

Modification vs Correction for BA Services

Submitting a Modification:

- You can only submit a modification on a review that already has been approved.
- If the review is still in process and a correction/change needs to be made, you need to cancel the review and resubmit correctly.
- Modification requests are required when:
 - 1. Increasing the # units
 - 2. Requesting a new service code
 - 3. Reallocating units
- If you did not use all the units during the certification period, you do not need to modify the request. You should not bill for any services that were not rendered.
- You need to have the PA# for the initial request that was submitted.
- ▶ Do not submit a modification when the certification status of the rendering provider has changed. Provider level requests are made on the basis of medical necessity at the time of the request.

Requesting a New Service Code and Reallocation of units on the same Review:

- If you need to reallocate units **and** request a new service code, you need to submit a modification request.
 - Reallocation of units are considered changes in level of service and must meet medical necessity criteria and should be submitted <u>with</u> an updated behavior plan.
 - -When you enter the request enter a note in the summary tab explaining the reallocation of units.

Appropriate submission for a modification:

Case was submitted for BA Service Code H2014-100 units and Service Code H2012-50 units from 6/1-6/30/18.

- ▶ Need to increase the units on H2012, to 150 units.
- You only enter the additional 100 units on the modification request

Appropriate submission for a modification:

Case was submitted for BA Service Code H2014-100 units and Service Code H2012-50 units from 6/1-6/30/18.

- You need to add another service code of H2019 for 75 units
- You only enter the new Service code of H2019 on the modification request

Inappropriate submission for a modification:



Case was submitted for BA Service Code H2014-300 units and Service Code H2019-25 units from 6/1-6/30/18. Your RBT-H2014 certification status has changed to BCaBA H2012 and you submit a modification to add the certification change.

- Continue with the current service code authorization through the end of the treatment period (6/30/18).
- You do not need to modify your current authorization to reflect a change in certification status.
- ▶ All modification request must meet medical necessity criteria.

Submitting a Correction:

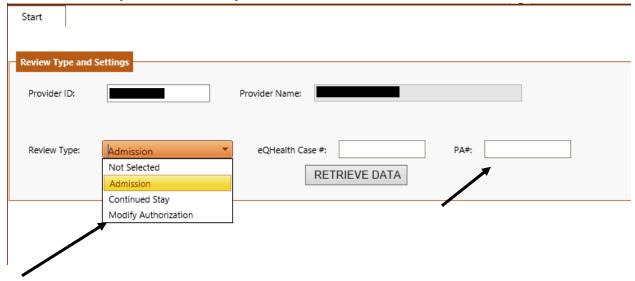
You can request a correction via a phone call to Customer Service or by entering an Online Helpline ticket in eQSuite®. *Reminder to give an explanation for the change*.

- ▶ If you need to change/shift dates on an already approved request.

 Example: H0032 with an authorized date span of 1/1/19-1/30/19 you can request to shift the dates to 1/31/19-3/1/19
- If you need to remove a modifier.
- If you need to add a discharge date to a review.

Entering a Modification in eQSuite®

Click on "Create New Review" your review type will be "Modify Authorization" and enter the PA# for the case you want to modify. Click "Retrieve Data"



The information from the initial request will automatically display on the tab.

Once the modification has been successfully submitted the review completion timeframe is 3 business days.



NOTE: We cannot change a Provider Medicaid ID # on a review. If the review was submitted under the incorrect Provider ID you will need to put in a request to cancel the review and you will need to resubmit.

