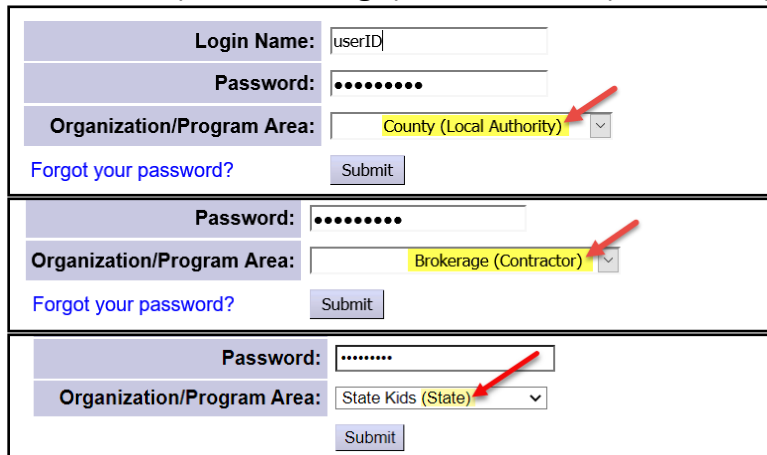# How to Create a Service Prior Authorization

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**
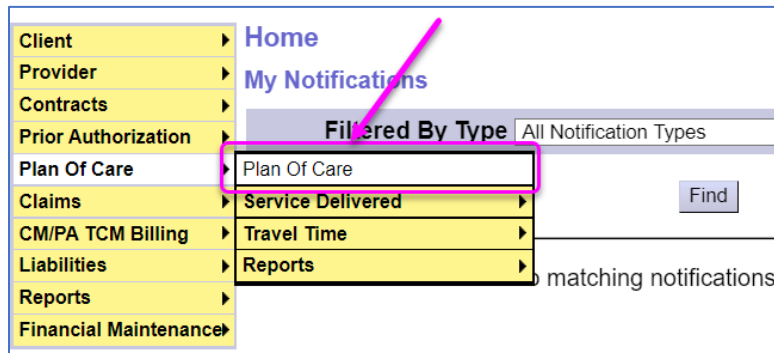
How to Create a Service Prior Authorization

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

Login Name:	userID
Password:	••••••••
Organization/Program Area:	County (Local Authority)
Forgot your password?	Submit

Password:	••••••••
Organization/Program Area:	Brokerage (Contractor)
Forgot your password?	Submit

Password:	••••••••
Organization/Program Area:	State Kids (State)
	Submit

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

Client ▶	**Home**
Provider ▶	**My Notifications**
Contracts ▶	
Prior Authorization ▶	**Filtered By Type** All Notification Types
Plan Of Care ▶	Plan Of Care
Claims ▶	Service Delivered ▶
CM/PA TCM Billing ▶	Travel Time ▶
Liabilities ▶	Reports ▶
Reports ▶	matching notifications
Financial Maintenance▶	

Find

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**.

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

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

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

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

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

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.

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.**

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.**