

Katie Beckett Participant/Package Web Submission

Version 1.2



REVISION HISTORY

Version	Date	Editor	Description
1.0	1/10/2013	D. Barrett	First Draft
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1.0 OVERVIEW

1.1 Document Purpose and Scope

This manual provides instructions on the process used by the *Right From the Start Medicaid* (RSM) Katie Beckett Medicaid Team to enter Katie Beckett (KB) participant/packet information and DMA6A requests via the Georgia Web Portal. Packets/DMA6As for new and existing participants may be entered. The submission process consists of three main components:

- Katie Beckett Participant search: Search for participants and DMA6As
- Participant/packet entry for new and existing participants
- DMA6A request entry

1.2 System Access and User Type

The Katie Beckett web entry submission functionality is limited to the RSM unit provider ID 000043557A. The provider must log into the web portal in order to access the submission functionality, which is located on the *Provider Workspace*. Only provider 000043557A will see the link for [Katie Beckett Participant Search](#). DFCS providers with the appropriate category of service may use *PA Search* to view DMA6As which are associated with their specific provider ID. At this time, the RSM Medicaid Team does not have access to *PA Search*. However, the RSM Medicaid team may view the DMA6As for **all** Katie Beckett participants by using *Katie Beckett Participant Search* functionality.

Access Instructions:

1. Log into the **Georgia Web Portal** utilizing established login credentials.
2. On the portal *Secure Home* page, select [Prior Authorization](#) from the links at the top of the page.

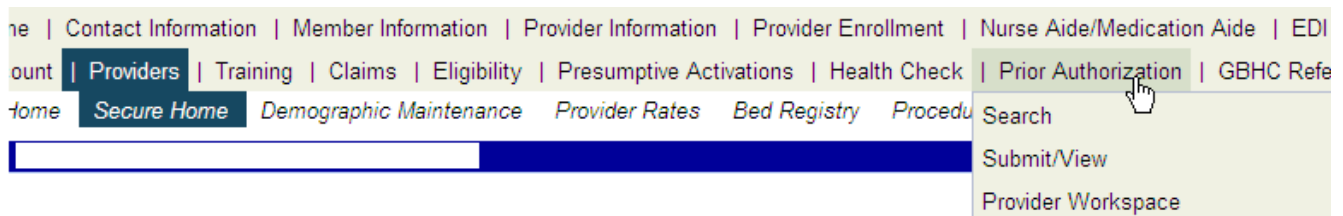


Figure 1

3. Then, select *Provider Workspace* from the drop list to open the workspace page.
4. The *Provider Workspace* consists of links to various authorization request functions. Go to the **Katie Beckett Packet and DMA6A Submission** section, and click **Katie Beckett Participant Search**.

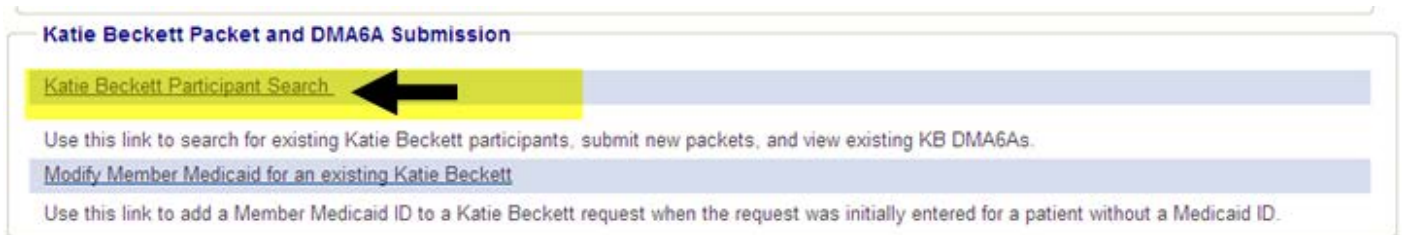


Figure 2

2.0 SUBMISSION INSTRUCTIONS

2.1 Katie Beckett Participant Search

Searching for a participant is required before a participant packet and DMA6A may be entered. The purpose of the search is twofold: prevent duplicate packet submissions and to associate the packet with a participant’s ‘chart’ for a participant that already exists in the system.

Follow these instructions to search for a participant:

1. On the *Provider Workspace*, click [Katie Becket Participant Search](#) to open the search page.

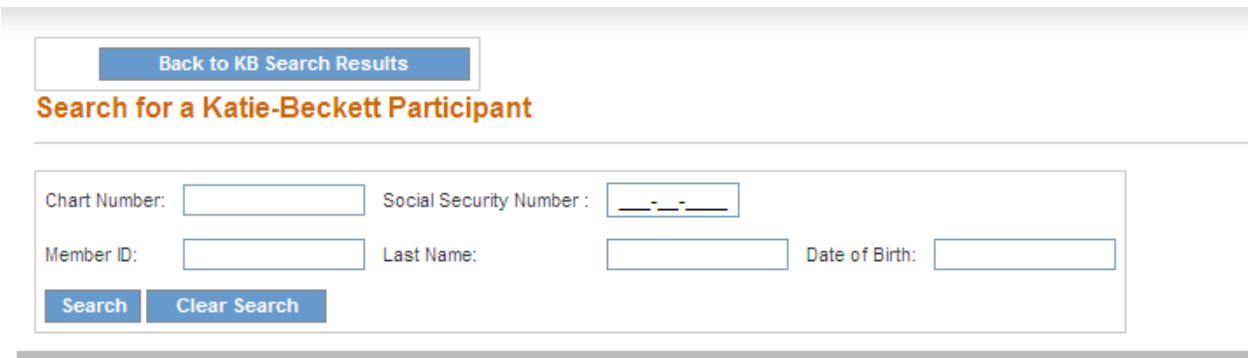
The screenshot shows a web interface for searching participants. At the top, there is a blue button labeled "Back to KB Search Results". Below this is the heading "Search for a Katie-Beckett Participant" in orange. The search form contains five input fields: "Chart Number:", "Social Security Number:", "Member ID:", "Last Name:", and "Date of Birth:". The "Social Security Number" field has a pre-filled format of "___-__-____". At the bottom of the form are two buttons: "Search" and "Clear Search".

Figure 3

2. A search for KB participants may be conducted using one or more of the following criteria:
 - **Chart Number:** This is the number **assigned by the system** when a participant is added. If a participant is already in the system, the chart number displays in the search results and also displays on the page displaying the participant information.
 - **Social Security Number (SSN):** The participant’s SSN.
 - **Member ID:** The participant’s Medicaid Member ID.
 - **Last Name:** Participant’s last name
 - **Date of Birth:** Participant’s date of birth.
3. First, attempt a search by **using the SSN only**. Enter the 9 digit SSN in the box provided. Enter the numbers and the system auto formats with dashes. Then, click [Search](#).

Add New KB Participant

Back to KB Search Results

Search for a Katie-Beckett Participant

Chart Number:

Social Security Number :

Member ID:

Last Name:

Date of Birth:

Search

Clear Search

No Katie-Beckett Participant(s) found for entered search criteria. Please try again.

Figure 4

- If no existing participant matching the SSN is found, a message in red displays indicating no participant found, as shown in the figure above.
- Click [Clear Search](#).
- Next, try searching for the participant by 'Last Name' and 'Date of Birth'. Enter the participant's last name; and enter the date of birth using the calendar popup or enter manually as mm/dd/yyyy. The system auto formats the date by adding '/'.
 - Click [Search](#). If the message in red indicating no participant found persists, then proceed to enter a new participant/packet.

Add New KB Participant

Back to KB Search Results

Search for a Katie-Beckett Participant

Chart Number:

Social Security Number :

Member ID:

Last Name:

Date of Birth:

Search

Clear Search

No Katie-Beckett Participant(s) found for entered search criteria. Please try again.

Figure 5

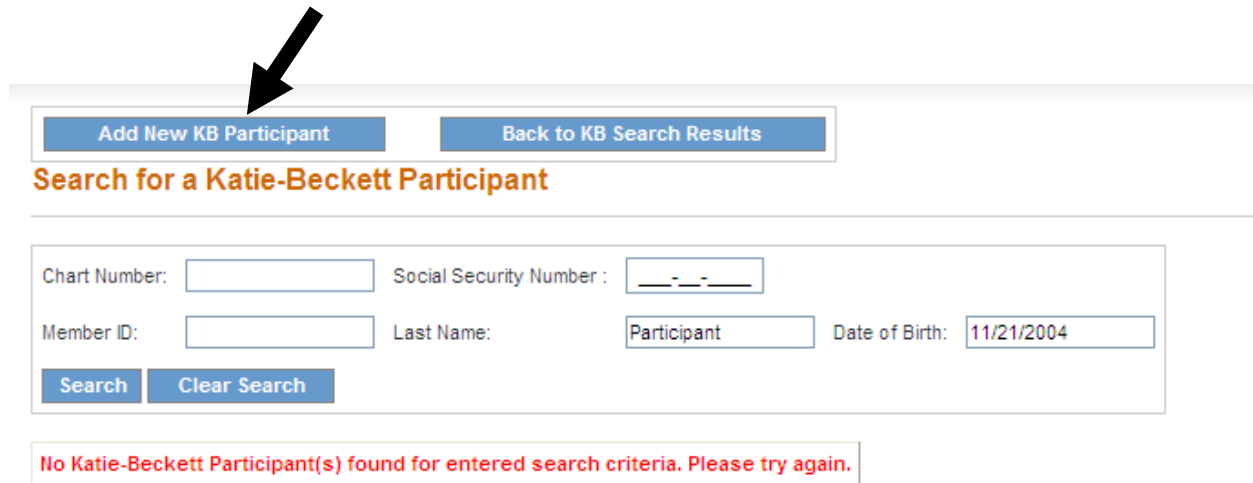
Note: If a SSN search does not return the participant but a search by name and DOB does, be sure that the SSN, Name, and DOB entered, were entered correctly. If all information was entered correctly but discrepancies exist, do not enter a new participant but notify GMCF using 'Contact Us'.

2.2 Participant/Packet Entry

2.2.1 Add a New Participant and Packet

Add a new participant when the participant search does not return any results.

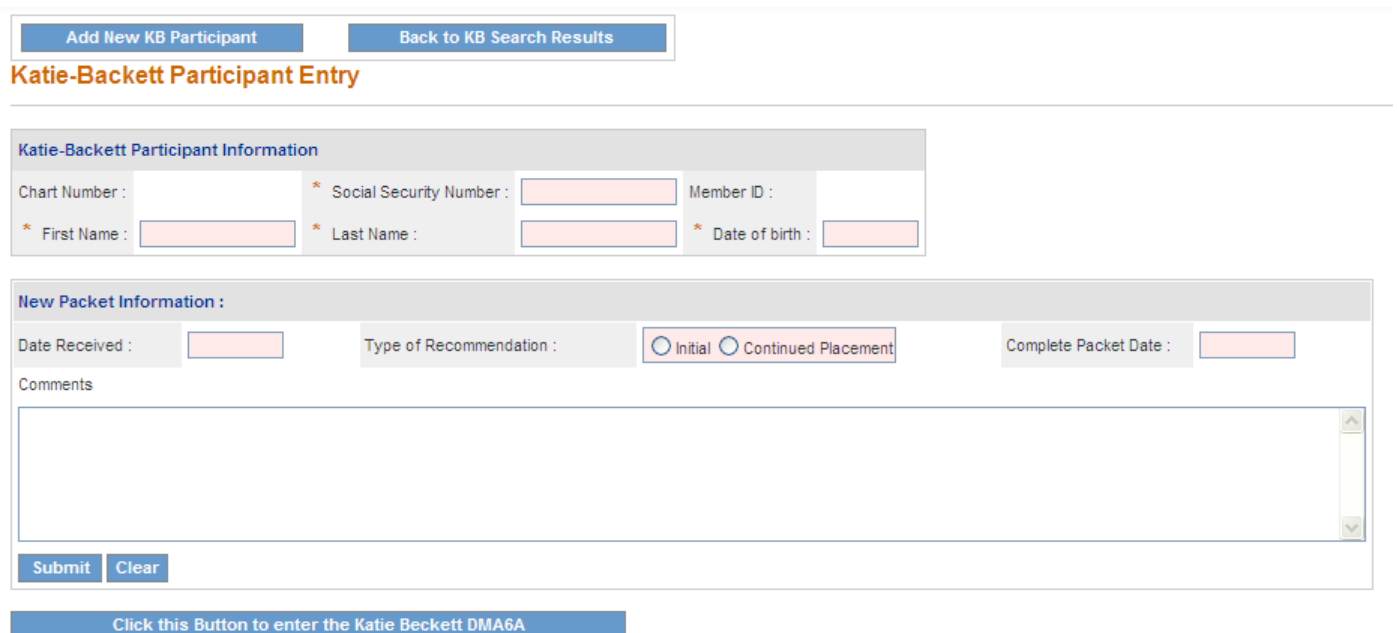
1. On the search page, click [Add New KB Participant](#).



The screenshot shows a web interface for searching participants. At the top, there are two buttons: "Add New KB Participant" and "Back to KB Search Results". Below these buttons is a heading "Search for a Katie-Beckett Participant". The search form contains the following fields: "Chart Number:", "Social Security Number:", "Member ID:", "Last Name:" (with the value "Participant"), and "Date of Birth:" (with the value "11/21/2004"). There are "Search" and "Clear Search" buttons. Below the search form, a red message box states: "No Katie-Beckett Participant(s) found for entered search criteria. Please try again."

Figure 6

2. The *Katie Beckett Participant Entry* page opens. This page is used to capture and track participant information and packet information.



The screenshot shows the "Katie-Beckett Participant Entry" page. At the top, there are two buttons: "Add New KB Participant" and "Back to KB Search Results". Below these buttons is a heading "Katie-Beckett Participant Entry". The form is divided into two main sections: "Katie-Beckett Participant Information" and "New Packet Information". The first section contains fields for "Chart Number:", "* Social Security Number:", "Member ID:", "* First Name:", "* Last Name:", and "* Date of birth:". The second section contains fields for "Date Received:", "Type of Recommendation:" (with radio buttons for "Initial" and "Continued Placement"), "Complete Packet Date:", and a large text area for "Comments". There are "Submit" and "Clear" buttons at the bottom of the form. Below the form, there is a blue button that says "Click this Button to enter the Katie Beckett DMA6A".

Figure 7

3. Enter the participant's Social Security Number in the box provided. Enter the 9 numbers and the system auto formats with dashes.
4. Enter the participant's first name in the 'First Name' box, and then the last name in the 'Last Name' box. **Suggestion:** Enter the first name and last name in all CAPS .
5. Enter the participant's birth date in the 'Date of birth' box by selecting the date from the calendar or manually entering the date as mm/dd/yyyy. The system auto formats with '/'.
6. In the *New Packet Information* section, enter the date that the packet information was received. Enter the date manually or use the calendar.
7. Select the 'Type of Recommendation' by clicking the *Initial* button since this is a packet for a new participant.
8. The '**Complete Packet Date**' field is read only. Once the nurse enters the complete packet date when the case is reviewed, the date will display in this box.
9. Additional information regarding the participant or packet may be entered in the 'Comments' box but this is optional.

Add New KB Participant

Back to KB Search Results

Katie-Beckett Participant Entry

Katie-Beckett Participant Information

Chart Number :

* Social Security Number : 434344445

Member ID :

* First Name : Katie

* Last Name : Participant

* Date of birth : 11/21/2004

New Packet Information :

Date Received : 01/07/2013

Type of Recommendation : ☒ Initial ☐ Continued Placement

Complete Packet Date :

Comments

This box is optional but may be used to provide additional information regarding the participant and/or packet.

Submit

Clear

Click this Button to enter the Katie Beckett DMA6A

Figure 8

10. Click **Submit** to save the participant/packet information.
11. Once the packet information is submitted successfully, the **Previous Comments** table opens below the 'Comments' 'box'. This table displays all the packet information entered in the system for the participant. Once the DMA6A is submitted, the system inserts the DMA6A tracking/authorization number in this table under 'PA Number' to associate each packet with the corresponding DMA6A.

Comments

This box is optional but may be used to provide additional information regarding the participant and/or packet.

Submit Clear

Previous Comments

Date Received	Type Recommendation	Complete Pkt Date	Comments	PA Number	
1/7/2013 12:00:00 AM	Initial		This box is optional but may be used to provide additional information regarding the participant and/or packet.		EDIT

Click this Button to enter the Katie Beckett DMA6A

Figure 9

2.2.2 Add a Packet for an Existing Participant

The process used to add a packet for a participant that already exists in the PA system is generally the same as adding a new participant packet. The main difference is that the participant information does not need to be added since the participant already exists in the system – only the packet information needs to be added.

1. First, it is necessary to search for the existing participant (follow the search instructions previously described). If the search is successful, the existing chart number and participant information will display in search results as shown in the next figure.

Search for a Katie-Beckett Participant

Chart Number: Social Security Number :

Member ID: Last Name: Date of Birth:

Search Clear Search

Fictitious member info

Chart Number	Member ID	Member Last Name	Member First Name	Social Security number	DOB
774048	333000000700	WILLIAMS	JAMES	818181818	2/3/2004 12:00:00 AM

Figure 10

2. Click the **Chart Number** (see previous figure) that is underlined and in blue font.
3. The *KB Participant Entry* page opens. This page displays participant information (top of the page); and existing packets/DMA6A PA IDs in the **Previous Comments** table at the bottom of the page.
4. The PA number noted in the **Previous Comments** table may be used to view the previously entered DMA6A including decision information (refer to section 3.1 of this manual for instructions).

Add New KB Participant
Back to KB Search Results

Katie-Beckett Participant Entry

Katie-Beckett Participant Information
 Chart Number : 774048 * Social Security Number : 818181818 Member ID : 333000000700
 * First Name : JAMES * Last Name : WILLIAMS * Date of birth : 02/03/2004

New Packet Information :
 Date Received : Type of Recommendation : ☐ Initial ☐ Continued Placement Complete Packet Date :
 Comments

Submit
Clear

Previous Comments

Date Received	Type Recommendation	Complete Pkt Date	Comments	PA Number	
3/28/2011 12:00:00 AM	Initial			111032800002	EDIT

Click this Button to enter the Katie Beckett DMA6A

Figure 11

5. To add the continued placement packet information, enter the date that the packet was received in the 'Date Received' box.
6. Select *Continued Placement* as the 'Type of Recommendation' since the packet is for an existing participant, who is continuing in the in the KB program.
7. Enter comments, if desired, and then click **Submit**. The packet information is added to the 'Previous Comments' table.

Previous Comments					
Date Received	Type Recommendation	Complete Pkt Date	Comments	PA Number	
3/28/2011 12:00:00 AM	Initial			111032800002	EDIT
3/26/2012 12:00:00 AM	Continued Placement				EDIT

Figure 12

2.3 Submit a DMA6A

Enter the DMA6A after packet information has been added for a new participant **OR** after packet information has been added for an existing participant so that each packet is associated with a DMA6A.

1. After submitting the packet information, select - [Click this Button to enter the Katie Beckett DMA6A](#) – below the ‘Previous Comments’ table.

Previous Comments					
Date Received	Type Recommendation	Complete Pkt Date	Comments	PA Number	
3/28/2011 12:00:00 AM	Initial			111032800002	EDIT
3/26/2012 12:00:00 AM	Continued Placement				EDIT

[Click this Button to enter the Katie Beckett DMA6A](#)



Figure 13

2. On the next screen, click [TEFRA/Katie Beckett \(Form DMA-6A\)](#).

New Request for Prior Authorization

[Exceptional Transportation Services \(Form Number: DMA-80\)](#)
[TEFRA / Katie Beckett \(Form DMA-6A\)](#)



Figure 14

3. The *New Request for Prior Authorization* page opens, which displays the RSM KB Medicaid unit provider ID (provider who logged into the portal). **However, the provider ID may be changed to any DFCS office provider ID with a 380 COS** if the plan is to associate the DMA6A with a specific DFCS office.

New Request for Prior Authorization

Figure 15

4. This page also displays the participant's SSN (if they are not yet a Medicaid member) **OR** the participant's Member Medicaid ID.
5. **No other member data needs to be entered on this page.** Click [Submit](#).
6. The next page lists the participant's available packets. 'Available packets' means that a DMA6A has not yet been entered for the packet. Select the applicable packet based on the date received and type of recommendation by clicking [Select](#) at the end of the packet line as shown in the figure below.

New Request for Prior Authorization

Figure 16

- Once the packet is selected, the Katie Beckett online form opens. At the top of the form the participant and provider information displays. **The only sections of the form that are required are: Participant Address (if member does not have a Medicaid ID); Contact Information; and Diagnosis Information.** The participant address is necessary for the KB notification.

Participant Address:

The next section captures the member's address. This information is important so that a decision notification can be sent to the member.

Participants with Member Medicaid IDs: The system inserts the address information for participants with Member Medicaid IDs. This information is read only and cannot be edited.

Participants who do not yet have a Member Medicaid ID: The address information must be entered by the person entering the DMA6A. Since participants without Medicaid IDs are not yet in MMIS, no address can be inserted by the system.

In the figure below, the member ID that displays is an example of the temporary member ID assigned by the PA system since this member is not in MMIS. These 'temporary' IDs end in GMC. When the member has one of these IDs, the participant address must be entered.

Member Information									
Member ID :	03396GMC	First Name :	Mary	MI :		Last Name :	Smith	Suffix :	
Date of Birth :	07/14/2009	Social Security Number :	111-11-1111	Gender :	Female				

Participant Address								
Address Line 1 :		Required		Address Line 2 :				
City :		Required		State :	GA	Zip :		Required

Figure 17

- Enter the participant's street or PO Box address on 'Address Line 1'. 'Address Line 2' may be used if more space is needed for the address (such as an apartment #); or there is a second line to the address.
- Enter the 'City' in the box provided.
- The 'State' defaults to Georgia.
- Enter the five (5) digit zip code in the 'Zip' box.

Contact Information:

All data is required in this section. Most of the information (except Contact Name) is auto-populated by the system based on the Provider ID associated with the request; but the **information can be edited if not correct.**

Contact Information			
* Contact Name:	Mary Smith	Contact Email:	RSM@email.org
Contact Phone:	404-999-8765	Ext.:	
		* Contact Fax:	404-888-7654

Figure 18

12. Review the information carefully and edit as necessary. **It is especially important that the 'Contact Email' is correct since a notification email is sent to the email address entered in this section when a decision is rendered for the DMA6A.**

Diagnosis Information:

At least one ICD-9 Diagnosis code is required.

* Diagnosis					
ICD-9 Code	ICD-9 Description	ICD 9 Date	Primary	Admission	
			☐	☐	ADD

Figure 19

13. In the ICD-9 Box, enter the ICD-9 Code for the participant's primary diagnosis related to the KB request. If the diagnosis code includes a decimal, enter with the decimal such as 250.0.
14. Enter the date that the diagnosis was determined in the 'ICD9 Date' box. If not known, enter the date that the physician signed the DMA6A.
15. Click the 'Primary' checkbox to indicate that the diagnosis is the primary diagnosis.

* Diagnosis					
ICD-9 Code	ICD-9 Description	ICD 9 Date	Primary	Admission	
344		01/11/2013	☒	☐	ADD

Figure 20

16. Click **ADD** to add the diagnosis code to the request. When add is clicked, **EDIT** and **DELETE** links appear. At this point, the code may be deleted if entered incorrectly. However, **once the DMA6A is submitted, the diagnosis code cannot be deleted.**

* Diagnosis					
ICD-9 Code	ICD-9 Description	ICD 9 Date	Primary	Admission	
344	OTH PARALYTIC SYNDROMES	01/11/2013	Yes	No	EDIT DELETE
				☐	ADD

Figure 21

17. Other ICD-9 diagnosis codes may be entered, following the same procedure just described.
18. After the contact information and diagnosis information is complete, go to the bottom of the form and click **Review Request**.
19. The next page displays an *Attestation Statement* (bottom of page). Review the statement carefully.

To the best of my knowledge, the information I am submitting in this transaction is true, accurate, complete and is in compliance with applicable Department of Community Health policies and procedures. I am submitting this information to the Georgia Department of Community Health, Division of Medical Assistance, for the purpose of obtaining a prior authorization number.

I understand that any material falsification, omission or misrepresentation of any information in this transaction will result in denial of payment and may subject the provider to criminal, civil or other administration penalties.

To accept this information and proceed with your transaction, please click 'I agree'.

I Agree

Figure 22

20. In order to proceed, **I Agree** must be clicked to confirm agreement with the statement.
21. When **I Agree** is clicked, the link to submit the request displays at the bottom of the page. Click **Submit Request**.
22. The next page displays the pending 12 digit authorization tracking number (top of the page). This number is also called the Request ID or PA ID. If the DMA6A is approved, this number is the DMA6A authorization number.

23. At this point in the submission process, required documents may be attached to the online form. Go to **Create an Attachment** near the middle of the page.

Create an Attachment

If you want to attach a document to this Request, click on "Browse...", select a document and then, click on "Attach File".

Please Check the name of the documents included in the Attachment before you attach. (All the files colored in red need to be attached for faster review.)

Codes	Documents
DEVELOPMENTAL	☐ Developmental/Psychological Evaluation
DMA6A	☐ DMA6A
IEP/IFSP	☐ IEP/IFSP
NURSING NOTES	☐ Nursing Notes
TEFRA	☐ TEFRA/Katie Beckett Medical Necessity/Level of Care Statement
THERAPY NOTES	☐ Therapy Notes

Figure 23

2.3.1 Attach Files

When files are attached via **Create an Attachment**, the file can be associated with a required document. Each checkbox, as shown in the figure below, represents a required document. One file may be attached for all required documents (**this is the preferred method**); or a different file may be attached for each document.

1. For example, to attach one file for all documents, click in each checkbox.

Create an Attachment

If you want to attach a document to this Request, click on "Browse...", select a document and then, click on "Attach File".

Please Check the name of the documents included in the Attachment before you attach. (All the files colored in red need to be attached for faster review.)

Codes	Documents
DEVELOPMENTAL	☒ Developmental/Psychological Evaluation
DMA6A	☒ DMA6A
IEP/IFSP	☒ IEP/IFSP
NURSING NOTES	☒ Nursing Notes
TEFRA	☒ TEFRA/Katie Beckett Medical Necessity/Level of Care Statement
THERAPY NOTES	☒ Therapy Notes

Figure 24

2. Then, click **Browse** to find the file saved to your file directory.
3. Select and open the file in the directory, and the name of the file displays in the box next to **Browse** as shown in the next figure.

Create an Attachment

If you want to attach a document to this Request, click on "Browse...", select a document and then, click on "Attach File".

X:\Attachment Test Docs\Member Records TEST 1.doc Browse... Attach File

Please Check the name of the documents included in the Attachment before you attach. (All the files colored in red need to be attached for faster review.)

Codes	Documents
DEVELOPMENTAL	☒ Developmental/Psychological Evaluation
DMA6A	☒ DMA6A
IEP/IFSP	☒ IEP/IFSP
NURSING NOTES	☒ Nursing Notes
TEFRA	☒ TEFRA/Katie Beckett Medical Necessity/Level of Care Statement
THERAPY NOTES	☒ Therapy Notes

Figure 25

- Next, click **Attach File**. The file attached is associated with each document type in the **Attached Files** table as shown below.

Create an Attachment

If you want to attach a document to this Request, click on "Browse...", select a document and then, click on "Attach File".

Browse... Attach File

File uploaded successfully.

Please Check the name of the documents included in the Attachment before you attach. (All the files colored in red need to be attached for faster review.)

Codes	Documents
DEVELOPMENTAL	☐ Developmental/Psychological Evaluation
DMA6A	☐ DMA6A
IEP/IFSP	☐ IEP/IFSP
NURSING NOTES	☐ Nursing Notes
TEFRA	☐ TEFRA/Katie Beckett Medical Necessity/Level of Care Statement
THERAPY NOTES	☐ Therapy Notes

Attached Files

File	Type	Code	Document Name	Size	User	Date	
Member Records TEST 1.doc	Web Upload	DEVELOPMENTAL	Developmental/Psychological Evaluation	37 KB	KB1	10/2/2013 11:09:21 AM	DELETE
Member Records TEST 1.doc	Web Upload	DMA6A	DMA6A	37 KB	KB1	10/2/2013 11:09:21 AM	DELETE
Member Records TEST 1.doc	Web Upload	IEP/IFSP	IEP/IFSP	37 KB	KB1	10/2/2013 11:09:21 AM	DELETE
Member Records TEST 1.doc	Web Upload	NURSING NOTES	Nursing Notes	37 KB	KB1	10/2/2013 11:09:21 AM	DELETE
Member Records TEST 1.doc	Web Upload	TEFRA	TEFRA/Katie Beckett Medical Necessity/Level of Care Statement	37 KB	KB1	10/2/2013 11:09:21 AM	DELETE
Member Records TEST 1.doc	Web Upload	THERAPY NOTES	Therapy Notes	37 KB	KB1	10/2/2013 11:09:21 AM	DELETE

Figure 26

Note: For more detailed guidelines regarding the attachment process, please refer to the user guide – [Attach Files to a PA Request](#) – located on the *Provider Workspace* under Education and Training/User Manuals.

2.4 Update a Member's ID

A new Katie Beckett participant may be added to the PA System before they are Medicaid members. When the new participant is added, the PA System assigns a temporary 'system' ID, which looks similar to 00222GMC. When the member becomes a Medicaid member and is assigned a Medicaid Member ID, the Medicaid ID needs to be added to the participant's chart and existing DMA6A in order for the continued placement DMA6A to be entered. When an attempt is made to enter the continued placement DMA6A before the Member ID is updated, the system triggers the following warning on the *New Request for Prior Authorization* page: 'Multiple Member IDs associated with the SSN'. The user is directed to add the member's Medicaid ID to the participant/packet as shown in the figure below.

NOTE: At this time, the RSM Medicaid Unit may only update member IDs for cases that are associated with their provider ID. Refer member updates for other DMA6As to GMCF review staff.

New Request for Prior Authorization

TEFRA / Katie Beckett (Form DMA-6A)

To find a member or provider ID click the next to the ID box

Member Medicaid ID:

Social Security Number :

Katie-Beckett Provider ID:

Submit

ERROR: Multiple Member IDs associated with this Medicaid SSN

WARNING: Multiple member IDs associated with the SSN. You must add the Medicaid ID to this participant/packet. Please click the following button Update Multiple Member ID to add the member's Medicaid ID before entering the DMA6A.

Update Multiple Member ID

Figure 27

1. To add the member's Medicaid ID, click **Update Multiple Member ID**.

WARNING: Multiple member IDs associated with the SSN. You must add the Medicaid ID to this participant/packet. Please click the following button Update Multiple Member ID to add the member's Medicaid ID before entering the DMA6A.

Update Multiple Member ID

2. When the update link is selected, the update page opens with the member's SSN auto-populated.

Update Member Medicaid Data

Request ID : OR Member Social Security Number :

Request Type : ☒ Katie-Beckett

Figure 28

3. Do not enter any other information, just click [Submit](#).
4. On the next page, the previous DMA6A request ID associated with the participant's temporary 'system' ID is shown.

Update Member Medicaid Data

Request ID : OR Member Social Security Number :

Request Type : ☒ Katie-Beckett

Request ID	Member ID	Last Name	First Name	SSN	Status
	00612GMC	NELSON	SHELLEY	712312345	Denied

Fictitious member info

Figure 29

5. Click the [Request ID](#) (blacked out in the screen shot above).
6. On the next page, under **Request Information**, enter the participant's Medicaid ID in the box next to the temporary ID.

Prior Authorization - Review Request

Request Information

Request ID : [REDACTED] Case Status : **Denied** Case Status Date : 01/14/2013

Member ID : 00612GMC **334000000700**  [Update Member Medicaid ID](#)

Provider ID : [REDACTED]

Effective Date : 01/14/2013 Expiration Date : 01/13/2014

Denial Reason :

Type of Recommendation : Initial

Decision Type : Nurse Denied, Denial Reason: DOES NOT MEET PLCY GUIDELINES. Decision Date: 1/14/2013

Diagnosis

ICD-9 Code	ICD-9 Description	ICD-9 Date	Primary
344	OTH PARALYTIC SYNDROMES	01/14/2013	Yes

Figure 30

7. Then, click **Update Member Medicaid ID**; and the request is updated with the member ID as shown in the next figure.

Request Information

Request ID : [REDACTED] Case Status : **Denied** Case Status Date : 01/14/2013

Member ID : **334000000700**

Provider ID : [REDACTED]

Effective Date : 01/14/2013 Expiration Date : 01/13/2014

Denial Reason :

Type of Recommendation : Initial

Decision Type : Nurse Denied, Denial Reason: DOES NOT MEET PLCY GUIDELINES. Decision Date: 1/14/2013

Diagnosis

ICD-9 Code	ICD-9 Description	ICD-9 Date	Primary
344	OTH PARALYTIC SYNDROMES	01/14/2013	Yes

[Attach File](#) [Return To Search Results](#) [Return to Provider Workspace](#) [Contact Us](#)

[Return to the Auth Request Page](#)

Figure 31

8. To return to the *New Request for Prior Authorization* page and enter the DMA6A, click [Return to the Auth Request Page](#).
9. On the next screen, the link to the Katie Beckett form displays. Click the form link.
10. The *New Request for Prior Authorization* page opens with the member's Medicaid ID and the requesting provider ID inserted by the system.

New Request for Prior Authorization

TEFRA / Katie Beckett (Form DMA-6A)

To find a member or provider ID click the  next to the ID box

Member Medicaid ID: 

Social Security Number :

Katie-Beckett Provider ID: 

[Submit](#)

Figure 32

11. Click [Submit](#) to enter the DMA6A.

3.0 Find DMA6As and View Decisions

The RSM Medicaid KB unit may access and view all KB DMA6As entered for a participant. The information that may be viewed includes: DMA6A decision, Recommendation type, Level of Care (approvals), and Length of Stay (approvals).

3.1 Search Instructions

Follow this procedure to find and view DMA6As for a member:

1. Log into the **Georgia Web Portal** utilizing established login credentials.
2. On the portal *Secure Home* page, select **Prior Authorization** from the links at the top of the page.

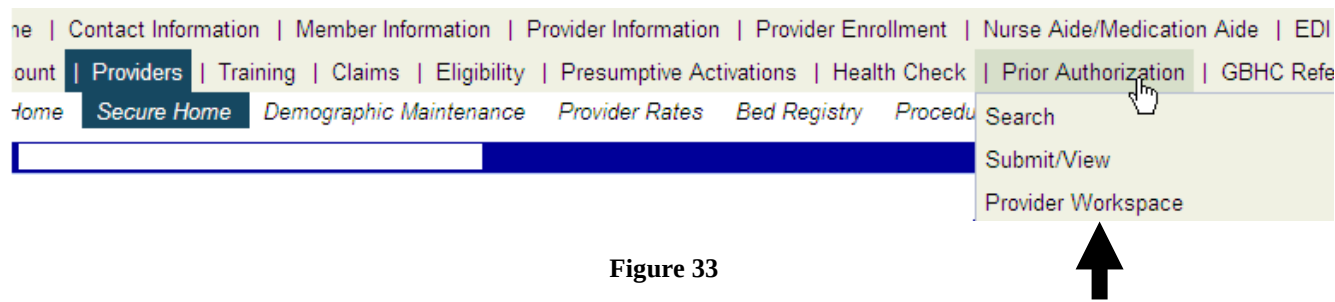


Figure 33

3. Then, select *Provider Workspace* from the drop list to open the workspace page.
4. Click the **Katie Beckett Participant Search** link.



Figure 34

5. On the *Search for a Katie Beckett Participant* page, enter the Social Security Number for a participant with an existing DMA6A.
6. Click **Search** and the case will display below the search fields.

Chart Number: Social Security Number :

Member ID: Last Name: Date of Birth:



Chart Number	Member ID	Member Last Name	Member First Name	Social Security number	DOB
773934	334000000700	Nelson	Nelson	712312345	6/24/2004 12:00:00 AM

Figure 35

- Click the **Chart Number** to open the Participant page for the member.
- On the Participant page, the DMA6As entered for the member display in the **Previous Comments** table.

Katie Beckett Participant Information

Chart Number : 773934 * Social Security Number : Member ID : 334000000700

* First Name : * Last Name : * Date of birth :

New Packet Information :

Date Received : Type of Recommendation : ☐ Initial ☐ Continued Placement Complete Packet Date :

Comments

Previous Comments

Date Received	Type Recommendation	Complete Pkt Date	Comments	PA Number	
1/2/2013 12:00:00 AM	Initial	1/14/2013 12:00:00 AM		113011408282	EDIT
1/14/2013 12:00:00 AM	Continued Placement				EDIT



Figure 36

9. To view one of the DMA6As listed, click the [PA Number](#) underlined and in blue font. This action opens the DMA6A *Review Request* page.

10. The *Review Request* page shows the following:

- **Effective Date and Expiration Date:** DMA6A start and end date
- **Case Status:** Pending, Approved or Denied
- **Type of Recommendation:** Initial or Continued Placement
- **'Denial' Decision Type:** If the case is denied, the decision type could be Tech Denied, Final Tech Denied, Nurse Denied or Physician Denied
- **Decision Date:** Date that the DMA6A was approved or denied
- **Level of Care:** Approved cases only
- **Length of Stay:** Approved cases only

The next figure shows a denied DMA6A.

Prior Authorization - Review Request

Request Information			
Request ID :	[REDACTED]	Case Status :	Denied
Member ID :	334000000400		
Provider ID :	[REDACTED]		
Effective Date :	01/04/2013	Expiration Date :	01/03/2014
Denial Reason :			

Fictitious member ID.
Request ID and provider ID redacted.

Type of Recommendation :	Continued Placement		
Decision Type :	Physician Denied. Decision Date: 1/4/2013		

Diagnosis			
ICD-9 Code	ICD-9 Description	ICD-9 Date	Primary
344	OTH PARALYTIC SYNDROMES	01/04/2013	Yes

Attach FileReturn To Search ResultsReturn to Provider WorkspaceContact Us

Figure 37

11. If the DMA6A is approved, the level of care and length of stay displays as shown in the next figure.

Prior Authorization - Review Request

Request Information			
Request ID :	[REDACTED]	Case Status :	Approved
Member ID :	334000000100		
Provider ID :	[REDACTED]		
Effective Date :	01/03/2013	Expiration Date :	01/02/2016
Denial Reason :			

Type of Recommendation :	Initial		
Decision Type :			
Level of Care :	Hospital	Length of Stay :	Three Years

Diagnosis			
ICD-9 Code	ICD-9 Description	ICD-9 Date	Primary
344	OTH PARALYTIC SYNDROMES	01/03/2013	Yes

Figure 38

12. To return to the workspace, click [Return to Provider Workspace](#).