How to Use the Pre-Authorization Tool

Superior’s online Pre-Authorization Tool enables providers to determine whether or not a Prior Authorization (PA) is needed by answering a series of questions and searching by procedure codes.

Instructions:

2. Under **Provider Quick Links**, click **Pre Auth Check**.
3. Select **Product** (Ambetter, Medicaid, Medicare Advantage or STAR+PLUS MMP).

Prior Authorization

Use our tool to see if a pre-authorization is needed. It's quick and easy. If an authorization is needed, you can access our login to submit online.

Pre-AUTH Needed Tool - Ambetter | Medicaid | Medicare Advantage | STAR+PLUS MMP

Please note that failure to obtain authorization may result in administrative claim denials. Superior HealthPlan providers are contractually prohibited from holding any member financially liable for any service administratively denied by Superior for the failure of the provider to obtain timely authorization.

Check to see if a pre-authorization is necessary by using our online tool. Select a product line to get started.

Click on the links below for more information.
4. Answer questions listed. In order to search by a specific procedure code **No** must be selected on all questions.

*Please note: If you receive a notice that the service requires PA, please submit your request by logging into Provider.SuperiorHealthPlan.com or by faxing one of the Superior PA forms found on the Provider Forms page.*