



# Prevent Prior Authorization Delays With These Submission Guidelines

Ensure your requests are processed efficiently by following these essential steps to submit prior authorization (PA) requests.

Where to submit PA requests	
If you are...	Then...
Affiliated with an independent practice association (IPA)	Follow your IPA's procedures. Contact the IPA directly for guidance.
A directly contracting fee-for-service provider	Refer to the authorizations information on the provider website at <a href="https://bit.ly/Wellcare-Auths">https://bit.ly/Wellcare-Auths</a> .
Know the timelines to avoid delays	
Type of service	When to submit PA request
<b>Elective</b> inpatient or outpatient services	As soon as the need for service is identified.
<b>Routine</b> services or procedures	At least seven calendar days before the scheduled procedure.
<b>Urgent</b> services or procedures	At least 72 hours before the scheduled procedure.
<b>Emergency</b> services	No prior authorization required.

If you have not received a response within the expected timeframe, contact Wellcare at **866-999-3945**.

## Member inquiries for PA status

Educate members on the PA process and timelines. Encourage them to contact their physician's office directly for PA status updates.

## Tips to prevent processing delays:

- Submit requests on time (see timelines above).
- Include complete clinical notes; some surgical requests require submission of non-returnable color photos, models or X-rays.
- Provide full member details (e.g., date of birth, ID number).
- Include accurate CPT codes.
- Include anticipated date of service or place of service code and facility name.
- Add referring/servicing provider details (e.g., tax ID, National Provider Identifier, contact name, phone number).
- Submit to the correct department/entity.
- Specify the correct amount requested (e.g., number of visits, dosage, quantity).