

Speech Therapy Referral Request

Expressable

February 24, 2026

Urgent • Confidential

Dear Refi Provi,

We are looking to coordinate care for a mutual patient who is seeking speech therapy services. To secure the required documentation and obtain approval from their insurance provider (if required), we need a referral on file.

We kindly request that you provide a referral for our patient at your earliest convenience. You may either complete and fax the attached referral form to us or, if required, submit the referral directly to the patient's insurance and fax us a copy of the submission. **Our fax number is 512-546-6034.** Your prompt response will help us expedite the process for our patient.

Thank you for your attention to this matter. If you have any questions or need additional information, please call us at 512-768-0274 and leave a detailed message referencing the patient's name.

Best regards,
Expressable Speech Therapy

Fax sent from:

Expressable Speech Therapy	Email	Phone	Fax
Insurance Intake Team	help@expressable.io	(512) 768-0274	(512) 546-6034

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Patient: Bruce Wayne	Speech Therapist: Ezequiel Therapist (1351813654)
DOB: 08/10/1985	Concerns: Stuttering
Ins ID: 9480207TH	Billing/Group Name: Expressable, Inc.
Evaluation Date: -	Billing/Group NPI: 1033714241

Our mutual patient needs an order/script to move forward with their evaluation or treatment. Please fax to 512-546-6034: an order/script with relevant medical records/reason for treatment OR a copy of the referral submitted directly to the patient's insurance.

If needed, you may utilize this request as the PCP order and sign below:

PCP Name:
PCP Signature:
NPI:
Date:

Please call us with any questions at 512-768-0274.

Thank you in advance for your help in coordinating care for our mutual patient!