

**McLaren Print System Order**

Order No: 7574  
Order Date: 2014-12-11  
User: Jennifer Dixon  
Phone: 810-342-2138

Ship Location: MRI / JENI DIXON  
750 S, Ballenger Hwy  
Flint, MI 48532

Forms  
Quantity: 500  
Paragon Dept No: 32113  
Dept Name: MRI  
Company Number: 60

Order Total Price: 0.00

Item Number: M-22054  
Item Description: Insurance Pre Authorization Request  
Revision Date: 12/2014  
Print: 1 sided black and white  
Paper: 20# White Text  
Size: 8.5 x 11  
Fold:  
Finish:  
Drill: None  
Misc Info:

McLaren Flint  
INSURANCE PRE-AUTHORIZATION REQUEST

**Please Note:**  
All Providers, Referrals, and Authorizations must be put under the physical address of:  
401 S. Ballenger Hwy., Flint, MI 48502 (McLaren Flint) NP#190284312

Ordering Physician: \_\_\_\_\_  
Primary Care Physician: \_\_\_\_\_  
Fax #: \_\_\_\_\_  
Patient's Name: \_\_\_\_\_  
Patient's DOB: \_\_\_\_\_  
All Health Insurances: \_\_\_\_\_  
Date of Service: \_\_\_\_/\_\_\_\_/\_\_\_\_ Office Contact: \_\_\_\_\_

<input type="checkbox"/> Pre-Auth	CPT Code(s)
CT of _____	_____
CT of _____	_____
CT of _____	_____
MR of _____	_____
MR of _____	_____
MR of _____	_____
PET/CT	_____
Nuc. Med:	_____
Study of _____	_____

A.A.M. (800) 728-8008     MHC: 1-877-843-3210     Hurley PPO  
 Care Core (800) 750-8744     Cigna: 1-800-880-4482     Genesis PPO  
 Blue Care Network: (800) 392-2512     McLaren Cent. Ref. Dept.  
 Other: \_\_\_\_\_

