

Only CSHCN Services Program Hospitals and Physicians Can Submit Nonemergency Ambulance Prior Authorization Form

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Children with Special Health Care Needs (CSHCN) Services Program providers must *not* complete any portion of the Nonemergency Ambulance Prior Authorization Request form to ensure the integrity of the request form.

Prior authorization must be obtained by the facility or the physician's staff for all nonemergency transports.

The Nonemergency Ambulance Prior Authorization Request form must be filled out and faxed or mailed to TMHP by the facility or the physician's staff that is most familiar with the client's condition. The CSHCN Services Program ambulance provider must not assist in completing or submitting any portion of this form.

For more information, call the TMHP-CSHCN Services Program Contact Center at 1-800-568-2413.