Important Update: URGENT Prior Authorization (PA) requests submission

Dear CHCN Providers,

Effective **September 1, 2026**, all CHCN **Prior Authorization (PA) requests submitted as URGENT** must include a **Date of Service (DOS**) on the PA form.

Any urgent PA request received without a Date of Service listed will be considered incomplete, and the authorization request will be cancelled. Providers will be required to resubmit a completed Prior Authorization form with all required information, including the Date of Service, for the request to be processed.

This change is being implemented to ensure a timely and accurate review of urgent authorization requests and to minimize delays in processing.

Please review your submission processes and ensure that all urgent PA forms are fully completed before submission.

For any questions, please email Provider Services Department at providerservices@chcnetwork.org for assistance.

Thank you for your cooperation.

CHCN Utilization Management Team