

Authorization Exceptions Request

Please submit your request to Healthy Blue at <https://www.availity.com>* or via fax at 1-844-886-2750. Forms can be found at <https://provider.healthybluemo.com>. For Provider Services, call 1-833-405-9086.

Note: All clinical information to support requested services is required to be submitted with this form.

Member information				
Member name				
Last:	First:	MI:		
DCN:	DOB:	Today's date:		
Other insurance carrier (if applicable):	Policy # (if known):	Member phone:		
Is a home health agency making skilled nursing visits? <input type="checkbox"/> Yes <input type="checkbox"/> No				
If yes, agency name:		Agency phone:		
Member's ICD-10-CM Dx codes (must be related to the service or items requested):				
List all appropriate alternative covered services attempted and found ineffective for the above diagnosis:				
CPT® code (required):	Place of service:	Description:	Number of units (including daily quantity):	Duration of need:
Servicing provider (provider who will dispense and bill for services)				
Provider name:				
Provider address:				
Provider phone:		Provider fax:		
Service provider ID #:	TIN #:	NPI #:		
Referring provider				
Referring provider name:				
Referring provider address:				
Referring provider ID #:	TIN #:	NPI #:		
Contact name:	Contact phone:	Contact fax:		
Doctor's original signature (no stamps or photocopies):				

* Availity, LLC is an independent company providing administrative support services on behalf of Healthy Blue.

<https://provider.healthybluemo.com>

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