



POSTSERVICE CHANGE REQUEST FORM

Utilization Management Local Phone: (313) 221-5553
Utilization Management Toll Free Phone: (855) 511-0840
Utilization Management Local Fax: (313) 261-7199
Utilization Management Toll Free Fax: (833) 374-0036

Use this form to update procedure codes after a surgery has taken place, when the procedure that was performed is different from the procedure TurningPoint Healthcare Solutions, LLC authorized. Submit only one form per patient.

TurningPoint will complete postservice reviews only for procedure codes that require authorization by TurningPoint.*

*TurningPoint may not review requests that don't include the required information.

Have you submitted a claim to Priority Health? <input type="radio"/> Yes <input type="radio"/> No	
Have you submitted an appeal to Priority Health? <input type="radio"/> Yes <input type="radio"/> No	
Authorization number:	Member ID:
Member date of birth:	Group number:
Member name (Last, First):	
Date(s) of service:	Provider TIN:
Provider name:	NPI:
Contact person:	Phone number:
Provide detailed information about your request, including the procedures that TurningPoint authorized and which procedure(s) changed:	
Form completed by:	Date:
REMINDERS: 1. Fax this form to TurningPoint at (313) 261-7199. Include all pertinent clinical information, including but not limited to operating notes.	