

WV Birth to Three Referrals



How to Make a Referral

Making a referral to the WV Birth to Three program is a straightforward process:

- 1. Online Referral:** Go to the BTT website [WV Birth to Three - Early Intervention - Home page](#) and under the referrals tab, click on the WV BTT Secure Electronic Referral, click link below to be directed to the DocuSign page, or Scan the QR Code
<https://www.wvdhhr.org/birth23/referral.asp>
- 2. Fax:** Fax referral to us at (304) 267-3599. Please make sure all parts of the form are filled out so that we are able to reach you.
- 3. Email:** Complete the referral form and email to us at wvbttdata@groups.k12.wv.us. If you email the form you should receive a reply that it has been received and processed.
- 4. Call us:** You can call us at (681) 247-5265 to provide your information over the phone.

What is needed

What is needed to start the process is simple – if more is needed, we will request it

- 1. Referral:** The completed referral is the main thing that is needed as we use that to make initial contact with the family...correct contact information is vital...parent name, phone number, email if available, primary language spoken, reason for the referral, etc.
- 2. Medical Records:** If the child has a diagnosis the medical records will help with qualifying a child. They can be sent to us after the referral is placed, or we will request the records from you after we have completed the intake with the family.

What is NOT needed

- 1. Insurance approval:** We do not bill insurance and it does not have to be approved by them before the referral is sent to us.

How long the process takes

- 1.** We have 45 days from the (business) day that we receive the referral to have the IFSP written when a child is found eligible
- 2.** If the family has given us permission, we will notify the referral source if the child has been terminated or if the child will be receiving services once the eligibility meeting has taken place



WV BIRTH TO THREE REFERRAL FORM

WV Birth to Three (WVBTT) is a statewide system that supports families of children under the age of three (3) who have or are at risk of having a delay in their development.

If you prefer to print and handwrite your information, please refer to page 2 for the Drop-down Key.

I am a parent/caregiver making a referral for a child in my home. TODAY'S DATE:

CHILD'S LEGAL NAME

First Name MI Last Name, Suffix

DOB: COUNTY OF RESIDENCE: GENDER:

PRIMARY CONTACT - (the person that the child lives with)

First Name MI Last Name, Suffix

Relationship to child: If "Other" Relationship:

Address:

City: State: Zip Code:

Primary Contact Phone: Best time to Call: Time:

Primary Contact Email:

Alternate Contact Name: Alternate Phone:

Relationship to Child: If "Other" Relationship:

What is the native language/mode of communication in the home?

Is an interpreter needed for the family to access WV Birth to Three services? YES NO

Has this child/family been referred to or received services from WV Birth to Three before? YES NO Don't know

If YES, when

REASON FOR REFERRAL - Why are you contacting WVBTT? What questions do you have about the child's development?

How do you think that WVBTT can help? Does the child have a medical diagnosis? Please list.

If you are a parent/caregiver making this referral for the child listed above STOP HERE.

If you are not the "Primary Contact" listed above, please enter your contact information.

Referring Individual's Name:

Referring Individual's Relationship to child: If "Other" Relationship:

Agency Type:

Agency Name (if applicable):

Referring Individual's Agency Role:

Address:

City: State: Zip Code:

Phone: Fax: Email:

Has family been made aware that a referral has been made to WV Birth to Three? YES NO

If you prefer to speak with someone, please call 1-800-642-8522 OR return via fax to a *WVBTT Regional Office.

* WVBTT Regional Offices on page 3.

REQUIRED INFORMATION

NON-PARENT REFERRAL

Please use the information below if you are completing the
 WV Birth to Three Referral Form in writing.

DROP DOWN MENUS.

Gender

Male
Female
Ambiguous
Unknown

Primary & Alternative Contact Relationship to Child

Mother
Father
Brother
Sister
Half-Brother
Half-Sister
Stepmother
Stepfather
Stepbrother
Stepsister
Foster Mother
Foster Father
Grandfather
Grandmother
Uncle
Aunt
Guardian
Surrogate Parent
Friend/Acquaintance
Relative(s)
Other – Please identify

Best time to Call

Morning
Afternoon
Early Evening
Unknown

Referring Individual Relationship to Child

CPS Caseworker
Daycare Provider
Friend/Acquaintance
Physician-Other
Physician-Primary Care
Relative(s)
Other – please identify

Agency Type

Behavioral Health Agency
Birth Score Office
Birth to Three Program
Child Care
Child Protective Services (CPS) – CAPTA
Child Protective Services (CPS) Non-CAPTA
Children with Special Health Care Needs (CSHCN)
DHHR (other than CPS)
Early and Periodic Screening, Diagnostic, and Testing (ESPDT)
Foster Care Agency
HAPI
Health Department
Healthy Families
Help Me Grow
Hospice
Hospital Clinic
MCFH Special Needs Unit
Neonatal Intensive Care Unit (NICU)
Other
Out of State Agency
Parent as Teachers
Physician - Other
Physician – Primary Care
Shelter for the homeless or abused
Women, Infants, and Children (WIC)



WV BIRTH TO THREE
Office of Maternal, Child and Family Health
Bureau for Public Health
West Virginia Department of Health

Please send your referral to the regional office that supports the county where the child resides:

RAU I: Catholic Charities West Virginia *Brooke, Hancock, Marion, Marshall, Monongalia, Ohio, Tyler, Wetzel*
Address: 2000 Main Street Suite 222, Wheeling, WV 26003 **Phone:** 1-800-619-5697 **Fax:** (304) 214-5792

RAU II: The Arc of Mid-Ohio Valley *Calhoun, Doddridge, Gilmer, Harrison, Pleasants, Ritchie, Wirt, Wood*
Address: 1917 Dudley Avenue, Parkersburg, WV 26101 **Phone:** 1-866-401-8919 **Fax:** (304) 865-2072

RAU III: River Valley Child Development *Clay, Jackson, Kanawha, Roane*
Address: 1 Players Club Drive, Ste. 160, Charleston WV 25311 **Phone:** 1-844-885-0618 **Fax:** (304) 414-4461

RAU IV: River Valley Child Development *Boone, Cabell, Lincoln, Logan, Mason, Mingo, Putnam, Wayne*
Address: 432 2nd Street, Huntington, WV 25701 **Phone:** 1-866-982-8855 **Fax:** (304) 523-5556

RAU V: MountainHeart Community Services *Barbour, Lewis, Preston, Randolph, Taylor, Tucker, Upshur*
Address: 1200 Harrison Ave, Suite 220, Elkins, WV 26241 **Phone:** 1-800-449-7790 **Fax:** (304) 637-2845

RAU VI: MountainHeart Community Services *Braxton, Greenbrier, Monroe, Nicholas, Pocahontas, Summers, Webster*
Address: 25 Red Oak Shopping Center, Lewisburg, WV 24901 **Phone:** 1-866-229-0461 **Fax:** (304) 647-5521

RAU VII: MountainHeart Community Services *Fayette, McDowell, Mercer, Raleigh, Wyoming*
Address: 1411 North Walker Street, Princeton, WV 24740 **Phone:** 1-866-207-6198 **Fax:** (304) 425-7367

RAU VIII: Eastern Panhandle Instructional Cooperative – EPIC, *Berkeley, Grant, Hampshire, Hardy, Jefferson, Mineral, Morgan, Pendleton*
Address: 109 S. College Street, Martinsburg, WV 25401 **Phone:** 1-800-367-3728 **Fax:** (304) 267-3599