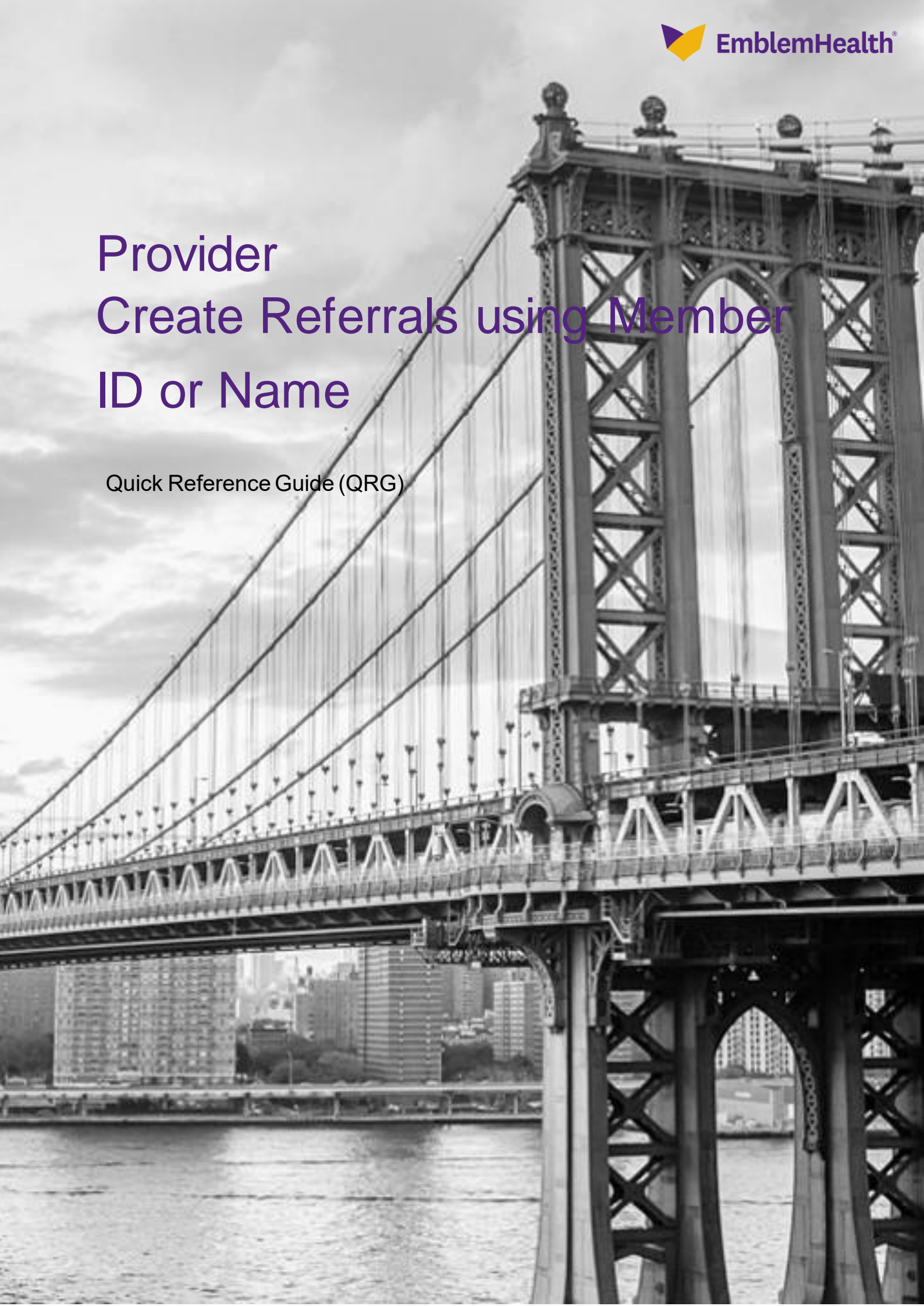


Provider Create Referrals using Member ID or Name

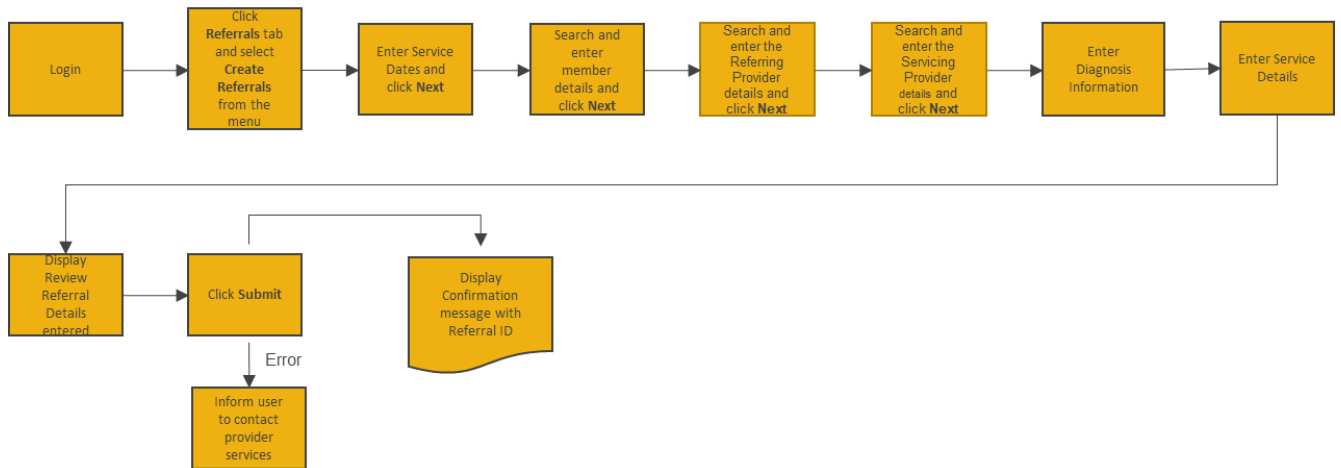
Quick Reference Guide (QRG)



Provider Portal – Create Referrals


This Quick Reference Guide (QRG) will provide an overview of the Provider Portal – Create Referrals process.

Refer to the end-to-end process flow shown below for Provider Portal – Create Referrals process.



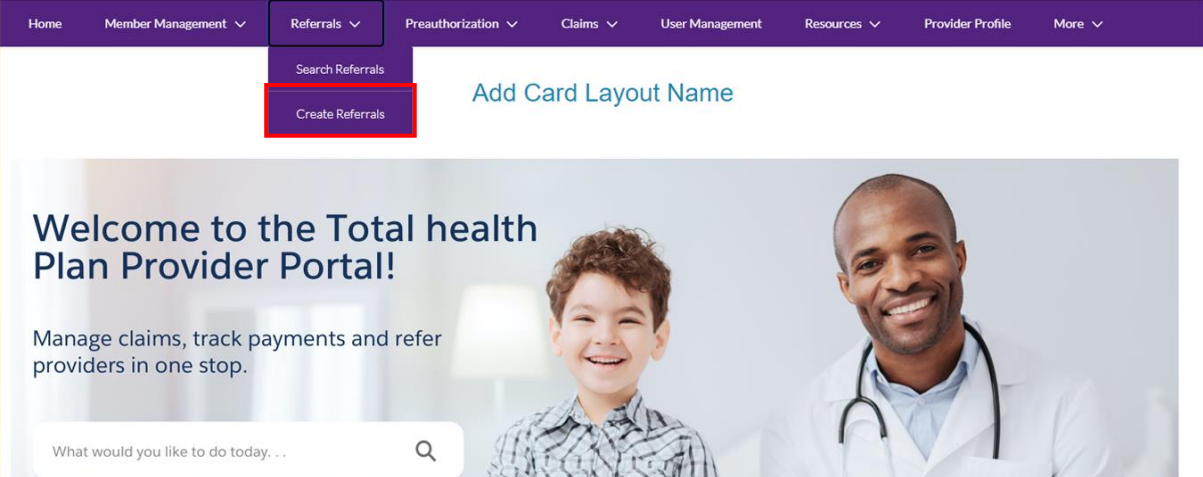
Let us look at the steps in detail for the Create Referrals process.

Purpose: Create a referral when a physician is sending a patient to a specialist.



Step 1:

1. From the EmblemHealth **Home** page, select the **Referrals** tab.
2. From the drop-down list, select **Create Referrals**.





Step 2:

1. Enter the **Service Date From** date (required).
2. The **Service Date To** date will appear by default; change if required.
Note: Your referral will be valid for 180 days.
3. Click **Next**.


Service Dates

CREATE REFERRAL

Service Dates

Complete the details below and click Next to continue. All fields with an asterisk * are required.

Referral can't be saved or submitted until all the steps are completed. Be sure to have all necessary details available before you continue. If you refresh a page or leave at any point before submitting, you will have to begin your submission again.

 Click [here](#) to see a list of EmblemHealth plans that don't require a referral.

Service Date From * Service Date To



Step 3:

1. If an incorrect Service Dates information error is displayed, edit and correct the information.
2. Click **Next** again.


Service Dates


CREATE REFERRAL

Service Dates

Complete the details below and click Next to continue. All fields with an asterisk * are required.

Referral can't be saved or submitted until all the steps are completed. Be sure to have all necessary details available before you continue. If you refresh a page or leave at any point before submitting, you will have to begin your submission again.

 Click [here](#) to see a list of EmblemHealth plans that don't require a referral.

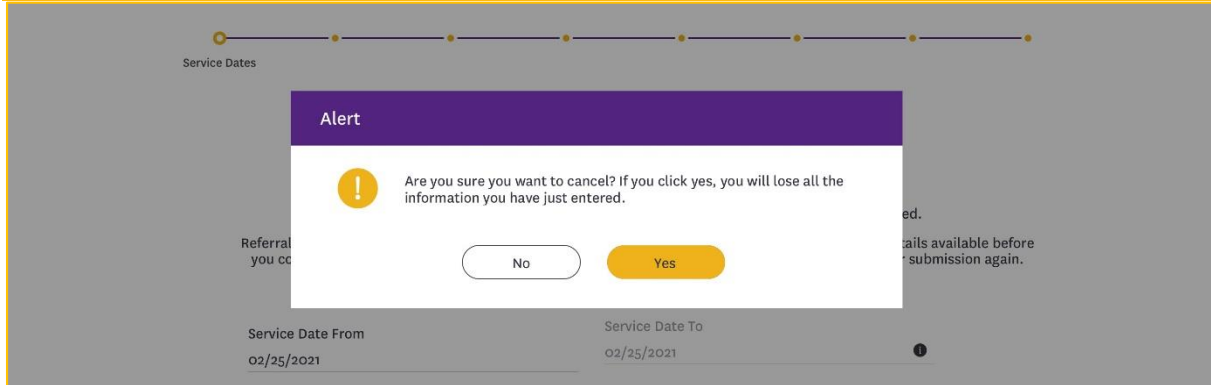
Service Date From Service Date To 

Service From date cannot be more than 30 days in the past.



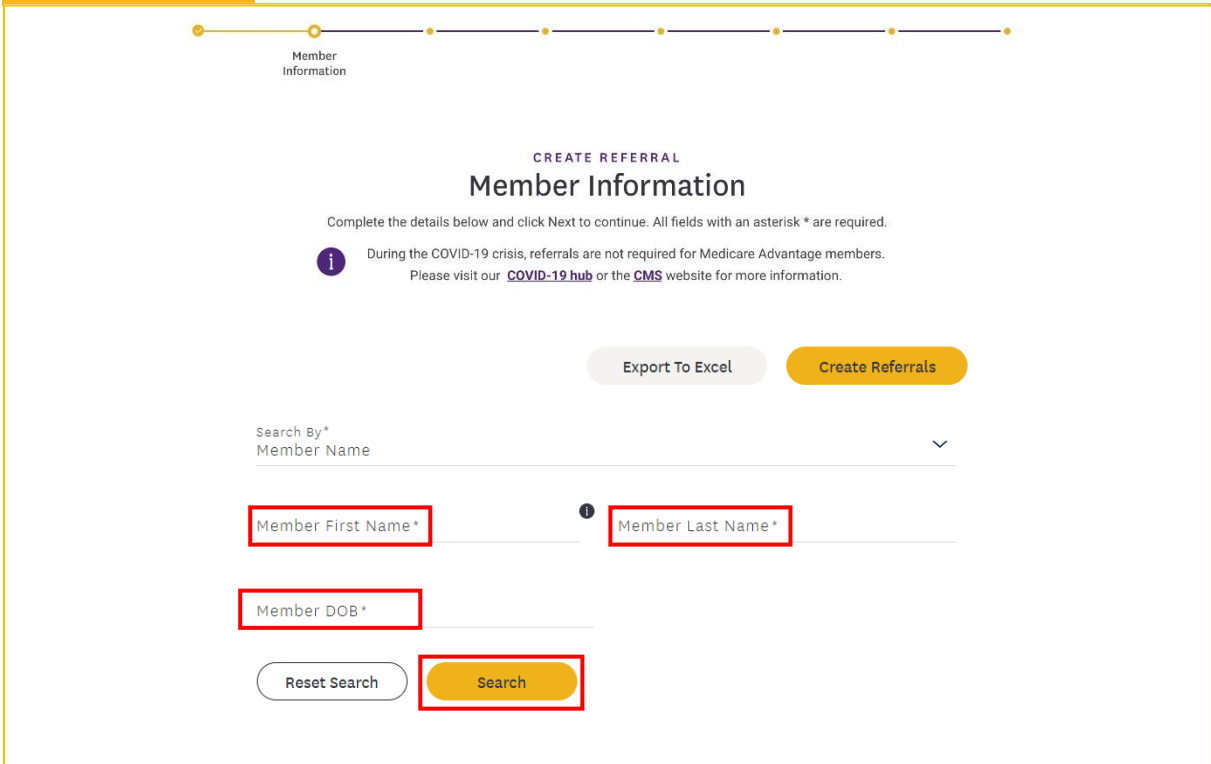
Step 4:

1. If you click **Cancel**, a warning is displayed.
2. Click **Yes** if you wish to cancel the transaction.



Step 5:

1. In the **Search By** field drop down, select **Member Name** or **Member ID**. **Note:** For our example, we will use Member Name.
2. Enter the **Member First Name**, **Member Last Name**, and **Member DOB**.
3. Click **Search**.





Step 6:

1. If no results were found, a message displays.
2. Click **Reset Search** and enter new values.

Export To Excel Create Referrals

Search By*
Member Name

Member First Name*
john

Member Last Name*
smith

Member DOB*
05/26/2960

Reset Search Search

We were unable to find anything based on your search. Please check your search and try again.



Step 7:

1. If results were found, these results will be displayed.
2. Click to select an active member.
3. Click **Next**.

Member Information

CREATE REFERRAL

Member Information

Complete the details below and click Next to continue. All fields with an asterisk * are required.

i During the COVID-19 crisis, referrals are not required for Medicare Advantage members. Please visit our [COVID-19 hub](#) or the [CMS](#) website for more information.

First Name
Will

Last Name
Smith

Date of Birth
11/11/1979

i This Active/Inactive status is as of today's date.

Filter By **i**

Member ID	Member Name	Coverage Start Date	Coverage End Date	Status	Date of Birth	Gender	Coverage Type	Plan Type
<input checked="" type="radio"/> K1000234532	Smith, Will	01/01/2020	12/31/9999	Active	11/11/1979	Male	Medical	HMO
<input type="radio"/> K1000234532	Smith, Will	01/01/2019	12/31/2019	Inactive	11/11/1979	Male	Medical	HMO

Total Records: 1 < Showing 1-2 >



Step 8:

1. Click **Cancel** to end the process.
2. A message displays to confirm the cancellation.
3. Click **Yes** to cancel.

Member Information

Alert

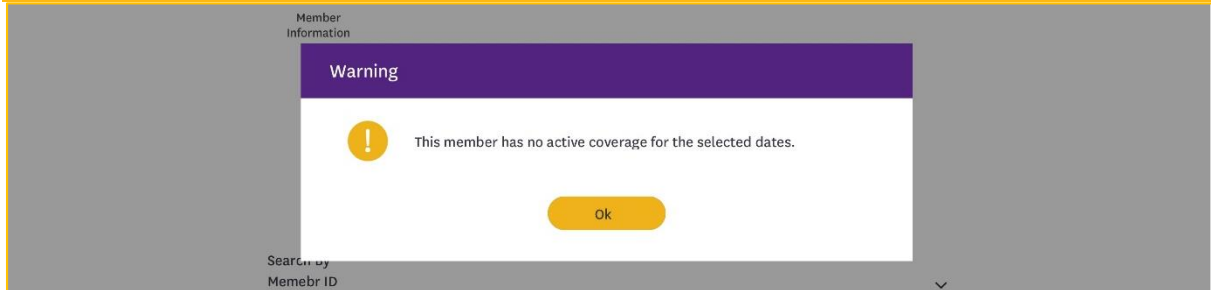
! Are you sure you want to cancel? If you click yes, you will lose all the information you have just entered.

Search by
Member ID



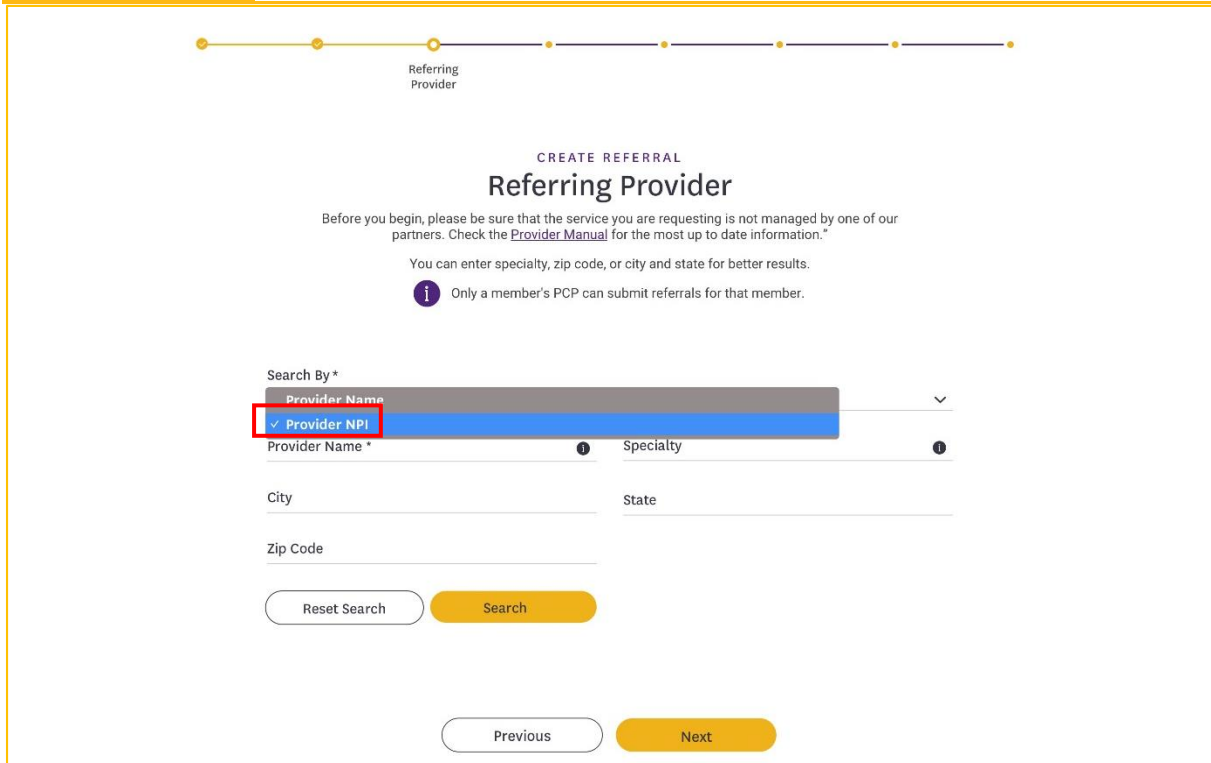
Step 9:

1. If the selected member has no active coverage, an error message displays.
2. Click **OK**.
3. Go to Step 5 to restart the search.



Step 10:

1. If the member has active coverage, the *Referring Provider* page displays.
2. In the **Search By** field, select either Provider Name or NPI.
Note: For our example, we will use NPI.





Step 11:

1. Enter the Referring Provider NPI number.
2. Click **Search**.

Referring Provider

CREATE REFERRAL

Referring Provider

Before you begin, please be sure that the service you are requesting is not managed by one of our partners. Check the [Provider Manual](#) for the most up to date information.*

You can enter specialty, zip code, or city and state for better results.

i Only a member's PCP can submit referrals for that member.

Search By *
Provider NPI

Provider NPI *
1523423789

Reset Search Search



Step 12:

1. Click the radio to select the Referring Provider.
2. Click **Next**.

Referring Provider

CREATE REFERRAL

Referring Provider

Before you begin, please be sure that the service you are requesting is not managed by one of our partners. Check the [Provider Manual](#) for the most up to date information.*

You can enter specialty, zip code, or city and state for better results.

i Only a member's PCP can submit referrals for that member.

Search By *
Provider NPI

Provider NPI *
1523423789

Filter By **1**

Name	Address	Tax ID	NPI	Type	Specialty	In-Network
<input checked="" type="radio"/> Hilred, Robert	500 Commack Rd, Ste 102b, Commack, NY, 11725	810616910	1523423789	Allopathic Physician	Dermatology	Yes

Total Records: 1 < Showing 1-2 >



Step 13:

1. The *Servicing Provider* page displays.
2. In the **Search By** field, select either Provider Name or NPI.
Note: For our example, we will use Provider Name.

Service
Provider

CREATE REFERRAL
Servicing Provider

You can enter specialty, zip code, or city and state for better results.

Search by

- ✓ Provider Name
- Provider NPI

Provider Name * Specialty

City State

Zip Code

Reset Search Search

Previous Next

Cancel



Step 14:

1. Enter the Servicing Provider Name.
Note: If searching by Provider Name, you may enter the first two characters of the provider name
Note: You may also enter four characters of the specialty
2. Click **Search**.
Note: If no provider is found, an error message displays. Enter a new name and click **Search**.

Servicing Provider

CREATE REFERRAL

Servicing Provider

You can enter specialty, zip code, or city and state for better results.

Search By *
 Provider Name ▼

Provider Name * ❗ Specialty ❗
 Watson, Laura Medicine

City _____ State _____

Zip Code _____

Filter By ❗

Q

	Name	Address	Tax ID	NPI	Type	Specialty	In-Network
<input checked="" type="radio"/>	Watson, Laura	25 Central Park W, Apt 1u, New York, NY, 10023	463111392	1811234211	Allopathic Physician	Internal Medicine	Yes
<input type="radio"/>	Watson, Laura	25 Central Park W, Apt 1u, New York, NY, 10023	463111392	1811234211	Allopathic Physician	Internal Medicine	No

Total Records: 1 < Showing 1-2 >



Step 15:

1. If an Out of Network provider is selected, an error message displays.
2. Click **OK** and select an In Network provider.
3. Click **Next**.

Servicing Provider

CREATE REFERRAL

Warning

You have selected an Out-of-Network provider. Please select a In-Network provider to continue.

Ok

Search Provider

Provider Name *
Watson, Laura

Specialty
Medicine

City

State

Zip Code

Reset Search
Search

Filter By

Name	Address	Tax ID	NPI	Type	Specialty	In-Network
<input type="radio"/> Watson, Laura	25 Central Park W, Apt 1U, New York, NY, 10023	463111392	1811234211	Allopathic Physician	Internal Medicine	Yes
<input checked="" type="radio"/> Watson, Laura	25 Central Park W, Apt 1U, New York, NY, 10023	463111392	1811234211	Allopathic Physician	Internal Medicine	No

Total Records: 1 < Showing 1-2 >



Step 16:

1. The *Diagnosis Codes* page displays.

Diagnosis Codes

CREATE REFERRAL

Diagnosis Codes

Complete the details below and click Next to continue. All fields with an asterisk * are required.
You can click in to any diagnosis code to edit it. You can add up to 11 secondary diagnosis codes.

▼ Primary Diagnosis Information

Q Diagnosis Code/Description *

▼ Secondary Diagnosis Codes Add

Q Diagnosis Code/Description *



Step 17:

1. Click the *Primary Diagnosis Information - Diagnosis Code/Description* field.
2. Enter the diagnosis code, if known. If the code is not known, search by entering at least three characters.
3. Click **Search**.

Diagnosis Information

Diagnosis Code/Description *

Search for a code or description using at least 3 characters.

Reset Search Search

Cancel OK

Q Diagnosis Code/Description *



Step 18:

1. Select the required diagnosis code.
2. Click **OK**.

Diagnosis Information

Diagnosis Code/Description
m54

Filter By

Diagnosis Code	Code Description
<input checked="" type="radio"/> M54	Dorsalgia
<input type="radio"/> M540	Panniculitis affecting regions of neck and back
<input type="radio"/> M5400	Panniculitis affecting regions of neck and back, site unspecified
<input type="radio"/> M5401	Panniculitis affecting regions of neck and back, occipito-atlanto-axial region
<input type="radio"/> M5402	Panniculitis affecting regions of neck and back, cervical region
<input type="radio"/> M5403	Panniculitis affecting regions of neck and back, cervicothoracic region
<input type="radio"/> M5404	Panniculitis affecting regions of neck and back, thoracic region
<input type="radio"/> M5405	Panniculitis affecting regions of neck and back, thoracolumbar region
<input type="radio"/> M5406	Panniculitis affecting regions of neck and back, lumbar region
<input type="radio"/> M5407	Panniculitis affecting regions of neck and back, lumbosacral region

Total Records: 37 < Showing 1-10 >



Step 19:

1. The *Diagnosis Codes* page displays.
2. To add additional codes, click **Add**.
Note: A maximum of 11 codes may be added.
Note: An error displays if a duplicate code is entered.
3. When all codes are added, click **Next**.



Diagnosis Codes

CREATE REFERRAL

Diagnosis Codes

Complete the details below and click Next to continue. All fields with an asterisk * are required.

You can click in to any diagnosis code to edit it. You can add up to 11 secondary diagnosis codes.

▼ Primary Diagnosis Information

Q Diagnosis Code/Description *
M54 Dorsalgia

▼ Secondary Diagnosis Codes

Add

Q Diagnosis Code/Description *



Step 20:

1. A summary page listing all the diagnosis codes displays.
2. Click **Add / Delete** to add another code or delete the selected code.
3. Click **Next** to continue.

Diagnosis Codes

CREATE REFERRAL

Diagnosis Codes

Complete the details below and click Next to continue. All fields with an asterisk * are required.
You can click in to any diagnosis code to edit it. You can add up to 11 secondary diagnosis codes.

▼ Primary Diagnosis Information

Q Diagnosis Code/Description *
M54 Dorsalgia

▼ Secondary Diagnosis Codes 1 Add Delete

Q Diagnosis Code/Description *
M540 Panniculitis affecting regions of neck and back

▼ Secondary Diagnosis Codes 2 Add Delete

Q Diagnosis Code/Description *
M5400 Panniculitis affecting regions of neck and back, site unspecified

▼ Secondary Diagnosis Codes 3 Add Delete

Q Institution Name *

▼ Secondary Diagnosis Codes 4 Add Delete

Q Institution Name *

▼ Secondary Diagnosis Codes 5 Add Delete

Q Institution Name *

▼ Secondary Diagnosis Codes 6 Add Delete

Q Institution Name *

▼ Secondary Diagnosis Codes 7 Add Delete

Q Institution Name *

▼ Secondary Diagnosis Codes 8 Add Delete

Q Institution Name *

▼ Secondary Diagnosis Codes 9 Add Delete

Q Institution Name *

▼ Secondary Diagnosis Codes 10 Add Delete

Q Institution Name *

Previous Next

Cancel



Step 21:

1. The *Service Details* page displays.
2. The **Service Type**, **Place of Service** and **Type of Care** defaults and cannot be changed (value is greyed out).
3. In the **Units** field, enter the total number of units for this referral.
4. Click **Next**.

Service Details

CREATE REFERRAL

Service Details

Complete the details below and click Next to continue. All fields with an asterisk * are required.

Service Type
Consultation

The selected service type covers Consult/Follow-Up/Testing/Treatment.

Place of Service
Office

Type of Care
Elective

Units *
1

Previous Next

Cancel



Step 22:

1. The *Created By* page displays.
2. Edit **Name**, **Phone** fields, if required.
3. Click **Next**.

Created By

CREATE REFERRAL

Created By

Complete the details below and click Next to continue. All fields with an asterisk * are required.

Name *
John Kearney

Phone *
(847) 670-0656

Previous Next

Cancel



Step 23:

1. The *Review Referral Details* page displays.
2. Click **Edit** to revise information in a section.
Note: This is the last opportunity to change information.
3. Click **Submit**.

Referral Details

CREATE REFERRAL

Review Referral Details

Your referral is not complete until you submit. If you need to make changes click edit next to section below.

Service Dates Edit

Service Date From 02/25/2021	Service Date To 02/25/2021
--	--------------------------------------

Member Information Edit

Member ID K1000234532	Name Simth, Will	Date of Birth 07/21/1987
---------------------------------	----------------------------	------------------------------------

Referring Provider Edit

Name Hilred, Robert	Address 500 Commack Rd, Ste 102b, Commack, NY, 11725	Provider ID 100000234321	NPI 1523423789
Type Practitioner	Specialty Dermatology	Network Type In-Network	

Servicing Provider Edit

Name Watson, Laura	Address 25 Central Park W, Apt 1u, New York, NY, 10023	Provider ID 100000133391	NPI 1811234211
Type Practitioner	Specialty Internal Medicine	Network Type In-Network	

Diagnosis Codes Edit

Primary Diagnosis Information

ICD-10 Code M54	ICD - 10 Code Description Dorsalgia
---------------------------	---

Secondary Diagnosis Information

ICD-10 Code	ICD-10 Code Description
M540	Panniculitis affecting regions of neck and back
M5400	Panniculitis affecting regions of neck and back, site unspecified

Service Line Details Edit

Service Type Consultation	Place of Service Office	Type of Care Elective	Units 1
-------------------------------------	-----------------------------------	---------------------------------	-------------------

Created By Edit

Name Lucy Livingston	Phone (847) 656-1953
--------------------------------	--------------------------------

Previous
Submit

Cancel



Step 24:

1. If the referral cannot be submitted, an error displays. Please try to resubmit the referral again later.
Note: Reasons for error could be lost internet or network connection, violation of processing rules, etc.
2. Click **Done**.



Oops! Your referral could not be submitted at this time.

Please contact Provider Services: 1-866-447-9717 Available 8 a.m. to 6 p.m. Monday - Friday.

Reference error code:1009

Done



Step 25:

1. If successfully submitted, the final confirmation message displays.
2. Note the reference ID.
3. Click **Done**.



Submission Confirmation

A referral request from provider Robert Hired to provider Laura Watson has been submitted on 02/25/2021 at 10:25 and can be identified by reference ID: 001812252

Payment is contingent on the member's continued eligibility, contractual benefits (if applicable) in the benefits year and care is rendered in accordance with the appropriate physician certification of medical necessity.

Done

Thank
You

