

Prior Authorization Request- Faxed

- ▶ The most current version of our Authorization Request forms are available on our website.

- ▶ <https://www.cascadehealthalliance.com/providers/provider-resource-center/>

- ▶ Forms and Resources

- ▶ Authorization Request - Behavioral
 - ▶ Authorization Request - Dental
 - ▶ Authorization Request - Medical
 - ▶ Authorization Request - DME

- ▶ Tips for a successful submission:

- ▶ 1. Use **current version** of Auth Request form and clearly mark request type (ie: Urgent, Standard, Retro)
 - ▶ 2. Fill out **ALL** fields on the form (Physician Signature is not required unless form is being used as a prescription)
 - ▶ 3. Include current supporting clinical documentation
 - ▶ 4. Do NOT resubmit the same request multiple times
 - ▶ 5. Ensure you provide us with your name, direct phone number **and** a fax number to contact you at