

How to Create a Service Prior Authorization

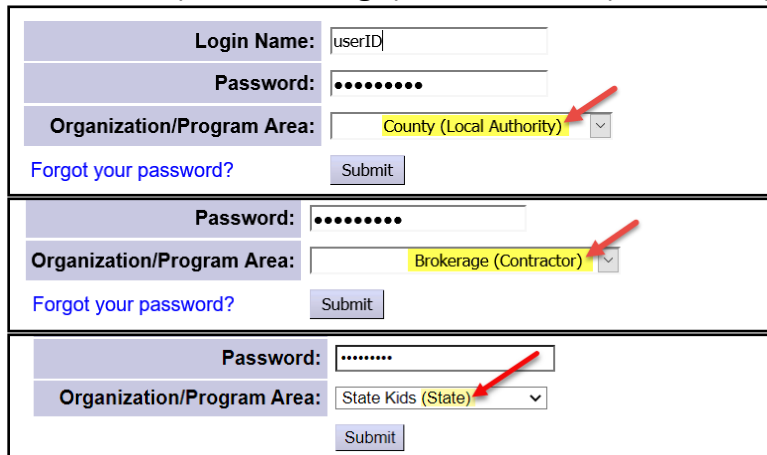
Case Management Entities (CMEs) are responsible to create Service Prior Authorizations (SPAs) for individuals enrolled with their program. These authorizations exist in an individual's Plan of Care, and they authorize a provider to deliver a service that supports the Individual Support Plan (ISP).

Users must have one of the following roles to complete this work:

- **POC Manager**
- **POC Super User**

How to Create a Service Prior Authorization

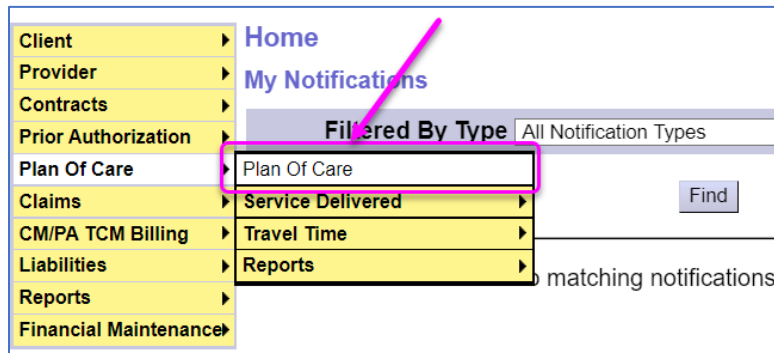
1) Login to eXPRS. If users have multiple login options, use the Local Authority (for CDDPs), Contractor (for Brokerage), or State for (State Kids).



The image shows three sequential screenshots of the eXPRS login form. Each screenshot has a red arrow pointing to the 'Organization/Program Area' dropdown menu.

- First screenshot:** Login Name: [userID], Password: [masked], Organization/Program Area: County (Local Authority) [selected].
- Second screenshot:** Password: [masked], Organization/Program Area: Brokerage (Contractor) [selected].
- Third screenshot:** Password: [masked], Organization/Program Area: State Kids (State) [selected].

2) Select **Plan of Care > Plan of Care**.



The image shows a navigation menu with the following items: Client, Provider, Contracts, Prior Authorization, Plan Of Care, Claims, CM/PA TCM Billing, Liabilities, Reports, and Financial Maintenance. The 'Plan Of Care' item is highlighted in yellow, and its sub-menu is open, showing 'Plan Of Care', 'Service Delivered', 'Travel Time', and 'Reports'. A pink box highlights the 'Plan Of Care' sub-item, and a pink arrow points to it from the right. Below the menu, there is a 'Filtered By Type' dropdown set to 'All Notification Types' and a 'Find' button.

TIP: If needed, see [How to Create a Plan of Care](#) for help creating a POC.

3) On the **Find Plan of Care** page, enter at least one criterion and select **Find**.

Find Plan of Care

Note: If criteria entered results in more than 20,000 rows, data returned will be truncated. You may need to narrow your search criteria to return a smaller dataset.

Plan ID:

Client Prime:

Service Element:

Plan Begin: Overlap Contain Exact

Plan End: Overlap Contain Exact

DHS Contract Num:

Status:

Max Displayed:

4) From the results list, select the **Plan ID** Hyperlink to open the POC.

Find Plan of Care

Note: If criteria entered results in more than 20,000 rows, data returned will be truncated. You may need to narrow your search criteria to return a smaller dataset.

Plan ID:

Client Prime:

Service Element:

Plan Begin: Overlap Contain Exact

Plan End: Overlap Contain Exact

DHS Contract Num:

Status:

Max Displayed:

[First/Prev] 1, 2, 3 [Next/Last] Export options: [CSV](#) | [Excel](#) | [PDF](#) | [RTF](#)

Plan ID	Client Prime	Client Name	DHS Contract Num	Plan Begin	Plan End	Status
56770742	76 YV	/ SABHCD SXSEA				Accepted

5) Navigate to the **Plan of Care > In Home Services** tab and select **Edit**.

Plan of Care

Plan Id: 56770742 Plan Dates: 3/1/2022 - 2/28/2023

Client Name: NMCL EMXZOCN Client Prime: FI R3L

Plan Status: Draft

Service Eligibility **Plan Overview** **In Home Services** Residential Supported Living Community Transportation Ancillary Legacy

Monthly Assessed Attendant Care/Skills Training Hours

Dates	Hour Limit
3/1/2022 - 2/28/2023	108.00

6) In Edit Mode, select the **Add Plan Line Button**.

Buttons: Delete Done

Service Eligibility Plan Overview **In Home Services** Residential Supported Living Community Transportation Ancillary Legacy

Monthly Assessed Attendant Care/Skills Training Hours

Dates	Hour Limit
3/1/2022 - 2/28/2023	108.00

Plan Details

Add Plan Line

7) Enter in the details of the service Plan Line and select **Save**. Details include the:

- SE/PROC/MOD Codes
- Number of Units permitted for this Plan Line
- Frequency of the Plan Line
- Start and End dates of the Plan Line

Service Eligibility Plan Overview **In Home Services** Residential Supported Living Community Transportation Ancillary Legacy

Monthly Assessed Attendant Care/Skills Training Hours

Dates	Hour Limit
3/1/2022 - 2/28/2023	108.00

Plan Details

* SE/Procedure Code/Modifier	*Units	*Dates	Status
49 - In-Home Comprehensive Supports	108.00 Hours / Month	10/1/2022 - 2/28/2023	Draft
OR526 - Attendant Care, home or comm			
NA - Not Applicable			

Save Split Cancel

8) Now that the Plan Line is in Draft Status, select the **Add Provider Button**.

Service Eligibility Plan Overview **In Home Services** Residential Supported Living Community Transportation Ancillary Legacy

Monthly Assessed Attendant Care/Skills Training Hours

Dates	Hour Limit
3/1/2022 - 2/28/2023	108.00

Plan Details

Draft Pending Accepted Withdrawn Void

SE	Procedure Code	Modifier	Units	Dates	Status
49	OR526 - Attendant Care - 1:1 Supports	NA	108.00 Hours per Month	3/1/2022 - 2/28/2023	Draft

Add Provider

Add Plan Line

9) Enter in the details of the Service Prior Authorization and select **Save**. Details include the:

- Provider
- Start and End dates of the SPA
- Number of Units permitted for the SPA

TIP: When saving a SPA for the first time, eXPRS will determine whether it is a **Fixed Rate** or **Not-To-Exceed (NTE)** rate.

10) For Fixed Rate Services, the **Rate** field will continue to display the word “Fixed”, and the rate will auto-populate in various areas of eXPRS. Shown below, If it’s an NTE service, the **Rate** field enables for a user to manually key in the correct rate.

11) Select the **Submit** button on the SPA.

The screenshot shows a web interface for managing services. At the top, there are several tabs: Service Eligibility, Plan Overview (highlighted with a pink box), In Home Services, Residential, Supported Living, Community, Transportation, Ancillary, and Legacy. Below the tabs is a section titled "Monthly Assessed Attendant Care/Skills Training Hours" with a table showing Dates (3/1/2022 - 2/28/2023) and Hour Limit (108.00). Underneath is a "Plan Details" section with a status filter (Draft, Pending, Accepted, Withdrawn, Void) and a "Select" button. A table lists plan details with columns for SE, Procedure Code, Modifier, Units, Dates, and Status. The first row shows SE 49, Procedure Code OR526 - Attendant Care - 1:1 Supports, Modifier NA, Units 108.00 Hours per Month, Dates 10/1/2022 - 2/28/2023, and Status Draft. Below this table is another table with columns for Auth Id, Provider, Dates, Units, Rate, Pay-To Provider, Review?, and Status. The first row shows Auth Id 56770747, Provider PSW, ONE, Dates 10/1/2022 - 2/28/2023, Units 108.00, Rate 16.67, Pay-To Provider Public Partnerships LLC FMAS, Review? Yes, and Status Draft. The "Submit" button in the "Status" column of this row is highlighted with a pink box and a pink arrow points to it. There are also "Add Provider" and "Add Plan Line" buttons at the bottom.

12) If all validations for the SPA pass, it will move to **Accepted** status. Additionally, the Plan Line Status & POC Status have both moved to **Accepted**.

The screenshot shows the same web interface as above, but now the "Plan Status" is "Accepted" (highlighted with a pink box). Below the tabs, the "Plan of Care" section shows Plan Id: 56770742, Client Name: LKEN CKRFIEL, Plan Dates: 3/1/2022 - 2/28/2023, and Client Prime: FI 3L. There are "Edit", "Copy", and "Print Summary" buttons. The "Monthly Assessed Attendant Care/Skills Training Hours" table is the same. In the "Plan Details" section, the status filter now includes "Accepted" (checked). In the table below, the "Status" column for the first row now shows "Accepted" (highlighted with a pink box). The "Review?" column for the same row also shows "Accepted" (highlighted with a pink box). The "Submit" button is no longer visible.

Tip: The status of the SPAs on the Plan of Care directly affect the Plan Line Status and POC Status. For example, the SPA shown above is the only one on the plan. If it were **Voided**, both the Plan Line and POC Status would also change to **Voided**.