Enhancements for Online Prior Authorizations

Effective January 26, 2015, the online prior authorization system was updated to improve the Provider Web Portal experience for providers. Enhancements have been made to the “View Authorization Response” page, and some fields have been removed from the “Create Authorization Step 2,” “Print Preview,” “View Provider Request” and “View Denial Information” pages for some Authorization/Service Types.

The following information will now be displayed on the “View Authorization Response” page:

- The “From” and “To/Through” dates and units: For authorizations that are Pended, Denied or Cancelled, the dates and units requested by the provider are displayed. For authorizations that are “Certified in Total” or “Modified,” the approved dates and units are displayed.
- “Medical Citation” and “Notes to Provider” are displayed by clicking the “Hide” link under Medical Citation.
- Decision and date: The decision date will be considered the final decision date once the prior authorization is no longer pending. For “Pending” authorizations, the decision date is the date that the PA was submitted.

Note: If there is no information to display in the “Medical Citation” and “Notes to Provider” fields, the fields will appear blank in the Provider Web Portal.
Denied Authorizations

When all of the service lines on a prior authorization are “Not Certified,” the “View Denial Information” button will appear on the “View Authorization Response” page.

<table>
<thead>
<tr>
<th>From Date</th>
<th>To/Through Date</th>
<th>Units/Days</th>
<th>Remaining Units/Days</th>
<th>Amount</th>
<th>Code</th>
<th>Medical Citation</th>
<th>Decision / Date</th>
<th>Reason</th>
</tr>
</thead>
<tbody>
<tr>
<td>12/31/2014</td>
<td>01/02/2015</td>
<td>3</td>
<td>-</td>
<td>-</td>
<td>Revenue 0121-RAB-2 BED-MED- SURG-GYN</td>
<td>View</td>
<td>Not Certified</td>
<td>12/18/2014</td>
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<tr>
<td>12/31/2014</td>
<td>01/03/2015</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>Surgical [CD-9 0001]-THER HN VESSEL US</td>
<td>View</td>
<td>Not Certified</td>
<td>12/18/2014</td>
</tr>
</tbody>
</table>

Clicking the “View Denial Information” button will display the “View Denial Information” page. The text on this page has been updated to state:

You have the right to appeal this determination. Please reference the Nevada Medicaid Billing Manual for appeal rights and procedures.

The Billing Manual is located on the Provider Billing Information webpage at www.medicaid.nv.gov.

View Provider Request

The “View Original Request” button has been replaced with the “View Provider Request” button. Click the “View Provider Request” button to display the “View Authorization Print” page. This page will now show all of the diagnosis, service lines, and attachments, including those that have been added since the prior authorization was initially submitted. This page will show the information requested by the provider. The dates and units may be different than the approved dates and units that are displayed on the “View Authorization Response” page if the PA has been modified during the approval process.

For PA service lines, the “View Authorization Print” page will always display the requested “Units” and “From” and “To/Through” dates.
Note regarding attachment information for previously submitted prior authorizations: HP Enterprise Services (HPES) is working to resolve an issue with displaying attachment information for previously submitted PAs on the “View Provider Request” screen. For inpatient PAs, the file name of the attachment is not being displayed. For other PA types, no attachment information is being displayed. Providers are advised to use the “Print Preview” button from the Authorization Receipt page when the PA is submitted and print the PA, so that they have the attachment information for the PA.

Additional Changes

In addition to the above changes, some fields have been removed from “Create Authorization Step 2,” “Print Preview,” “View Provider Request” and “View Denial Information” pages for the following Authorization/Service Types.

Authorization Type **M/S Outpatient/Lab - Service Type OB/GYN** will no longer display the following fields:
- Is this request pregnancy related?
- Is the EDC related to the service?

Authorization Type **M/S Outpatient/Lab - Service Type Therapies** will no longer display the following fields:
- Yes/No Radio button: Is this a request for home health care, private duty nursing, or services by a nurses’ agency?
- Checkbox for Homebound – Unable to receive services in alternative setting
- Checkbox for Making Progress in Therapy
- Goals text box

Authorization Type **Home Health – Service Type Home Health/ PDN** will no longer display the following fields:
- Yes/No Radio button: Is this a request for home health care, private duty nursing, or services by a nurses’ agency?
- Checkbox for Homebound – Unable to receive services in alternative setting
- Checkbox for Making Progress in Therapy
- Goals text box
<table>
<thead>
<tr>
<th>Procedure</th>
<th>Provider Type</th>
<th>Provider Specialty</th>
<th>Claim Type</th>
<th>PA Required</th>
<th>Age Restrictions</th>
<th>Effective Date</th>
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<tbody>
<tr>
<td>A4377-DRAINABLE PLASTIC PCH W/O FP</td>
<td>017-SPECIAL CLINICS</td>
<td>166-FAMILY PLANNING</td>
<td>PRACTITIONER</td>
<td>Required if exceeding service limitations</td>
<td>0-999</td>
<td>06/01/2006 - 12/31/9999</td>
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<td>017-SPECIAL CLINICS</td>
<td>174-PUBLIC HEALTH</td>
<td>PRACTITIONER</td>
<td>Required if exceeding service limitations</td>
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<td>06/01/2006 - 12/31/9999</td>
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<td>017-SPECIAL CLINICS</td>
<td>183-COMPREHENSIVE OUTPATIENT REHAB FACILITIES (CO)</td>
<td>PRACTITIONER</td>
<td>Required if exceeding service limitations</td>
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<td>06/01/2006 - 12/31/9999</td>
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<tr>
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<td>017-SPECIAL CLINICS</td>
<td>199-COMMUNITY HEALTH CLINICS - STATE HEALTH DIVIS</td>
<td>PRACTITIONER</td>
<td>Required if exceeding service limitations</td>
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<td>06/01/2006 - 12/31/9999</td>
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<td>A4377-DRAINABLE PLASTIC PCH W/O FP</td>
<td>017-SPECIAL CLINICS</td>
<td>195-SPECIAL CHILDREN'S CLINICS</td>
<td>PRACTITIONER</td>
<td>Required if exceeding service limitations</td>
<td>0-999</td>
<td>06/01/2006 - 12/31/9999</td>
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