



Technical Assistance for Providers Submitting Prior Authorization Requests via the MITS Web Portal

The Medicaid Information Technology System (MITS) went live on August 1, 2011. Since then, Medicaid providers are required to submit electronic prior authorization requests. This information release was developed to assist providers with the new electronic process for submitting prior authorization requests via the MITS Web Portal.

Note: *Before you log on to MITS, make sure your pop-up blocker is turned off.* This can be done in Internet Explorer: click “tools,” select “pop-up blocker,” and turn it “off.” You should routinely check this setting because a new browser session can reactivate the pop-up blocker.

Base Information Panel

1. The “*submitting provider*” is the **account holder** unless you are a sole practitioner, in which case you are the “*servicing provider*” If the “*submitting provider*” is a group, the “*servicing provider*” must enter the servicing provider’s NPI when completing the PA request (not the group NPI).
2. All fields with an asterisk must be completed (some additional fields may be required depending upon the submission).
3. Select assignment.
4. **Prior Authorization** is the “authorization” type selection for most requests.

Diagnosis Code Panel

If a diagnosis code is not required, check the next button at the bottom of the submission screen. If you choose “add,” the system will not let you respond without entering a diagnosis. If you click the previous button and then the next button twice, you will bypass the diagnosis panel and move to the line item panel.

Line Item Panel

Enter all requested service lines. **All required fields must be completed** for each process or Healthcare Common Procedure Coding System (HCPCS) code entered.

Provider Notes Panel

This panel is optional. Use it **only if something significant is required to obtain approval** that is not noted elsewhere.

Attachments Panel

1. Select the **type of document** you intend to mail or upload from the drop-down menu.
2. Then select the **type of transmission** (mail or upload) from the next drop-down menu.
3. Provide a brief **description** of the document or material you are mailing or uploading.

Attachments Panel cont.

Note: In order to **upload** a document or get the Electronic Document Management System (EDMS) cover sheet option for mailing (as well as the option to call up a PDF file with the post office boxes for mailing), click on the lines you have previously entered on this panel. You must click each line to indicate how you will transmit the documentation. Once complete, select **save** to finish and **submit** the request. If the pop-up blocker is not turned off, you will not get the browser panel to locate electronic documents to upload.

Miscellaneous Information

Pending Review: Prior Authorization requests post as **pending review** when:

1. The PA is initially submitted.
2. The PA is awaiting additional information. **You must open the line item to see what additional information is needed.**

When requested services/items are approved at the **maximum allowable**, MITS will post the item approved at \$0.00. However, when billing, the line item will pay at the max allowable.

Workaround for Modifier Issues: ODJFS is aware of modifier issues in MITS. Until they are resolved, do not use modifiers in the provided field. Simply indicate the modifier (i.e., left or right) in the **provider note field**.

Making Changes to a PA. You can make changes to a requested PA **until** the PA is under review by ODJFS. If you must make changes after ODJFS has begun to review the request, you must either:

1. End the associated PA number by choosing the “cancel” option, and submit a new PA.
2. Call the PA Unit at (614) 466-6734 if a determination has been made.

Tips for Dental Providers

1. Include the “*servicing dentist’s*” NPI number in the servicing provider field, not the **group** NPI number.
2. **Use a zero (0) as a placeholder** when listing tooth numbers 1 through 9 (for example, 01, 02, 03, etc.).
3. **Attachments and Supporting Documentation:**
 - a. You **must upload a note** stating no X-rays are required even if the dental PA request has no attachments. The uploaded note will push the request to the pending review queue.
 - b. It is not necessary to **upload** an attachment when **mailing** an attachment. However, print the EDMS cover sheet and include it with the mailed documents. When completing the EDMS cover sheet, be sure to fill all required fields:
 - i. Name, date, number of pages, phone;
 - ii. Document type (for example: prior authorization)
 - iii. Subcategories (for example, dental)
 - iv. Index Field and Values (recipient ID, prior authorization number, NPI).
 - c. Whether uploading or mailing attachments. Please include **the method used** to submit the attachment in the provider notes. (For example, the attachment(s) were uploaded, mailed or not required).

Keep up to date with MITS information at <http://jfs.ohio.gov/mits/index.stm>.