**PRE-SERVICE/
PRIOR AUTHORIZATION
REVIEW REQUEST – DME**

PBC fax to: 800-843-1114
FEP fax to: 866-948-8823
(Handwritten faxes not accepted.)

PREMERA BLUE CROSS

HOME MEDICAL EQUIPMENT/PROSTHETICS/ORTHOTICS

Request Date ____________
Anticipated Delivery Date ________

MEMBER/PATIENT ____ Date of Birth ________________________
Member ID ________________________________ Suffix ____________ Group # ________________________

REQUESTING PROVIDER	SERVICING PROVIDER
REQUESTING PROVIDER: ______________________	**SERVICING PROVIDER:** ______________________
Address: ______________________	Address: ______________________
City/State/ZIP: ______________________	City/State/ZIP: ______________________
Phone: ______________ Fax: ______________	Phone: ______________ Fax: ______________
Contact person: ______________________	Contact person: ______________________
Tax ID (**required**):______________________	Tax ID (**required**):______________________
NPI # (if available): ______	NPI # (if available): ______

☐ **URGENT REQUEST**
PLEASE NOTE: Scheduling issues do not meet the definition of urgent.
Urgent requests must be signed and include supporting documentation from the provider's office, noting that standard timeframes for making a non-urgent determination could:

- Seriously jeopardize the life/health of the patient or the ability to regain maximum function, **or**
- Seriously jeopardize the life, health or safety of the member or others, due to the member's psychological state, **or**
- In the opinion of a provider with knowledge of the member's medical or behavioral condition, subject the patient to adverse health consequences without the requested care or treatment.

I attest that this request meets the urgent definition described above: MD signature: ______________________________

ICD Diagnosis Codes ____

HCPCS Code	Requested Item	Quantity	Purchase Price	Or Rental Fee	Length of Rental

Note: Unless specifically requested elsewhere in this document, do not send a DNA or other genetic sample, or the results of any genetic typing, test, or analysis, including DNA.