

OUTPATIENT MEDICAID PRIOR AUTHORIZATION FORM

Request for additional units. Existing Authorization Units

Standard Request - Determination within 5 working days of receiving all necessary information, not to exceed 14 calendar days from receipt.
 Urgent Request - I certify this request is urgent and medically necessary to treat an injury, illness or condition (not life threatening) within 72 hours to avoid complications and unnecessary suffering or severe pain.

* INDICATES REQUIRED FIELD URGENT REQUESTS MUST BE SIGNED BY THE REQUESTING PHYSICIAN TO RECEIVE PRIORITY.

MEMBER INFORMATION

*Member ID Last Name, First *Date of Birth (MMDDYYYY)

ORDERING PROVIDER INFORMATION

*Ordering NPI *Ordering TIN Ordering Provider Contact Name
 Ordering Provider Name Phone *Fax

SERVICING PROVIDER / FACILITY INFORMATION

Same as Ordering Provider
 *Servicing NPI *Servicing TIN Servicing Provider Contact Name
 Servicing Provider/Facility Name Phone Fax

AUTHORIZATION REQUEST

*Primary Procedure Code (CPT/HCPCS) (Modifier)
 Additional Procedure Code (CPT/HCPCS) (Modifier)
 *Start Date OR Admission Date (MMDDYYYY) *Diagnosis Code (ICD-10)
 Additional Procedure Code (CPT/HCPCS) (Modifier)
 Additional Procedure Code (CPT/HCPCS) (Modifier)
 End Date OR Discharge Date (MMDDYYYY) Total Units/Visits/Days

***OUTPATIENT SERVICE TYPE** (Enter the Service type number in the box)

422 Biopharmacy	107 Respite Care	DME
299 Drug Testing	201 Sleep Study	417 Rental <input type="text"/>
709 Genetic Testing & Counseling	993 Transplant Evaluation	120 Purchase <input type="text"/>
249 Home health	209 Transplant Surgery	(Purchase Price)
390 Hospice Services	724 Transportation	
141 Imaging		
997 Office Visit/Consult		
794 Outpatient Services		
171 Outpatient Surgery		
202 Pain Management		
470 Personal Care Worker Services		
101 Physical Therapy		
790 Occupational Therapy		
701 Speech Therapy		

**ALL REQUIRED FIELDS MUST BE FILLED IN AS INCOMPLETE FORMS WILL BE REJECTED.
COPIES OF ALL SUPPORTING CLINICAL INFORMATION ARE REQUIRED. LACK OF CLINICAL INFORMATION MAY RESULT IN DELAYED DETERMINATION.**