Authorization Details 3/18/25, 4:27 PM



**Authorization Information** 

**Authorization #:** 25031802710313600010

**Status:** APPROVED

**Processed By:** 

Place Of Service: OFFICE

**LOS:** 0

**Priority Status:** 2 - STANDARD

**HP Authorization #:** Request Category:

Service Type:

**Decision Date:** 3/18/2025

**Admit Source:** Facility Code:

**Patient Mailing Address** 

3090 E HOME AVE FRESNO,CA 937034011

**Patient Information** 

Patient Name: MCCLELLAND, KELLI A

 DOB:
 7/21/1985

 Age:
 39.658

 Gender:
 FEMALE

 Memb ID:
 98367744C

**Healthplan:** HNM **PCP OV Co-Pay:** N/A

**Service Area:** 

**Referring Physician Information** 

Name: MALLARD WARREN, GAIL MAUREEN

**Provider ID:** 1487665535

**Specialty:** OBSTETRICS & GYNECOLOGY

**Address:** 645 S MINNEWAWA

AVE

FRESNO,CA 937274141

**Phone:** (800)492-4227 **Fax:** (833)918-2250

**Service Area:** 

Company ID: UPN

 Requested Date:
 03/18/2025

 Time:
 15:02:45

 Auth/Action Date:
 03/18/2025

 Expiration Date:
 07/16/2025

Authorized Units: 0
Requested Units: 0
Certification Type:
Auth Service Pkg:

Admit Type: Patient Status:

**Home Phone:** (559)417-4902

**Diagnosis Information** 

Code	Version	Description	LOINC Code
N39.3	10	STRESS INCONTINENCE (FEMALE) (MALE)	

**Performing Physician Information** 

Name: RAINWATER, HAROLD

G

Provider ID: 1790780658 Specialty: UROLOGY

**Address:** 6113 N FRESNO ST,STE

101

FRESNO,CA 937105207

**Phone:** (559)438-2777 **Fax:** (833)518-1974

**Service Area:** 

Services

Statu	Auth			Service	Type	Description	Modifiers						Modifiers					Discharge								
	Action	Expiration	Grp				1	2	3	4	_ `	/ Pay	Ins	Date	Date	туре	Source	Qty	Catg	туре		Line Amount				
				99214		OFFICE O/P EST MOD 30-39 MIN			,		1.0	0.0	0.00	)				1.0				0.00	0.00			
				99204		OFFICE O/P NEW MOD 45-59 MIN					1.0	0.0	0.00	)				1.0				0.00	0.00			
				81003		URINALYSIS AUTO W/O SCOPE					1.0	0.0	0.00	)				1.0				0.00	0.00			
				87184	-	MICROBE SUSCEPTIBLE DISK					1.0	0.0	0.00	)				1.0				0.00	0.00			
				87086		URINE CULTURE/COLONY COUNT					1.0	0.0	0.00	)				1.0				0.00	0.00			
				87088		URINE BACTERIA CULTURE					1.0	0.0	0.00	)				1.0				0.00	0.00			

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	5	1798		US URINE CAPACITY MEASURE		1.0	0	0.00	0.00			1.0			0.00	0.00
	5	2000	Р	CYSTOSCOPY		1.0	0	0.00	0.00			1.0			0.00	0.00
	5	1701		Insert bladder Catheter		1.0	0	0.00	0.00			1.0			0.00	0.00
	5	1725		SIMPLE CYSTOMETROGRAM	— М	1.0	0	0.00	0.00			1.0			0.00	0.00

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