



Job Aid: Submit a Referral

A MassHealth member is enrolled with the Primary Care Clinician (PCC) Plan at the service location/site level. MassHealth services provided by a provider other than the member's PCC require referral from the member's PCC in order to be payable, unless the service is exempted. Referral requirements and exceptions are noted in the MassHealth regulations at [130 CMR 450.118\(J\)](#).

This job aid describes how to

- submit a referral for a service provider; and
- use the **Search for Provider** function to locate a MassHealth provider.

Enter a New Referral

From the **POSC** home page:

1. Click **Manage Service Authorizations**.

Health and Human Services Mass.gov

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MassHealth Provider Online Service Center

The Provider Online Service Center gives you the tools to effectively manage your business with MassHealth electronically. Use these services to enroll as a MassHealth provider, manage your profile information, and submit and retrieve transactions.

Enter data directly and modify individual transactions (ie. claims submission, eligibility verification, MMQ, Prior Authorization, Pre-Admission Screening, Referrals, and EHR Incentive Program).

View your notifications, contracts, reports, metrics, and financial data. Download most MassHealth forms and publications.

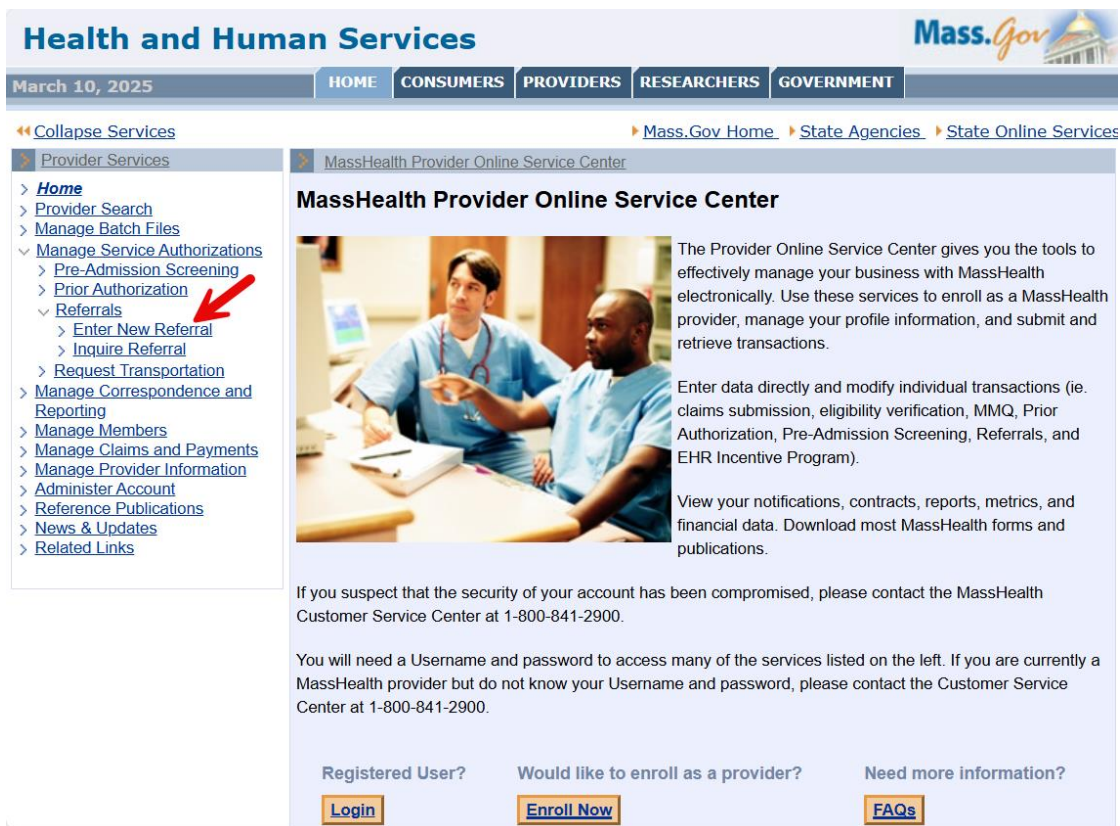
If you suspect that the security of your account has been compromised, please contact the MassHealth Customer Service Center at 1-800-841-2900.

You will need a Username and password to access many of the services listed on the left. If you are currently a MassHealth provider but do not know your Username and password, please contact the Customer Service Center at 1-800-841-2900.

Registered User? **Would like to enroll as a provider?** **Need more information?**

[Login](#) [Enroll Now](#) [FAQs](#)

2. Click **Referrals**.
3. Click **Enter New Referral**.



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4. The **Referral Information** panel will display.

Enter Member and Provider Information

On the **Referral Information** panel:

5. Enter the **Member ID**.
6. Select the **Referring Provider** (the member's PCC) from the dropdown list. This field will be populated based on the credentials used by the PCC to log in to the POSC.
7. In the **Service Provider** field, click the **Field Search** button to display the **Search for Provider** panel, where you can perform a search for the service provider.

Search for Service Provider

On the **Search for Provider** panel:

8. Enter the search criteria for the service provider.

The screenshot displays the Mass.gov Health and Human Services portal. The top navigation bar includes the date 'March 26, 2025', the 'Mass.gov' logo, and a 'Logout' link. Below this is a secondary navigation bar with links for 'HOME', 'CONSUMERS', 'PROVIDERS', 'RESEARCHERS', and 'GOVERNMENT'. The main content area is titled 'Health and Human Services' and features a left-hand menu with various service categories. The 'Referrals' section is expanded, showing options like 'Enter New Referral', 'Inquire Referral', and 'Request Transportation'. The 'Enter New Referral' panel is active, displaying a 'Referral Panel >>> Search for Provider' form. This form includes input fields for Business Name, Last Name, First Name, Gender, City, ZIP Code, Provider ID or NPI, Specialty, Info Specialty, and Provider Type. A 'Search' button is located at the bottom right of the form, and a 'Cancel Service' button is at the bottom left. The footer of the page contains copyright information for the Commonwealth of Massachusetts and links for Accessibility, Feedback, Site Policies, Contact Us, Help, and Site Map.

Health and Human Services Mass.gov

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Enter New Referral

Referral Panel >>> Search for Provider

Business Name

Last Name

First Name

Gender

City

ZIP Code

Provider ID or NPI Enter 9 digits for the Provider ID or 10 digits for the NPI.

Specialty

Info Specialty

Provider Type

[Clear](#) [Search](#)

[Cancel Service](#)

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Note: For effective searching, enter as much search information as possible. You can search for service providers using one or more of the following search criteria.

- Business Name
- Provider's Last Name
- Provider's First Name
- Gender
- City
- ZIP Code
- Provider ID or NPI
- Specialty
- Provider Type

Note: The current MMIS provider search capability within the Service Authorizations subsystem is limited to active MassHealth providers and specialties such as nursing homes, abortion services, etc.

9. Click **Search**. A **List of Service Providers** panel will be displayed.

You may select a provider at the individual or group level. The specificity of your selection determines the **Service Provider** who can file a claim for the services requested by your referral. For example, if you select a **Group Practice Provider** level, any provider in the group can submit a claim. If you select at the Individual Provider level, only that provider will be allowed to submit claim(s). To identify board-certified specialists, use your current business process/methods through your own network of providers.

Select Referring Provider

On the **List of Providers** panel:

10. Click the hyperlinked **Name** of the desired service provider. Within the **Referral Information** panel, the selected provider's name will populate the **Service Provider** field.

Referral Details and Submit

On the **Referral Information** panel, complete at least the fields marked with an asterisk (*). Fields without an asterisk are informational and not required.

The screenshot shows the 'Enter New Referral' form on the Mass.gov website. The header includes 'Health and Human Services' and the 'Mass.gov' logo. A navigation bar contains links for HOME, CONSUMERS, PROVIDERS, RESEARCHERS, GOVERNMENT, and a Logout button. The date 'March 26, 2025' is displayed. A left sidebar lists various service options under 'Provider Services', with 'Enter New Referral' selected. The main form area is titled 'Referral Information' and contains several fields: 'Member ID *' (text box), 'Referring Provider *' (dropdown menu), a note about selecting an individual provider for organizations, 'Individual Referring Provider' (text box with a search icon), 'Service Provider *' (text box with a search icon), 'Assignment *' (dropdown menu), 'Diagnosis Code' (text box with a search icon), 'Reason for Referral' (text area), 'Procedure Code' (text box with a search icon), 'Thru Code' (text box with a search icon), 'Effective Date *' (calendar picker showing 03/26/2025), 'End Date *' (calendar picker showing 03/26/2026), 'Visits *' (text box), and 'Service Description' (text area). At the bottom are 'Cancel Service' and 'Submit' buttons. The footer contains copyright information for the Commonwealth of Massachusetts and links for Accessibility, Feedback, Site Policies, Contact Us, Help, and Site Map.

11. In the **Assignment** field, select the type of referral from the dropdown list. Payment edits are not applied to the selection.

12. Enter the **Diagnosis Code** (optional).
13. Enter the **Reason for Referral** (optional). In this text box and **Service Description**, consider entering brief details about the purpose for issuing a referral.
14. Enter **Procedure Code** and **Thru Code with Modifiers** (optional).
15. Enter the **Effective Date** of the referral.
16. Enter the **End Date** of the referral.

Note: When an **Effective Date** is entered, the **End Date** field is automatically populated with a date one year from the Effective Date. Enter a different End Date or leave the default date of one year. You can use the **Inquire Referral** panel to change the End Date in the future, after the referral has been submitted.
17. In the **Visits** field, enter the total number of authorized visits to the **Service Provider**. The number of Visits can be less than, equal to, or greater than the number of days the referral is active.
18. Once you have entered all the required information, click the **Submit** button. A **Referral Confirmation** panel will display, indicating that you have successfully submitted the referral and providing you with the **Referral Number** that has been assigned.
19. All service providers listed on the referral will automatically be notified on the evening of the approval.

Referral Updates (See **Update a Referral** and **Inquire on a Referral** Job Aids)

Notes:

1. The referral remains active and available under the following conditions.
 - The referral matches the **Member** and **Service Provider**.
 - The **Effective Date** and **End Date** range includes the date of service of the claim.
 - The total number of **Visits** (episodes of service) on the referral has not been exceeded.
2. The referral will be automatically canceled under the following conditions.
 - For any available referral, when the member leaves the PCC Plan, the **End Date** is changed to the close date.
 - When a member changes enrollment to a different PCC, the **End Date** of the referral will
 - remain unchanged if the **End Date** on the referral is less than or equal to **30** days after the close date; or
 - be set to a grace period of **30** days after the close date, if the **End Date** on the referral is greater than **30** days after the close date.