

Frequently Asked Questions

Q: I submitted my review last week. How do I find out about the status?

A: Search for the Case ID under Search Responses. Click on "View" to see the status info.

Q: Why can't I find my Case ID under Search Responses? I can see it in Search Request; why does it say "Saved" instead of "Submitted?"

A: This is because the Case has not been fully submitted to APS. Unsubmitted cases will have a red "X" to the right of the case. Click on the Case ID # Link in Search Request, and go to the Submit to APS page. Now, click the blue button on the top of the page that says "Submit to APS." You should see a dialog box pop up that lets you know your request has been successfully submitted.

Q: Why does the status say "Queued?"

A: This means that your review has been submitted to the Utilization Manager within your organization. It has not yet been submitted to APS.

Q: I am trying to submit a Continued Stay Review, but on the Administrative Page, under Authorization Type, "Continued Stay Review" is not an option. How can I make this a Continued Stay Review?

A: If "Continued Stay Review" is not an option, you should click "Delete Request." Go to Search Services and click EXT off of the most recent Case ID. The only way to create a Continued Stay Review is by clicking EXT.

Q: How do I change the level of Service?

A: If the member is going to be changing from one procedure code to another, start by discharging the first service using the most current APS case ID. Then, go to Search Request, enter the same case ID, hit search, then click COPY. This will copy any clinical information from the last case and allow you to create a new Registration for the new procedure code.

Q: How do I do a discharge? I can't find the discharge button.

A: Go to the Search Services page. Enter the most current case ID or a MaineCare number. It is only necessary to discharge the most current case. Confirm that you are choosing the correct case, as it is impossible to undo a discharge. Click on the little house icon in the far right column, and this will bring up the discharge form. If you have multiple procedure codes you will need to discharge each of the codes as necessary. **Please note – If the house is blue, it means the client has already been discharged.*

Q: What do I do if I run out of time or units?

A: If your units and or/time have been exhausted you need to complete a Continued Stay Review to request more time and units. Your end date is the last covered day of the authorization despite any units that may be left over. These units are void after the last covered day.



Q: How do I go back in and finish a case I've already started?

A: Go to Search Request and enter in the Case ID number that you have started and click search. When your case comes up you will want to click on the case ID link to bring you back into the unfinished review. Don't click COPY or EXT as this will create a whole new review.

Q: I can't submit my review. There's a box highlighted in pink and no matter how much I type in the box, it won't let me continue or submit.

A: A pink text box means that you have exceeded the maximum number of characters for that box. Remove some text, and try again. Do not use special characters such as /. If you feel that everything you entered in is important, you can move the information to the Additional Information Section.

Q: Where do I find my PA number?

A: Look up your APS Case ID (or use the member's MaineCare number) under Search Response. Your PA number is listed in the "Auth Number" column to the right. You may also find your PA number in the Download Notifications. **Please note - Only the Utilization Manager(s) have access to the Download Notifications.*



Q: When I try to register my client, there are no codes on the “Services Requested” page. What do I do?

A: Go back to the Administrative page. Check to make sure that you have chosen the correct Authorization type for the service you want. If the correct option has been chosen, then this means that the member does not have MaineCare eligibility for the services you want. Change the Authorization Type to Initial Courtesy Review, and the codes will appear in the drop-down. Contact Provider Relations at 1-866-521-0027 when/if member regains eligibility.

Q: I submitted a case yesterday and it still does not have an auth number. What do I do?

A: Wait another day or so. It takes about 24 business hours to receive an authorization number. If you are still not seeing your auth number after a few days, call Provider Relations at 1-866-521-0027.

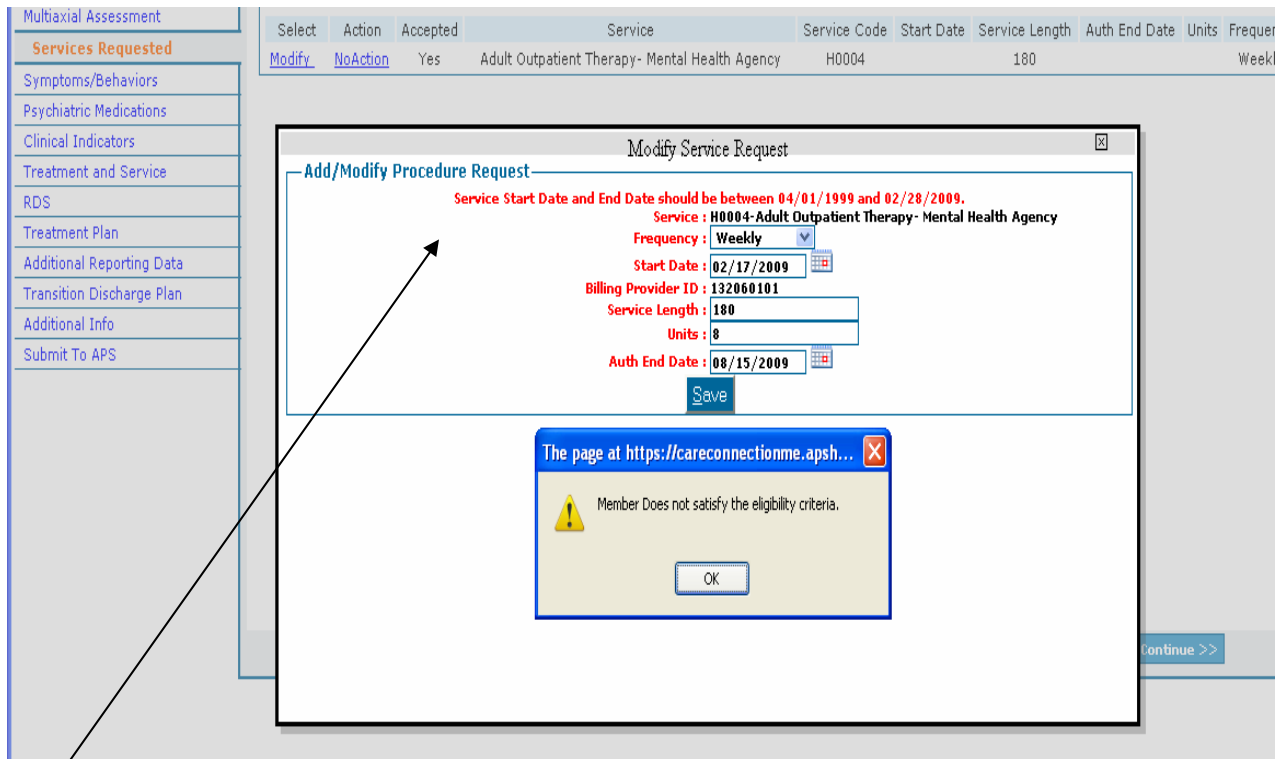
Q: How do I know which case to complete a Continued Stay Review off of?

A: Go to Search Responses and put in the client’s MaineCare number. When the page loads, Sort the list by clicking in the column header Start Date. This will sort the list by date. Look for the last authorized case for the service you want to extend. Click “View” to ensure that there are no notes for you on the case prior before continuing. You will want to use that case to complete a Continued Stay Review. Take the case id to Search Request, enter it there, and hit EXT to do a CSR.

Q: Why won’t the system let me enter in a start date beyond 10 days for a Continued Stay Review and 15 days for a Registration?

A: Our policy for backdating a Continued Stay Review is 10 calendar days from the date of submission and 15 calendar days from the date of submission for Registrations. Any dates of service beyond the allowable timeframe will be considered lost days. Hospitals and residential units do not have this grace period and must be entered within 24 hours.

Q: I have created a new case or a Continued Stay Review and under Services Requested I receive a message that Member does not satisfy the eligibility criteria.



The screenshot shows a web application interface for 'Add/Modify Procedure Request'. The form contains the following fields:

- Service:** H0004-Adult Outpatient Therapy- Mental Health Agency
- Service Code:** H0004
- Start Date:** 02/17/2009
- Service Length:** 180
- Auth End Date:** 08/15/2009
- Frequency:** Weekly
- Billing Provider ID:** 132060101
- Units:** 8

At the top of the form, a red error message states: "Service Start Date and End Date should be between 04/01/1999 and 02/28/2009." Below the form, a modal dialog box displays the error: "Member Does not satisfy the eligibility criteria." with an "OK" button. A "Save" button is located at the bottom of the form. A "Continue >>" button is visible in the bottom right corner of the application window.

A: Eligibility dates are indicated in red at the top of Add/Modify Service Request Box. You cannot ask for an end date beyond the end date indicated. Once you submit the case and see that CareConnection© has received updated eligibility information from the state, call Provider Relations and a PR Specialist will be able to extend the end date out for the full service length if eligibility allows.



Q. I am not able to submit the Continued Stay Review. There is a message telling me to complete the Services Requested page.

Guardian Information

Delete Request

[<< Previous](#)

[Save & Continue >>](#)

Data has been saved successfully

Procedures Requested

Select	Action	Accepted	Service	Service Code	Start Date	Service Length	Auth End Date	Units	Frequency	Auth No
Modify	Accept	No	Child Outpatient Comp Assess Mental Health Agency	H2000		30			Weekly	100269306
Modify	NoAction	Yes	Child Outpatient Therapy- Mental Health Agency	H0004		180			Weekly	100269306

A. Check to see that you have hit MODIFY on the code you wish to continue. You need to tell the system the new units and end date that you are requesting. In the example above, the provider has not done so. Be sure that there is no other code present that you no longer need. This extra code must be negated before submission, as in the example. The H2000 code is no longer needed. Do this by hitting the NO ACTION button. This puts a line through the unnecessary code, allowing for submission of the case.