

Physical/Occupational/Speech Therapy requests require prior authorization regardless of member's age.

For Children three years old and younger:

To obtain an initial prior auth (PA), fax the following to the fax # on the form:

- A completed "BabyNet Universal PA form" (for consistency)
- The most recent full evaluation of the member's abilities and measure of delay, etc.
- The most recent notes documenting any progress achieved toward goals in the current therapy plan (not expected if request is a new case)
- The long and short term goals of therapy
- The frequency of therapy being requested
- The duration that therapy is expected to last
- A copy of the prescription from the physician- demonstrating physician involvement.

For those requesting an extension (more therapy sessions) to their original authorization:

- A completed "BabyNet Universal PA form" (for consistency)
- The most recent notes documenting any progress achieved toward goals in the current therapy plan
- The long and short term goals of therapy- any changes
- The frequency of therapy being requested- any changes
- The duration that therapy is expected to last- any changes
- A copy of the prescription from the physician- demonstrating physician involvement

For children over the age of three:

In addition to the above, please also send an IEP (Individualized Education Plan) along with all of the above information. If complete information is not received, the health plan will make a determination based the available information.

Please note: Authorizations are strictly based on evidence of medical necessity. Payment is dependent on member's eligibility at the time services are rendered and on benefit plan limits.