

## Precertification Lookup Tool -- easy access to prior authorization guidelines on the Availity Portal

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Anthem Blue Cross and Blue Shield Healthcare Solutions (Anthem) has an online tool that displays prior authorization guidelines to help you quickly determine whether certain services for Anthem members require a prior authorization.

You can access the **Precertification Lookup Tool** through the Availity Portal. The Precertification Lookup Tool will let you know if clinical edits apply, information such as the medical necessity criteria used in making the authorization decision, and if a vendor is used -- without the need to make a phone call.

### Where is the Precertification Lookup Tool located on Availity?

Navigate to the Precertification Lookup Tool on the [Availity Portal](#) by selecting either 1) **Payer Spaces** or 2) **Patient Registration** from Availity's homepage. You can also reach Availity via phone at **1-800-AVAILITY (1-800-282-4548)**. Access to the information does not require an Availity role assignment, tax ID or NPI.

#### Through Availity **Payer Spaces**:

- Select Anthem from the *Payer Spaces* menu.
- Select the **Applications** tab.
- Select the **Precertification Lookup Tool** tile.

#### From the **Patient Registration** menu:

- Select **Authorizations and Referrals**.

- Select the **Precertification Lookup Tool** link located on the page below *Additional Authorizations & Referrals*.

Once you've accessed the Precertification Lookup Tool, choose a line of business from the menu selection offered, and then type the CPT®/HCPCS code or a code description to determine if a prior authorization is required.

**Other ways to access:** If you are currently accessing the Pre-certification / Pre-Authorization Requirements list through your health plan's public website, this option is still available for you.

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**URL:** <https://providernews.anthem.com/nevada/article/precertification-lookup-tool-easy-access-to-prior-authorization-guidelines-on-the-availability-portal>

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