI)  
MedExpert International, Inc.  
1300 Hancock Street  
Redwood City, CA 94063

**To send the referral by fax:**

Fax: (650) 326-6700

**For questions about AMCCI:**

Please visit the AMCCI webpage at:  
<http://dhss.alaska.gov/dhcs/Pages/amcci/default.aspx>

You may also contact the AMCCI staff members at:  
(907) 334-2400.