

## Prior Authorization Confirmation Order Form

The *Utah Association of Home Care (UAHC)* and several representatives from different insurance companies are pleased to provide this helpful tool to assist payers and providers with consistent, complete, and timely information for, and confirmation of, prior authorizations of home health services. It has been the desire of insurers and agencies to reduce costs for all, reduce confusion and decrease denials while improving communications through consistency and accuracy of information. This form is printed on NCR paper providing agencies with a yellow and a pink copy of the original and provides a wide spectrum of home care services which can be ordered and/or confirmed.

UAHC members may order the three-part Prior Authorization Forms at a cost of \$25.00 per unit of 100 forms plus shipping charges. Non UAHC Members may order the same for \$30.00 per unit + shipping.



To expedite delivery, please fill out the information below, make a copy for your file, and return (with payment) to:

**UAHC**  
1327 South 900 East  
Salt Lake City, Utah 84105-2301

Name \_\_\_\_\_  
Agency \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_

I would like to order \_\_\_\_\_ unit(s) of 100 forms @

- UAHC Member @ \$25.00 per unit \$ \_\_\_\_\_  
 Non UAHC Member @ \$ 30.00 per unit \$ \_\_\_\_\_  
 Shipping & Handling (\$5.00 - \$10.00) \$ \_\_\_\_\_

**TOTAL Payment Due:** \$

- Check Enclosed  
 Check in the Mail  
 Credit Card Payment
- American Express  
 Discover Card  
 MasterCard  
 Visa Exp. Date \_\_\_\_\_

Card No. \_\_\_\_\_  
 Name on Card \_\_\_\_\_  
 Signature \_\_\_\_\_

Phone (801) 487-8242  
 Fax (801) 487-6424

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[www.ua4hc.org](http://www.ua4hc.org)