



# Mental Health Champion Attestation Form

This form is confidential.

This form is to be completed ONLY for the individual who has completed mental health (MH), substance use or suicide prevention related training, education or volunteer work .

**Congratulations on being a MH Champion and serving the needs of your community. This attestation form is to be completed after you have engaged in at least six (6) hours of mental health, substance use or suicide prevention activities listed below. Competing this form allows you to earn My Health Pays\*\* rewards as you continue to be a MH Champion.**

### Member Information

**\*Required Field**

Today's Date: (mmddyyyy)

Your First Name:\*

Your Birth Date:\* (mmddyyyy)

Your Last Name:\*

Mailing Address:

City:

State:

Zip Code:

Home Phone:  -  -

Cell Phone:  -  -

Email:

Best day/time to reach you? \_\_\_\_\_

I hereby attest to completing at least six (6) hours of one of the following Behavioral Health efforts:

- MATCH module completion. Please include module and completion date: \_\_\_\_\_
- MH Training. Please include a copy of your certificate of completion: \_\_\_\_\_
- MH First Aid Training. Please include a copy of your certificate of completion: \_\_\_\_\_
- Peer Support. Please describe: \_\_\_\_\_
- Seven Challenges Program. Please include completion date: \_\_\_\_\_
- Suicide Prevention Training. Please include a copy of your certificate of completion: \_\_\_\_\_
- Substance Use Training. Please include a copy of your certificate of completion: \_\_\_\_\_
- Volunteer work. Please describe: \_\_\_\_\_
- \*Other Behavioral Health related project, assignment or activity. Please describe: \_\_\_\_\_

Signature: \_\_\_\_\_

**If you need immediate assistance with behavioral health needs please call the Doorway NH 2-1-1 or the National Suicide Prevention Lifeline at 1-800-271-8255.**

Completed forms can be sent electronically to MH\_Champion@centene.com or mailed to: NH Healthy Families, Attn: Megan Melanson, 2 Executive Park Drive, Bedford, NH 03110-9983

*\*Other BH related projects, assignments or activities require pre-approval. Please contact us at MH\_Champion@centene.com to obtain approval prior to completing this form.*

**\*\*Some restrictions and limitations apply. Each member can earn up to \$250 in cash and non-cash goods and services through June 30 each year.**