

Referral vs Prior Authorization Infographic

A simple comparison for beginners who need to know which front-end permission or payer review may be required.

TYPE	Infographic
WHO	Schedulers, eligibility VAs, prior authorization VAs, Medical VAs, and billing beginners.
WHEN	Use when an appointment, specialist visit, procedure, or service may need referral or authorization review.
HOW	Compare the two columns, then document which item may be required and what proof is needed.

Workflow stage: Front-End RCM - referral and authorization risk control

Referral
Often PCP/provider-directed permission or plan-required routing for specialist care.

Authorization
Payer review/approval that may be required before a service, visit, medication, or procedure.

Source
Referral proof may come from PCP/referring provider; authorization proof often comes from payer/plan.

Timing
Both should be checked before service when possible to reduce avoidable denial risk.

Proof
Capture numbers, valid dates, visits/units, provider, location, service, and source.

Not a guarantee
Neither referral nor authorization guarantees payment. Claim details still matter.

COMMON MISTAKE AVOIDED
Avoid using referral and authorization as interchangeable terms.

NO-PHI REMINDER
Do not use or enter real patient names, dates of birth, insurance IDs, member IDs, claim numbers, medical record numbers, addresses, phone numbers, diagnoses, treatment details, login details, or protected health information. Use fictional data only when practicing.

EDUCATIONAL DISCLAIMER
This resource is for beginner-friendly healthcare admin education only. It is not medical advice, legal advice, coding certification, payer-specific billing authority, a replacement for employer training, or a guarantee of employment. Always verify current requirements with official sources, employer policy, payer rules, client instructions, and updated guidance.

SOURCE / REVIEW NOTE
This beginner resource explains general front-end RCM workflow concepts. Requirements can vary by payer, plan, provider type, specialty, place of service, contract, referral rules, authorization rules, and current policy. Verify current requirements with official sources, employer policy, payer rules, client instructions, and updated guidance. Last reviewed: July 2026.