

Authorization/Referral Inquiry Enhancement and Best Practices

We've enhanced the Authorization/Referral Inquiry screen on Availity^{®1} to improve your user experience. When submitting an Auth/Referral Inquiry, using the *Date of Service* field is now optional. The change went into effect April 25, 2019.

For your convenience, we provide multiple options for you to receive information using the Auth/Referral Inquiry screen on Availity.

The following three options explain the best practices to follow to obtain information:

Auth/Referral Inquiry Screen – Service Information section

Service Information ?

Option 1 - Authorization or Referral

When reviewing the Authorization or Referral Results, the authorization number can display as a Certification Number or Reference Number:

| | | |
|--|----|---|
| <p><u>Certification Information</u></p> <p>Certification Number: 18081466611</p> | OR | <p><u>Certification Information</u></p> <p>Service Type/Quantity: 1.0 Visit(s) Reference Number: REF18072046174</p> |
|--|----|---|

Enter either the Certification or Reference Number on the Auth/Referral Inquiry screen by entering the provided number (shown in sample above) into the Authorization or Referral # field to receive results for that specific request. Notice that the Reference Number includes the letters *REF* along with numbers. Entering the letters *REF* when submitting the Reference Number is optional.

¹Availity, LLC is a multi-payer joint venture company. For more information or to register, visit availity.com.
900-3193-0419

Option 2 - Date of Service

When submitting the Date of Service, the date submitted must match the start date of the request.

Option 3 - Do not submit Date of Service or Authorization or Referral

If you elect to not submit a specific Date of Service or an Authorization or Referral #, the system will review up to the last ten requests on file for the patient. In order to receive a response, the provider requesting the information must be one of the following:

1. the patient's primary care physician
2. a provider on the authorization or referral
3. associated with a provider on the authorization or referral on all of the requests

When the provider-matching criteria is met, a list will be provided to allow the provider to select detailed information for multiple authorizations or referrals. If any of the requests, do not match the provider information, a response of *Certification Information Missing* will be returned.

For best results, we recommend using option 1 or option 2.

For details about our referral and authorization requirements, please refer the [Manual for Physicians and Providers](#) on our website at floridablue.com; select Providers > Tools & Resources > Provider Manual.