Medical Prior Authorization Request Form

Urgent Phone: 1-800-816-5465	Routine Fax: 1-800-552-8633 ☐ Routine: up to a 15 day process	Urgent Fax: 1-888-430-9897 STAT ORDERS ONLY ☐ Urgent: up to a 72 hour process (See definition below)

- All fields are REQUIRED. An incomplete request form will delay the authorization process.
- **Definition of STAT/Expedited/Urgent requests**: must be supported by acute symptoms of sufficient severity such that the absence of immediate medical attention could reasonably be expected in any of the following:
  - Serious jeopardy to the health of the patient, including pregnant women or her fetus.
  - Serious impairment to bodily functions; serious dysfunction to any organ or body part.

Member Information

Last Name	First Name	ID # **A**
Date of Birth	Gender F ☐ M ☐	Date of Service

Requesting Provider Information (Primary Care or Specialist)

Name	Provider #	Tax ID	NPI
Telephone/Ext	Fax	Contact Person	

Servicing Provider or Facility (e.g., Hospital, Surgery Center, DME provider etc.)

Name	Provider #	Tax ID	NPI
Telephone	Fax	Contact Person	

Requested Service - ***Please Include supporting chart notes, Diagnostic tests & Lab Values when appropriate.***
For Non-Par providers, please include: Name, Address, Tax ID, NPI, Phone /Fax Numbers & Contact Person.

☐ In Patient Admission	☐ Out Patient Surgery	☐ Specialty Lab	☐ Non Par Provider
☐ Observation	☐ Chemotherapy	☐ Predetermination	☐ Non Par Facility
☐ Wound Care (Facility)	☐ Pain Management	☐ Durable Medical Equipment	☐ UM Provider
☐ WTN Wound Care	☐ Admin. of Medication	☐ Transplant	☐ Home Health Care
☐ Other(please specify)		☐ Clinical Trial ☐Medicare ☐Commercial **No Auth. required for CMS approved clinical trials –Medicare only.**	

Diagnosis: ICD Code and Description

Code	Code	Code
Description	Description	Description

Procedure: CPT Code and Description

Code	Description
Code	Description
Code	Description
Code	Description

Changes to be made to an existing authorization. (select all that apply)

Authorization #	Date of Service	Facility	ICD/CPT Code	Other

Additional Information: