



# OUTPATIENT AUTHORIZATION SUPPLEMENTAL FORM

This page is optional and meant to be used when an authorization request exceeds more than four (4) Procedure Codes. When applicable, please submit this form with the Outpatient Prior Authorization Form to the applicable fax number.

\* INDICATES REQUIRED FIELD

## MEMBER INFORMATION

\*Date of Birth (MMDDYYYY)

\* Medicaid/Member ID

Grid for Medicaid/Member ID (16 columns)

Last Name, First

Grid for Last Name, First (24 columns)

Grid for Date of Birth (8 columns)

## AUTHORIZATION REQUEST

\*Additional Procedure Code

Grid for Additional Procedure Code (5 columns)

\*Start Date OR Admission Date

Grid for Start Date OR Admission Date (8 columns)

\*End Date

Grid for End Date (8 columns)

Total Units/Visits/Days

Grid for Total Units/Visits/Days (7 columns)

\*Additional Procedure Code

Grid for Additional Procedure Code (5 columns)

\*Start Date OR Admission Date

Grid for Start Date OR Admission Date (8 columns)

\*End Date

Grid for End Date (8 columns)

Total Units/Visits/Days

Grid for Total Units/Visits/Days (7 columns)

\*Additional Procedure Code

Grid for Additional Procedure Code (5 columns)

\*Start Date OR Admission Date

Grid for Start Date OR Admission Date (8 columns)

\*End Date

Grid for End Date (8 columns)

Total Units/Visits/Days

Grid for Total Units/Visits/Days (7 columns)

\*Additional Procedure Code

Grid for Additional Procedure Code (5 columns)

\*Start Date OR Admission Date

Grid for Start Date OR Admission Date (8 columns)

\*End Date

Grid for End Date (8 columns)

Total Units/Visits/Days

Grid for Total Units/Visits/Days (7 columns)

\*Additional Procedure Code

Grid for Additional Procedure Code (5 columns)

\*Start Date OR Admission Date

Grid for Start Date OR Admission Date (8 columns)

\*End Date

Grid for End Date (8 columns)

Total Units/Visits/Days

Grid for Total Units/Visits/Days (7 columns)

\*Additional Procedure Code

Grid for Additional Procedure Code (5 columns)

\*Start Date OR Admission Date

Grid for Start Date OR Admission Date (8 columns)

\*End Date

Grid for End Date (8 columns)

Total Units/Visits/Days

Grid for Total Units/Visits/Days (7 columns)

\*Additional Procedure Code

Grid for Additional Procedure Code (5 columns)

\*Start Date OR Admission Date

Grid for Start Date OR Admission Date (8 columns)

\*End Date

Grid for End Date (8 columns)

Total Units/Visits/Days

Grid for Total Units/Visits/Days (7 columns)

\*Additional Procedure Code

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Grid for End Date (8 columns)

Total Units/Visits/Days

Grid for Total Units/Visits/Days (7 columns)

\*Additional Procedure Code

Grid for Additional Procedure Code (5 columns)

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Grid for Start Date OR Admission Date (8 columns)

\*End Date

Grid for End Date (8 columns)

Total Units/Visits/Days

Grid for Total Units/Visits/Days (7 columns)

\*Additional Procedure Code

Grid for Additional Procedure Code (5 columns)

\*Start Date OR Admission Date

Grid for Start Date OR Admission Date (8 columns)

\*End Date

Grid for End Date (8 columns)

Total Units/Visits/Days

Grid for Total Units/Visits/Days (7 columns)

**Disclaimer:** An authorization is not a guarantee of payment. Member must be eligible at the time services are rendered. Services must be a covered Health Plan Benefit and medically necessary with prior authorization as per Plan policy and procedures.

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