

Fax cover sheet – BCBSNC

To: Home & Community Care Transitions

H&C Phone Number: 1-855-692-6140

From (Name/Title):

Current facility/NPI:

Phone #:

Fax #:

Today's date:

Additional Contact Information (if applicable):

Acute Case Manager:

Acute Facility:

Phone #:

Patient Identifiers:

Patient name:

Patient DOB:

Member ID #:

Preservice authorization request

Fax number 1-855-847-7242

The following information is required:

Commonly found in Physician History & Physical (H&P):

- **Acute presentation and diagnosis**

Commonly found in most recent Physician Progress Note(s):

- **Current medical status demonstrating stability**
- **Ongoing skilled medical need(s)**

Commonly found in PT/OT/ST therapy evaluations:

- **Usual living setting***
- **Prior level of function***

Commonly found in most recent therapy progress note(s)

- **Current mobility, transfers & ambulation***
- **Current ADL status, e.g., feeding***
- **Current cognitive status***

**Applies when therapy is indicated*

Admission review/first continued stay authorization request

Fax number 1-844-206-7051

The following information is required:

- **Demographic sheet**
- **Acute hospital discharge summary**
- **Nursing admission assessment, nursing notes and/or CNA documentation** including respiratory treatment and restorative nursing
- **Physical, occupational, and speech therapy evaluations (within 48 hours of admission)**

Interim review/subsequent continued stay authorization requests

Fax number 1-844-206-7051

- **Discharge planning assessment/Case management or social work notes**
- **Physician and nursing notes** since last update
- **Nursing notes and/or CNA documentation** including details for continued medical necessity
- **Physical, occupational, and speech therapy notes** since last update (within 24 hours of review date)

NOMNC (Health plan ONLY; must be signed and valid)

Fax number 1-844-206-7051

Discharge review – dischargeinfo@navihealth.com

Fax number 1-877-651-1359

The following information is required:

- **Discharge instructions** (preferably within 24 hours of discharge)
- **Therapy discharge summaries** (if applicable)
- **Therapy services logs/billing logs** (if applicable) including minutes and visits recorded for entire stay

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