Quick Reference Guide: Referral Submission

The Quick Reference Guide contains the steps a user should take to submit an in-network referral for medical services. The referral submission functionality should not be used for the following:

- Behavioral Health services. Refer to the Behavioral Health Prior Authorization and Portal User Guide.
- Out-of-network (OON) referrals. OON referrals require the signature of the Provider Unit’s Physician Reviewer.

**OVERVIEW**

Registered users can view the status of a claim using the secure Provider portal. Note: Claims information is not available for CareLink when Cigna is the primary administrator of for CareLink – Shared Administration. A message for redirection will display.

**How to check the status of, correct or dispute a claim:**

**Step 1:** Log on to the secure Provider portal.

**Step 2:** From the main menu, click "Referral Submission."

**Note:** Historical referral submission is available for up to 180 days after the start date of the referral.

**Step 3:** Enter the member’s Tufts Health Plan ID, including the suffix and member’s date of birth, and click "Submit."

**Step 4:** Complete the required fields with the appropriate referral information and click “Submit.”

**Step 5:** Review the information entered is accurate. If so, click “Confirm.”

**RESULT:** A referral ID will be generated and the referring provider, the referred to provider and the member will all be able to view the referral electronically through their own accounts.