

Cornerstone Behavioral Healthcare
32 College Ave, Suite 206
Waterville ME 04901
(207) 680-2065

Wabanaki, Division of Cornerstone
157 Park St, Suite 5
Bangor ME 04401
(207) 992-0411

Client Name:

Mailing Address:

Phone Number:

Email Address:

Date:

Dear

The intention of this letter is to inform you that I have reached out several times via phone calls and/or text messages to engage you in case management services, but have not received a response from you.

We would like to continue to partner with you to help you achieve your goals. If you have any questions, please contact me to schedule an appointment or come into the office to discuss this in person.

If I do not speak with you before _____ you will be discharged from case management services. Date

Sincerely,

CM Printed Name:
Case Manager/Home Health Coordinator
Cornerstone/Wabanaki Case Management
Cell: