

NEWBORN SCREENING BENEFITS PRIOR APPROVAL REQUEST

Texas Department of State Health Services

Confirmatory laboratory procedures other than those in the Allowable Benefits List may be allowed and billed with prior approval from the Texas Department of State Health Services (DSHS).

Requests for prior approval must be faxed to:

512-776-7593

Attention: DSHS NBS Benefits, Medical Director Debra Freedenberg, MD, PhD

NBS Benefits will respond within 7 business days. Please check the box below if an immediate response is needed and follow-up with a phone call to the Newborn Screening Unit at 512-776-2983.

Date of Request:	Check here if URGENT! (The patient is in the clinic and needs lab specimen drawn today.)	<u> </u>
Service or Laboratory Procedure:		
Reason for Request:		
Confirm Diagnosis:		
Patient Name:	DOB:	
Has individual been approved for NBS Benefits?	Yes □ *No □	
*If not approved prior to this request, the Presun Eligibility Application must be submitted immed	•	
Name of Requester:		
Telephone #:	Fax #:	
Physician Name:		
Physician Signature:		
NBS Benefits Only Approved: ☐ YES ☐ NO	☐ All Clients ☐ This Client	Only
NBS Medical Director	 Date	

Questions? Call 512-776-2983 or 800-252-8023 ext. 2983