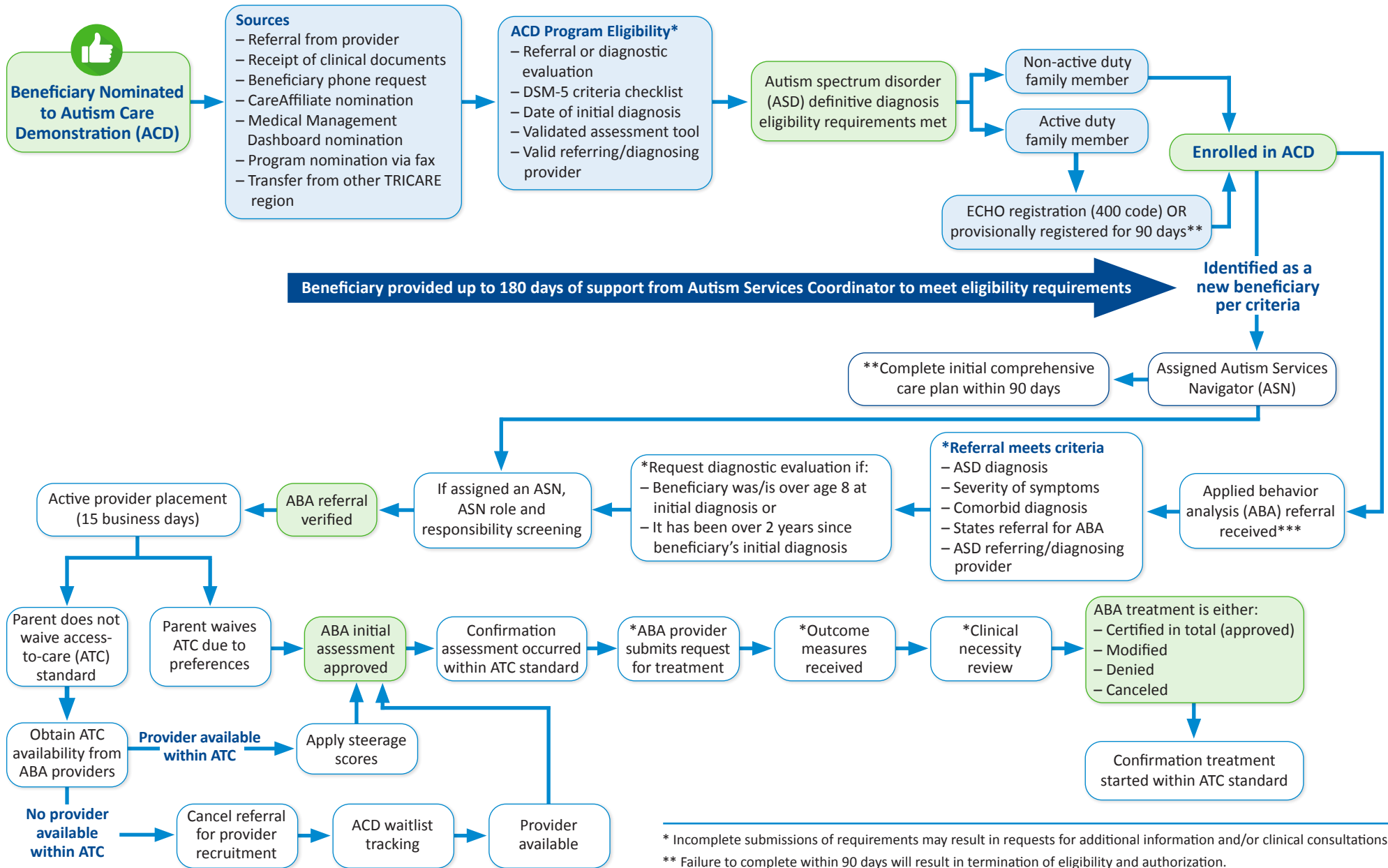


Autism Care Demonstration

Beneficiary Program Nomination to First Treatment Authorization



* Incomplete submissions of requirements may result in requests for additional information and/or clinical consultations.
 ** Failure to complete within 90 days will result in termination of eligibility and authorization.
 *** If submitted during pre-enrollment process, Health Net Federal Services, LLC (HNFS) will initiate review for minimum requirements and request additional information as needed. HNFS is unable to complete verification of the referral until after enrollment is complete.