

BlueCare Plus (HMO SNP) SM
Utilization Management
Authorization Decision Fax Form

Date: _____ Reference Number: _____

Contact Name: _____ Fax Number: _____

Your request for authorization for:

Member Name: _____ ID Number: _____

Type of Service: _____

has been received and reviewed. The following decision has been made:

Date(s) of Service APPROVED: _____ TO: _____

Procedures (if applicable):

Date(s) of Service DENIED: _____ TO: _____

Reason for Denial: _____

Procedures (if applicable): _____

Note: Organization determination is subject to verification of all medical information and is valid only if such information is accurate and complete. If services are received out-of-network, the member's benefits may be reduced. This benefit determination was made in accordance with 42 CFR Part 410.

Please Fax to BlueCare Plus Utilization Management Department upon completion of this form

Fax: 1-866-325-6698

Telephone: 1-866-789-6314

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BlueCare Plus Tennessee • 1 Cameron Hill Circle • Chattanooga, TN 37402 • bluecareplus.bcbst.com
BlueCare Plus Tennessee, an Independent Licensee of the BlueCross BlueShield Association
BlueCare Plus Tennessee is an HMO SNP plan with a Medicare contract and a contract with the Tennessee Medicaid program.
Enrollment in BlueCare Plus Tennessee depends on contract renewal.