

December 2019

## Reminder to fax all expedited authorization appeal requests

To ensure proper handling of Hoosier Healthwise, Healthy Indiana Plan and Hoosier Care Connect expedited authorization appeal requests, fax the request to **1-855-516-1083**. Requests received at this number are sent for expedited review. A decision will be made within 48 hours if expedition is approved.

Pre-service Hoosier Healthwise, Healthy Indiana Plan and Hoosier Care Connect authorization appeal requests must include written member consent in order to be processed. If written consent is not received within 10 days of the appeal being received, it will be dismissed. A valid appeal can be resubmitted for processing if requested within 60 days of the initial *Notice of Action*.

### [www.anthem.com/inmedicaiddoc](http://www.anthem.com/inmedicaiddoc)

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Providers who are contracted with Anthem Blue Cross and Blue Shield to serve Hoosier Healthwise, Healthy Indiana Plan and Hoosier Care Connect through an accountable care organization (ACO), participating medical group (PMG) or Independent Physician Association (IPA) are to follow guidelines and practices of the group. This includes but is not limited to authorization, covered benefits and services, and claims submittal. If you have questions, please contact your group administrator or your Anthem network representative.

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