

Provider Bulletin



News and Information

Oct. 30, 2023

Submitting Claims for Services with Authorizations

UCare has streamlined its internal claim adjudication process for services that require authorization. Beginning in November, providers should experience more timely remittance for these services.

Reminders when billing services that require authorization

- An authorization must be on file that includes the service, dates and units being billed, or the claim will be denied (CARC 197: Precertification/authorization/notification/pre-treatment absent).
- Detailed information regarding authorization requirements and process can be found in the [UCare Provider Manual](#), Authorization and Notification Standards section.
- Services that require authorization can be found on the [UCare Authorization and Notification Requirements grids](#).

Provider appeals related to claims determinations can be submitted via UCare's [Provider Portal](#) or Provider Claim Reconsideration Request Form ([Claims & Billing](#) > Forms & Links). Medical records and rationale for the service performed are required to review the retrospective authorization request.