

Today's Date: \_\_\_\_\_

Patient Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Parent/Legal Guardian: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_ Alternate Phone Number: \_\_\_\_\_

Patient Insurance: \_\_\_\_\_

*See back page for participating insurance companies.*

Reason for Referral or Consult: \_\_\_\_\_

PREMIER ALLERGIST LOCATIONS		
<b>MARYLAND</b>		<b>VIRGINIA</b>
Annapolis P 410-974-8332   F 410-571-3961	Glenn Dale P 301-860-1200   F 301-860-0050	Alexandria P 703-778-8201   F 703-888-3949
Baltimore/Dundalk P 410-282-2903   F 443-503-5894	Greenbelt P 301-474-8118   F 301-345-1271	Arlington P 571-229-5081   F 571-970-2442
Bel Air P 410-638-1999   F 410-638-6355	Hagerstown P 240-267-2216   F 240-513-7237	Fairfax P 703-573-4440   F 571-282-3356
Bowie P 301-833-0001   F 301-262-1178	North Bethesda P 240-747-5750   F 240-747-5753	Falls Church P 703-534-5500   F 703-534-4838
Columbia P 410-964-3888   F 410-964-4405	Pikesville P 410-486-2000   F 410-486-0825	Henrico P 804-527-1190   F 804-527-1199
Easton P 410-822-5575   F 410-770-3258	Rockville P 301-869-7820   F 301-762-2541	Midlothian P 804-794-9477   F 804-794-1793
Ellicott City P 410-772-8000   F 410-461-4000	Silver Spring P 301-681-6055   F 301-681-9670	Reston P 703-437-5151   F 703-437-4972
Frederick P 301-662-1244   F 301-662-0552	Towson P 410-321-0284   F 410-321-0286	Woodbridge P 703-490-5803   F 703-490-6443
Germantown P 301-972-9433   F 301-972-2767	Westminster P 410-857-7900   F 410-857-1150	<b>WASHINGTON, DC</b>
<b>PENNSYLVANIA</b>		Dupont Circle P 202-861-8888   F 202-861-8887
Chambersburg P 410-974-8332   F 410-571-3961	Bethlehem Township P 610-954-9260   F 610-954-9265	Foxhall Square P 202-966-7100   F 202-966-2196

**Referral Information**

Referring Provider: \_\_\_\_\_ Referring Provider NPI: \_\_\_\_\_

Sent by (Person sending this form): \_\_\_\_\_

Referring Phone Number: \_\_\_\_\_ Referring Fax Number: \_\_\_\_\_

*We accept a comprehensive list of insurance providers and are available to assist with financial counseling and insurance verification prior to a patient's visit. Most insurance policies do not require a referral to see an allergy specialist. If the patient's insurance requires a referral from their PCP to see a specialist, please include the referral with this form. Please contact the clinic directly for a complete list of accepted insurance providers.*

**MARYLAND & D.C.**

- BCBS PPO
- CIGNA
- UNITED HEALTHCARE UHC
- BCBS BLUECHOICE HMO
- AETNA PPO
- MEDICARE
- AETNA HMO
- AMERIHEALTH CARITAS
- COMMERCIAL
- MEDICAID MCO
- BCBS BLUECHOICE HMO
- AMERIGROUP
- PRIORITY PARTNERS
- MARYLAND PHYSICIANS CARE
- UHC MEDICAID

**PENNSYLVANIA**

- BCBS PPO
- AMERIHEALTH CARITAS
- BCBS HIGHMARK
- AETNA PPO
- UNITED HEALTHCARE UHC
- BCBS CAPITAL
- MEDICARE
- MEDICAID MCO
- TRICARE
- CIGNA

**VIRGINIA**

- BCBS PPO
- UNITED HEALTHCARE UHC
- CIGNA
- AETNA PPO
- MEDICARE
- BCBS BLUECHOICE HMO
- TRICARE
- AETNA HMO
- UHC MEDICAID
- FEDERAL/VETERANS

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