

INPATIENT FOLLOW UP GIFT CARD PROGRAM

(FOR BEHAVIORAL OR MENTAL HEALTH)

You can fill this out online at Righ computer.	tCare.SWHP.org/Members/Forms-Tools on your phone or
 \$20 gift card for going to your 7 date \$20 gift card for going to your 30 date \$20 gift card for going to your 30 date \$20 Be age 5 or older \$20 Be a RightCare member during the inp \$4 Be a RightCare member during all visit \$5 Make your appointments on time \$6 Fill out this form online or mail it to us \$7 Requests must be received within 3 mail 	day follow-up appointment oral or mental health patient stay ts s at the address below
TO BE COMPLETED BY MEMBER	
	Date of Birth: Phone #:
Mailing Address: APPOINTMENT DATES: 7 day follow up: 30 day follow up: Date of Discharge: Doctor Name:	Doctor Phone #:
*Incomplete requests may RightCare from Scott & WI MS-A4-144 ATTN: Member 1206 West Campu Temple, Texas 765 RCSWHP 4153 (09/19)	1-855-TX-RIGHT (1-855-897-4448) Affairs TTY 7-1-1 us Drive www.rightcare.swhp.org