



National Benefit Fund (646) 473-9200 | Pension Fund y (646) 473-8666
Greater New York Benefit Fund y (212) 541-9150 | Pension Fund y (646) 473-8666
Home Care Employees Benefit and Pension Funds y (646) 473-9200
Home Health Aide Benefit Fund y (646) 473-7470

330 WEST 42ND STREET ,, NEW YORK, NY 10036-6977 ,, www.1199SEIUBenefits.org

Care Management Programs Department Service/Equipment Request for Authorization

Fax completed form to (646) 473-7447.

Request Submitted By: Integra Partners Request Date: _____

Name of Ordering/Treating

Physician: _____

TIN # (Tax ID): _____ Referring MD Fax #: (_____) _____ - _____

Name of Facility/Vendor Providing Service: _____

TIN # (Tax ID #): _____ Vendor Fax Number: (_____) _____ - _____



1199SEIU Member's Name: _____

Member ID:

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Patient (if not member): _____

Patient date of birth: ____ / ____ / ____ Age: ____

Is Patient's Condition Related To:

Employment? (Current or Previous)	† No	† Yes	If yes, date _____
Auto Accident?	† No	† Yes	If yes, date _____
Other Accident?	† No	† Yes	If yes, date & type of accident _____

Is legal action being taken? † No † Yes

Is there Other Insurance? † No † Yes List: _____



CPT/HCPCS Code(s) & Description _____

ICD-9 Code(s) & Description: _____

Address: _____

Vendor Authorized Signature: _____ Print Name: _____ Title: _____

Contact Person: _____ Title: _____

Telephone: (_____) _____ - _____

Please note: Any areas that are not filled out will be considered not applicable to your patient AND MAY AFFECT THE OUTCOME OF THIS REQUEST.

In order to process your request, the Provider TIN & Fax #'s along with the CPT/HCPS & ICD-9 codes must be included.

Complete this form and attach copies of pertinent medical documentation or copies of the physician's actual office chart to support your request. Fax completed form to (646) 473-7447.

The Fund's Pre-Authorization Call Center is available Monday to Friday, 9:00 AM to 5:00PM at (646) 473-7446.

Pre-authorization requirements are regularly updated and are therefore subject to change; periodically visit the website at www.1199SEIUBenefits.org for our most recent pre-authorization requirements, authorization request forms and other pertinent information located in the "For Providers" section.