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To:

Audiologists Hearing Instrument Specialists Speech and Hearing Clinics HMOs and Other Managed Care Programs

# Wisconsin Medicaid Accepting Prior Authorization Requests Via the Medicaid Web Site for Hearing Aids

Effective August 1, 2005, Wisconsin Medicaid will accept prior authorization (PA) requests via the Medicaid Web site from hearing instrument specialists and audiologists requesting PA for hearing aids.

This *Wisconsin Medicaid and BadgerCare Update* also explains Web PA registration, options for submitting PA requests via the Web, and changes concerning:

- The Prior Authorization Request/ Hearing Instrument and Audiological Services (PA/HIAS2) form.
- The Prior Authorization/Physician Otological Report (PA/POR).
- Lost hearing aids.

# Submit Prior Authorization Requests Via the Web for Hearing Aids in August

Effective August 1, 2005, Wisconsin Medicaid will accept prior authorization (PA) requests via the Web from hearing instrument specialists and audiologists requesting PA for hearing aids.

Hearing instrument specialists and audiologists will be able to complete and submit the Prior Authorization Request for Hearing Instrument and Audiological Services (PA/HIAS1) form, HCF 11020 (Rev. 10/03), and PA attachments via the Web. Hearing instrument specialists and audiologists are required to submit the following PA attachments with the PA/HIAS1:

- Hearing instrument specialists Prior
  Authorization Request/Hearing Instrument
  and Audiological Services (PA/HIAS2)
  form, HCF 11021 (Rev. 06/04) *and* the
  Prior Authorization/Physician Otological
  Report (PA/POR), HCF 11019 (Rev. 06/03).
- Audiologists Only the PA/HIAS2.

If additional supporting clinical documentation is required for a PA request, users may submit PA requests using a combination of the Web *and* mail or fax. Supporting clinical documentation may include, but is not limited to, letters regarding lost hearing aids, manufacturer's invoices, or photographs.

Completing and submitting PA requests via the Web is intended to reduce the number of requests returned to providers due to clerical errors or omissions and may establish initial grant dates.

*Note:* Providers may continue to submit paper PA requests by mail or fax.

### Registering to Submit Prior Authorization Requests Via the Medicaid Web Site

To register and log in to submit PA requests via the Web, users should go to the Medicaid Web site at *dhfs.wisconsin.gov/medicaid/* and:

- Select "Providers" from the main menu and then "Web Prior Authorization (PA)" under "Related Programs and Services."
- Select "Web PA Application on the Web Prior Authorization page." This will take users to the "Welcome to Web PA" login and registration screen.

Refer to Attachment 1 of this *Wisconsin Medicaid and BadgerCare Update* for instructions on how to register and log in as a new user.

### Two Options for Submitting Prior Authorization Requests Via the Web

After registering, users will have two submission options:

- Completing and submitting the PA/HIAS1 and PA attachments via the Web. Refer to Attachment 2 for instructions on completing and submitting PA requests with no additional supporting clinical documentation required via the Web.
- Completing and submitting the PA/HIAS1 and PA attachments via the Web and then sending the PA/HIAS1, PA attachments, and any supporting clinical documentation on paper by mail or fax. Refer to Attachment 3 for instructions on completing and submitting PA requests with supporting clinical documentation via the Web.

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# Enter Decibels Rather Than Symbols on Pure Tone Audiogram

When submitting PA requests for hearing aids via the Web, users will enter numeric decibel values rather than symbols on the pure tone audiogram on the PA/HIAS2.

The PA application will convert the numeric decibel into the appropriate symbol when the PA is submitted. Users will be able to view the symbols when they print a copy of their PA requests.

# Prior Authorization/Physician Otological Report Submitted Via the Web Does Not Require Physician's Signature

When submitting the PA/POR via the Web, users no longer need to submit a physician's signed form. The hearing instrument specialist is required to have a paper PA/POR completed and signed by a physician *prior* to requesting PA via the Web. Users should enter the information into the Web PA/POR *exactly* as written by the physician. Providers should retain the paper PA/POR in their records for audit purposes.

# Requesting Prior Authorization for Lost Hearing Aids

When requesting PA via the Web for lost hearing aids, users are required to notify Wisconsin Medicaid of the loss by doing one of the following:

- Entering the following information on the PA/HIAS2 in the "Additional Information" field:
  - $\checkmark$  That the hearing aid was lost.
  - ✓ How the hearing aid was lost.
  - ✓ Description of effort to find the hearing aid.
  - A statement attesting that the recipient received instructions on care and maintenance.

When submitting PA requests for hearing aids via the Web, users will enter numeric decibel values rather than symbols on the pure tone audiogram on the PA/HIAS2.

- A statement that the hearing aid is not covered by a manufacturer's loss and damage warranty.
- ✓ Whether or not the recipient has other insurance coverage.

Refer to Attachment 2 for instructions on completing and submitting PA requests with no additional supporting clinical documentation via the Web.

Attaching a letter from the recipient with the PA/HIAS1 and PA attachments and mailing or faxing the entire PA request to Wisconsin Medicaid. This letter should also contain the previously listed information.

Refer to Attachment 3 for instructions on completing and submitting PA requests with supporting clinical documentation via the Web.

#### **User Resources**

If users have questions about submitting PA requests on the Web, Wisconsin Medicaid offers a complete tutorial, online Help, and a helpdesk to assist providers submitting PA requests via the Web.

#### **Online** Tutorial

For users who want step-by-step instructions on submitting PA requests via the Web site, there is a complete tutorial. There is a Tutorial link at the top of each screen of the Web PA process if a user has a question about a specific screen.

#### Online Help

If users have a question about a specific item while submitting a PA request (e.g., a procedure code element on the PA/HIAS1), they may select "Help" at the top of the Web page. This will give the user a brief explanation about a specific area.

#### Helpdesk

For help with logging in or other Web PA questions, users may also contact the Web PA technical helpdesk at (608) 221-9730. The helpdesk is available Monday through Friday from 8:30 a.m. to 4:30 p.m. (Central Time).

*Note:* For PA policy questions, providers should contact Provider Services at (800) 947-9627 or (608) 221-9883.

## Information Regarding Medicaid HMOs

This *Update* contains Medicaid fee-for-service policy and applies to providers of services to recipients on fee-for-service Medicaid only. For Medicaid HMO or managed care policy, contact the appropriate managed care organization. Wisconsin Medicaid HMOs are required to provide at least the same benefits as those provided under fee-for-service arrangements.

The *Wisconsin Medicaid and BadgerCare Update* is the first source of program policy and billing information for providers.

Although the *Update* refers to Medicaid recipients, all information applies to BadgerCare recipients also.

Wisconsin Medicaid and BadgerCare are administered by the Division of Health Care Financing, Wisconsin Department of Health and Family Services, P.O. Box 309, Madison, WI 53701-0309.

For questions, call Provider Services at (800) 947-9627 or (608) 221-9883 or visit our Web site at *dhfs.wisconsin.gov/medicaid/*. PHC 1250

# ATTACHMENT 1 New User Registration

A user who has not previously registered to submit prior authorization (PA) requests via the Wisconsin Medicaid Web site should select "Register to use this site" to access the New User Registration page.

On the New User Registration page, users will be asked to enter or select the following information (all items are required except as noted):

- First Name.
- Last Name.
- E-mail. E-mail addresses are not case sensitive.
- Address 1.
- Address 2 (optional).
- City.
- State.

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- **ZIP** Code (plus four digits, if applicable).
- Telephone Number (with extension, if applicable).
- Fax Number (optional).
- User Name. User names must be at least eight characters long and can be alphanumeric. User names are not case sensitive. Each user is required to select a unique user name and password.
- **Password.** Passwords must be at least eight characters long and contain at least one letter character and one numeric character. Passwords are case sensitive.
- **Password Confirmation.** As a security check, users will be asked to retype their password.
- Select a personal password reminder question that will be asked to confirm your identity if you forget your password. Users are required to choose just one of the following questions:
  - ✓ "What is your mother's maiden name?"
  - ✓ "What is your father's middle name?"
  - ✓ "What are the last four digits of your Social Security number?"
  - ✓ "What was the name of your high school?"
- Question Response. Users are required to enter the answer to the question they selected. The maximum length of this response is 25 characters. Question responses are not case sensitive. This feature is used to confirm a user's identity if a password is forgotten.
- Select Register. If an error is found on the page, a message on the screen will prompt the user to correct it. When the error is corrected, users should select "Register" again.
- Select Reset. Selecting "Reset" will clear all the information from the screen.

After "Register" is selected, the screen will notify the user that the registration request is being processed. When processing is complete, the user is logged into the Web PA application.

# **Updating Billing Provider List**

After registering, users will be able to enter one or more Wisconsin Medicaid billing provider numbers for submitting PA requests via the Web on the "Updating Billing Providers Associated With Your User ID" screen.

Note: Users submitting hearing aid PA requests use "testing center" rather than "billing provider."

A single provider (e.g., speech and hearing clinic) may have multiple users who submit PA requests via the Web. Also, a staff member (e.g., billing clerk) may be able to submit PA requests via the Web for multiple testing centers.

To authorize the testing center numbers, users are required to enter the following:

- **Billing Provider's Medicaid Provider Number.** This is the provider's eight-digit Wisconsin Medicaid provider number.
- **Provider Name.** At a minimum, users are required to enter the first three characters of the provider's last name or the organization's name to validate that the provider number was entered correctly. Users are required to enter the provider's name that was used when the provider became Medicaid certified.

When the testing center number and provider name have been entered, users should select the following:

- Confirm Add. Select "Confirm Add" to verify that the testing center number was entered correctly. Then choose "Add."
- Add. Select "Add" to add the testing center to the "Selected Providers" field. Users may authorize multiple billing testing center numbers.
- **Done.** Select "Done" when the billing testing center numbers have been added. Users will then be able to begin submitting PA requests via the Web.

Other options on this screen:

- Remove. Select "Remove" to remove a testing center from the "Selected Providers" drop-down list.
- Clear. Select "Clear" to remove information from all unprotected fields on the screen.

For help with logging in or other Web PA questions, users may also contact the Web PA technical helpdesk at (608) 221-9730.

### **Forgotten Passwords**

Users can reset forgotten passwords by selecting "Forgotten Password Help" and doing the following:

- Entering his or her User Name.
- Selecting "Get Password Reminder."
- Entering the answer to the personal reminder question that the user chose during registration in the "Question Response" field.
- Selecting "Submit."

The user is required to enter a new password. Once changed, the user will be logged into the Web PA application. Select "Clear" to remove information from all unprotected fields on the screen.

# ATTACHMENT 2 Completing and Submitting Prior Authorization Requests with No Additional Supporting Clinical Documentation Via the Web

After registering to submit prior authorization (PA) requests via the Medicaid Web site, users with no supporting clinical documentation will complete the Prior Authorization Request for Hearing Instrument and Audiological Services (PA/HIAS1) form, HCF 11020 (Rev. 10/03), and the appropriate PA attachment. Users who submit Web PA requests must *not* submit duplicate paper or fax copies to Wisconsin Medicaid.

Audiologists are required to complete and submit the Prior Authorization Request/Hearing Instrument and Audiological Services (PA/HIAS2) form, HCF 11021 (Rev. 06/04). Hearing instrument specialists are required to complete and submit the PA/HIAS2 *and* the Prior Authorization/Physician Otological Report (PA/POR), HCF 11019 (Rev. 06/03). The information on the Web PA screens is the same as on the paper versions.

*Note:* When submitting the PA/POR via the Web, users no longer need to submit a physician's signed form. The hearing instrument specialist is required to have a paper PA/POR completed and signed by a physician *prior* to requesting PA via the Web. Users should enter the information into the Web PA/POR *exactly* as written by the physician. Providers should retain the paper PA/POR in his or her records for audit purposes.

If a clerical error is detected while a user is completing a Web PA request, a message on the screen will prompt the user to correct it. Examples of clerical errors that providers will be prompted to correct include, but are not limited to, the following:

- Invalid place of service code.
- Obsolete procedure code.
- Invalid recipient name.
- Invalid recipient Medicaid identification number.
- Invalid Medicaid provider number.
- Failure to indicate a recipient's primary diagnosis code.

Some information from the PA/HIAS1 will be automatically entered on the PA attachments. Users should enter the necessary information just as they would on a paper PA attachment. When the PA attachment is complete, users should select "Submit." If an error is detected, a message on the screen will prompt the user to correct it.

If the PA request contains no errors, users will advance to the "Verify PA" screen. Users with no additional supporting clinical documentation should select "No" and then "Submit PA."

A PA number will be assigned and the PA number will appear on the "Confirmation of Receipt" screen. Users may print this screen for their records. On the "Confirmation of Receipt" screen, users should also print or save a copy of the PA/HIAS1 and PA attachments in Portable Document Format (PDF) (with Adobe Reader<sup>®</sup>) for their records when the PA is accepted. If users do not print or save this PA request when it is initially accepted, they will not be able to print or save it later. Users may also elect to start a new PA request from this screen.

*Note:* When a user receives the PA number, this *does not* signal an approved PA request. While *clerical* errors have been reviewed, a *clinical* review of the PA request must still take place.

## After the Prior Authorization Request Is Submitted Via the Web

After Wisconsin Medicaid receives the PA request via the Web and the user has received confirmation of the Web submission, including a PA number, the PA will process as usual. Users and recipients will continue to receive copies of the PA request when the PA request is adjudicated.

*Note:* Since partially completed PA requests may *not* be saved, users should complete and submit the PA/HIAS1 and appropriate PA attachment together when they log on to the Web PA site. If, for example, a user turns off his or her computer before submitting the PA request, all the information will be lost.

<sup>\*</sup>The Medicaid Web site provides instructions on how to obtain Adobe Reader<sup>®</sup> at no charge from the Adobe<sup>®</sup> Web site. Adobe Reader<sup>®</sup> does not allow users to save completed PDFs to their computers; however, if Adobe Acrobat<sup>®</sup> is obtained, providers may save completed PDFs to their computer. Refer to the Adobe<sup>®</sup> Web site, *www.adobe.com/*, for more information about PDFs.

# ATTACHMENT 3 Completing and Submitting Prior Authorization Requests with Supporting Clinical Documentation Via the Web

After registering to submit prior authorization (PA) requests via the Medicaid Web site, users with supporting clinical documentation will complete the Prior Authorization Request for Hearing Instrument and Audiological Services (PA/HIAS1) form, HCF 11020 (Rev. 10/03), and the appropriate PA attachment. Supporting clinical documentation may include, but is not limited to, letters regarding lost hearing aids, manufacturer's invoices, or photographs. Users who submit Web PA requests must *not* submit duplicate paper or fax copies to Wisconsin Medicaid.

Audiologists are required to complete and submit the Prior Authorization Request/Hearing Instrument and Audiological Services (PA/HIAS2) form, HCF 11021 (Rev. 06/04). Hearing instrument specialists are required to complete and submit the PA/HIAS2 *and* the Prior Authorization/Physician Otological Report (PA/POR), HCF 11019 (Rev. 06/03). The information on the Web PA screens is the same as on the paper versions.

If a clerical error is detected while a user is completing a Web PA request, a message on the screen will prompt the user to correct it. Examples of clerical errors that providers will be prompted to correct include, but are not limited to, the following:

- Invalid place of service code.
- Obsolete procedure code.
- Invalid recipient name.

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- Invalid recipient Medicaid identification number.
- Invalid Medicaid provider number.
- Failure to indicate a recipient's primary diagnosis code.

Some information from the PA/HIAS1 will be automatically entered on the PA attachments. Users should enter the necessary information just as they would on a paper PA attachment. When the PA attachment is complete, users should select "Submit." If an error is detected, a message on the screen will prompt the user to correct it.

If the PA request contains no errors, users will advance to the "Verify PA" screen. Users with supporting clinical documentation should select "Yes" and then "Submit PA." A PA number will be assigned and the PA number will appear on the "Confirmation of Receipt" screen. Users may print this screen for their records.

On the "Confirmation of Receipt" screen, users should also print a copy of the PA/HIAS1 and PA attachments in Portable Document Format (PDF) (with Adobe Reader<sup>®</sup>) for their records when the PA is accepted. If users do not print this PA request when it is initially accepted, they will not be able to print it later. Users may also elect to start a new PA request from this screen.

*Note:* When a user receives the PA number, this *does not* signal an approved PA request. While *clerical* errors have been reviewed, a *clinical* review of the PA request must still take place.

On the "Verify PA" screen, users will be instructed to print the PA/HIAS1 and PA attachments and mail or fax the *entire* PA request (e.g., PA/HIAS1, PA attachments, and supporting clinical documentation such as letters regarding lost hearing aids, manufacturer's invoices, or photographs) to Wisconsin Medicaid within 10 business days.

*Note:* Do *not* make any handwritten changes to the PA/HIAS1 or PA attachments once they are printed. Submitting a PA/HIAS1 and PA attachments with handwritten changes will delay the processing of the PA request.

# Mail or Fax Entire Prior Authorization Request Within 10 Business Days to Wisconsin Medicaid

Wisconsin Medicaid should receive the *entire* PA request on paper by fax or mail, including a printed copy of the Web PA/HIAS1, PA attachments, and supporting clinical documentation, within 10 business days of the PA/HIAS1 and PA attachments being accepted via the Web.

If the *entire* PA request is *not* received within 10 business days, the PA/HIAS1 and PA attachments submitted via the Web will be returned to the provider requesting the required supporting clinical documentation. Providers will then have to resend the returned PA/HIAS1 and PA attachments, along with the additional supporting clinical documentation, by mail or fax. By resubmitting the returned PA/HIAS1 and PA attachments, providers may continue to establish initial grant dates according to current policy.

If the supporting clinical documentation is received within 10 business days, the PA request will be processed as usual.

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<sup>\*</sup>The Medicaid Web site provides instructions on how to obtain Adobe Reader<sup>®</sup> at no charge from the Adobe<sup>®</sup> Web site. Adobe Reader<sup>®</sup> does not allow users to save completed PDFs to their computers; however, if Adobe Acrobat<sup>®</sup> is obtained, providers may save completed PDFs to their computers. Refer to the Adobe<sup>®</sup> Web site, *www.adobe.com/*, for more information about PDFs.