

**DDS ACS Waiver
PAM (Prior Authorization Manipulation) Process**

I. Purpose: The PAM system allows for Implementation of an automated process for providers to submit prior authorization (PA) requests to DDS, for DDS to approve/modify/deny PA request, and for DDS to send an automated PA approval/denial to the provider.

II. Scope/Limitations: All initial PA requests issued within the plan year. The PAM system will not be used for making revisions to existing PA's. If during the plan year a revision is needed for an existing PA, the current process will be utilized and the PA unit will key/issue the PA.

III. PAM PILOT: The PAM system was piloted in the Northeast region. The pilot was monitored for ease of use, determination of steps (process refinements) and for problems/issues requiring resolution before the PAM system is implemented statewide. The pilot included two providers, Abilities Unlimited of Jonesboro and St. Francis Area Developmental Center. The pilot started May 15, 2008 and will continue through December 31, 2008. . DDS staff met with Abilities Unlimited of Jonesboro and entered their first PA on June 12, 2008 and the PA was approved and transmitted back to the provider on June 18, 2008. DDS staff met with St. Francis Area Developmental Center staff and entered their first PA on June 19, 2008 and the PA was approved and transmitted back to the provider on July 1, 2008. Both providers feedback was very positive. They both prefer the PAM system for submission of the pa requests to the old system and have stated that the turnaround time is great.

DDS staff will attend EDS training December 9-10, 2008. At this time, it is felt that providers will not need training as they are already using PES or software that interfaces with PES for billing. The first week of December 2008, DDS will send notification to providers with information from EDS regarding submission of electronic PA requests through PES. Should a provider need training or have questions regarding submission of electronic PA requests through PES, they are to contact their EDS Provider Representative or EDS. Statewide implementation will occur on January 5, 2009.

DDS Process for Requesting PAM Access for DDS staff:

1. The DDS Waiver Program Manager will notify the Waiver Program Administrator (Terrell Wade) when new staff are hired or leave, including the new employee's AASIS number (if available).
2. The DDS Waiver Program Administrator will complete a MMIS access form for the staff person and email completed MMIS access form to the DDS Waiver Program Coordinator. (Note: DDS Manager and their Secretary will need Administrative ID. Specialists will need Approval ID. PA Unit staff will need access to run reports only.)

3. The DDS Waiver Program Coordinator (to be hired) will forward complete MMIS access forms to Roger Patton roger.patton@arkansas.gov at the Division of Medical Services.
4. The DDS Waiver Program Administrator will forward password information to the appropriate DDS staff person and the DDS Waiver Program Coordinator.
5. The DDS Waiver Program Coordinator will maintain a control list of all DDS employees who have access to PAM and will assure updates are completed as staff resign or are hired.
6. When staff leaves a DDS position that requires access to MMIS, the DDS Waiver Program Administrator will complete MMIS access form to delete MMIS access and send to Roger Patton at the Division of Medical Services.

DDS Program Manager/Designee Process for Review/Assigning Clerk:

1. The DDS Program Manager/designee will be given Administrator ID's for monitoring PA requests and assignment of provider requests to a Specialist as they are received. When work has not been handled, or someone is out and their work needs covered by someone else, the DDS Program Manager/designee can reassign the work to another Specialist. NOTE: You may want to run a report before you review requests to identify PAs for your counties.
2. Log in to PAM using PAM User ID and Password.
3. From the Main Menu, under heading "View PA Request For" click on DDS.
4. A list of open DDS PA requests will display.
5. Identify the PA you want to assign and click on "Assign Clerk ID" in the "Assigned To" column.
6. A dropdown box appears in the Clerk ID field of the selected record. Choose a clerk from the dropdown menu.
7. The value in the "Assigned To" column will change to "Update" and "Cancel".
8. In the "Assigned To" column, click on "Update" to make the change or "Cancel" to stop.
9. The value in the "Assigned To" column will change back to "Assign Clerk ID".
10. To exit, use your back browser or click on any key in the left margin (Home, Requests, Reports or Log Out).

DDS Process for Generating Report:

1. On a daily basis, each Program Manager/Designee and Specialist will log into PAM system using their PAM User ID and Password.
2. From the main menu, select “Generate a Report” from the Reports section. Select the type of report you want to run. **Note:** The Program Manager/Designee will need to run a report of all new PA’s by county and then assign a clerk to the pa’s for their county. The Specialist will need to run a “Request for PA’s” report by Specialist to identify any PA’s for individuals assigned to that Specialist.
3. The Query screen will appear and provide additional select criteria for identification of the data needed. At least one criteria (PA number, PA Status, Clerk ID, Recipient ID or County), must be completed, but may enter all that apply. For example, PA Status pending for specific Clerk ID for dates May 1, 2008 through June 30, 2008.
4. Click “Submit”.
5. You will be at the List Report Screen. This screen displays the primary data on the PA Requests you selected.
6. To view the Detail Report, click on the underlined Select button.
7. Use the scroll bar view to view the PA electronically.
8. To exit Reports, use your back browser or click on any key in the left margin (Home, Requests, Reports or Log Out).

DDS Process for Review of PA:

1. Log in to PAM using your Pam User ID and Password.
2. The Main Menu will display. Select “Requests” from the main menu.
3. Click on DDS as reviewing department.
4. A list of all open PA requests for DDS will be shown. **IMPORTANT: If a pa is not part of your caseload or is not assigned to you, do not click on the PA at all or it will be assigned to you and the proper Specialist will not be able to access the PA to do their work.**

5. The PA Queue Screen displays key PA information in a table format. The column has a header row with column labels, most of which can be sorted by clicking on the underlined field names, (e.g. click on “Provider Name” to sort PA Requests in descending order by Provider Name).
6. After the Specialist identifies any of their own PA’s, they will check the PA request and see if they have received the necessary MAPS documents for review.
7. The Specialist will complete the MAPS review process including the Plan of Care Review Sheet.
8. Click on the select button next to the record you want to review.
9. The PA Request Review Screen will display. Check name of person and Medicaid number.
10. Click on the “Details” tab, check provider number, procedure code and modifier, amount, and dates of service.
11. Go to the bottom of the details screen and click on “Make a Decision”.
12. Click on Certification Reason and select the correct action
 - a. Pend
 - b. Certify in total
 - c. Not Certified – Denied
 - d. Modified - Partially Approved
13. If you click modified, a box will come up that will allow you to change the dollar amount and/or from and to dates of service for the PA.

14. If a PA is pended or not certified, the Specialist will explain reason using one of the following PAM codes:

CERTIFICATION REASON (PLAN PENDED OR DENIAL CODES)

PES MESSAGE	DDS Explanation for Pending/Denial
Duplicate	Duplicate
Exceeds Plan Maximums	Exceeds approved amount in MAPS Plan
Level of Care Not Appropriate	Pervasive level not approved
Non-Covered Service	Service not approved
Not Medically Necessary	Need physician's page/prescription
Out of Network	Used wrong provider number
Request Forwarded to and Decision Response Forthcoming From an External Review Organization	Request forwarded to POC Review Committee for decision
Requested Information Not Received	Additional information needed
Requires Medical Review	Waiting for DDS Specialist Review of MAPS documents
Testing Not Included	ICF/MR level of care not current/expired

15. After you click on certify in total or modified, a screen will come back showing previous PA number. Change PA number to new 10 digit PA based on following:
- a. First number is last digit of current year
 - b. Next three numbers are the Julian calendar date (the Julian calendar uses 001 for the first day of the year, 002 for second day of the year, etc. The Julian date shows as you log onto MMIS.)
 - c. Next three numbers are batch range which is code assigned to worker
 - d. Next two is number of PA's you have approved that day. For example, the first PA that each individual Specialist approves for the day would be 01, the second PA that each individual Specialist approves for the day would be 02, etc.
 - e. Last digit is 9 for ACS Waiver
16. After you enter the PA number, click on submit.
17. The Specialist will have to make a decision on each individual detail (go to next detail by using scroll key at bottom).

18. Before you click on generate response, complete work on all the details shown. After a decision has been made on each detail, click on generate a response. This will create a response back to the provider giving them your decision, the ten digit PA number (if the PA was approved or modified), and certification reason if PA was pended or denied.
19. **NOTE: DDS staff can only change dollar amounts and begin and/or end date of services. If the PA requires any other changes, you will have the PA will have to be Not Certified (denied) and the provider will have to resubmit the PA request.**
20. **NOTE: Once a PA has been certified in total or denied it cannot be changed.**
21. **NOTE: The PAM system will not allow approval of PA requests that have overlapping begin and/or end dates with an existing PA for the same service (procedure code). It will read as a duplicate on PAM and will have to be denied. If there is a valid reason for a second PA needing issued for the same dates, the PA will have to be processed manually by the DDS Specialist using the current process with the PA Unit keying the PA in MMIS.**
22. Pended PA requests will remain on PAM until they have been certified in total, not certified or modified.
23. If additional documentation is required, the DDS Specialist can “pend” the PA request, which will return an electronic message to the provider to inform him/her of the status and of the need for supporting documentation.
24. After 48 hours, the status of the Request for PA will default to “pended” if the Specialist has not taken some form of action on the PA.
25. Providers will be able to view approved PA’s in their PES system within 20 minutes after the Specialist has approved their plan.
26. New and Pended PA Requests will remain in the PA Queue until a final decision has been made.
27. To exit “Requests”, use the back browser or click on any key in the left margin (Home, Requests, Reports or Log Out).
28. Go to “Reports” and run a report of PA’s actions you just did for the person. Click on your worker code, click on “All Actions”, enter Medicaid number of person and then click on “Submit”. A report will come back of the PA work you just completed for the file.

DDS Process for PAM Error Report:

1. The PA Unit Secretary will run a PA Error Report daily from On Demand.
2. The PA Unit Secretary will review the daily report and identify any DDS PA's that erred off during transmission from PAM to MMIS.
3. If a DDS PA is on the error report, the PA Unit Secretary will notify their Supervisor.
4. The DDS PA Unit Supervisor will work with the appropriate Program Manager to resolve the error and get the PA on MMIS by either having the provider/staff correct the PA so it will transmit properly to MMIS or manually entering PA into MMIS if necessary.

DDS Process for Entry of Type of Service 9:

1. The DDS PA Unit staff will run a report daily showing any PA's that were processed under PAM.
2. Any approved or modified PA will be pulled up on MMIS and type of service 9 will be entered.
3. A copy of printouts will be maintained for count of work done on a weekly basis and for comparison of any billing problems.

DDS Assigned Worker Codes for PAM Approvals (Can only use 600-699):

Northeast Region:

600 Pamela Bowers
601 Leslie Price
602 Sheila Warnick
603 Elvira Smith
604 Polly Hurt
605 Ruth Dunn
606 Linda Armstrong
607 Carolyn Sattiewhite (resigned)
608 Dorothy Vance
609 Susan Baker

North Central Region:

610 Ruby Jeffers
611 Tracey Brister
612 Tora Aldridge
613 Lynetta Reese
614 Kimberly Green
615 Karensia Richmond
616 Sandra Hamilton

Central Region:

620 Linda Wilson
621 Heather Bailey
622 Felicia Coleman
623 Linda Grover
624 Yolanda Gore
625 Annie Townsend
626 Margaree Luster
627 Charlotte Malvin
628 Marian Hall

DDS Assigned Worker Codes for PAM Approvals (Can only use 600-699):

Northwest Region:

630 Laura Mendez
631 Bonnie Dickelman
632 Ashley Clanton
633 Debbie Renfroe
634 Rhee Reamy
635 Vikki Sparks
636 Amala Sista
637 Leslie Lichti
638 Rodney Collins
639 Sam Dorrough

Southwest Region:

640 Patricia White
641 Kesha Wilson
642 Monique Freeman
643 Claretta Newborn
644 Kathy Bivens
645 Charles Brinkman

Southeast Region:

650 Richard Fong
651 Melanie Rawls
652 Gwendolyn Stanfield
653 Michael Suttle

PA Unit for MMIS PA'S:

660 Kim McCuien
661 Portland Gilbert
662 Vacant
663 Gwen Williams
664 Danielle Terry
665 Terrell Wade
666 Danna Snedden (resigned)