

How to Make Corrections to POC Service Lines and Provider Service Prior Authorizations (SPAs) in a Plan of Care (CDDPs/Brokerages)

As the Case Management service agency for I/DD individuals, CDDPs and Brokerages hold the responsibility to authorize services for the individuals enrolled with their program necessary to support the individuals' Individual Support Plan (ISP) using eXPRS and Plan of Care. Ensuring that POC services are authorized accurately is an essential component of that responsibility.

There are situations when services authorized in an individual's POC need to be corrected, such as an increase/decrease in the hours authorized for a service, or a correction to the authorized rate for a provider. If corrections are needed, it is again the responsibility of the authorizing CDDP or Brokerage to make those corrections as timely as possible to prevent negative impacts to the provision and payment for services to I/DD individuals.

The correction services authorizations in a POC is possible, but involves some complicated steps.

When creating a POC, the process is to work from the top, down to the next level.
Example:

Overall POC Parameters

↳ **Specific POC Service Lines**

↳ **Individual provider SPAs under each POC service line**

↳ **SD billing entries/claims for payment**

See sample POC below/next page.

View Plan of Care

Plan Id: 18 #### 9	Plan Dates: 3/1/2015 - 6/30/2015
Client Name: Last, First	Client Prime: XYZ9999A
Plan Total: \$11,698.00	Plan Status: Accepted

Monthly Assessed Attendant Care/Skills Training Hours

Dates	Hour Limit
3/1/2015 - 6/30/2015	204.00

CDDP(s)

PA Adj #	Provider	Auth Dates
83	Case Management Provider	1/1/2014 - 6/30/2015

Plan Details

SE	Procedure	Modifier	Units	Dates
49	OR004 - Comm Transp, Mileage	WE	300.00 Miles per Month	3/1/2015 - 6/30/2015
49	OR526 - Attendant Care, home or comm	NA	150.00 Hours per Month	3/1/2015 - 6/30/2015
49	OR560 - FI Services	NA	1.00 per Month, Fullrate	3/1/2015 - 6/30/2015

Provider SPAs SD billing entries are submitted against these.

Auth Id	Provider	Units	Rate	Pay To Provider	Dates	Review?	Allocation	Status
18	PSW #1	200.00	\$0.485	TNT Fiscal Intermediary Services Inc	3/1/2015 - 6/30/2015	Yes	\$388.00	Accepted
18	PSW #2	200.00	\$0.485	TNT Fiscal Intermediary Services Inc	3/1/2015 - 6/30/2015	Yes	\$388.00	Accepted
18	Agency Provider	100.00	\$0.485	Agency Provider	3/1/2015 - 6/30/2015	Yes	\$194.00	Accepted
18	PSW #1	100.00	\$13.75	TNT Fiscal Intermediary Services Inc	3/1/2015 - 6/30/2015	Yes	\$5,500.00	Accepted
18	PSW #2	100.00	\$13.75	TNT Fiscal Intermediary Services Inc	3/1/2015 - 6/30/2015	Yes	\$5,500.00	Accepted
18	Agency Provider	50.00	\$27.28	Agency Provider	3/1/2015 - 6/30/2015	Yes	\$5,456.00	Accepted
18	TNT FI Services Inc Svc Location	1.00	\$47.50	TNT Fiscal Intermediary Services Inc	3/1/2015 - 6/30/2015	No	\$160.00	Accepted

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To make corrections to a POC, the process is to work up from the bottom.

To correct a provider Service Prior Authorization (SPA) but no changes to the specific POC Service Line is needed:

1. If a provider SPA is still in “*draft*” status, it can be edited to make any necessary changes.
2. If a provider SPA is in “*pending*” status, it can be withdrawn. Once withdrawn, a new provider SPA with the correct information can be created/submitted.
3. If a provider SPA is in “*accepted*” status, it needs to be voided. Voiding a provider SPA can involve several steps.
 - a. If the SPA has **NO** SD billing entries created/submitted against it, the SPA can be voided without issue. Once voided, a new provider SPA with the correct information can be created/submitted.
 - b. If the SPA **does** have SD billing entries created/submitted against it, then there is work to be done before the SPA can be voided. That work involves 3 steps:

Step 1 - Any SD entries created against the SPA must be either deleted, rejected or voided.

 - SD entries in “*draft*” must be deleted.
 - SD entries in “*pending*” status just be rejected or voided.

- SD entries in “*suspended*” status must be voided.
- SD entries in “*approved*” status must be voided.

Step 2 - for SD entries that were in “approved” status and then voided ***and*** were included in claims that were paid, those associated claims must also be voided.

- Those claims will be voided by the system in the next aggregation cycle, or can be voided by ITBSU staff upon written request.

Step 3 - once steps 1 & 2 above are completed, the provider SPA can be voided. Once voided, a new provider SPA with the correct information can be created/submitted.

Please note: If after you have completed steps 1 & 2 above, when you attempt to void the SPA and you receive the error message: “*Your request could not be completed because: Insufficient funds -\$xxx.00 on mm/dd/yyyy for Client Service*” that means there are still associated claims need to be voided as well, before the SPA can be successfully voided.

To Correct a POC Service Line:

1. If the POC Service Line is in “*draft*” status, it can be edited to make any necessary changes, and then re-saved.
2. If the POC Service Line is in “*pending*” or “*accepted*” status, then work will be needed to void/withdraw any provider SPAs under the line first. Follow steps 1 - 3 in the above section, as needed.
3. Once the POC Service Line is in “*withdrawn*” or “*void*” status, a new POC Service Line can be created with any new information needed.
4. Once the new POC Service Line is saved, new provider SPAs can be created under it.