

Pregnancy Notification Form

Fast Fax

To notify UnitedHealthcare of pregnant patients digitally and reduce paperwork, you can also use Care Conductor and Notification of Pregnancy on the UnitedHealthcare Provider Portal.

Please fax completed form to 1-877-353-6913.

Member ID #:

Group #:

Patient Name:

Street Address:

City

State:

Phone:

Date of Birth:

EDC:

Gestational Age:

Medical & Pregnancy History

- This patient has a history of pre-term delivery.
To prior authorize 17P or Makena, please call 1-866-604-3267 or fax 1-866-950-7757.
- This patient has other pregnancy-related complications. Please list:
- Other pertinent clinical history:
- Other:

Physician:

Provider Group Name:

Street Address:

City:

State:

Zip:

Phone:

Physician Provider ID/TIN #:

Member's personal health information is kept private in accordance with their plan's privacy policy. For more information, please contact the number provided.

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