



Right Choices Program Referral Request Form

Requesting Provider Information

Requesting Provider ID: _____ NPI _____ Name: _____

Member Information

Member ID: _____ Birth Date: _____

Last Name: _____ First Name: _____

Referral Request Information

Please select the appropriate action:

- I authorize this member to be seen by the physician/practice/pharmacy listed below for the dates indicated. Please add physician/practice/pharmacy to the member's list of approved providers.
- I authorize that the member's lock-in pharmacy be changed to the pharmacy listed below on the effective date indicated.
- I authorize that the selected provider/practice/pharmacy be removed from the member's list of approved providers.

Provider ID: _____ ID Type: _____ Name: _____

Taxonomy: _____ Provider Type: _____ Specialty: _____

Effective Date: _____

Guidelines for Lock-in Right Choices Program Referrals

1. Members identified with high utilization are assigned to primary lock-in providers, such as:
 - One primary medical provider (PMP)
 - One pharmacy
 - One hospital (for non-emergent visits)
2. Approved specialty providers Typically, members are locked in to all three provider types. However, members can be locked in to just one provider type (e.g., pharmacy). If a member requires specialty services or services at a non-lock-in pharmacy, the PMP must make the referral for those services to be reimbursed.

The Indiana Health Coverage Programs (IHCP) reimburses only the providers to whom the member is restricted, unless a referral is on file with the member's Right Choices Program (RCP) Administrator or the service is for an emergency condition. If the member receives non-emergency services from providers that are not locked in, the IHCP does not reimburse the services.

3. PMPs are encouraged to provide RCP referrals for all Medicaid services, including carved-out services. This process provides better coordination of care among providers. This also allows members to obtain prescriptions written by the referral providers at the member's lock-in pharmacy.
4. If an RCP member presents a prescription at the lock-in pharmacy from a prescriber who is not the primary lock-in provider or a valid referral provider, the claim will be denied. If an RCP member presents a prescription to a pharmacy not on the member's lock-in list, the claim will be denied.
5. Claims for nonemergency services rendered by a provider not assigned or referred to an RCP member are denied.
6. The provider types to which members are most often restricted are physicians, pharmacies and hospitals. A member can be restricted to other provider types if such action is warranted.
7. MCEs may require selection and lock-in for behavioral health providers and dental services, because these services are highly likely to generate prescriptions, especially for controlled substances.
8. The IHCP reimburses any provider for emergency services if the RCP member's case is related to a true emergency.