3 – Revising Diagnostic Imaging PARs

This chapter covers revisions for Diagnostic Imaging PARs submitted through eQSuite®.

There are only a handful of scenarios in which a Diagnostic Imaging PAR would need to be revised. Each scenario involves revising a different PAR component, e.g. Billing Provider, Procedure Code. The revision process for each scenario is slightly different, thus each section of the chapter is dedicated to a particular scenario.

Refer to the appropriate section in the Contents below for step-by-step instructions on how to revise a Diagnostic Imaging PAR in a particular scenario.

Contents

3.1 – Changing the Billing Provider ID

Summary

In certain cases a PAR's Billing Provider must be changed after the PAR has already been approved. For instance, a patient originally approved to receive an MRI at Hospital A must now have the MRI performed at Hospital B. In this case, the Billing Provider must be changed from Hospital A to Hospital B.

This section explains how to request a Billing Provider ID change for a Diagnostic Imaging PAR. (Note: Users must request to have this change made on their behalf as the eQSuite® system does not allow them to make the revision themselves.)

Required Items

Before beginning, ensure you have each of the following items:

- ☐ The Review ID for the PAR you are revising
- ☐ The PAR Number for the PAR you are revising
- ☐ The original and new Billing Provider IDs

Instructions

To begin, follow the step-by-step process detailed below:

1. *Log into the PAR Portal/eQSuite®*
   Go to http://www.ColoradoPAR.com and log into the system using your unique username and password.

2. *Submit a Helpline ticket requesting the change be made*
   Click **Online Helpline** to access the eQHS Online Helpline screen. Enter the PAR's Review ID number in the **Review ID** field, type your message in the space provided, then click **Submit Question** when finished.

   Be sure to reference the PAR Number as well as the original and new Billing Provider IDs in your message. For instance, "I would like to change the Billing Provider ID for PAR #F123456 from 123456789 to 987654321."

What to Expect Next

Once submitted, you may check the *Question/Response* section of the eQHS Online Helpline screen to confirm that your request has been received.

Requests are typically processed within two business days, after which a new PAR Number will be generated. You may log into eQSuite® or into the Medicaid Portal to view the new PAR Number.

3.2 – Updating a Procedure Code

Summary

The only case in which a Diagnostic Imaging PAR's procedure may be revised after the PAR has already been approved is when there is an order for the procedure to be performed with or without contrast. For instance, a patient was originally approved for an MRI of the brain without contrast but a new order calls for the scan to be performed with contrast. In this case, the Procedure Code must be updated to reflect the new order.

This section explains how to request a Procedure Code update for a Diagnostic Imaging PAR. (Note: Users must request to have this update made on their behalf as the eQSuite® system does not allow for them to make the revision themselves.)

Required Items

Before beginning, ensure you have each of the following items:

- ❐ The Review ID for the PAR you are revising
- ❐ The PAR Number for the PAR you are revising
- ❐ The original and new Procedure Codes

Instructions

To begin, follow the step-by-step process detailed below:

1. *Log into the PAR Portal/eQSuite®*
   Go to http://www.ColoradoPAR.com and log into the system using your unique username and password.

2. *Submit a Helpline ticket requesting the change be made*
   Click **Online Helpline** to access the eQHS Online Helpline screen. Enter the PAR's Review ID number in the **Review ID** field, type your message in the space provided, then click **Submit Question** when finished.

   Be sure to reference the PAR Number as well as the original and new Procedure Codes in your message. For instance, "I would like to update the Procedure Code for PAR #F123456 from 70551 to 70552."

What to Expect Next

Once submitted, you may check the *Question/Response* section of the eQHS Online Helpline screen to confirm that your request has been received.

Requests are typically processed within two business days, after which a new PAR Number will be generated. You may log into eQSuite® or into the Medicaid Portal to view the new PAR Number.

3.3 – Extending a Procedure's Date Range

Summary

In certain cases the date range of a PAR's procedure must be extended after a PAR has already been approved. For instance, a patient was approved to receive a scan between 05/01/2016 and 05/31/2016 but was unable to have the scan completed during that time. In this case, the end date can be extended by up to 60 days. (Note: A PAR can be valid for up to 90 calendar days starting on the original 'from' date.)

This section explains how to request a date range extension for a procedure on a Diagnostic Imaging PAR. (Note: Users must request to have this extension made on their behalf as the eQSuite® system does not allow for them to make the revision themselves.)

Required Items

Before beginning, ensure you have each of the following items:

- ☐ The Review ID for the PAR you are revising
- ☐ The PAR Number for the PAR you are revising
- ☐ The Procedure Code for the procedure whose date range you are extending
- ☐ The original and new end dates for the procedure, in MM/DD/YYYY format

Instructions

To begin, follow the step-by-step process detailed below:

1. *Log into the PAR Portal/eQSuite®*
   Go to http://www.ColoradoPAR.com and log into the system using your unique username and password.

2. *Submit a Helpline ticket requesting the change be made*
   Click **Online Helpline** to access the eQHS Online Helpline screen. Enter the PAR's Review ID number in the **Review ID** field, type your message in the space provided, then click **Submit Question** when finished.

   Be sure to reference the PAR Number, Procedure Code, and the original and new end dates in your message. For instance, "I would like to extend the date range for procedure 73200 from original end date 05/31/2016 to new end date 06/30/2016 for PAR #F123456."

What to Expect Next

Once submitted, you may check the *Question/Response* section of the eQHS Online Helpline screen to confirm that your request has been received.

Requests are typically processed within two business days, after which a new PAR Number will be generated. You may log into eQSuite® or into the Medicaid Portal to view the new PAR Number.

3.4 – Adding, Updating, or Removing a Modifier

Summary
In certain cases a PAR's procedure must have a modifier added, updated, or removed after the PAR has already been approved. For instance, a PAR was submitted with a modifier attached to a procedure code but it was later discovered that the modifier was preventing the Billing Provider from billing for the procedure. In this case, the modifier must be removed.

This section explains how to request a modifier's addition, update, or removal for a procedure on a Diagnostic Imaging PAR. (Note: Users must request to have these revisions made on their behalf as the eQSuite® system does not allow for them to make the revisions themselves.)

Required Items
Before beginning, ensure you have each of the following items:

- ❏ The Review ID for the PAR you are revising
- ❏ The PAR Number for the PAR you are revising
- ❏ The new Modifier Code, if adding or updating; the original Modifier Code, if updating or removing
- ❏ The Procedure Code corresponding to the modifier being added, changed, or removed

Instructions
To begin, follow the step-by-step process detailed below:

1. *Log into the PAR Portal/eQSuite®*
   Go to http://www.ColoradoPAR.com and log into the system using your unique username and password.

2. *Submit a Helpline ticket requesting the change be made*
   Click **Online Helpline** to access the eQHS Online Helpline screen. Enter the PAR's Review ID number in the **Review ID** field, type your message in the space provided, then click **Submit Question** when finished.

   Be sure to reference the PAR Number as well as the specific modifier(s) you are adding, changing, or removing in your message. For instance, "I would like to remove modifier 26 from procedure 71250 for PAR #F123456."

What to Expect Next
Once submitted, you may check the *Question/Response* section of the eQHS Online Helpline screen to confirm that your request has been received.

Requests are typically processed within two business days, after which a new PAR Number will be generated. You may log into eQSuite® or into the Medicaid Portal to view the new PAR Number.

3.5 – Increasing the Number of Units for a Procedure

Summary

In certain cases additional units of a PAR's procedure must be added after the PAR has already been approved. For instance, a patient had a scan performed during a specific timeframe but the scan needs to be repeated once more during the same timeframe. In this case, one additional unit of the scan procedure must be added.

This section explains how to add additional units of a procedure on a Diagnostic Imaging PAR.

Required Items

Before beginning, ensure you have each of the following items:

- ❑ The PAR Number for the PAR you are revising
- ❑ The Procedure Code for which you need to add additional units
- ❑ The original date range, in MM/DD/YYYY format, of the procedure for which you need to add additional units
- ❑ Clinical documentation to support your request

Instructions

To begin, follow the step-by-step process detailed below:

1. *Log into the PAR Portal/eQSuite®*
   Go to http://www.ColoradoPAR.com and log into the system using your unique username and password.

2. *Begin submitting a Modify Authorization review*
   Click **Create New Review** to access the Review Entry screen. (The Start tab will be displayed by default.)

   Select either **Yes** or **No** to specify whether you are also the Billing Provider for the PAR being revised. If yes, the system will auto-populate the **Billing Provider ID** field with your Provider ID number; if no, enter the appropriate number in the **Billing Provider ID** field.

   Next, select the **Outpt Diagnostic Imaging** option in the space labeled **Choose Setting**. (Note: Options may vary depending on Billing Provider.)

   Select **Modify Authorization** from the **Review Type** drop-down box, then enter the PAR Number in the adjacent **eQHealth PAR Number** field.

   Click **Retrieve Data** to proceed. The DX Codes/Items tab will appear next to the Start tab.

3. *Specify Procedure information*
   Click the DX Codes/Items tab to display its contents.

   Two grids will appear: the Diagnosis grid and the Procedure grid. Click **Add** in the Procedure grid (the second grid) to access the Item Code Add/Edit screen.

   Enter the code of the procedure for which you are adding additional units in the **Code** field, specify the new units' date range using the **From Date** and **Thru Date** fields (Note: the new units' date range must fall <u>within </u>the procedure's original date range), then specify how many units you

would like to add in the **Total Units** field. (For instance, if the PAR was approved for 1 unit but you would like it to be 2 units, enter "1" here.)

Click **Add**, then manually close the Item Code Add/Edit screen to return to the DX Codes/Items tab.

Click **Continue** to proceed. (Note: Disregard any warning you receive about a possible duplicate entry.) The Clinical Info tab will appear next to the DX Codes/Items tab.

4. *Specify Clinical Information*
   Answer each of the questions on the Clinical Info tab appropriately.

   Click **Continue** to proceed. The Summary tab will appear next to the Clinical Info tab.

5. *Provide an Explanation for the PAR Revision*
   Use the space provided to briefly explain the clinical need to add additional units to the procedure.

   Click **Submit for Review** when finished.

What to Expect Next
Once submitted, you will be required to upload additional clinical documentation to support the medical necessity of your request.

Your request will then be reviewed by a first-level clinical nurse reviewer. Once a decision is made regarding your request you will receive an email notification with the status of your PAR. Within two business days of receiving the email a new PAR Number will be generated, after which you may log into eQSuite® or into the Medicaid Portal to view the new PAR Number.