



May 6, 2021

Web Announcement 2492

**Attention Provider Types 30 (Personal Care Services – Provider Agency) and 83 (Personal Care Services – Intermediary Service Organization):**

**Protocols for Creating Prior Authorizations in the Provider Web Portal**

The following protocols will assist provider types 30 (Personal Care Services – Provider Agency) and 83 (Personal Care Services – Intermediary Service Organization) when creating and managing prior authorizations in the Provider Web Portal.

**1. Initial Service Requests:**

- As a reminder, agencies may not request initial services for recipients.

**2. Recipients who are not in the Nevada Medicaid Personal Care Services (PCS) program:**

- Do not create a PA for recipients who are in a Managed Care Organization (MCO), have not previously been approved for the PCS program, or who are not Medicaid eligible.

**3. Use Form FA-24 – Personal Care Services (PCS) Prior Authorization:**

- All requests for authorization must have a completed FA-24 attached with all fields completed.
- Please type information on this form. If information is illegible, processing may be delayed.
- Save a master copy of the completed form, then save it again as the recipient and then upload the form leaving all fields open. The data in those open fields will automatically be captured by the prior authorization system.
- Submit all documents as a portable document format (PDF) or Microsoft® Word document. Please do not take pictures of forms and upload the pictures. Submitting PDF and Word documents may allow for faster turnaround time, prevent illegible copies and save processing time.

**4. Check for pending or completed authorizations before creating a new PA:**

- Do not submit notification of death, completed transfers, or other types of information if you can see in the system that information has already been completed, or the PA has been end dated or is no longer active.
- Submit notices to close out a PA as the following occurs: recipient declines, expires or moves or contact with recipient is lost. Do not submit these notices if services have not been provided for some time, or when the authorization has already expired. Please see the following example of what not to submit:
  - PA expired 12/31/2020 and
  - FA-24 submitted on 3/01/2021 and
  - The last date of service was 6/30/2020
- If a PA has been pended back requesting more information, upload that information to the same PA. Do not create a new, separate PA. A new PA does not need to be created to alert Nevada Medicaid that new information has been added.
- Do not create a PA to request an assessment when the recipient is already pending an assessment. If you have additional information, upload it to the pending PA.
  - Example: The recipient is pending a significant change in condition assessment, and you create a PA for an annual update.

**5. Submitting additional information:**

- Do not create PAs for demographic changes. Demographic information is only needed if it relates to a pending assessment, and should be uploaded to the pending PA.
- If a PA has been pended for additional information, upload the requested information to the same PA. Do not create a new PA.

- Do not create additional lines in a PA when adding information. Simply upload the new information. (Service plans only pull information from line 1 of any PA.)
- 6. Transfer requests should not be associated with Significant Change in condition requests:**
- No expectations should be made to recipients that a transfer to an agency may provide them with additional personal care service hours.
- 7. Changing from Managed Care Organizations (MCO) to Fee-For-Service (FFS) Medicaid:**
- For recipients changing from MCO to FFS Medicaid, a completed FA-24 for a significant change in condition and copy of the MCO authorization must be submitted as soon as possible to avoid a lapse between prior authorizations.
- 8. Nevada Medicaid recipients depend on Personal Care Services providers:**
- Please answer and return calls as timely as possible when contacted by Nevada Medicaid, including contact from therapists as they may need your assistance with scheduling an assessment.
  - Nevada Medicaid relies on Personal Care Services providers to have the most current information on the recipient to avoid delays in assessments or interruption in services.