



Authorization Status Tool

Check status and view/print determination letters

Health Net Federal Services, LLC (HNFS) offers beneficiaries an easy way to view authorization details with our secure, online Authorization Status tool.

Beneficiaries must be logged in at www.tricare-west.com to access this tool.

Key features:

- Check referral and authorization status.
- Print determination letters.
- Make network-to-network provider changes.

Beneficiaries:

- TRICARE requires beneficiaries to access referral and authorization notices online. There is no “opt out” option.
- Other ways to view determination letters:
 - Check your Secure Inbox for status messages.
 - Sign up for text or email alerts.
 - If you do not have access to a computer, call our customer service line to request letters be mailed to you on a per-instance basis.

Step 1:

Go to the beneficiary portal at www.tricare-west.com. In the Secure Tools menu, select “Authorization Status.” If you are not already logged in, you will be directed to do so. (Log in using your Department of Defense Self-Service Logon [DS Logon] or, if you are not able to get a DS Logon, you can register for a [tricare-west.com](http://www.tricare-west.com) username and password.)

The screenshot shows the TRICARE West for Beneficiaries website. At the top right, the 'Log In / Register' link is circled in red. Below the navigation bar, the 'Secure Tools' menu is visible, with 'Authorization Status' circled in red. The main content area features a 'TRICARE West for Beneficiaries' banner with a healthy lifestyle image and a 'Take Me To...' sidebar with links to various services.

Step 2:

You may search the status for yourself or other family members (if they are a minor or if permission to view the record has been granted). Choose to search by a certain time frame or date range, or by the authorization number.

Note: Learn more about how to [request or release medical information](#) to another person or entity.

Secure > Authorization Search

Check Status or Make Changes to an Authorization

* = Required Field.

* Check status of
Self

* Search for authorization by
 Authorizations and referrals within the last
48 months

Show me all authorizations and referrals between
MM / DD / YYYY --&-- MM / DD / YYYY

Authorization Number

SEARCH RESET

Note: This guide provides step-by-step instructions on how to use the Check Authorization Status tool to change the specialty care provider on an existing authorization or referral.

Step 3:

Once you locate the authorization you'd like to view, click on the authorization DBN number to view details.

Check Authorization and Referral Status

* Sponsor SSN XXXX-XX-1234
* Patient Name
* Patient Date of Birth
* Patient DBN

SHOW ME ALL AUTHORIZATIONS AND REFERRALS WITHIN THE LAST 48 MONTHS

Search all Columns Show 20 entries Dates of Service

Authorization	Dates of Service	Place of Service	Servicing Provider	Provider Specialty	Decision Description	Claims Link
0000001234	04/23/2020 - 10/20/2020	Outpatient	Concentra Medical Center	Physical Therapy	Pended	View claims for this authorization

Step 4:

The details page will show you the authorization status (approved, pended/pending, canceled or denied). This page will also give you an option to view your authorization letter. Click on "View authorization letter" to view and/or print the determination letter from HNFS. *The option to view and/or print the authorization letter will only exist if one has been generated by HNFS.*

If you would like to request a different network specialist, click on the "Request New Provider" link. Our ["Network-to-Network Provider Changes"](#) guide offers additional details about this process.

CHECK AUTHORIZATION AND REFERRAL STATUS

Authorization XXXXXXXXXXXXXXXX	Requesting Provider Name Dr. John Doe
Authorization Status Approved	Provider Phone (XXX) XXX-XXXX
Decision Approved	Servicing Provider Name Dr. Tom Smith
UTIN	Servicing Provider NPI XXXXXXXXX
Patient Name	Provider Phone (XXX) XXX-XXXX
Patient DBN 1	Servicing Facility
Patient DOB 0	Provider Address
Primary Diagnosis Code S32.009	Request New Provider
Secondary Diagnosis Code	FAX (XXX) XXX-XXXX
Plan TRICARE Prime-Active Duty Family Members	Primary Diagnosis/Description Unspecified fracture of unspecified lumbar vertebra
Sponsor Name Jane Doe	Secondary Diagnosis/Description
Sponsor SSN XXX-XX-XXXX	Specialty Durable Medical Equipment & Medical Supplies

[View authorization letter](#)
[View claims for this authorization](#)

End of Guide



Scan this QR code to view the Authorization Status Tool guide.