

Is an authorization or referral required?

Find out on Availity Essentials

The Availity Essentials secure multipayer portal now has a feature healthcare providers can use to determine if an authorization or referral is required for a specific outpatient* service, based on the patient's Humana plan.

Advantages

- Save time by entering a few details to help determine if an authorization or referral is required.
- You'll receive a tracking number for the query for future reference (Humana Record Number).
- If you require an authorization/referral, the details you entered are prefilled, and the request can be completed online.

Getting started

1. Sign in to [Availity Essentials](#) (registration required) and begin the outpatient authorization or referral submission process as usual. (Select "Patient Registration," then "Authorizations & Referrals." Next, select "Authorization Request" or "Referral Request.")
2. Look for the screen heading, "LET'S DO A CHECK TO SEE IF AUTH/REFERRAL IS REQUIRED," and fill out the required fields. (See image at right.)
3. Be sure to read the important bullet points on the authorizations webpage.
4. Review your results online and save the Humana Record Number for tracking purposes.

After viewing your results, if you would like to submit the authorization or referral, you can proceed without re-enter the data already provided.

Important considerations

Be sure to read the bullet points at the bottom of the Availity Essentials web page for key points, such as those paraphrased below.

- Authorization requirements are based on the requesting provider. Services rendered by a different provider or facility may have different authorization requirements.
- In some instances, after identifying the service provider, you may be redirected to a vendor to complete your transaction.
- For nonparticipating providers caring for patients with a health maintenance organization (HMO) plan, authorization is always required, with the exception of emergency care.
- This feature should not be used to check auth/referral needs for services provided for patients with Medicaid plans. Instead, select "Skip" and proceed with the auth/referral submission.

We're here to help:

- Online: Visit [Humana.com/ProviderSelfService](https://www.humana.com/ProviderSelfService).
- Training opportunities: Visit [Humana.com/ProviderWebinars](https://www.humana.com/ProviderWebinars).
- Registration assistance: Call Availity Client Services at 800-AVAILITY (282-4548), Monday – Friday, 8 a.m. – 8 p.m., Eastern time (excluding holidays).
- For the most recent version of this flyer, go to [Humana.com/ProviderIsAuthRequired](https://www.humana.com/ProviderIsAuthRequired).

*This feature is not available for inpatient or behavioral health services.

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