

Provider Bulletin

Subject:	Status Requests		
Plan:	All Plans	Bulletin Date:	March 29, 2016
Bulletin Number:	16-002	Effective Date:	April 1, 2016

The purpose of this bulletin is to inform all providers of changes to the status request process. This is applicable to all providers that submit Claim Status Requests, Requests for Review Status and Authorization Status Requests.

Effective April 1, 2016, the Health Care District and Healthy Palm Beaches will require all Providers to submit all status requests in writing to fax number (561) 671-4665.

The status request forms are available on our website:

Claims/Request for Review Status Request Form

<http://www.hcdpbc.org/Modules/ShowDocument2.aspx?documentid=1200>

Authorization Status Request Form

<http://www.hcdpbc.org/Modules/ShowDocument2.aspx?documentid=1201>

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

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