

Maryland Medicaid - Traumatic Brain Injury Authorization Requests

Table of Contents

Page Contents

- Incedo Provider Portal Navigation
- Entering Initial Authorization for <u>TBI</u>
- After the Submission

Summary

This article provides steps to request an authorization for Traumatic Brain Injuries (TBI).

Incedo Provider Portal

Follow the steps below to request authorization for Traumatic Brain Injuries.

Step	Action
1	Log in to the Incedo Provider Portal using the login received for Provider Type 86: Traumatic Brain Injury Waiver. Logging in with these credentials will allow for TBI requests.
2	After logging in, the Dashboard will appear. The top of the screen will show a series of menu options.

Back to top

	To request authorization, click on the Membership tab and select Search from the drop-down.
	Authorization ▼ 幸 Claims ▼ BY File Transfer ▼ La ClearView BI PT86 Q Search Summary
	5 Forms 9 Eligibility <u>Claims</u>
	s page, click on the <u>Claims</u> hyperlink.
	Note : If there are previously submitted authorizations, the Authorization tab can be used to review the authorizations for a participant. Click on the drop-down next to Authorization and choose Requests . The Claims tab can be used to view submitted claims.
3	A search can be conducted using the following:Policy Number/Medicaid ID
	 Last name, first name, and date of birth (DOB)
4	The participant appears in the Results tab. Double click on the First Name to expand the screen and add additional details.
5	When the Membership Summary appears, verify the participant is active, including effective and end dates. Also verify the participant has Brain Injury listed in the Insurer column of the Insurances tab.
	Alert Insurer COB Rank Policy Number Date From Date To Status Plan Group I 96 Brain Injury Unspecified TBI6857889 1/1/2020 12/31/2099 Active Brain Injury Image: Status Status Plan Group Image: Status Status Plan Group Image: Status Image: Status Plan Group Image: Status Flan Group Image: Status Flan Group Image: Status Flan Flan Group Image: Status Flan Flan
6	Under the Membership tab, select Forms to view forms that have been created for the participant, or add forms. The Brain Injury related forms are located under Case Management. There is also an option to Filter Forms .

	Members	hip 👻 🕂 Au	ıthorizatio		
	Q Search				
	🖻 Summar	у			
	Forms				
	1 ⑦ Eligibilit	У	1		
	E € ▲+ Add Me	ember			
	Incedo as	inclair, Alex (114) (01/01/1956)			
	🕷 📑 Export/Print 📑 Sum	hmary			
	Filter Forms or Forms for Sinclair, Alex (114) (01)	/01/1956)			
	Category - Form Type Clinical - Case Management	Form Name Traumatic Brain Injury.(TBI).	Form Status	MULTIPLE INS	
	Forms				
	 Clinical 1915i ABA Utilization Manage Eligibility Appeal Assessments Case Management Case Management 	ement t sent Referral (For MCO-Medi	cal Case Manager	ent Only)	
7	If needed, upload on the icon shown computer files to I	additional docur below at the bo ocate the file or	mentation t ottom of the drag and d	o the participa Member Sui rop within the	int's record by clicking nmary screen. Browse File box. Type in a

Document Type				
Showing 0 to 0 of 0 entries				
•				
Attachment			×	
Browse Files				
File:				
File:	Cr Drag It Here.			
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Entering Initial Authorization for TBI

Back to top

Follow the steps below to enter an Initial Authorization (Pre-Certification) in the Incedo Provider Portal.

Step	Action
1	Under the Authorization tab drop-down, choose Request Entry.
2	On the Select Request Criteria tab, under the Request Type drop-down, choose Pre-cert .

3	Enter today's date (the date the submission is being entered) for the Submission Date (not the treatment date).						
4	Under the Priority drop-down choose Standard .						
5	Under the Specify Service Type locate the correct service location.						
6	Enter the actual treatment date in the Effective Date field.						
7	Under the Insurance drop	o-down, choose the participant's primary insurance.					
8	Under the Authorization I	Plan drop-down, choose Bl Waiver (365).					
9	Check the boxes next to the table in Incedo. Checked s displays available service	ne Service(s) to include in the request in the Service services will be highlighted in yellow. The table below codes and descriptions of each.					
	Code	Description					
		Traumatic Brain Injury					
	W0037	Residential habilitation level 1 (per day)					
	W0038	Residential habilitation level 2 (per day)					
	W0039 Residential habilitation level 3 (per day)						
	W0054 Day habilitation Level 1 (per day)						
	W0055	Day habilitation Level 2 (per day)					
	W0056	Day habilitation Level 3 (per day)					
		Supported Employment					
	W0057	Supported Employment Level 1 (per day)					
	W0058	Supported Employment Level 2 (per day)					
	W0059	Supported Employment Level 3 (per day)					
10	Oliale an Next						
10	Click on Next.	faulte tab. Complete the Brain Injury Waiver Form by					
11	On the Define Service Defaults tab, Complete the Brain Injury Waiver Form by clicking on Add Form .						
	Service Defaults						
	Default service dates to:	Include information from the corm:					
	Service Start Date:* Service End Date:* 02/17/2020 02/15/2021	Maximum allowed duration is: 365 Clinical form - Assessme					
	02/17/2020 02/15/2021 365 Add Form Edit Form						
	Attached Documentation						

12	Under Diagnosis click on the Plus Symbol to select a diagnosis.
12	Enter discharge information: Discharge Date: Discharge Reasi /
	Link Service Reguest to episode: Episode Diagnosis Lookup × Search Results Diagnosis Results Diagnosis Results
	ID - Axis Category Description 86089 Z87.828 Factors influenc hith status & contact Personal history of oth
	86088 Z87.821 Factors influenc hlth status & contact Personal history of retained foreign body fully re 86087 Z87.820 Factors influenc hlth status & contact Personal history of traumatic brain injury
	I ← << Page 1 of 1 →> → 10 ▼ View 1 - 3 of 3
	Search Reset Cancel
13	On the Update Service tab, adjust the units as needed for the service showing in
	adjusting, click Next to be brought to the next service. Once all services are
	reviewed and updated, the Next button will bring the user to the Review tab.
14	On the Review Request Summary tab review the revised unit and click on Process to submit the authorization for review.

After the Submission

TBI Waiver services are authorized and approved by the BHA's Office of Older Adults and Long-Term Services and Supports. When the authorization is complete, BHA is sent an automated notification that an authorization request has been submitted.

Once the authorization is reviewed and processed by BHA, the status will be updated. To view the status of authorizations, access the **Authorization** tab and choose **Requests**. Locate the request to check the status.

Back to top

Once approved, the status will reflect the approval and an **Authorization #** will be assigned. When submitting claims for the authorization, use the **SR#** on the claim.

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O Ser	iee Deque	***								
🔲 ID	SR ID	SR Auth # Aut	h Approval #	Auth Status	Provider Site	Phone	Procedure	Start Date	End Date	Units
20	118	A20202612994 2020	000299281	Approved	ClearView BI PT86 - 4987 PT86 Way, ROCKVILLE, MD 208500000 (In Network)	555-555-5555	W0056 - BI-Day Habili-W0056-Day habilitation Level 3 (per day)	2/16/2020	2/14/2021	260
44	25	A20202612877		In Presso	ClearView BI PT86 - 4987 PT86 Way, ROCKVILLE, MD 208500000 (In Network)	555-555-5555	W0056 - BI-Day Habili-W0056-Day habilitation Level 3 (per day)	1/21/2020	1/19/2021	260
0 42	24	400000040070		i	OL- 36- DI DTAC - 4007 DTAC MA- DOOLONILLE MD 300500000 /- NAMADA		WAAPPE DE DU LIEUR WAAPPE DE LEERSTREET HEET DIE AND	4/24/2020	4/40/2024	200

Revision History

Date	Author	Activity
03/19/20	SKS/MK	New.