THE STATE of ALASKA
GOVERNOR BILL WALKER

Department of Health and Social Services

DIVISION OF PUBLIC HEALTH
Section of Epidemiology

3601 C Street, Suite 540
Anchorage, Alaska 99503
Main: 907.269.8000
Fax: 907.562.7802

REFERRAL AND AUTHORIZATION FOR TB SCREENING AND FOLLOW-UP SERVICES

DATE: _____

PROVIDER/FACILITY:_____

CLIENT: _____ **DOB:** _____

SERVICE(S) REQUESTED:

☐ CHEST X-RAY (CPT 71010) Single View	Authorization #: _____ reimbursement up to $125 allowed
☐ HEPATIC PANEL (CPT 80076)	Authorization #: _____ reimbursement up to $110 allowed
☐ VENIPUNCTURE (CPT 36415)	Authorization #: _____ reimbursement up to $40 allowed
☐ Other_____	Authorization #: _____

NOTE: Reimbursement is ONLY available for the services authorized above. See reverse side for additional information.

DIAGNOSIS: _____

PHYSICIAN: Dr. Joseph McLaughlin, State of Alaska Section of Epidemiology, NPI: 1245523257

SERVICE(S) REQUESTED BY: _____, **PHN**

☐**FAX REPORT/RESULTS TO:** _____

☐**MAIL X-RAY CD/FILM TO:** _____

_____

Please send invoice and this authorization to:
Attn: Jessica Grantier
Alaska DHSS, DPH, Section of Epidemiology/TB Program
3601 C Street, Ste. 540
Anchorage, AK 99503
Phone: (907) 269-8000
Fax: (907) 563-7868

Thank You

NOTE:

The Alaska TB Program is the payer of last resort and authorizes payment not to exceed the listed amounts for the targeted diagnostic services listed on this form. To qualify for payment through the Alaska TB Program, patients must be *without* health insurance coverage for the requested services. Only single view chest x-rays, hepatic panels and venipuncture can be authorized by public health nurses without prior approval from the Alaska TB Program. The Alaska TB Program *does not* provide payment for radiologic interpretation of chest x-rays (71010-26); all films are sent to our contract radiologist for review and interpretation.

LFTs and venipuncture may be authorized for high risk (HIV +, liver disease, alcohol abuse, etc.) or symptomatic patients who are being treated for latent tuberculosis infection or active tuberculosis. The Alaska TB Program **will not** authorize payment for routine monitoring of LFTs in low risk individuals.

When patients have insurance coverage, the Alaska TB Program should not be balance billed and will not pay for costs that exceed payments received from the patient's third party payer.