

How the Preauthorization Process Works

(Health Care Providers and Division Staff Responsibilities)

NOTE: The preauthorization process is voluntary. **If the Health Care Provider determines a procedure is urgent/emergent, proceed without preauthorization. Health Care Providers are guaranteed payment when the preauthorization request has been approved by the Division.

Health Care Providers who want to admit injured workers for non-emergency inpatient hospital procedures, who want to perform selected outpatient/ambulatory procedures, or who perform any of the required peer review procedures; may contact the Division preauthorization nurse to request a review and subsequent determination decision.

Steps:

1. The Health Care Provider must complete the request for preauthorization review form, in writing and submit it to the Division by fax, mail, or by e-mail.

a. Fax: 307-777-8724;

b. E-mail: dws-wscpreauth@wyo.gov, brian.shenefelt1@wyo.gov, cinda.ewing2@wyo.gov or heather.sonnek@wyo.gov

c. Mail: 5221 Yellowstone Rd, Cheyenne, WY 82009, Attention Brian Shenefelt, RN, Cinda Ewing, RN, or Heather Sonnek

2. Provider request for preauthorization review forms are available online at http://www.wyomingworkforce.org/_docs/providers/Provider-Request-for-Preauthorization-Review.pdf or by contacting the Division at (307) 777-6307, (307) 777-5266 or (307) 777-6204 to request a copy.

3. Division preauthorization staff will be available by phone between the hours of 8:00 a.m. and 5:00 p.m. Mountain time. Health Care Providers can submit requests for review by fax or e-mail anytime during non-business hours and weekends. The request will be date stamped the next business day, and processed for the review procedure.

4. The Health Care Provider must supply relevant clinical information to the Division with the request. This must include chart notes that document the injured worker's history, physical examination, diagnostic test results, and the treatment plan. Please refer to the Division's Treatment Guidelines for information on what specific clinical information is reviewed and requested for required selected procedures.