



# Acute Inpatient/Post Acute Authorization Request Form

Notification of admission is required within 24 hours or the next business day.

Please call (217) 902-8949 to make verbal notification.

**Fax completed forms and clinical documents to:**

Inpatient Admissions: (217) 902-9750

Fax SNF/LTACH/Post-Acute completed forms to: (217) 902-9712

## MEMBER INFORMATION

Member Name

Member ID Number

Member Birthdate

Secondary Insurance

### Type of Admission

Inpatient.

Observation - Call Customer Service prior.

Behavioral Health.

Please indicate: IOP, PHP, Residential or Inpatient.

Substance Abuse.

Please indicate: IOP, PHP, Residential or Inpatient.

## ENCOUNTER INFORMATION

Diagnosis/DX Code

Encounter Date

Admitting Physician's Name and NPI

Facility Name

Facility NPI

Attending Provider's Name and NPI

Facility Address

Admission Date and Time

Source of Admission (ED, Transfer, Elective, etc.)

UR Phone Number

UR Fax Number

## GUARANTOR INFORMATION

Guarantor Name

Guarantor Relationship to Member

Guarantor Street Address

Guarantor City, State and ZIP

**For all admissions, please submit all clinical regarding the admission within 24 hours of notification.**

Post-acute admissions (Skilled Nursing Facility, Inpatient Rehabilitation Facility and Long-Term Acute Care Hospital) require prior authorization. Please view the section of the website specific to post-acute prior authorization instructions. Information can be faxed to (217) 902-9712 for SNF/LTACH/Rehab/post-acute.