

PAR Revisions

for Diagnostic Imaging Providers



In this presentation...

- PAR Revision Overview
 - Concepts, Definitions
 - Revision methods
- Examples
 - Two examples specific to Diagnostic Imaging providers
 - Step-by-step instructions with animations
- Helpful Resources
- Questions & Answers
- Brief Evaluation

PAR Revision Overview

- Main elements of a PAR:
 - Billing Provider Medicaid ID
 - Client (member) Medicaid ID
 - Procedure(s)/Item(s)
 - Codes & Modifiers
 - Date Range
 - Number of Units
- What is a PAR revision?
 - A specific change (i.e. update, addition, or removal of information) to an already approved PAR
- When would a Diagnostic Imaging PAR need to be revised?
 - Only five scenarios:
 - Changing the Billing Provider
 - Updating a Procedure code (contrast/no contrast)
 - Extending a Procedure's date range
 - Adding/Updating/Removing a Modifier
 - Increasing the number of units for a Procedure

PAR Revision Methods

- Two PAR revision methods:
 - Helpline Ticket
 - Modify Authorization
- Some revisions must be made by submitting a Helpline Ticket, others by submitting a Modify Authorization review

Method 1: Helpline Ticket

- What is a Helpline Ticket?
 - A request made through eQSuite's online 'help' system
- Process
 - User writes and submits a message requesting desired change
 - eQHealth employee receives message, makes the change
 - New PAR # issued, original PAR # inactivated
- When is it used?
 - When the revision does **not** require clinical review
 - Changing the Billing Provider
 - Updating a Procedure Code
 - Extending a Procedure's Date Range
 - Adding/Updating/Removing a Modifier

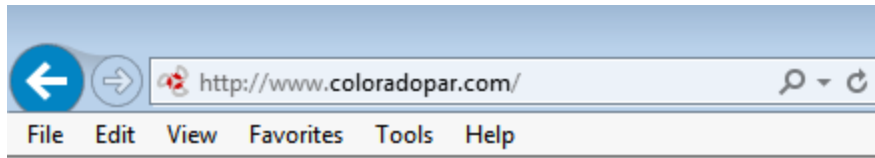
Helpline Ticket Example

- Background
 - In this example we will be changing a PAR's Billing Provider ID
 - This is something you would do if, for instance, a patient were originally approved to receive an MRI at one facility (original Billing Provider) but must now receive it at another facility (new Billing Provider)
- What we'll need before beginning
 - The PAR's review ID number
 - Info to include in the message, in this case:
 - Original Billing Provider ID
 - New Billing Provider ID
 - Original PAR number

Helpline Ticket Example

Step 1: Log into the PAR Portal/eQSuite®

- Open your web browser and go to <http://www.ColoradoPAR.com>
- Click the **PAR Portal Login** icon, followed by the **Click above to log in** icon
- Enter your unique username and password, then click **Login** to access the system



↖



Click above to log in

eQSuite® Login

Username	Password
<input type="text"/>	<input type="password"/>
<input type="button" value="Login"/>	forgot password?

Helpline Ticket Example

- **Step 2: Submit a Helpline Ticket requesting the change**

- Click Online Helpline
- Enter the PAR's review ID in the **Review ID** field, then type your message in the space provided
- Click **Submit Question** when finished

The screenshot displays the 'eQHS Online Helpline' interface. At the top, there is a navigation bar with links: 'Create New Review', 'Respond to Add'l Info', 'Online Helpline', 'Utilities', 'Reports', 'Search', 'Attachments', and 'Letters'. Below this is a header for 'eQHS Online Helpline'. On the left side, there is a vertical menu with 'Menu' and 'Errors' options. The main content area contains instructions: 'To enter a new question, type your question in the box below, then click the **Submit Question** link below. You will be e-mailed with a link to return here when this ticket has been processed. To view the response to a previous ticket, scroll down and view the **History** in list below.' Below the instructions, there are input fields for 'Review ID:' (containing '123456'), 'PAR #:', 'Client #:', and 'Admit Date:'. A note states 'Do NOT enter other values if Review ID is entered.' and another note states 'Do NOT enter a Client # or Admit Date if a PAR # is entered.' A large yellow text area is provided for the question. At the bottom, a confirmation message reads: 'Your question has been submitted to the helpdesk. Please check back in a short while for a response. If your e-mail address is in the system, you will be notified by e-mail when your question has been addressed.' with a 'Close' link below it.

Helpline Ticket Example

- **What happens next?**

- Your request will be processed within two business days
- Once processed, you will receive a new PAR number (the original PAR number will become inactive)

The screenshot displays the 'eQHS Online Helpline' interface. At the top, there is a navigation bar with links: 'Create New Review', 'Respond to Add'l Info', 'Online Helpline', 'Utilities', 'Reports', 'Search', 'Attachments', and 'Letters'. Below this is the 'eQHS Online Helpline' header. On the left side, there is a vertical menu with 'Menu' and 'Errors' options. The main content area contains the following text: 'To enter a new question, type your question in the box below, then click the **Submit Question** link below. You will be e-mailed with a link to return here when this ticket has been processed. To view the response to a previous ticket, scroll down and view the **History** in list below.' Below this text are input fields for 'Review ID:', 'PAR #:', 'Client #:', and 'Admit Date:'. A note states: 'Do NOT enter other values if Review ID is entered.' and 'Do NOT enter a Client # or Admit Date if a PAR # is entered.' A large yellow text area is provided for the question. At the bottom, a message box states: 'Your question has been submitted to the helpdesk. Please check back in a short while for a response. If your e-mail address is in the system, you will be notified by e-mail when your question has been addressed.' with a 'Close' link.

Method 2: Modify Authorization

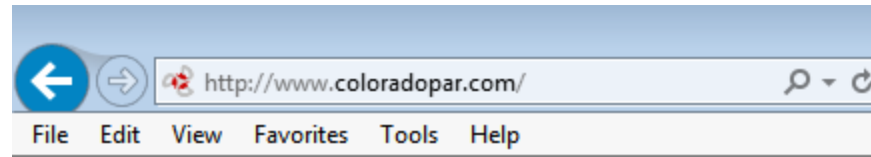
- What is a Modify Authorization?
 - A “re-submission” of an existing PAR, but with modifications
- Process:
 - User creates new review, but links to original PAR and makes desired change(s)
 - eQHealth clinical reviewer approves or denies new request
 - If approved, new PAR # is issued (original PAR # is inactivated)
- When is it used?
 - When the revision requires clinical review
 - Increasing the number of units for a Procedure

Modify Authorization Example

- Background
 - In this example, we will be increasing the number of units for an MRI procedure
 - This is something you would do if, for instance, a patient had an MRI performed during a specific timeframe but the scan needed to be repeated once more during the same timeframe
- What we'll need before beginning
 - Original PAR number
 - CPT Code of the MRI procedure
 - Original procedure's date range

Modify Authorization Example

- **Step 1: Log into the PAR Portal/eQSuite®**



PAR Portal/eQSuite®



Click above to log in

eQSuite® Login

Username	Password
<input type="text"/>	<input type="password"/>
<input type="button" value="Login"/>	forgot password?

Modify Authorization Example

Step 2: Begin submitting a Modify Authorization review

- Click **Create New Review**
- Select either **Yes** or **No** to specify whether you are the Billing Provider
- Select the **Outpt Diagnostic Imaging** option, if available
- Select **Modify Authorization** from the **Review Type** drop-down box
- Enter the PAR Number of the Authorization you would like to revise in the **eQHealth PAR Number** field
- Click **Retrieve Data** to proceed

Create New Review **Respond to Add'l Info** **Online Helpline** **Utilities** **Reports** **Search** **Attachments** **Letters**

Review Header Information
Provider #: 12345678 Provider Name: Example Provider

Start **DX CODES/ITEMS**

Review Type and Settings

Requesting Provider ID: 12345678 Requesting Provider Name: Example Provider

Are you the Billing Provider? Yes No

Billing Provider ID: 12345678 Billing Provider Name: Example Provider

Choose Setting: Surgical/Nonsurgical Outpt Therapy/CRT Eval Outpt Molecular Testing Outpt Diagnostic Imaging DME - Orthotics

Review Type: Admission (dropdown menu)
Not Selected
Admission
Retrospective

eQHealth PAR Number: F123456 (or) APS PAR Number: []

Retrieve Data

Client ID: O123456 Name: Example Client DOB: 1/9/1973 Sex: Female

Physicians and Healthcare Practitioners

	Type	Medicaid #	NPI #	Name	Phone #
Edit	Ordering Provider	87654321	0123456789	Example Ordering Provider	3035551234

Indicate whether you are the: Ordering Physician (dropdown menu)

Select type of request: Non-urgent (dropdown menu)

Modify Authorization Example

Step 3: Specify Procedure information

- Click the DX Codes/Items tab to display its contents
- Click **Add** in the Procedure grid
- Specify the following information:
 - The Procedure code for which you are adding units
 - The Procedure's date range (Note: these dates must fall within the PAR's original date range)
 - The number of units you would like to add
- Click **Add**, then manually close the Item Code Add/Edit screen
- Click **Continue** to proceed

Item Code Add/Edit Page

Code: 71260
Description: CT Chest with contrast
Modifier: Select Modifier
Modifier 2: Select Modifier
Modifier 3: Select Modifier
Modifier 4: Select Modifier
From Date: 6/30/2016
Thru Date: 8/29/2016

Add		Search		Refresh	
P	ICD Code	Description			
Y	Z01.818	ENCOUNTER FOR PREPROCEDURAL EXAMINATION NEC			Edit
	J449	CHRONIC OBSTRUCTIVE PULMONARY DISEASE NOS			Edit

Add											Refresh	
CPT [®] Code	Modifier1	Modifier2	Modifier3	Modifier4	Description	From Date	Thru Date	Price	Total Units			
71260					CT Chest with contrast	06/30/2016	08/29/2016		1	Edit	Delete	

CANCEL PARTIAL SAVE CONTINUE
Select type of request: Non-urgent

Modify Authorization Example

- **Step 4: Specify clinical information**

- Click the Clinical Info tab to display its contents
- Answer each question appropriately
- Click **Continue** to proceed

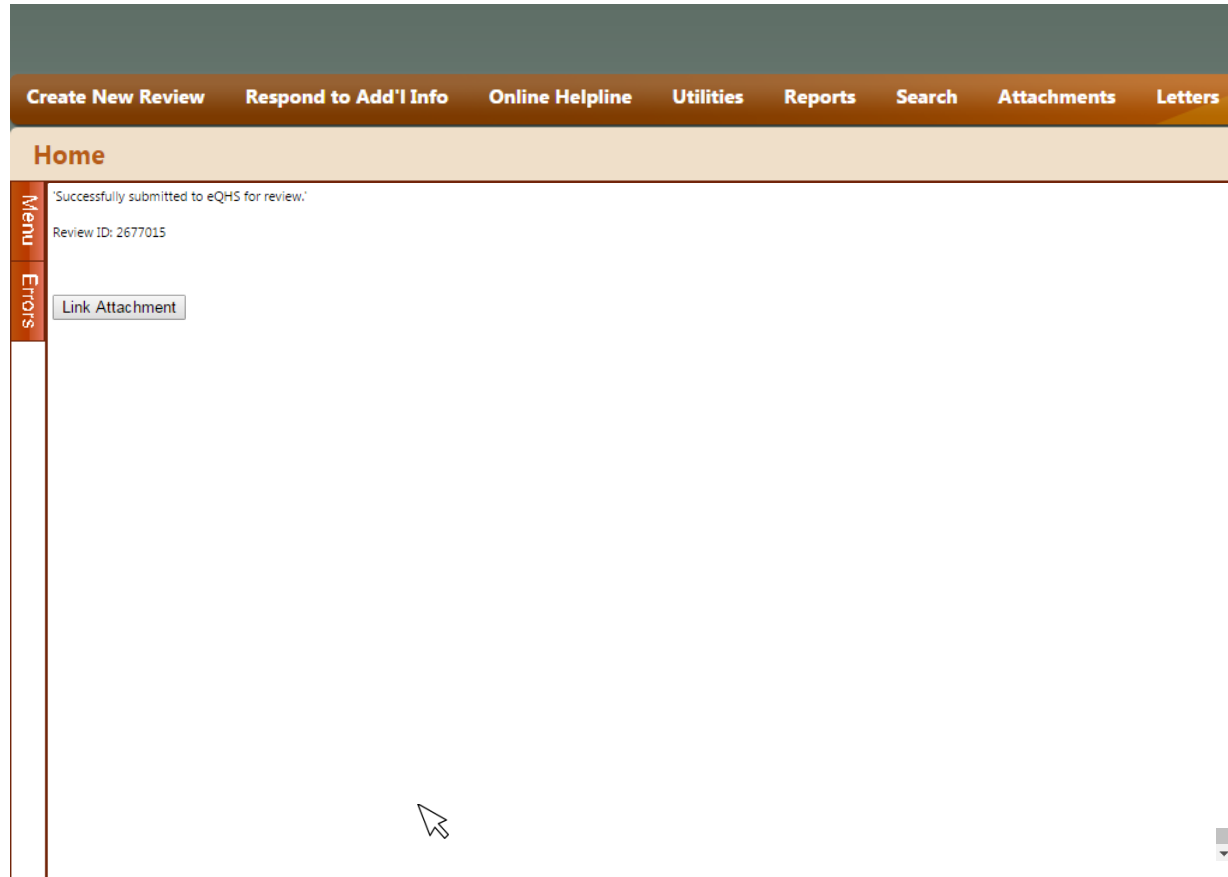
The screenshot displays a web application interface for modifying authorization. At the top, there is a navigation bar with links: 'Create New Review', 'Respond to Add'l Info', 'Online Helpline', 'Utilities', 'Reports', 'Search', 'Attachments', and 'Letters'. Below this is a 'Menu' section with a 'Review Header Information' tab selected. The header information shows 'Provider #: 12345678' and 'Provider Name: Example Provider'. A 'Errors' section contains a row of tabs: 'Start', 'DX CODES/ITEMS', 'Clinical Info', and 'SUMMARY'. The 'Clinical Info' tab is active, showing a table of clinical conditions with checkboxes. The conditions are: 'Hilar enlargement or mediastinal adenopathy' (checked), 'Hoarseness or vocal cord weakness resulting from recurrent laryngeal nerve injury' (unchecked), 'Acute post-operative complications following cardio-thoracic surgery' (unchecked), 'Chest wall trauma including cardiomeastinal structures, lungs, and/or aorta' (checked), and 'Subacute cough lasting at least 3 weeks after chest xray' (unchecked). Below the table is a text box labeled 'Other (explain in the text box)'. At the bottom, there are three buttons: 'CANCEL', 'PARTIAL SAVE', and 'CONTINUE'. A mouse cursor is pointing at the 'CONTINUE' button.

Condition	Checked
Hilar enlargement or mediastinal adenopathy	<input checked="" type="checkbox"/>
Hoarseness or vocal cord weakness resulting from recurrent laryngeal nerve injury	<input type="checkbox"/>
Acute post-operative complications following cardio-thoracic surgery	<input type="checkbox"/>
Chest wall trauma including cardiomeastinal structures, lungs, and/or aorta	<input checked="" type="checkbox"/>
Subacute cough lasting at least 3 weeks after chest xray	<input type="checkbox"/>

Modify Authorization Example

- **Step 5: Provide an explanation for the PAR revision**

- Click the Summary tab to display its contents
- Use the space provided to briefly explain the clinical need for adding units of the Procedure
- Click **Submit for Review** when finished

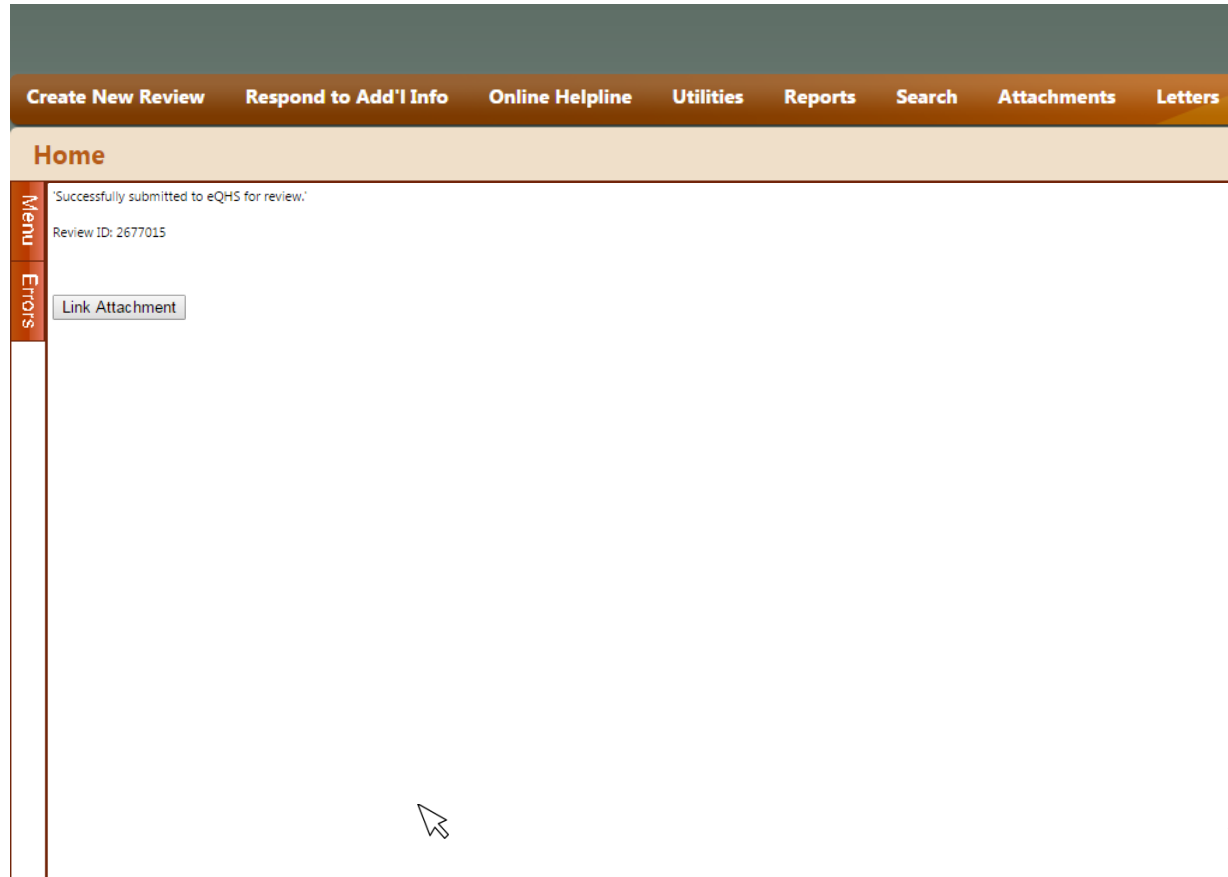


The screenshot displays a web application interface. At the top, there is a navigation bar with the following links: [Create New Review](#), [Respond to Add'l Info](#), [Online Helpline](#), [Utilities](#), [Reports](#), [Search](#), [Attachments](#), and [Letters](#). Below this is a 'Home' section. A message states: 'Successfully submitted to eQHS for review.' Below the message, the 'Review ID: 2677015' is displayed. A 'Link Attachment' button is visible. On the left side, there is a vertical menu with 'Menu' and 'Errors' options. A mouse cursor is visible over the page.

Modify Authorization Example

- **What happens next?**

- You will be prompted to link any and all documents supporting the medical necessity of your request
- Once received, your request will be processed within 4 business days
- If approved, you will receive a new PAR number (the original number will become inactive)



Helpful Resources

- Customer Service
 - Phone number: **1-888-801-9355**
- Provider Relations
 - Helpline ticket via eQSuite
- Revision Guides on [ColoradoPAR](#)
 - <http://www.ColoradoPAR.com>
 - Provider Resources Tab, Revisions