

Guidance for Inpatient PA Templates

I. Before Using the Template(s):

- Verify and Update your computer with the latest Adobe Reader and Java software available. These downloads are available for free at <http://www.adobe.com/products/reader.html> and <http://java.com/en/download/index.jsp> respectively.

II. Upon Opening the Template(s):

- Carefully read any messages found in the header area. The follow message may appear. If so, click the “Options” button to enable the necessary features.

The screenshot shows the Adobe Reader interface with a warning message: "JavaScript is currently disabled and this document uses it for some features. Enabling JavaScript can lead to potential security issues." Below the warning is a form titled "ACUTE AND RTC EXTENSIONS" with the Oklahoma HealthCare Authority logo. The form contains the following fields:

Request Type: [Dropdown]		
Date Submitted: [Text]	Is Medicaid Primary? [Dropdown]	
Provider Name: [Text]	Provider ID w/ Service Loc: [Grid]	
Reviewer Name: [Text]	Reviewer Phone Number: [Text]	
Member Name: [Text]	Member ID: [Grid]	
Attending MD: [Text]	Age and Date of Birth: [Text]	
Custody Status: [Dropdown]	Custodial Agency: [Dropdown]	
Is Member a Native American? [Dropdown]		
Date of Admission (DOA): [Text]	Est. Date of Discharge (EDOD): [Text]	LOS: [Text]

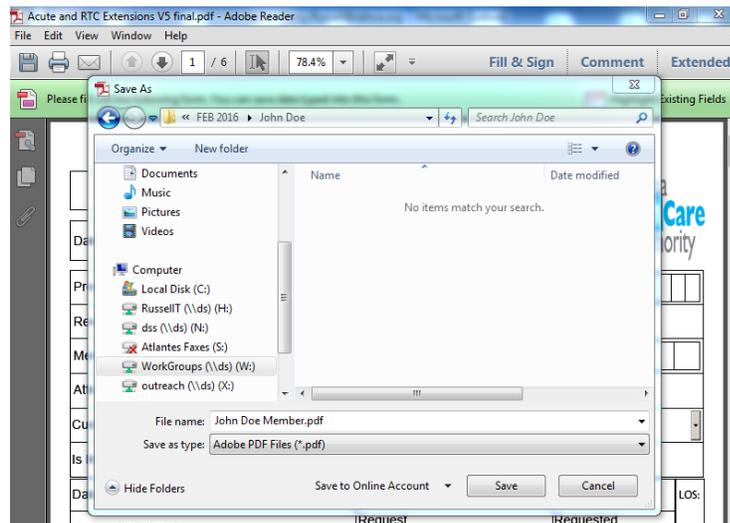
- The form is safe to work in once the user sees a message stating “Please fill out the following form. You can save data typed into this form”.

The screenshot shows the Adobe Reader interface with a green message bar: "Please fill out the following form. You can save data typed into this form." Below the message is the same "ACUTE AND RTC EXTENSIONS" form as shown in the previous screenshot.

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III. Saving the Information Entered into the Template:

- The template is an original that can be used over and over.
- Once there is an attempt to save the information entered into the template, it will prompt the user to save the information as a new document as seen below.



- Type in your document name and click on Save.

IV. Submitting Future Member Updates for Review:

- Use your newly saved file to document the member's clinical for all future PA requests submitted to the reviewer. You are only required to have the member's last PA review and current review when you submit an extension request.

V. Specific Tips for the Acute and RTC Admission Template

- Request Type choices
 - Acute Admission
 - RTC Admission
 - RTC Specialty Admission
 - Reconsideration – Acute Admit
 - Reconsideration – RTC Admit
 - Reconsideration – RTC Specialty Admit
 - Newly Eligible – Acute Admit <=5 Days (if member becomes eligible after 5 days, both Admission template and the Extension template for clinical for day 6 and beyond must be submitted at the same time)
 - Newly Eligible – RTC Admit <=7 Days (if member becomes eligible after 7 days, must also submit PA Extension template for day 8 and beyond)

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V. Specific Tips for the Acute and RTC Admission Template (cont.)

- Is Medicaid Primary - If answer is “NO” enter primary insurer’s name in space below Custodial Agency by deleting the default text.
- Reviewer Phone Number - Enter the area code and phone in the field using all digits and no spaces. Field will auto format.
- Est LOS (days between Date of Admit to Est Date of Discharge) - This is an auto calculated field and cannot be changed.
- REQ Days (days between Requested Start Date to Requested End Date) - This is an auto calculated field and cannot be changed.
- Delete Empty Rows (warning cannot undo this action) – Available for use with the Add Diagnoses section only. Pushing the button will delete the last inserted row.

VI. Specific Tips for the Acute and RTC Extension Template

- Request Type choices
 - Acute Extension
 - RTC Extension
 - RTC Specialty Extension
 - Reconsideration
 - Newly Eligible – Acute Admit ≤ 5 Days if member becomes eligible after 5 days, must also submit PA Extension template for day 6 and beyond)
 - Newly Eligible – RTC Admit ≤ 7 Days (if member becomes eligible after 7 days, must also submit PA Extension template for day 8 and beyond)
- Is Medicaid Primary – If no, document primary insurer’s name in blank below Custodial Agency.
- Reviewer Phone Number – Enter the area code and phone in the field using all digits and no spaces. Field will auto format.
- Requested Days – Days between Request Start Date and Request End Date. This is an auto calculated field and cannot be changed.
- LOS – Days between Date of Admission and Request Start Date. This is an auto calculated field and cannot be changed.
- Delete Accidental Empty Rows (warning: cannot undo this action)
 - Available for use with the Reserve and the Diagnoses fields only.
 - Enables user to delete the LAST row(s) that was accidentally added.

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VI. Specific Tips for the Acute and RTC Extension Template (cont.)

- Reserve
 - Please do not delete any clinical information in this field while the member remains inpatient.
- Enter Request Start Date – Use the same date that was entered for the PA Request Start Date.
- Delete Oldest Entry (warning: cannot undo this action)
 - Available for use with fields located in the Discharge Planning field and the fields located in the CURRENT CLINICAL section.
 - Enables user to delete the OLDEST Enter Request Start Date. OHCA only requires the last review and the current review to be documented on the request.