

In completing the field "Date Behavioral Health Services were first requested", please fill in the date that you (or someone else with your consent) first asked any BHR (wrap-around) provider, county MH/MR worker or behavioral health managed care plan for assistance in obtaining health services. Also fill in the name of the agency, county or MCO that was asked for assistance, the name of the person (maybe you) who asked and that person's relationship to your child.

Any complaints and problems associated with access to services should be initially directed to providers, counties or managed care organizations (if applicable). Complaints and problems not resolved in a timely manner can be directed to the following contacts in the Commonwealth's regional field offices of the Office of Mental Health and Substance Abuse Services:

REGIONAL FIELD OFFICE	TELEPHONE#
Northeast (Scranton) Field Office	570-963-4335
Southeast (Norristown) Field Office	610-313-5844
Central (Harrisburg) Field Office	717-705-8396
Western (Pittsburgh) Field Office	412-565-5226