

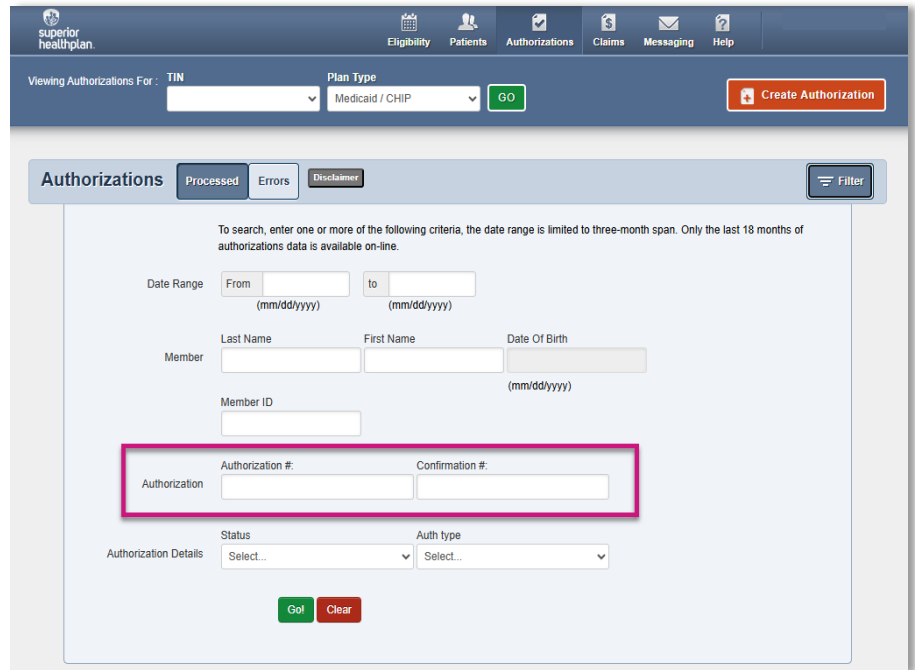
Secure Provider Portal: Check Status of an Authorization

1. To check status via Authorization or Web Reference ID Number:

Click the **Authorizations** tab on the header (providers can search for the member's authorization by entering the authorization or web reference ID number into the search box).

Authorization Home Page:

- List of members
- Status of authorizations
- Start and end date of authorization
- Diagnosis code
- Authorization type
- Service



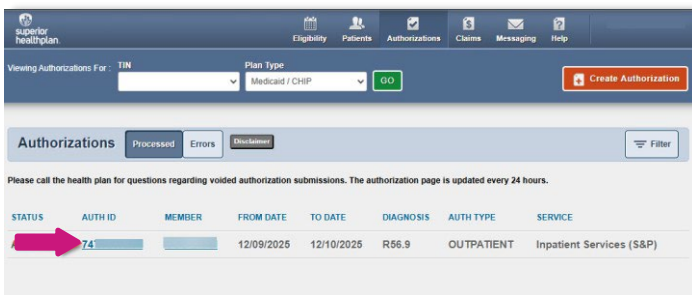
The screenshot shows the 'superior healthplan' header with navigation tabs: Eligibility, Patients, Authorizations, Claims, Messaging, and Help. Below the header, there's a search bar for 'Viewing Authorizations For' with a 'TIN' dropdown and a 'Plan Type' dropdown set to 'Medicaid / CHIP'. A 'GO' button and a 'Create Authorization' button are also present. The main section is titled 'Authorizations' with sub-tabs: 'Processed', 'Errors', and 'Disclaimer'. A 'Filter' button is on the right. The search criteria section includes a 'Date Range' (From to, mm/dd/yyyy), 'Member' (Last Name, First Name, Date Of Birth, mm/dd/yyyy), 'Member ID', and 'Authorization' (Authorization #, Confirmation #). There are also 'Status' and 'Auth type' dropdowns. 'Go!' and 'Clear' buttons are at the bottom.

2. To view Authorization details:

Click on the **Auth ID**.

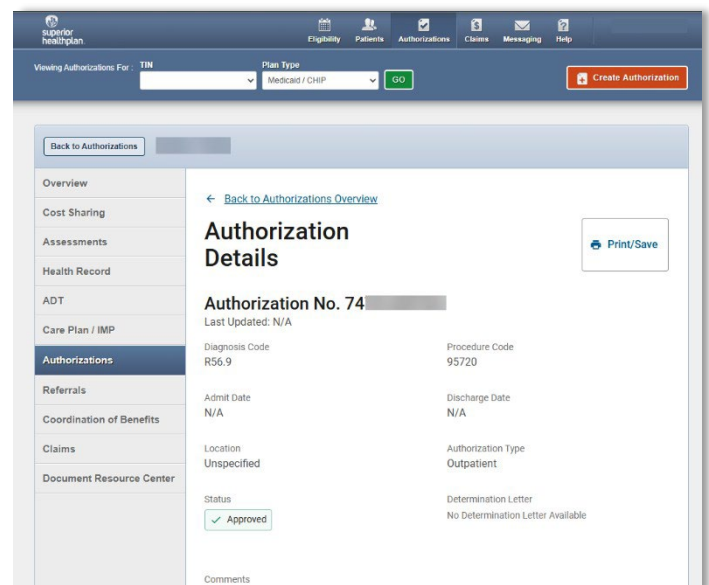
In the Authorization detail view:

Providers can scroll down to view details of the member's authorization diagnosis and procedure codes.



The screenshot shows a table of authorizations. A pink arrow points to the 'AUTH ID' column, which contains the value '74'. The table has columns: STATUS, AUTH ID, MEMBER, FROM DATE, TO DATE, DIAGNOSIS, AUTH TYPE, and SERVICE.

STATUS	AUTH ID	MEMBER	FROM DATE	TO DATE	DIAGNOSIS	AUTH TYPE	SERVICE
	74		12/09/2025	12/10/2025	R56.9	OUTPATIENT	Inpatient Services (S&P)



The screenshot shows the 'Authorization Details' page for Authorization No. 74. It includes a 'Back to Authorizations Overview' link and a 'Print/Save' button. The details section shows: Authorization No. 74, Last Updated: N/A, Diagnosis Code R56.9, Procedure Code 95720, Admit Date N/A, Discharge Date N/A, Location Unspecified, Authorization Type Outpatient, Status Approved, and Determination Letter No Determination Letter Available. There is also a 'Comments' section at the bottom.

3. To check status via Member's ID or Last Name & Member's Date of Birth:

Click the **Eligibility** tab on the header. Enter **Member's ID or Last Name** and member's **Birthdate** into the **Quick Eligibility Check** search box (*providers must remember to select correct product for member before entering member's information*).

The screenshot shows the Superior HealthPlan dashboard. The 'Eligibility' tab is highlighted in the top navigation bar. Below the navigation bar, there's a 'Viewing Dashboard For' section with a dropdown for 'TIN' and a 'Plan Type' dropdown set to 'Medicaid / CHIP'. A 'GO' button is next to the Plan Type dropdown. Below this, there's a 'Home: Superior HealthPlan' section. In this section, the 'Quick Eligibility Check' box is highlighted with a red rectangle. It contains two input fields: 'Member ID or Last Name' (with the text '123456789 or Smith') and 'Birthdate (mm/dd/yyyy)'. A 'Check Eligibility' button is to the right of these fields. A red arrow points from the 'Eligibility' tab to the 'Quick Eligibility Check' box. Another red arrow points from the 'Check Eligibility' button to the right.

4. To view Eligibility information:

Click on the **Patient Name**.

The screenshot shows the 'Eligibility Check' results page. At the top, there's a navigation bar with 'Eligibility', 'Patients', 'Authorizations', 'Claims', 'Messaging', and 'Help' tabs. Below the navigation bar, there's a 'Viewing Eligibility For' section with a dropdown for 'TIN' and a 'Plan Type' dropdown set to 'Medicaid / CHIP'. A 'GO' button is next to the Plan Type dropdown. Below this, there's a 'Check Eligibility' button and a 'Print' button. Below the buttons, there's a table with the following columns: 'ELIGIBLE', 'DATE OF SERVICE', 'PATIENT NAME', 'DATE CHECKED', 'RECENT ADT', 'CARE GAPS', and 'LOG ER VISIT'. The table has one row of data. The 'ELIGIBLE' column has a green checkmark. The 'DATE OF SERVICE' column has the date '07/10/2025'. The 'PATIENT NAME' column has a red rectangle around it, and a red arrow points to it from the left. The 'DATE CHECKED' column has the date '07/10/2025'. The 'RECENT ADT' column has the text 'NO'. The 'CARE GAPS' column is empty. The 'LOG ER VISIT' column has a 'LOG ER VISIT' button. Below the table, there's a 'ER Visit?' button and a 'Phone' button.

5. To view Authorizations for this member in the Eligibility Detail Screen:

Click **Authorizations**

The screenshot shows the 'superior healthplan' interface. At the top, there are tabs for Eligibility, Patients, Authorizations, Claims, Messaging, and Help. Below these, there are dropdowns for 'Viewing Authorizations For' (TIN) and 'Plan Type' (Medicaid / CHIP), with a 'GO' button and a 'Create Authorization' button. The left sidebar contains a list of options: Overview, Cost Sharing, Assessments, Health Record, ADT, Care Plan / IMP, **Authorizations** (highlighted with a red box and an arrow), Referrals, Coordination of Benefits, Claims, and Document Resource Center. The main content area is titled 'Overview' and features a green banner stating 'This patient is eligible as of today, Jul 14, 2025'. Below this, there are sections for Patient Information and PCP Information. The Patient Information section includes fields for Name, Gender, Birthdate, Age, Member #, Member #, Address, and Redetermination Date. The PCP Information section includes fields for Name, Service Coordinator, and a table with Name and Phone #. A 'Print Eligibility Overview' link is also present.

Authorizations for member will populate.
Providers can click on the **Authorization Number**

The screenshot shows the 'superior healthplan' interface. At the top, there are tabs for Eligibility, Patients, Authorizations, Claims, Messaging, and Help. Below these, there are dropdowns for 'Viewing Authorizations For' (TIN) and 'Plan Type' (Medicaid / CHIP), with a 'GO' button and a 'Create Authorization' button. The left sidebar contains a list of options: Overview, Cost Sharing, Assessments, Health Record, ADT, Care Plan / IMP, **Authorizations** (highlighted with a red box), Referrals, Coordination of Benefits, Claims, and Document Resource Center. The main content area is titled 'Authorizations' and features buttons for 'View as Cards', 'Export as CSV', and 'Print/Save'. Below these, there is a 'Create' button and a 'SEARCH' button. A 'DATE RANGE FILTER' section includes dropdowns for 'Auth Status: All', 'Auth Type: All', and 'Service Type: Medical'. Below this, a 'Date Range: 07/14/2015 - 07/14/2025' is displayed. A table lists authorizations with columns: Service Type, Authorization No., Start Date, End Date, Diagnosis Code, and Status. The first row shows 'Inpatient Services (S&P)' with an authorization number highlighted by a red box. The status is 'Approved'.

For help or questions, please contact Provider Engagement at
MSCAN and CHIP 1-877-236-0751

