

Provider Bulletin

Subject:	Authorization Request for Inpatient Services		
Plan:	Coordinated Care Option 1	Bulletin Date:	January 09, 2015
Bulletin Number:	14-016	Effective Date:	January 15, 2015

The purpose of this bulletin is to inform participating Hospital Facilities of documentation requirements when requesting inpatient authorizations.

Effective January 15, 2015 the following supporting documentation for inpatient authorization request will require:

- Inpatient notification forms
- Patient's face sheet with demographics

If all required documentation is not received, a reference number will not be provided for that inpatient stay.

If you have questions regarding this bulletin, please contact your Provider Representative at (561) 659-1002.

Please insert this bulletin into your Provider Handbook. The policies and procedures in this bulletin supersede any related policies and procedures within the handbook.