AvMed’s Physician-to-Physician Referral Program

Quick Reference Guide
For Primary Care Physicians
Important Note about Referrals for AvMed Medicare Members
AvMed requests that Specialists, known as Service Providers in our referral portal, honor all scheduled Member appointments regardless of the existence of a referral. If a Medicare Member is seeking specialty treatment and the Service Provider cannot confirm a referral at the time, AvMed requires the Specialty Provider contact the Member’s Primary Care Physician to obtain the required referral.

Introduction
Primary Care Physicians (PCPs) play a critical role in the health of our Medicare members and are in the best position to coordinate their health care needs. With the update of our Physician-to-Physician referral program, PCPs will provide referrals for AvMed Medicare members to access most Specialty Care Services. PCPs will access the referral system to create and verify referrals, while Specialists will access it only to verify referrals. A referral does not require AvMed’s approval. It has been established to promote better communication and coordination between treating physicians.

For a detailed list of services needing referrals or exceptions, such as various preventative services and mandated open access services you can view the Referral Guidelines on AvMed’s Provider Portal.

The Requesting Provider will create the referral in three easy steps:

1. Access the new referral portal.
2. Create the referral for the member.
3. Send the referral electronically to the selected Specialist.

For Help: If you don’t have this information, we are here to help you. Contact us by phone or email.

Phone: 800-452-8633
Email: provider@avmed.org
Step 1: Access the new referral portal.

Log into the AvMed Provider Portal: To get started, the PCP, known as the Requesting Provider in our system, will log into the AvMed Provider Portal using your unique individual or group provider username and password. Your login credentials allow you single sign-on access to all areas of AvMed’s provider website, including the physician-to-physician referral portal.

For Help: If you don’t have this information, we are here to help you. Contact us by phone or email.

Phone: Provider Service Center 1-800-452-8633  Email: provider@avmed.org
Quick Medicare Referral: Once you’re logged in, select the “Quick Medicare Referral” button.

**Note:** You’ll then see a disclaimer advising that you’re leaving the AvMed web site and entering a third party portal. Select “I agree” if you’re a solo provider. If you’re part of a group practice, select the individual provider in the group and then click “I agree.” You must agree with the terms and conditions of the disclaimer to create or review a referral.
Step 2: Create a referral for the member.

New Referral Tab: Once logged into the referral portal, the Requesting Provider will land in the “New Referral” tab to easily create a referral for the member.

Verify the Member: To select a member, select the search button.

Patient
* Search Current Patients
Search by Name or Member ID

Diagnosis
* Search and select a diagnosis

Requesting Provider
* Requesting Provider
Select...

Member must be assigned to your panel. Member cannot be referred to another PCP.
You’ll see red asterisks by the fields that require information.

**Search Current Patients**

*Member ID*  
First Name  
Last Name  

*Date of Birth*  

**Search**

Once required information is entered, click add when member results are loaded.

**Search Current Patients**

*Member ID*  
First Name  
Last Name  

*Date of Birth*  

**Search**

Patient ID  
Birthdate  

**ADD**
Enter the appropriate diagnosis code(s) for the member by typing in the field. You may search for a diagnosis code by “Code Key Words” or “Code Value.” You may select up to 12 diagnosis codes.

Select the Requesting Provider: Once you have entered the member information and diagnosis, click the drop down to select the Requesting Provider. You will only have the option to select the PCP you are logged in as.
Select the Servicing Provider: You may type in the Providers Name or Provider number in the Servicing Provider field or you may do an advanced search by selecting the search icon. This option allows search by Zip Code and Specialty.

Note: We highly recommend that you confirm the service provider’s name and/or AvMed Provider ID prior to completing this step. You can find the complete Provider information in AvMed’s online provider directory at www.avmed.org/providers.
Service Details: After you have selected the Service Provider, you will enter the specific referral information for the member, including the type of service, number of visits, and any clinical comments. An asterisk denotes required fields.

The referral will be valid for 90 days from the date the referral was created or within their policy termination date; the specific date will automatically populate for your convenience on the confirmation page.

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**Service Details**

*Service*

Select...

*Service Units*  

Start Date

07/31/2018

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**Additional Information**

Clinical Comments

Characters remaining: 225 / 225
Start by selecting the type of Service, you will have three types of service to select from and the number of visits that the member may have with the Service Provider, from one to nine.

*Service

- Consult Only (1-3 Visits)
- Consult and Treat (1-5 Visits)
- Evaluation and Therapy (1-9 Visits)

Once selected enter the Service Units. Start Date cannot be changed and will be today’s date.

*Service Units

<table>
<thead>
<tr>
<th>Service Units</th>
<th>Start Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>07/31/2018</td>
</tr>
</tbody>
</table>

Clinical Comments: You may include clinical comments with the referral to the Service Provider in the space provided.

Additional Information

Clinical Comments

Characters remaining: 225 / 225
Step 3: Send the referral electronically.

Once you have completed all the information for the new referral (patient information, Service Provider information, number of visits, diagnosis code(s), and clinical comments), click “Submit” to send the referral electronically to the selected Service Provider for the eligible Medicare Member.

You may also save a referral to complete at a later time or as a template for frequent usage.

To load a saved referral to template, select load.

Your referral submission will generate an automatic response that you may review (and retrieve at a later date) for accuracy, including the following data:

✓ The eligible Medicare Member information
✓ Requesting and Service Provider information
✓ Number of visits
✓ Validity period
✓ Diagnosis

Note: You may receive a transaction error if one or more of the data fields entered are incorrect. You can find a list of Common Transaction Errors and ways to correct them on the AvMed provider portal at www.avmed.org/providers.