

WELCOME

Thank you for joining “MO HealthNet Webinar.” The presentation will start shortly.

Dial: 866-699-3239

Participant code: 331964794 (July 9)

336995818 (July 14)

Please mute your phone by pressing *6.

Please do not put your phone on “Hold.” While on “Hold” other participants will hear your background music/message.

This presentation will be posted on the following websites for you to view at any time:

www.dss.mo.gov/mhd/cs/medprecert/pages/providertraining.htm

www.medsolutions.com/implementation

Questions may be asked via the email address which will be shown at the end of the presentation.

MedSolutions Provider Orientation



Reasons and Goals of Radiology Management

1. Increase the quality of Participant care.
2. Increase prospective compliance with evidenced based guidelines in ordering high tech and ultrasound imaging studies.
3. Achieve reasonable cost savings for the State without reducing quality of care.
4. Leverage existing MO HealthNet/ACS technology to improve overall provider experience under new radiology program.

WHO IS MEDSOLUTIONS?

MedSolutions Overview

- MedSolutions specializes in cost management solutions.
- Founded in 1992 as owner-operator of diagnostic imaging centers; became one of the first companies in the nation to develop radiology management services
- Call Center Locations: Nashville, TN (Corporate) and Melbourne, Florida
- Remote Office Locations: Arizona, California, Massachusetts, Missouri, North Carolina, Pennsylvania, and Texas.
- Growing staff of over 650 health care professionals, including on-site Board Certified Radiologists and MDs



Experience – Medicare, Medicaid, Commercial



Your Plan for Life.™

BlueCross BlueShield of Delaware

BlueCross BlueShield of Tennessee



Health Net

Destiny Health



The Health Plan for Federal Employees



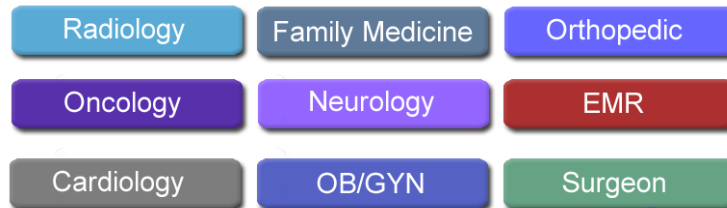
CIGNA HealthCare
A Business of Caring.



Medical Infrastructure

- **Diverse representation of Medical Specialties**

- Board certified, on-site medical directors in our Tennessee and Florida call centers



- Specialized nursing team approach to medical review for more intense and higher volume cases



PRIOR AUTH REQUIREMENTS

Covered Participants

- The following MO HealthNet participants require prior authorization through MedSolutions:
 - Medicaid participants who live in the state of Missouri
 - Excluded Participants:
 - Participants in Managed Care plans
 - Medicare Dual eligible participants

Prior Authorization Required

- CT, CTA, CT guidance
- MRI, MRA, MRI-CAD, fMRI (functional MRI), MR guidance, MRCP
- PET
- ULTRASOUND – diagnostic, obstetrical, fetal and vascular
- **CARDIAC IMAGING**
 - Cardiac CT
 - Coronary CTA
 - Nuclear Cardiac Imaging
 - Cardiac MRI
 - Cardiac PET
 - Cardiac echocardiograms
 - Diagnostic heart catheterization
- **OTHER**
 - 3D Rendering (CPT 76376 – 76377)

NOTE: A complete list of CPT codes which require authorization can be found under the link for MO HealthNet at:

www.medsolutions.com/implementation

Timeline

- **7/12/10** - MedSolutions will accept prior authorization requests via phone 800-392-8030 option 5 for DOS 7/19/10 and beyond.
- **7/19/10** – Web requests accepted via CyberAccess.
- **7/19/10 – 7/31/10** – High tech (MR, CT, PET, Cardiac Imaging) will be under an Education Program. **Beginning 8/1/10**, these modalities will move to a full authorization program requiring medical necessity for approvals.
- **7/19/10 – 8/31/10** - All Ultrasounds will be under a Registration Only Program. **Beginning 9/1/10**, Ultrasounds will move to a full authorization program requiring medical necessity for approvals.

Timeline (continued)

- **10/1/10** – Accuracy Assessment activated for all modalities. Only those providers who have passed Accuracy Assessment through MedSolutions will be allowed to perform the studies for which they were approved at the location where they were approved. (MSI contracted facilities are exempt from Accuracy Assessment.)
- **Claims will be denied without proper prior authorization from MedSolutions effective 7/19/10.**
- **Retro authorizations will be reviewed by MedSolutions for urgency and medical necessity.**

HOW DOES THE PROGRAM WORK?

Predictive Radiology Intelligence™

■ Patent-Pending Proprietary Technology

- Analyzes historical ordering patterns of physicians by modality and body part
- Appropriate studies are approved immediately
- Inappropriate studies are routed for clinical review

■ PRI Advantage

- Minimizes provider disruption
- Rewards best providers for their clinical accuracy
- Enhances detection of inappropriate studies

■ PRI Experience

- 355,000 physicians are in PRI

Program Overview

- Prior authorization is required for dates of service July 19, 2010 and beyond.
- Prior authorization applies to these imaging studies that are:
 - Outpatient
 - Elective / Non-emergent
 - Observation stays
- Prior authorization does not apply to these imaging studies that are performed in:
 - Emergency Room
 - Inpatient
- Two ways to request prior authorization:
 - Online: Available 24 hours
 - Call: 7:00 AM to 8:00 PM, Central Standard Time – 800-392-8030 option 5

Prior Authorization Outcomes

- **Authorization Requests**

- Authorizations are valid for 14 days

- **If changes need to be made to an existing authorization, please contact MedSolutions by phone: 800-392-8030 option 5**

- Performing provider location changes
- Upcodes/additonal CPTs added (requires medical necessity review)

Downcodes within the existing CPT family do not require updating.
Example: 70553 (MRI head with and without) was authorized, but 70551 (MRI without) was performed.

Changes to existing authorizations can be made anytime prior to the claim being filed.

Prior Authorization Outcomes *(cont.)*

■ Denied Requests

- Written notification of the final determination will be:
 - Mailed to the participant
 - Faxed to the ordering physician or providers may check this information via the web

■ Participant Appeals

- MO HealthNet retains responsibility for all appeals relating to prior authorization requests.

Requests for appeals should be directed to MO HealthNet.
Participant denial letters will include appeal information as they currently do today.

Special Circumstances

■ Outpatient Urgent Studies:

- Option 1: Contact MedSolutions via phone to request an expedited prior authorization review and provide clinical information. Most decisions made within 4 hours or less.
- Option 2: Submit retrospective request. Retrospective reviews must be requested within 2 years of the date of service and must have been urgent and medically appropriate.

PARTICIPATING PROVIDERS

Performing Providers

■ Accuracy Management Process

- The Program will base accuracy assessments on criteria adopted from the American College of Radiology (ACR), American Institute of Ultrasound Medicine (AIUM), American College of Obstetricians and Gynecologists (ACOG), Intersocietal Accreditation Commission (IAC) and industry standards.
- Assessment process conducted through an online questionnaire collecting information about current accreditation status, imaging equipment, training and experience of the technical and professional staff.
- Imaging providers must complete and pass the Accuracy Management process in order to continue to provide diagnostic imaging services.
- Accuracy Assessment letters will be mailed the week of June 28, 2010.
- Providers should look for and respond to those letter as soon as possible to allow for processing, but no later than September 30, 2010.

Performing Providers

- The Program will not approve authorization requests for services subject to accuracy assessment where:
 - the rendering provider has not completed the accuracy assessment
 - the rendering provider has completed the accuracy assessment but has not been approved
 - the rendering provider has completed and passed the accuracy assessment, but the service requested was not assessed or not approved.
 - the rendering provider has completed and passed the accuracy assessment, but the servicing location requested was not assessed or not approved.

Beginning 10/1/10, services will not be approved to providers who have not passed Accuracy Assessment through MedSolutions.

Accuracy Assessment Frequently Asked Questions

- **Which providers must complete the accuracy assessment?**
 - If your office has the capability of performing any of the scans that require authorization, each physical location must complete the accuracy assessment.
- **How do I know if our location has gone through the accuracy process?**
 - First, check with your office manager. If you are still unsure, check MedSolutions' Accuracy Management website at www.accuracygmt.com
- **I went to the website www.accuracygmt.com and I need a login ID. Where would I get that from?**
 - Login ID's were mailed to provider offices, if you did not receive your letter or misplaced it, contact MedSolutions' Accuracy Management Department at www.accuracygmt.com
- **My physician works at a hospital however his office is outpatient. The hospital is credentialed and has accreditations; does he need to be recognized as a site? They use the hospitals credentials.**
 - If the ultrasounds are billed through the hospital and the ultrasound equipment is part of the radiology department, then no. Otherwise, yes.
- **Our accredited hospital runs an OB/GYN clinic that performs ultrasounds at the clinic. Does the clinic have to complete an accuracy assessment or does the accredited "owning" hospital cover the OB/GYN clinic facility?**
 - If the hospital owns imaging equipment and the clinic is physically within the hospital and included in the hospital's accreditation, then accuracy assessment is not required. If it is an ancillary facility, they must complete the assessment.
- **With regard to accreditation for ultrasound, do you need to be accredited for each type of ultrasound? For example: OB accreditation AND vascular accreditation.**
 - Not necessarily. If you answer questions appropriately, and the services provided meet the minimum accuracy management requirements, you can become approved in lieu of an accreditation. MedSolutions would then recommend you become accredited. Accreditation of any service grants a provider "auto approval" for that service in the accuracy management process.

PROVIDER RESOURCES

Provider Resources

- MedSolutions Call Centers are available from 7:00 AM to 8:00 PM (CST) through the Help Desk phone number 800-392-8030 ; option 5.
- Accuracy Management Department (800) 457-2759 is available between 8:00 a.m. to 5:00 p.m., CST, Monday through Friday

Provider Resources

All reference materials for the MO HealthNet prior auth program can be found at the web address listed below under the link for MO HealthNet.

- CPT List
- Link to MedSolutions Guidelines (http://www.medsolutions.com/our_difference/guidelines_index.php)
- Announcement Letter
- Quick Reference Guide
- A PDF copy of this presentation

www.medsolutions.com/implementation

Prior Authorization Requests

Two ways to request prior authorization:

- **Phone: 800-392-8030 option 5**
 - 7:00 AM to 8:00 PM (CST)
 - Monday through Friday
- **Internet: www.cyberaccessonline.net**
 - CyberAccess Help Desk phone number 888-581-9797
 - CyberAccess Help Desk email cyberaccesshelpdesk@acs-inc.com

BASICS ON PHONE REQUESTS

Phone Calls

First-Call Resolution

Call: 800-392-8030 option 5

7:00 AM to 8:00 PM (CST), Monday through Friday

- To increase the percentage of requests authorized on the first contact, experience reveals three factors can help to accomplish this:
 - Referring provider office initiates and completes the prior authorization process
 - Referring provider office has appropriately qualified staff call
 - Referring provider office has access to the correct information needed to perform prior authorization evaluation

- The key information needed to evaluate a request is:
 - The working or differential diagnosis
 - Prior tests, lab work and/or imaging studies performed related to this diagnosis
 - The notes from the patient's last visit related to the diagnosis
 - Type and duration of treatment performed to date for the diagnosis

www.cyberaccessonline.net

CyberAccess Login

CyberAccess

Protect your patients by following a few simple rules

Log In

User Name:

Password:

[Forget Your Password?](#)

- Always choose passwords that are difficult for others to guess. You can change your password on the "My Account" screen after you log in.
- Never give your user name and password to others because it could be used without your knowledge.
- Never leave patient information unprotected on the computer screen while you step away.
- Place all printed documents containing patient information in secure storage or shred them daily to prevent accidental disclosure.
- Obey the golden rule: always handle information about your patients with the same care that you expect from your own physician.

NOTE: Any unauthorized use or access to the pages, or the computer systems on which the pages and information to be displayed reside, is strictly prohibited and may be a criminal violation. Your use of this Web site is governed by and conditioned on your acceptance of the terms of use referenced herein and such other terms and conditions as may be contained in this Web site. Your use of this Web site constitutes your agreement to the terms of use and all such additional terms and conditions.

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CyberAccess Login

- Enter CyberAccess User Name and Password.
- New Users
 - CyberAccess Help Desk phone number 888-581-9797
 - CyberAccess Help Desk email cyberaccesshelpdesk@acs-inc.com

CyberAccess EULA

Logout

CyberAccess

MoHealth Net

ACS Health Management Solutions, INC.

CyberAccessSM

End User License Agreement and Terms of Use

ACCEPTANCE OF TERMS

The services that ACS Health Management Solutions, Inc. ("**ACS**") provides to you are subject to the terms and conditions of this End User License Agreement and Terms of Use ("**this Agreement**"). ACS reserves the right to amend this Agreement at any time without notice to you. The date of the most recent amendment will appear on this page. This Agreement governs the use of all data and software available at this site ("**Site**"). Please read the rules contained in this Agreement carefully. You can access this Agreement at any time by clicking on User Agreement at the bottom of every page on this Site. If you do not agree to abide by this Agreement, your access to any other pages of this Site will be denied. **Clicking on the I Agree button at the end of this Agreement and accessing of this Site by you will constitute your acceptance of this Agreement. Continued accessing of this Site by you will constitute your acceptance of any amendments to this Agreement.** Your failure to follow the terms and conditions for use of this Site, whether listed below or in bulletins posted at various points in this Site, may result in

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CyberAccess End User License Agreement and Terms of Use

- Click "I Accept" after reading EULA and Terms of Use to continue.

CyberAccess Home Page

Logout

CyberAccess**MoHealthNet**

Home Application Admin My Account Reports DirectCarePro Message Center(7) HCBS

Missouri Test Super User Practice

Welcome, Dr. Carla Guanzon Current Site: Missouri Test Super User Site CyberAccess CBT Training

Site Patients

0000LNAME	0000FNAME
0000LNAME	0000FNAME
0002LNAME	0002FNAME
0003LNAME	0003FNAME
0005LNAME	0005FNAME
0006LNAME	0006FNAME
0007LNAME	0007FNAME
0009LNAME	0009FNAME
0009LNAME	0009FNAME
0010LNAME	0010FNAME
0013LNAME	0013FNAME
0016LNAME	0016FNAME

ABCDEFGHIJKLMNOPQRSTUVWXYZ (ALL)

Search For A Patient

Patient Id Birth date

(required) (mm/dd/yyyy) (or)

Last Name

News And Alerts

- MO HealthNet Division
- MO HealthNet Clinical Services
- MO HealthNet Manuals
- MO HealthNet Internet Claims (EMomed)
- MO HealthNet Provider Bulletins
- MO HealthNet Provider Participation

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CyberAccess Home Page

- Select a Patient.

CyberAccess MO HealthNet Demographics

Logout

CyberAccess MoHealthNet

Home > Patient Info > Demographics

Patient Info For - 0003LNAME , 0003FNAME

Print Patient Profile Check Drug/e-Prescribe Imaging Pre-Cert Pre-Certify Service

Home Patient Info Drug Hx Medical Hx Interventions Clinical Data HCY Screen Message Center(2)

CareConnection **Missouri Test Super User Practice**

MO HealthNet Demographics

Last Name: 0003LNAME	Address: 0003ADD1	↑ ↓
First Name: 0003FNAME	0003ADD2	
Middle Initial:	0003CITY MO, 64052	
Date of Birth: 09/23/2003		
Gender: F		
Phone #: 0003PHONE		
MO HealthNet ID: 61200003		

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CyberAccess MO HealthNet Demographics

- Select Imaging Pre-Cert link.

Provider Registration

Provider Registration

- Pre-populated with available data.
- User may enter or update fields as needed.

Terms of Agreement/ HIPAA Disclosure Agreement

- Read Terms of Agreement/HIPAA Disclosure Agreement.
- Click on "I ACCEPT" to continue.
- Click "Cancel" to exit.

Patient Info For - ARNOLD, JETTIE M

Print Patient Profile Check Drug/e-Prescribe Drug Pre-Certify Service

Home Patient Info Drug Hx Medical Hx Interventions Clinical Data HCBS Care Mgmt HCY Screen Message Center(8)

Contact Information for MO Radiology Benefits Management Program

Provider Information:
(all fields required)
Provider Name:
Provider Type:

User Contact Information:
(all fields required)
User First Name:
User Last Name:
Email:

Site Information:
(all fields required)
Tax ID:
Address:
City:
State:
Zip:
Telephone:
Fax:

Terms of Use Agreement/HIPAA Disclosure Agreement

MedSolutions, Inc.

Provider Access Agreement for Web-Based Applications

This Provider Access Agreement for Web-Based Applications ("Access Agreement") contains the terms and conditions for use by Providers of the web-based applications provided by MedSolutions, Inc. (MSI) through its Web Site. This Access Agreement applies to Provider and all employees and/or agents that have access to MSI's web-based applications by utilizing a User ID and Personal Identification Number ("PIN"), Security Password, or other security device provided by MSI, hereinafter referred to as "Users."

To obtain access to MSI's Web Site applications, User must first read and agree to this Access Agreement. After reviewing these documents, User will be asked to accept the Access Agreement by clicking on the "I ACCEPT" icon. If User accepts, this will result in a binding contract between User and MSI, just as if User had physically signed the Access Agreement.

Each and every time User accesses MSI's web-based applications, User agrees to be bound by this Access Agreement, as it may be amended from time to time.

1. Limited License. Upon acceptance, MSI grants Provider a revocable, nonexclusive, and nontransferable limited license to access electronically MSI's web-based applications only so long as Provider is currently bound by a Provider Agreement (as used herein a "Provider Agreement" is an agreement to provide health care/medical services to members of health plans for which MSI provides radiological services, whether it is with MSI directly or said health plan).

This Information will be used only by the Radiology Benefits Management Program for contact purposes.

There was a problem connecting to Med Solutions, please contact the help desk.

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Connecting to the MSI Site



MoHealth Net

DirectAccessEHRSM

Home

Search

Home Tab

- Search for a participant, case, or authorization
- Complete surveys

SELECT ONLINE SERVICE

SEARCH/REQUEST Member Lookup ▾

Insurance Co. ▾

Member ID

Member Details:

Enter full Last Name, full First Name and Date of Birth (mm/dd/yyyy)
Do not include middle initial or suffix.

Last Name

First Name

Date of Birth

Search Help

TOOLS/REPORTS

MAKING A DIFFERENCE

RECENT SURVEY HISTORY

Case Number	Survey Status	Date	
5477858	Skipped	5/24/2010 4:08:57 PM	Complete Survey Here
5477876	Incomplete	5/25/2010 4:16:46 AM	Complete Survey Here
5477886	Skipped	5/25/2010 5:57:02 AM	Complete Survey Here
5477845	Skipped	5/24/2010 9:25:06 AM	Complete Survey Here
5477846	Skipped	5/24/2010 9:50:15 AM	Complete Survey Here

ANNOUNCEMENTS

AETNA

* MedSolutions and Aetna are pleased to announce the expansion of the Radiology Management Program coverage a PET, Nuclear Cardiology, Stress Echo, and Heart Cath for dates of service June 15, 2010 and beyond. For more information visit www.medsolutions.com/implementation.

* MedSolutions and Aetna are pleased to announce the expansion of the Radiology Management Program coverage a and the state of Utah for MR, CT, PET, Nuclear Cardiology, Stress Echo, and Heart Cath for dates of service June 15, 2010. For more information on this expansion, please visit www.medsolutions.com/implementation.

* Aetna and MedSolutions are expanding the current radiology management program to include outcomes focused on diagnostic right heart catheterization for Aetna members who are currently in the MedSolutions Program. MedSolutions will require preauthorization for elective outpatient stress echocardiography, diagnostic right heart catheterization for Aetna members who are currently in the MedSolutions Program. MedSolutions will require preauthorization for these studies on May 10, 2010 for dates of service on or after May 15, 2010.

* As of April 30, 2010, MedSolutions is no longer contracted with Aetna for 3D Rendering (Code 76376/76377). MedSolutions will continue to provide 3D Rendering for Aetna members who are currently in the MedSolutions Program.

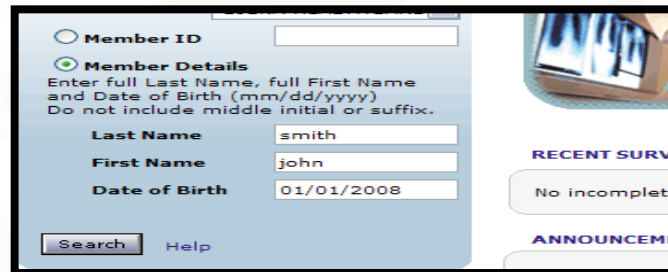
Select the Participant



The screenshot shows a web interface for selecting a participant. On the left, there are two radio buttons: "Member ID" (selected) and "Member Details". The "Member ID" option has a text input field containing "u12345678". Below it, the "Member Details" section is collapsed. On the right, there is a "RECENT SURVEY HISTORY" section with the text "No incomplete or skipped surveys for" and an "ANNOUNCEMENTS" section with a bullet point "***NEW*** Claims Stat". At the bottom left, there is a "Search" button and a "Help" link.

Input the ID# and click search

OR



The screenshot shows the same web interface as above, but with the "Member Details" radio button selected. The "Member ID" input field is empty. The "Member Details" section is expanded, showing three text input fields: "Last Name" with "smith", "First Name" with "john", and "Date of Birth" with "01/01/2008". The "RECENT SURVEY HISTORY" and "ANNOUNCEMENTS" sections are partially visible on the right. The "Search" button and "Help" link are at the bottom left.

You can search by name and date of birth

Start a Prior Authorization

SELECT ONLINE SERVICE

SEARCH/REQUEST

Insurance Co.

Member ID

Member Details
Enter full Last Name, full First Name and Date of Birth (mm/dd/yyyy)
Do not include middle initial or suffix.

Last Name

First Name

Date of Birth

[Help](#)

Search Results

	Member	Member ID	Date of Birth	Address	City	State	Zip
<input checked="" type="radio"/>	EDWARD SULLESTONE	XXX00016	01/11/1950	999 COBBLESTONE LANE APT 5	CAVE CITY	TN	37215

Member Programs

	Member ID	Program	Effective Date	Termination Date
<input checked="" type="radio"/>	XXX00016	TEST PROGRAM - PA REQ	01/01/2001	12/31/2999

No Case History
[Printer Friendly Version](#)

[Legal Disclaimer](#) | [Privacy Policy](#)

Click here to start prior authorization request

Select Referring Provider

Physician

Member	Member ID	Date Of Birth	Health Plan	Referring Physician	Specialty	Tax ID	NPI
EDWARD SULLEYSTONE	XXX00016	01/11/1950	TEST PROGRAM - PA REQ	JOHN SMITH (190 ROSEBERY STREET PHILLIPSBURG, NJ 08865)	RADIOLOGY	**_*****	**_*****

Physicians

First Name: Last Name: Tax Id: NPI: State:

First Name	Last Name	Specialty	Tax Id	NPI
<input checked="" type="radio"/> JOHN	SMITH		**_*****	**_*****
<input type="radio"/> JOHN	SMITH		**_*****	**_*****
<input type="radio"/> JOHN	SMITH		**_*****	**_*****
<input type="radio"/> JOHN	SMITH		**_*****	**_*****
<input type="radio"/> JOHN	SMITH		**_*****	**_*****
<input type="radio"/> JOHN	SMITH		**_*****	**_*****
<input type="radio"/> JOHN	SMITH		**_*****	**_*****
<input type="radio"/> JOHN	SMITH		**_*****	**_*****
<input type="radio"/> JOHN	SMITH		**_*****	**_*****
<input type="radio"/> JOHN	SMITH		**_*****	**_*****

1 2 3 4

Addresses

Address	Tax Id	NPI
<input checked="" type="radio"/> 190 ROSEBERY STREET	**_*****	**_*****

Select the appropriate provider

Select the appropriate address

For names that you are unsure of spelling, you may search with fewer letters (i.e., Rob or Rober, if provider's name could be Roberson or Robertson)

Select Type of Study and ICD-9

The screenshot shows the MoHealthNet DirectAccessEHR interface. At the top left, there is a navigation menu with 'Home' and 'Search' buttons. The main content area is titled 'Study' and contains a table with the following data:

Member	Member ID	Date Of Birth	Health Plan	Referring Physician	Specialty	Tax ID	NPI
			MO HEALTHNET - DELEGATED		FAMILY PRACTICE	**-*****	

Below the table, there are two radio buttons for selecting a product:

- HI-TECH - Includes CT, MR and PET procedure codes.
- ULTRASOUND - Includes BREAST, GENERAL, GYNECOLOGICAL, VASCULAR, and UROVASCULAR Ultrasound procedure codes

There are two search fields:

- Enter CPT Code or CPT Description:** A text input field with a 'Search' button. Below it, the text reads: 'Please type in at least two characters before performing search.'
- Enter ICD-9 Code or ICD-9 Description:** A text input field with a 'Search' button. Below it, the text reads: 'Please type in at least two characters before performing search.'

A 'Help' link is located at the bottom left of the search area.

Find the CPT/ICD-9 codes by typing in the code, such as “70553” or “784.0,” or the modality/description, such as “MRI” or “headaches” and choosing the correct code. (By typing in a portion of the code, such as “705” or “784,” you will bring up all codes that start with those three numbers.) Remember to search each CPT/ICD-9 **individually**. **Multiple CPT/ICD-9 codes can be submitted on a single request if necessary, such as CT abdomen and CT pelvis.**

Select Rendering Location

In office locations

Physician Study **Facility**

Member	Member ID	Date Of Birth	Health Plan	Referring Physician	Specialty	Tax ID	NPI
			BCBSTN (S) PA REC	SMITH	GENERAL PRACTICE		

<input type="radio"/>	In-Office Procedure Facility	Address	Equipment	Tax ID	NPI
<input type="radio"/>	SAINT FRANCIS HOSPITAL	5959 PARK AVE, MEMPHIS, TN 38119		752522262	1952326977
<input type="radio"/>	MEMPHIS PHYS RADIOLOGICAL GRP	5959 PARK AVE, MEMPHIS, TN 38119		620803743	1134231574
<input type="radio"/>	SFH EMERGENCY CHEST PAIN CENTE	5959 PARK AVE, MEMPHIS, TN 38119		752522262	1952326977
<input type="radio"/>	MID SOUTH EMERGENCY GROUP PC	5959 PARK AVE, MEMPHIS, TN 38119		621451676	
<input type="radio"/>	SAINT FRANCIS HOSPITAL	5959 PARK AVE, MEMPHIS, TN 38119		752522262	

1 2

Facility - Choose one of the facilities listed below

Other facilities

<input type="radio"/>	Facility	Address	Distance	Equipment	Tax ID	NPI
<input type="radio"/>	BIOIMAGING OF COOL SPRINGS INC	3310 ASPEN GROVE DR STE 101, FRANKLIN, TN 37067	Driving: 7.05 miles	Ultrasound	621848634	
<input type="radio"/>	TEST - WILLIAMSON MED CTR	2021 N CAROTHERS RD, FRANKLIN, TN 37067	Driving: 9.00 miles	CT Scan MRI Scan Ultrasound	621501534	

Facility Name:

Tax ID:

NPI:

Search

In-office Procedure

If the facility you are searching for does not appear, search by Tax ID or NPI number ONLY.

Authorization Approved

Physician Study Facility **Summary**

Case Number	Authorization Number	Member	Member Id	Date Of Birth	Health Plan	Referring Physician	Specialty	Tax ID
5477926	M00005940	EDWARD SULLEYSTONE	XXX00016	01/11/1950	TEST PROGRAM - PA REQ	JOHN SMITH	RADIOLOGY	**-*****

Case Number	Status	Effective Date	Expiration Date
5477926	A	05/26/2010	08/24/2010

Member Information

Address	Date Of Birth	Health Plan	Phone Number
999 COBBLESTONE LANE, APT 5, CAVE CITY, TN 37215	01/11/1950	TEST PROGRAM - PA REQ	

Performing Provider Information

Authorized Facility	SOUTHERN HILLS MEDICAL CENTER	Phone Number	<input type="text"/>
Facility Address	391 WALLACE ROAD, NASHVILLE, TN 37211	Fax Number	<input type="text"/>
Tax ID	**-*****	NPI	<input type="text"/>

Referring Physician Information

Requested By	JOHN SMITH	Specialty	RADIOLOGY	Phone Number	<input type="text"/>
Address	190 ROSEBERRY STREET, PHILLIPSBURG, NJ 08865	Fax Number		<input type="text"/>	
Tax ID	**-*****	NPI		<input type="text"/>	

Clinical Information

CPT Code	Description	ICD9 Code	Description
70450	CT HEAD or Brain; without contrast material	784.0	Symptoms involving head and neck; Headache

Additional Clinical Information Needed

- If you do not receive a prior authorization automatically through the website, you will need to provide additional clinical information.
- Complete the short-answer questions that assist our clinical staff in gathering information.
- You can always attach electronic medical records online or submit them by phone.

The next few slides display how it is done.

Providing Clinical Information

The requested study requires additional information. Your case will not be saved until you submit, save or skip the survey. Click the link below to view the clinical survey.

[Please fill out the clinical form here](#)

Click here to answer clinical questions and submit additional information

Example of Clinical Survey

Member	Date Of Birth	Case Number
MEMBER TEST	1/1/1980	5447050

Clinical Survey

- 1 . Has cancer diagnosis been confirmed by biopsy?
 Yes
 No
 Dont Know
- 2 . Is there documented lymph node involvement?
 Yes
 No
 Dont Know
- 3 . Is the PET being ordered to determine whether the tumor is operable or if the tumor will be treated with chemo?
 Yes
 No
 Dont Know
- 4 . Is this PET needed to identify the primary site of cancer?

<http://mstrn-psport01/PRISM/Portal.aspx?view=input&autoClose=True&key=526a503bb9b34218a4667cd1c2c71456&...> Local intranet

These questions will assist our clinical staff in gathering information

Attaching Clinical Information

Physician | Study | Facility | **Summary**

Case Number	Member	Member ID	Specialty	Tax ID
	TEST SS1	545454545	ALLERGY	123456789

The requested study requires additional information. Please enter the reason for skipping this survey.

Comments:

Save Submit

Skip Survey

Completing this survey will expedite the authorization process of your case. Please enter the reason for skipping this survey.

Skip Survey

[Legal Disclaimer](#) | [Privacy Policy](#)

Copy/paste or type additional information

survey. Click the link below to view the clinical information.

https://www.medsolutionsonline.com/portal/server.pt/ga

Authorization Granted After Clinical Survey

Authorization Number

Case Number	Authorization Number	Member	Member Id	Date Of Birth	Health Plan	Referring Physician	Specialty	Tax ID
5477926	M00005940	EDWARD SULLEYSTONE	XXX00016	01/11/1950	TEST PROGRAM - PA REQ	JOHN SMITH	RADIOLOGY	**.*

Authorization Period

Case Number	Status	Effective Date	Expiration Date
5477926	A	05/26/2010	05/26/2010

Member Information

Address: 999 COBBLESTONE LANE, APT 5, CAVE CITY, TN 37215
Date Of Birth: 01/11/1950
Health Plan: TEST PROGRAM - PA REQ
Phone Number:

Performing Provider Information

Authorized Facility: SOUTHERN HILLS MEDICAL CENTER
Facility Address: 391 WALLACE ROAD, NASHVILLE, TN 37211
Tax ID: **.*
Phone Number:
Fax Number:
NPI:

Referring Physician Information

Requested By: JOHN SMITH
Specialty: RADIOLOGY
Phone Number:
Address: 190 ROSEBERRY STREET, PHILLIPSBURG, NJ 08865
Fax Number:
Tax ID: **.*
NPI:

Clinical Information

CPT Code	Description	ICD9 Code	Description
70450	CT HEAD or Brain; without contrast material	784.0	Symptoms involving head and neck; Headache

Attaching Clinical Information (cont.)

Physician Study Facility **Summary**

Case Number	Member	Member Id	Date Of Birth	Health Plan	Referring Physician	Specialty	Tax ID
7734518					TEST DOCTOR	ALLERGY	

Your request will require additional review.

MedSolutions will complete this review process and be in touch with you via phone/fax to approve or modify your request.

Please attach additional clinical information here:

Browse...

[Back to Search](#)

Submit Attachment

Attach notes from your computer files by browsing and selecting the correct file

MedSolutions Clinical Review

- If additional clinical information is needed, you will be contacted via fax. MedSolutions will specify the information we are seeking.
- If no additional clinical is needed, a decision will be made with the data that has been presented.

MedSolutions Member History

MedSolutions Member History

- All Case History will be displayed for a participant as part of the Member Search Results.

Search Results

Member	Member ID	Date of Birth	Address	City	State	Zip
HOMER SIMPSON	XXX00001	01/01/1954	1237 MAIN ST	SPRINGFIELD	TN	37172

Member Programs

Member ID	Program	Effective Date	Termination Date
XXX00001	TEST PROGRAM - PA REQ	01/01/2001	12/31/2999

[Request New Study](#)

Patient Case History - HOMER SIMPSON, Member ID XXX00001

Case Number	Auth. No.	Case Status	Effective Date	Expiration Date	CPT Code	CPT Status	ICD-9 Code
5477914		Pending			78812	Pending	784.0
5477913	M00005937	Approved	05/25/2010	08/23/2010	70450	Approved	784.0
5477907	M00005935	Approved	05/25/2010	08/23/2010	70450	Approved	784.0
5475654	M00005409	Approved	03/31/2010	06/29/2010	70450	Approved	784.0
5475355		Pending			72156	Pending	346.00
5475104		Pending			70551	Pending	784.0
5473549		Pending			72141	Pending	723.1
5473417		Pending			78815	Pending	784.0
5468645	M00005198	Approved	12/01/2009	03/01/2010	74170	Approved	784.0
5468644		Pending			74160	Pending	784.0
5468643		Pending			70553	Pending	784.0

[Printer Friendly Version](#)

CyberAccess Pre-Certification History

Pre-Certification History

- Hover over Pre-Certifications on Medical Hx (History) dropdown list.
- All Pre-Certifications for the patient will be displayed.

CyberAccess **MoHealth Net**

Patient Info For - 0009LNAME , 0009FNAME K

Print Patient Profile Check Drug/e-Prescribe Drug Pre-Certify Service

Home Patient Info Drug Hx Medical Hx Interventions Clinical Data HCBS HCY Screen Message Center(7)

Procedures
Diagnoses
Pre-Certifications
Pre-Certify Service
Predetermination

Test Super User Practice
Pre-Certifications

Pre Cert #	PA Type	Requesting Provider	Servicing Provider	Modifier(s)	Procedure	Status	Start Date	End Date	Approved Units	Used Units
20101400000114	Imaging	name not available								
20101380000114	Imaging	name not available								
20100420000723	DME Diabetic Shoe Modifications	RED CROSS PHARMACY INC	name not available		TBD	Pending	02/11/2010	02/11/2010	1	0
20091400000123	DME	DATTA MD, JAYDIP	RED CROSS PHARMACY INC	LT	V2020	Approved	05/20/2009	05/20/2009	1	0
				RT	V2020	Approved	05/20/2009	05/20/2009	1	0
20091240000223	DME Knee Orthosis	DATTA MD, JAYDIP	name not available		TBD	Pending	05/04/2009	05/04/2009	1	0
20091070000623	DME Knee Orthosis	DATTA MD, JAYDIP	name not available		TBD	Pending	04/17/2009	04/17/2009	1	0
20090130000314	Imaging CT-Head or Brain	name not available			70450	Approved	01/13/2009	01/26/2009	1	0
				26	70450	Approved	01/13/2009	01/26/2009	1	0
				TC	70450	Approved	01/13/2009	01/26/2009	1	0
20083440000523	DME Oxygen	BALE MD, ROBERT D.	name not available		TBD	Pending	12/09/2008	12/09/2008	1	0
20083440000423	DME Nebulizer - Small Volume	WANEBO, SONJA M	name not available		TBD	Pending	12/09/2008	12/09/2008	1	0

DirectAccessEHR Pre-Certification Imaging History

Pre-Certification History ▲

Psychology/Counseling (0) ▼

Imaging (4) ▲

Service	Provider	Start Date	End Date	Status
IMAGING	Not Updated	1/1/0001	1/1/0001	Unknown
IMAGING	Not Updated	1/1/0001	1/1/0001	Unknown
IMAGING	Not Updated	1/1/0001	1/1/0001	ExpiredApproved

Pre-Certification Number	Service Provider	Procedure Code/Description	Modifiers	Approved Units/Hours	Used Units/Hours	Status
20090130000314		CT HEAD/BRAIN W/O DYE		100	0	ExpiredApproved
20090130000314		CT HEAD/BRAIN W/O DYE		100	0	ExpiredApproved
20090130000314		CT HEAD/BRAIN W/O DYE		100	0	ExpiredApproved

Service	Provider	Start Date	End Date	Status
IMAGING	Not Updated	1/1/0001	1/1/0001	VoidedClosed

Page 1 of 1

DirectAccessEHR Pre-Certification History

- Expand Pre-Certification History.
- Expand Imaging.
- All Pre-Certifications for the patient will be displayed.

Web Portal Services – Help

- If you need assistance:

- Access to CyberAccess

- CyberAccess Help Desk phone number 888-581-9797
 - CyberAccess Help Desk email cyberaccesshelpdesk@acs-inc.com

- Assistance using the MSI web portal

- 800-392-8030 option 5



Questions

clinical.services@dss.mo.gov

