

Obtaining prompt approvals for medically necessary outpatient authorizations

We are pleased to offer immediate approvals for outpatient authorizations that meet criteria. These enhancements are designed to speed up the authorization process so you can discuss next steps with your patient before they even leave your office.

Initiate a new prior authorization request in the Provider Portal

Step 1: In the Provider Portal, press “Check auth requirements” to verify authorization requirements by code. You can access the provider portal at allwaysprovider.org.

Step 2: If the service requires prior authorization, press “Submit new request” to initiate a new prior authorization request.

Step 3: The prior authorization form will look similar to what you see today. Complete all required fields and press “Next” to access InterQual Connect to initiate the medical review.

Authorizations & Referrals

- Check auth requirements
- Submit new request
- View an existing request
- Lookup By: Member ID
- Search For: [input field]
- Search
- [View all your requests](#)

Select Authorization/Referral Type: [dropdown]

Patient Search (Member ID/Name) [input field] [Search]

Requesting Provider [input field]

Contact Name [input field]

Contact Phone [input field]

Requested Service [dropdown]

Servicing Facility (Name/NPI) [input field] [Search]

Contact Name [input field]

Contact Phone [input field]

Diagnosis [input field] [Search]

Procedure Code [input field] [Search]

Start Date [input field]

End Date [input field]

Remarks (limited to 255 characters) [input field]

Next

Cancel

