

## AUTHORIZATION/REFERRAL INQUIRY

All Searches	Patient Last Name: <input type="text"/>	Patient First Name: <input type="text"/>
All Searches	Insurance ID: <input type="text"/>	Date of Birth: <input type="text"/>
Referrals Only	Referral ID: <input type="text"/>	Auth Request Date: <input type="text"/>
EOBs Only	Check Date From: <input type="text"/>	Check Date Thru: <input type="text"/>
<input type="button" value="Reset"/>		
<input type="button" value="Add Referral"/> <input type="button" value="Find Referral From"/> <input type="button" value="Find Referral To"/>		
<input type="button" value="Find Claim"/> <input type="button" value="Find EOB"/> <input type="button" value="Find Eligibility"/>		

### To view referrals your office has initiated:

- Click Find Referral From. A list of the most recent requests for all patients will appear.
- View the Status information in selection list, select desired record, and click

### To view referrals to your office from other providers:

- Click Find Referral To. A list of the most recent referrals to your office will appear.
- View the Status information in selection list, select desired record, and click .

### To view referrals your office has generated for a specific member:

- Enter the member's Insurance ID in the Insurance ID field.
- Click Find Referral From (if your office initiated the request) or Find Referral To (if other providers initiated the request to you). A list of referrals for that member will appear.

### To view a specific request your office has initiated by Referral ID:

- Type the Referral ID in the Referral ID without the dashes.
- Click Find Referral From. The referral detail for that specific referral will appear.
- If the specific referral does not appear, try another search option or try using the Find Referral To option, if another provider initiated a referral to you.

### SUBMITTING ELECTRONIC REFERRAL REQUESTS WITH MEDICAL RECORDS

- Before completing the referral request on-line, enter a note in the Clinical Info section indicating medical records are being faxed for this request.
- ▶ Make a note of the Referral ID (Ref ID).
- Create a Fax Cover Sheet to send the records to the Authorization Department. Be sure to include the following on every request: Contact Information (your name, phone and fax number) and Referral ID.
- Fax the Cover Sheet and appropriate records to (408) 937-3637.