



Precertification request

Please note, this communication applies to Anthem HealthKeepers Plus Medicaid products offered by HealthKeepers, Inc.
HealthKeepers Inc. prior authorization: **800-901-0020** Fax: **800-964-3627**

To prevent delay in processing your request, please fill out form in its entirety with all applicable information.

Today's date:

Provider return fax:

Member information

First name:	Last name:	HealthKeepers, Inc. member ID:
Address:		City, State ZIP code:
DOB:	Contact Phone:	
Additional member information:		

Referring provider **Participating** **Nonparticipating**

Full name:		
NPI:	Provider ID:	Tax ID number (TIN):
Office contact name:	Office phone:	Office fax:
Address:		City, State ZIP code:
Specialty:		

Servicing provider **Participating** **Nonparticipating**

Full name:		
NPI:	Provider ID:	TIN:
Office contact name:	Office phone:	Office fax:
Address:		City, State ZIP code:
Specialty:		

Servicing facility **Participating** **Nonparticipating**

Name:		
NPI:	Provider ID:	TIN:
Facility contact name:	Facility phone:	Facility fax:
Address:		City, State ZIP code:

Requested service (for type of service, check all that apply) **Date/date range of service:**

ICD-10 code(s):

CPT code(s) (include requested units):

Type of service: Outpatient Planned inpatient Emergent inpatient Skilled nursing facility
 Long-term services & supports/long-term care Home health
 Durable medical equipment Diagnostic study Hospice Office visit
 Personal care services Other:

Place of service: Hospital Ambulatory surgery center Office Home
 Independent lab Nursing facility Other:

Additional information:

Please submit all appropriate clinical information, provider contact information and any other required documents with this form to support your request. If this is a request for extension or modification of an existing authorization from Amerigroup, please provide the authorization number with your submission.

Emergent – use for ALL nonelective INPATIENT admissions only, when provider indicates that the admission was urgent, emergent or expedited (for admission on same day).

Urgent – use for OUTPATIENT services only, when provider indicates that the service is urgent, emergent or expedited.

<https://providers.anthem.com/va>