



STP Bed Hold Return Form

This form is used by an LTC facility that receives funding from San Diego County to inform Optum that a client has returned from an approved Bed Hold. This form must be completed within 24 hours of the client's return to the LTC Facility.

Please fax completed form to Optum at (888) 687-2515. Thank you.

Date	Click or tap here to enter text.
Client Name	Click or tap here to enter text.
Name of LTC Facility	Click or tap here to enter text.
Contact Name at LTC Facility	Click or tap here to enter text.
Contact Phone Number	Click or tap here to enter text.
Contact Fax Number	Click or tap here to enter text.
Date Bed Hold Began	Click or tap here to enter text.
Date Client Returned to LTC Facility (Date bed hold ends)	Click or tap here to enter text.
Comments (Including reason for bed hold)	Click or tap here to enter text.

Please note the concurrent review due date remains unchanged.