

## Supporting Documentation Routing Form - for pending claims only

### Instructions

- Use this for
  - To submit required documentation to substantiate payment on a pending claim and you have NOT received a medical records request letter from WyoBlue Advantage Health Plan.

- Do not use this form
  - If you have received medical records request letter from WyoBlue Advantage Health Plan; follow the instructions on the request letter.
  - To submit claim payment disputes or appeals; refer to the Provider Manual for instructions.

- Fill in all fields for proper routing; incomplete forms will not be processed.

- Attach all documentation to support the claim, including but not limited to physician notes, medical records, lab records etc

### Provider information:

Name of Provider of Services:	
Rendering NPI #:	Billing NPI #:
Provider Tax ID #:	
Submitter Name:	Submitter Phone #:

### Claim information:

Claim Number:	(if multiple claims, list in comment section)
Date of Service:	
Billed Charges:	Review Procedure code(s):

### Member information:

Member First Name:	Member Last Name:	Member Date of Birth: MM/DD/YYYY
Subscriber ID#: (include all characters/prefix):		

### Comments:

(Type up to 1000 characters):

Type of correspondence attached:

Medical Records

Other (explain in first line in comments)