## **Areas of Expertise Form**

Mental health and substance abuse clinicians must use this form to identify their area of expertise for marketing in both the online and paper directories. Clinicians report this information in good faith; Blue Cross and Blue Shield of Vermont and our delegates do not verify this information. Clinicians can change this information at any time by submitting an updated Area of Expertise Form.

## Provider Name: \_\_\_\_\_

Provider NPI: \_\_\_\_\_

## Date: \_\_\_\_\_

Check the preferred box for the area(s) in which you have special training, extensive experience and/or prefer to practice.

Specialty	Preferred	Specialty	Preferred
Attention Deficit Disorders (ADD/ADHD)		Fertility	
Adoption related services		Medication management	
Anxiety and panic disorders		Men's issues	
Autism spectrum disorders		Neuropsychological testing	
(Autism/PDD/Asperger's)			
Bariatric psych assessment		Obsessive compulsive disorder	
Behavior modification		Pain management	
Bipolar disorders/manic depressive illness		Personality disorders	
Chemical dependency/chemical dependency		Psychological testing	
assessment			
Faith counseling		Schizophrenia disorders	
Compulsive gambling		Transgender issues	
Cultural issues		Sexual disorders	
Depression		Abuse, assault and trauma	
Dialectical behavioral therapy		Prenatal issues	
Divorce and blended family issues		Women's issues	
Behavioral therapy for autism spectrum disorders		Postpartum issues	
Eating disorders		Solution-Focused Brief Therapy	
Electroconvulsive therapy		End of life issues	
Family therapy		Geriatrics	
Gay/Lesbian/Bisexual issues		Cognitive behavioral therapy (CBT)	
Group therapy		Post-traumatic stress disorder (PTSD)	
HIV/AIDS issues			

## Signature of Clinician: \_\_\_\_\_

