



## UCare Individual & Family Plans Restricted Member Prescribing Privileges for PCP Partners in a Clinic

Primary care providers (PCP) may authorize some or all providers in their clinic to see and prescribe medications for UCare Individual & Family Plans restricted members if the PCP is not available. By completing this form, you are giving permission for some or all of your partners to prescribe in your absence.

### Section I: Primary Physician

Date:	Member Name:	DOB:	UCare ID Number:
Primary Physician:		Provider ID Number	
Street Address:		Phone Number:	
City:	State:	Zip Code:	

### Section II: Referral Information

<input type="checkbox"/> Yes, any of the providers (Internal Medicine, Family/General Practice, and Pediatric) in this clinic may see and prescribe medications if I am not available.		
<input type="checkbox"/> No, only the providers listed below are allowed to see and prescribe medications if I am not available.		
Provider Name (First & Last Name):		NPI#:
Start Date:		End Date
PCP Signature:	Print PCP Name:	Date:

If more space is needed, please add the required information for each provider to a separate page and return with this document.

Fax this information to the UCare Individual & Family Plans Restricted Member fax line at 612-884-2316 as soon as possible.

Please call the UCare Individual & Family Plans Restricted Member phone line at 612-676-3397 with any questions. The Restricted Coordinator will return your call as soon as possible.