

What is a Provider Referral?

A provider referral is an order written by your provider for you to see another doctor, therapist, or specialist. A provider order is NOT the same as an Insurance Referral.

A provider referral is most commonly known as a “referral”, but only refers to the written recommendation of a medical professional. For example, if you get a referral to ophthalmology, you are being referred to see an eye doctor. In most **HMO Plans** and other managed care plans, a referral is usually necessary to see any provider or specialist other than your primary care physician (PCP) if you want the service to be covered. This type of order/ referral is usually issued by your PCP.

What is an INSURANCE Referral?

The term Insurance Referral refers to the permission or authorization of your insurance plan that they may require in order to see a recommended specialist, doctor, hospital, or type of treatment. In order to make sure that everything is in place when seeing a Specialist Provider for a Specialist Visit, you should be proactive and make sure that your insurer has received this insurance referral *before* you make an appointment with your specialist provider. This will ensure your visit to the specialist is covered under your health care plan, excluding any co-payments or plan deductibles.

How can I verify whether my plan requires an INSURANCE Referral to see a Specialist?

The fastest and most accurate way to verify whether your insurance plan requires an Insurance Referral is for you to contact the Member Services number listed on your insurance card directly. Otherwise, you may contact our Referrals team at **(914) 723-8100 ext. 228**.