

McLaren Convenient/Prompt Care Centers

PRIOR AUTHORIZATION/FINANCIAL RESPONSIBILITY

- 1458 W. Center Ave.
Essexville, MI 48732
(989) 6895-4600
- 1459 S. Center Rd.
Burton, MI 48509
(810) 496-0900
- 6910 S. Cedar St.
Lansing, MI 48911
(517) 975-3110
- 2420 Owen Rd.
Fenton, MI 48430
(810) 496-2400
- 1254 N. Main
Lapeer, MI 48446
(810) 667-7040

Your health insurance _____ requires prior authorization and/or network participation for each visit before being treated at a McLaren Convenient Care Center.

Please check one of the following categories that applies to your visit to this facility today:

1. _____ This is a true medical emergency and immediate treatment is required.
2. _____ My primary care physician, Dr. _____ or his/her alternate, Dr. _____ authorized treatment at McLaren Convenient/Prompt Care.
3. _____ My primary care physician was not available. Authorization was obtained by calling the appropriate "hotline" number. Authorization number is _____.
4. _____ I did not obtain the appropriate authorization.

Please provide the following information:

For illness – Date of onset: _____ / _____ / _____

For injury – Date of injury: _____ / _____ / _____ Where: _____

How: _____

I am aware that failure to obtain proper authorization may result in rejection of this claim and the charges would then become my responsibility.

Signature of Patient/Parent/Legal Guardian

Date