

Availity Essentials Referral Request Tool Enhancement: Change to Single Code Submission

The Referral Request tool in Availity Essentials™ is the digital platform used by Primary Care Physicians to manage referrals for Florida Blue members enrolled in myBlue HMO and Florida Blue Medicare HMO plans. The tool helps efficiently manage referrals to ensure patients receive timely and necessary care from participating specialists.

As part of our ongoing efforts to improve the referral process, we have implemented a change to how you enter Evaluation and Management (E&M) Current Procedural Terminology II (CPT® II) codes within the Referral Request tool for Florida Blue and Truli for Health. Effective **December 14, 2024**, referrals can only be submitted with a single E&M CPT II code.

What Is Changing

Prior to this update, submitting multiple E&M codes on a referral request would result in the approved response displaying a discrepancy in the total number of specialist visits, which potentially created confusion. For example, if two E&M codes were submitted, the referral response displayed two approved specialist visits for each code, thus giving the appearance that a total of four visits were approved.

The new single line format ensures the information is accurate with the correct number of specialist visits approved on the referral for the submitted E&M code.

Important Reminders

- Specialist referrals are approved for two visits over a 180-day period, except oncologist referrals, which are approved for six visits during a 180-day period.
- If a specialist plans to perform another procedure, they must obtain an authorization prior to rendering those services.
- Do not use E&M procedure codes 99242-99245 for Florida Blue Medicare HMO member referrals. These codes are marked as “(Not for use with Medicare) Office consultations for new or established patients (requiring 3 specific components)” and only apply to myBlue HMO member referrals.