

## Lock-In Provider Referral Form

**Please note: This referral form is only for lock-in members.**

Anthem Blue Cross and Blue Shield Medicaid (Anthem) lock-in providers, please note:

- Lock-in referrals for provider consult and treatment are valid for one year with unlimited visits.
- This referral form may only be used for referral from a PCP to a participating specialist.
- Referrals to nonparticipating providers require prior authorization.
- Services rendered without a referral will not be covered by Anthem.
- A specialist should not refer to another specialist. Additional specialty services must be coordinated through the PCP.

Member information		
Member name:	Member ID:	DOB:
Reason for referral:		
Referring PCP/designated lock-in provider		
Provider name:	NPI:	TIN:
ICD-10 code and description:		
Person who completed form:		
Phone:	Fax:	
Referred to provider information		
Provider name:	Start date:	
Provider NPI:	Provider TIN:	
Group NPI:	Specialty type:	
CPT code(s): (99213-99215)		
Phone:	Fax:	

**Signature of referring PCP/provider**

**Date**

Fax a copy of this completed form to **1-844-206-3452** or mail to:

Anthem Blue Cross and Blue Shield Medicaid  
HCMS/Case Management — L.I., 3rd Floor  
13550 Triton Park Blvd.  
Louisville, KY 40223

If you have any questions, call Case Management toll free at **1-855-661-2027, ext. 1061035259**, Monday through Friday, from 8 a.m. to 5 p.m., except holidays. Please provide a copy of this lock-in referral form to the specialist and the member.

**Important note:** You are not permitted to use or disclose Protected Health Information about individuals who you are not treating or are not enrolled to your practice. This applies to Protected Health Information accessible in any online tool, sent in any medium including mail, email, fax or other electronic transmission.

<https://mediproviders.anthem.com/ky>

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