**Pre-Certification for Acne**

**Patient Information**

Name

Address City State Zip

Date of Birth Social Security Number

**Insurance Information**

Name of Insurance

Insurance Phone Number Policy Holder Name

Plan ID Group Number

Plan Address City State Zip

**Procedure**

Diagnosis: 706.1/Acne

Procedure: 17360 Chemical Peel 10040 Acne Surgery 11900/11901 Cortisone Injections

Date of Procedure

Body Site(s) to be Treated

History of Medications Tried

**Physician Information**

Name: Riva Aesthetic Dermatology

Tax ID Number: 45-5403384

Address: 17039 Kenton Dr., Ste. 100 Cornelius, NC 28031

Phone Number: 704-896-8837

Fax Number: 704-896-8892

Office Contact Name: Nurse

NPI Number: 1740394543

**To Be Completed During Precertification**

Name of Contact Contact Phone Number

Precertification Number CPT/HCPCS Codes

Coding Required for Claim