DDS ACS Waiver
Provider Automated Prior Authorization 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 the 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 DDS 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. This 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. This 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.

Provider Process:

1. Providers will submit an electronic PA request through EDS Provider Electronic Solutions (PES) or other vendor software that will interface with PES. Providers who are billing electronically through PES will not need any additional software or passwords to access PES for electronic submission of PA's. Providers who are not billing electronically through PES can access the PES software through EDS at no additional cost. PES software is available for download from the DMS Website at https://www.medicaid.state.ar.us/ .   Click on provider. Then click on free software.   If you need further assistance regarding PES, please contact EDS.

2. Refer to attached document from EDS "Submitting an Electronic PA Request on PES" for instructions.

3. Notes on header 1:

   a) Check and make sure you are using the correct provider number based on the service for which you are requesting a PA.
   b) Click on DDS Waiver as the PA Reviewing Department. (ACS Waiver cannot be used to transmit PA request to DDS).
   c) Do not enter anything on attachment section
   d) In comments show who, when and how MAPS submitted, for example, hand delivered MAPS forms to Jonesboro DDS Office 7/1/08.

4. Notes on header 2:

   a) Request Category – click on HS (Health Services Review)
   b) Service Type – leave blank
   c) Place of Service Code – enter correct code

5. Notes on service 1 tab:

   a) Procedure qualifier B0 – (HCFA Common Procedural Coding System)
   b) The appropriate procedure code and modifier for the service from your MAPS form
   c) The total dollar amount for the service
   d) The beginning and ending date of services for the PA request.
   e) Note: do not enter units of service (DDS uses dollars instead of units).

6. PA requests must use the individual procedure codes as shown on the MAPS forms as revised 11/01/08 (DO NOT USE SCD SERVICE CLASS CODES).

7. A separate PA number will be issued for each individual service

8. At this time, the PAM system will not accommodate electronic submission of the MAPS and its attachments. These documents must be sent to DDS through an email with an attachment, mailed, or delivered to DDS by some other means. Identify in your PA request under comments how, when and to who the MAPS documents will be sent. If the actual MAPS and supporting documentation is not at the proper DDS Office, the PA request will have to be pended until the MAPS documentation is received. In this case, you will receive a notice from the Specialist that the PA is being pended and why.

9. The PA request is checked through PES to validate key elements including Provider ID number, Recipient ID (Medicaid number), procedure codes, and modifiers (if applicable).

10. Once validated, the PA request is routed to PAM and will appear on the PAM PA Queue screen for DDS review.

11. The requests are routed to DDS and will be accessed by the appropriate DDS Program Manager and DDS Specialist based on the recipient's county of residence.

12. After the MAPS documentation has been received, the DDS Specialist will complete their review and then enter action in PAM. Action taken by the Specialist will be shown as one of the following:
    a) Pend
    b) Certify in total
    c) Not Certified – Denied
    d) Modified - Partially Approved

13. If a PA is pended or not certified, the Specialist will explain why using one of the following PAM codes (Note that if PA is not worked within 48 hours, PAM automatically changes code to pending until such time as the PA is worked):

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

14. The PAM system "updates" every 20 minutes.

15. Completed business is posted to the EDS system (MMIS) the next business day.

16. DDS PA Unit staff will manually enter type of services in the EDS system (MMIS) the next day from a PAM report for each PA that is approved through PES/PAM.

17. **NOTE**: **DDS staff can only change dollar amounts and begin and/or end date of services. If the PA needs any other changes, the PA will be "Not Certified" (denied) and the provider will have to resubmit the PA request.**

18. **NOTE: Once a PA has been certified in total or denied, it cannot be changed on PAM**.

19. **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 DDS PA Unit keying the PA in MMIS.**

20. Providers will be able to request a 278 Prior Authorization Response through PES that will show the action taken by DDS on their PA requests that have been submitted through PES. If the PA was approved/modified the response will include the PA number, amount approved and dates of service approved.   If the PA was pended, it will show what is needed or you will be contacted by the Specialist if codes shown in # 13 above do not cover what is needed.