

MDHHS-6239, WISEWOMAN FAX TRANSMISSION
Michigan Department of Health and Human Services (MDHHS)
(New 4-25)

Date

From

Phone Number

Fax

MBCIS Number

Important Submission Instructions - Forms can be uploaded to DCH-File Transfer, faxed to 517-763-0290, or sent via secure email to MDHHS-MiWISEWOMAN@michigan.gov.

Include one fax cover sheet per participant and fax each participant's paperwork separately.

Forms Checklist

- BC3NP and WISEWOMAN Dual Enrollment form
- BC3NP and WISEWOMAN Participant Consent form
- WISEWOMAN Health Intake form
- WISEWOMAN Clinical Assessment form
- WISEWOMAN Contact form
- WISEWOMAN Follow-Up/Outcome Evaluation form
- WISEWOMAN Referral for Medical Evaluation
- Lab Work
- WISEWOMAN Case Management Form (Alert Values)

Comments

Claim Status: 866-930-6324

Leave your name, LCA, and number when leaving a voicemail message.

Claim Questions: MDHHS-Claims-CAN@michigan.gov

Program Questions: mdhhs-miwisewoman@michigan.gov

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