

CDC UI, Auto Auth, and EDI



CDC Data Entry

- All claimants will require a completed CDC prior to requesting a PA – except Medicaid IP
- APS will automatically create partial CDC for existing claimants prior to implementation
- Enforced by leading the user thru the new CDC section of [CareConnection®](#) in order to enter a new PA
- Some PA data will be moved to CDC section (GAF scores, CAR, ASI/TASI)

CDC Data Entry

- Some data entered in CDC will be automatically populated in PA request such as consumer demographics, CAR, ASI/TASI
- Look and feel will be the same as current CareConnection®
- Claimant must exist in OHCA eligibility file
- No inter-agency checks (for CDC only)
- Completed CDC records exported to MMIS nightly PRIOR to exporting Pas

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Auto Authorization



Auto Authorization

- Runs every time a user submits a PA request thru UI or EDI
- If a request auto auths, **NO HUMAN REVIEWER IS REQUIRED**
- Approved request immediately flags for export to OHCA MMIS (will export that night)
- Modified to prohibit submission if AA fails due to start date

Auto Authorization

- Start date **MUST** be \geq submit date (usually “today” except for EDI)
- Applicable only for certain auth types (Prior Auth and Courtesy Review)
- Relies on review type (MH, SA, Integrated)
- Checks psychosocial stressor levels
- Looks at Dx codes (different for MH and SA; different for adult and minor)

Auto Authorization

- Checks history for claimant – if ANY service exists in history where dates overlap, auto auth will fail
- Overlap includes services with any other provider, so collaborative requests fail to auto auth
- Evaluates CAR current scores and compares against service level (I, II, III, IV)
- Can also evaluate based on ASI/TASI if Substance Abuse

Auto Authorization

- See outpatient provider manual on SoonerPro – Medical Necessity Criteria
- New rules will be added for CDC claimants (under development)
- Will include the CDC program groups

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Electronic Data Interchange (EDI)



EDI

- Data is extracted from your agency's MIS, reformatted, and transmitted to APS
- APS validates data and runs the SAME business rules as CareConnection®
- Data are not written to CareConnection® unless status = Submit (no errors)
- Turnaround (at APS) generally one day

EDI

- Immediate responses returned
- If changes to service, secondary responses returned (approval, update, etc)
- Functionality keeps even with CareConnection®
- **No data entry required!**
- Built for HIPAA privacy
- APS partners with software vendors

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Questions and Answers

