Authorization Status Request

If you do not receive your Hospice Authorization Request Form back, you can submit an Authorization Status Request:

The Authorization Status Request will only be accepted on the 3ʳᵈ Friday of each month.

You must provide:
- ✓ Patient Name
- ✓ Client Index Number (CIN #)
- ✓ Date the Hospice ARF was submitted - (very important)
- ✓ Dates of Service requested

This will be researched and answered by CalOptima Authorization Assistants by the following Tuesday.

Authorization Status Requests received any other day than the 3ʳᵈ Friday of the month without prior approval will be **Rejected**.

A blank form has been provided for your use on the following page.

P.O. Box 11045
Orange, CA 92856
Phone: (714) 846-8444
Fax: (714) 246-8843

Authorization Status Request

Name of Hospice Agency:			Fax #:		Date:	

	Patient Name	ID#	Date Submitted	Dates of Service	Current Status (CalOptima Use Only)
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					