

Job Aid: Re-Review a Pre-Admission Screening Request

The purpose of the Pre-Admission Screening (PAS) request is to authorize elective/nonemergency acute or chronic hospital stays. PAS requests may be updated if they have been saved but not submitted.

A PAS request may be submitted for a second opinion if it meets the following criteria.

- The PAS is in a Denied status.
- A re-review has not already been requested.
- The re-review request falls within seven days of the denial notice date.

This job aid describes how to

- set a PAS for re-review; and
- submit the re-review for processing.

From the **POSC** home page:

1. Click Manage Service Authorizations.



2. Click Pre-Admission Screening.



3. Click Inquire/Maintain PAS Request. The Search for PAS panel will display.



Search for PAS

On the Search for PAS panel:

- 4. If known, enter the **PAS Number**. If you do not know the number, do the following.
 - Select the **Facility** from the dropdown list.
 - Enter the **Member ID**.
 - Select the **Status** from the dropdown list.

Collapse Services	Welcome	Mass.Gov Home	State Agencies > State Online Services
Provider Services	Inquire/Maintain PA	S Request	?
 > Home > Provider Search > Manage Batch Files > Manage Service Authorizations > Pre-Admission Screening > Enter PAS Request > Inguire/Maintain PAS Request > Prior Authorization > Referrals > Request Transportation > Manage Correspondence and 	PAS#	number to inquire about a specific 278 reques	
Reporting		sy, select the Facility and either member 10 of	Status
> Manage Members > Manage Claims and Payments	Facility		`
> Manage Provider Information > Administer Account	Member ID		
> Reference Publications > News & Updates	Status		~
> Related Links	Requesting		X
	Provider		
	Admission Date		Primary Diagnosis
	Effective		Effective Date
	Date From		То
	When you are the requi	OR esting provider, select the Requesting Provide	r and either Member ID or Status
	Requesting		~
	Provider		
	Member ID		
	Status		~
	Facility		X
	Admission Date		Primary Diagnosis
	Effective Date From		Effective Date To
	Clear		Search

5. Click Search. The PAS Search Results panel will display.

Collapse Services	Welcome	Mass.G	ov Home_ > State	Agencies • State	Online Services
Provider Services	> Inquire/Maintain PAS	S Request			?
 Home Provider Search Manage Batch Files Manage Service Authorizations Pre-Admission Screening Enter PAS Request Inguire/Maintain PAS Request Prior Authorization 	PAS Search You can enter the PAS #	number to inquire about a specific 2			
> <u>Referrals</u> > <u>Request Transportation</u>					
> Manage Correspondence and Reporting	When you are the facilit	y, select the Facility and either Mer	nber ID or Status		
 Manage Members Manage Claims and Payments 	Facility				~
> Manage Provider Information	Member ID				
Administer Account Account Reference Publications News & Updates	Status		~]	
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	Provider				
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	Effective Date From			Effective Date To	
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	Requesting				~
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	Member ID				
	Status		~]	
	Facility			⊠×	
	Admission Date			Primary Diagnosis	
	Effective Date From			Effective Date To	
	Clear				Search

6. Select the **PAS Number**. If more than one record appears, use the admission date as a guide.

Selecting the PAS number will open the **Base Information** panel. It includes all the demographic information.

Collapse Services	Welcome		Mass.Gov Home	e State Ag	encies State	Online Services
Provider Services	Inquire/M	laintain PAS Request				?
 <u>Home</u> <u>Provider Search</u> <u>Manage Batch Files</u> <u>Manage Service Authorizations</u> <u>Pre-Admission Screening</u> <u>Enter PAS Request</u> 	PAS Searc You can ente PAS #	r the PAS number to inquire about a	specific 278 reques	L		
 Inquire/Maintain PAS Request Prior Authorization 			OR			
> <u>Referrals</u> > <u>Request Transportation</u>	When you are	e the facility, select the Facility and	either Member ID or S	Status		
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Manage Claims and Payments Manage Provider Information Administer Account Reference Publications News & Updates	Member ID Status			~		
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> Related Links	Provider					
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	Effective Date From				Effective Date To	
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	Member ID					
	Status			~		
	Facility			<u>a</u>	×	
	Admission Date				Primary Diagnosis	
	Effective Date From				Effective Date To	
	Clear DAS Score	h Doculto	-			Search
	PAS Searc	AS# link to view the PAS Details	_			
	PAS#	Facility	Member ID	Member Name	Admission Date	Effective Date From
					11/22/2022	02/07/2023
					11/22/2022	11/22/2022
	Close					

Initiate the Re-Review Process

Select the Line Item tab.

Select the line item associated with the denied request. 7.

January 23, 2025	HOME CONSUMERS	PROVIDERS RESEARCHERS	GOVERNMENT		Logout
<u>Collapse Services</u> Provider Services	Welcome	Mass.Gov Hom	e_ • <u>State Agenc</u>	<u>cies</u> • <u>State Onl</u>	ine Services ?
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 Pre-Admission Screening Enter PAS Request Inguire/Maintain PAS 	Line Item Requested Care I	Level Authorized Care Level		Auth. Eff Date / S Auth. End Date	itatus
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	в	CHRONIC/REHAB - ADMIN DAY LEVEL OF CARE		02/07/2023 - A 02/10/2023 - A	PPROVED
Manage Provider Information Administer Account Reference Publications					New Item
News & Updates Related Links	Close Return to Search Ret	sults			
©2005 Commonwealth of Mass	achusetts	Accessibility Feedback	Site Policies	Contact Us Help	Site Map

8. The Line Item Detail panel will display.

Item Acquested Care CHRONIC/REHAB - CARE CHRONIC/REHAB - HOSPITAL LEVEL OF CARE CHRONIC/REHAB - HOSPITAL LEVEL OF CARE 11/22/2022 12/06/2022 B CHRONIC/REHAB - CARE CHRONIC/REHAB - ADMIN DAY LEVEL OF CARE 02/07/2023 - 02/10/2023 Line Item Detail Line Item A Re-review Indicator Re-Review Date Date Received 11/22/2022 Decision Date	achments	
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Reason		
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Reason		
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Behavioral Health No Total Parenteral Nutrition	No	
Reason		
	No	
Close Return to Search Results		

9. Click the **Extensions** tab. The list of extensions will display.

	PAS In	formation	Line Items Extensions	Attachments	
st o	of Line	Items			
	Line	ltem	Status		
	A		APPROVED		
	B		APPROVED		
List	of Ext	ensions			
	Ext#	Date Received	Reg. Eff Date / Reg. End Date	Req. Days	Status
	00	11/22/2022	11/22/2022 - 12/06/2022	14	APPROVED
	01	12/06/2022	12/08/2022 - 12/20/2022	14	APPROVED
	02	12/20/2022	12/20/2022 - 01/04/2023	15	APPROVED
	03	01/04/2023	01/04/2023 - 01/14/2023	10	APPROVED
	04	01/18/2023	01/18/2023 - 01/24/2023	6	APPROVED
	05	01/24/2023	01/24/2023 - 02/07/2023	14	APPROVED
	06	02/07/2023	02/07/2023 - 02/22/2023	15	DENIED
					New Item

10. Select the extension number corresponding to the DENIED status. The **Extension Detail Panel** will be displayed.

1000	uire/Main	ntain PAS Reque			tate Agencies + St	
	PAS In	nformation	Line Items	xtensions	Attachments	
it c	of Line	Items				
	Line	ltem	S	tatus		
	A		A	PPROVED		
	B		A	PPROVED		
ist	ofEx	tensions				
	Ext#	Date Received	Reg. Eff Date / Reg.	End Date	Req. Days	Status
	00	11/22/2022	11/22/2022 - 12/06/2	022	14	APPROVED
	<u>01</u>	12/06/2022	12/06/2022 - 12/20/2	022	14	APPROVED
	02	12/20/2022	12/20/2022 - 01/04/2	023	15	APPROVED
	<u>03</u>	01/04/2023	01/04/2023 - 01/14/2	023	10	APPROVED
	<u>04</u>	01/18/2023	01/18/2023 - 01/24/2	023	8	APPROVED
	<u>05</u>	01/24/2023	01/24/2023 - 02/07/2	023	14	APPROVED
2	06	02/07/2023	02/07/2023 - 02/22/2	023	15	DENIED
Ex	tensio	n Detail	08			
		Ext #	06			
	Re-re	eview Indicator			Re-Rev	iew Date
		Status Decision Date	DENIED			
200						
	Reques	sted Admission	Rehah		Authorized Admiss	ion Type
		sted Admission Type lested Effective			Authorized Admiss	
	Requ	lype lested Effective Date	02/07/2023		Authorized Effec	tive Date
	Requ Requ	lype ested Effective Date ested End Date	02/07/2023 02/22/2023		Authorized Effec Authorized I	tive Date End Date
	Requ Requ	lype lested Effective Date	02/07/2023 02/22/2023		Authorized Effec Authorized I	tive Date
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	Requ Requ	lype lested Effective Date ested End Date lequested Days ator Dependent	02/07/2023 02/22/2023 15 No		Authorized Effec Authorized I	tive Date End Date zed Days 0 NIPPV No
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- 11. Scroll to the bottom of the panel. Click the **Re-review** button in the bottom right corner. The **Extension Detail** panel will be displayed.
 - Note: Only the finalized, most recent extension will display the Re-review button.
- 12. Set the **Re-review Indicator** to **YES**.
- 13. Click the **Update** button in the bottom right corner.

>	Inquire/Mair	ntain PAS Reque	st			?
	PAS In	nformation	Line Items	Extensions	Attachments	
_	Confir	mation				
Li	st of Line	Items				
	Line	ltem		Status		
•	A			APPROVED		
	B			APPROVED		
	List of Ex	tensions				
	Ext#	Date Received	Reg. Eff Da	te / Req. End Date	Req. Days	Status
	00	11/22/2022	11/22/2022 -	- 12/06/2022	14	APPROVED
	01	12/06/2022	12/06/2022	- 12/20/2022	14	APPROVED
	02	12/20/2022	12/20/2022	- 01/04/2023	15	APPROVED
	03	01/04/2023	01/04/2023	- 01/14/2023	10	APPROVED
	04	01/18/2023	01/18/2023	- 01/24/2023	6	APPROVED
	05	01/24/2023	01/24/2023	- 02/07/2023	14	APPROVED
	→ <u>06</u>	02/07/2023	02/07/2023	- 02/22/2023	15	DENIED
						New Item
1.1						
	Extensio	n Detail				
		Ext#	06			
	Re-re	eview Indicator	~		Re-Rev	iew Date
		Status	DENIED			
		Decision Date	02/08/2023			
	Reques	sted Admission	Robab		Authorized Admiss	ion Tuno
		Type			Autorized Autors	ion type
	Requ	ested Effective Date	02/07/2023		Authorized Effect	tive Date
	Requi	ested End Date	02/22/2023		Authorized I	End Date
	· · · ·	equested Days	_			red Days 0
	<u></u>	equested Days	15		Addiona	teu Days V
	Ventila	ator Dependent				NIPPV No
		Tracheotomy				TBI/ABI No
		bstance Abuse			Behavior	al Health No
	lotal Pare	nteral Nutrition	No			
		Reason	0037	ENT ADMISSION IS NO	OT MEDICALLY NECES	SARY, SEE 130
	Co	de/Description	CMR 450.20	J4		
	Cancel Iter	m				Update
<u>C</u>	ancel Servio	<u>se</u>				

Submit the Re-review Request

- 14. Click the **Confirmation** tab. The **Confirmation** panel will be displayed.
- 15. Click the **Submit** button in the bottom right corner. The **Pre-Admission Screening Response** notice will display, indicating the status of the request.

Velcome	Mass.Gov Home State Agencies State Online Service
Inquire/Maintain 742 Reque	
PAS Information	The Items Extensions Attachments
Confirmation	
Confirmation	
You are about to submit a Pre-A	Admission Screening request for Member: Please verify the
nformation below and then click	
PAS Assignment CHRONI	IC DISEASE/REHAB
# of Lines 2	
Facility (
Cancel Service	Submit
/elcome	
Inquire/Maintain PAS Reque	Mass.Gov Home State Agencies State Online Servic est
re-Admission Screening	
Te-Aumission screening	a response
V	athe Bur Administra Constitution and the
You have successfully submitte	ed the Pre-Admission Screening request for
The following DAC another should	
The following PAS humber should	uld be retained for your records.
PAS#	
PAS#	
Note:Please use the PAS humb	ber above for all additional information that is sent separately.
Disclaimer: This PAS number	is for tracking purposes only and does not constitute an approval.
	oport related to this request, please contact Customer Support at 1-800-841-2900.

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