



# **ChoicePA Registration Instructions**

**July 2014**

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**Prior Authorization of Outpatient Specialized Therapies  
North Carolina Division of Medical Assistance**

## Introduction

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The Carolinas Center for Medical Excellence (CCME) conducts prior authorization (PA) reviews for the North Carolina Division of Medical Assistance (DMA) for outpatient specialized therapy treatment. PA is needed for treatment visits when provided in all settings except hospital/rehabilitation inpatient settings or when provided by a Local Education Agency following the Individualized Education Program process.

Prior Authorization is required for all Health Choice and Medicaid beneficiaries except for those who are also Medicare beneficiaries. Outpatient specialized therapies include:

- Audiology
- Occupational Therapy
- Physical Therapy
- Respiratory Therapy
- Speech Language Pathology

Additional information about outpatient specialized therapies can be found on the DMA website and in Clinical Coverage Policies 10A through 10D: <http://www.ncdhhs.gov/dma/mp/>.

DMA requires electronic submission of PA requests through CCME's ChoicePA® web portal. Using ChoicePA, providers can also:

- Track the status of requests
- Respond to requests for additional information
- View/print notification letters

For additional help, please contact CCME via:

- Telephone – 800-228-3365
- Email – [priorauth@thecarolinascenter.org](mailto:priorauth@thecarolinascenter.org)

# Setting up an Account/Registration

## I. USER ROLES AND PERMISSIONS

You must register as either a **ChoicePA Administrator (Admin)** or a **User**. The ChoicePA Admin is responsible for managing other users within the ChoicePA website, i.e., assigning user permissions and inactivating accounts. This person does not need to be an administrator in the organization.

**Each provider (NPI) must have at least one registered ChoicePA Admin before other users may register. ChoicePA allows a maximum of two Admin accounts per NPI.**

In addition to the roles of **Admin** and **User**, ChoicePA allows a third role of **Supervisor**. An Admin may promote a user to the role of Supervisor or Admin. A Supervisor can also manage users and may promote a user to the role of Supervisor.

Users' access to requests will be limited to those they create, but they may be granted additional permissions by an Admin or Supervisor to view and access requests created by other users associated with the same NPI. Functions vary by user role as represented in the following table:

	User	Supervisor	Admin
Create Requests <u>and</u> Edit, View, Submit and/or Delete these requests	✓	✓	✓
Edit/View/Submit/Delete requests created for your NPI by other users	✓ Based on permissions*	✓ Based on permissions*	✓ All requests
Update account/contact information	✓	✓	✓
Change password and security question	✓	✓	✓
Associate additional provider with account	✓	✓	✓
Grant permission for enhanced access (assign Service Types)	✗	✓	✓
“Promote” user/supervisor	✗	✗	✓
Create/edit the provider PIN	✗	✗	✓
Inactivate user accounts	✗	✓	✓

 \*Permissions: Users will always have access to requests they initiated, regardless of the therapy type. For access to requests created by other users, enhanced permissions are needed. Supervisors and Admins can permit other users to see all requests for specified therapies (Service Type), regardless of who created the request. For example, a user granted access to Physical Therapy (PT) will have access to all PT requests for the specific NPI number in addition to any request they initiated.

 Supervisors can only grant access to therapy cases to which they have access.

## II. ADMINISTRATOR ACCOUNT (ADMIN)

Before you begin, you will need:

- Provider NPI
- Provider Tax ID
- Valid taxonomy and ZIP code for NPI
- Your old CCME generated PIN (if previously registered with CCME)

1. Click the “**Create an account!**” link.

**ChoicePA**  
north carolina

**LOG IN**

Username

Password

Show Password

**Log In**

Forgot Username or Password?  
Not registered? **Create an account!**

**Welcome to ChoicePA!**

CCME and the Division of Medical Assistance (DMA) have developed a secure electronic submission process as the required format for submitting Prior Authorization requests. The web based tool additionally allows providers to:

- ✓ Track status of requests
- ✓ View and print authorization notices
- ✓ Respond to CCME with additional information
- ✓ View instructional and training materials

📁 Providers may designate any personnel as a ChoicePA Admin, but each NPI is limited to two Admins. At least one Admin must be registered before other users may register.

⚠️ For enhanced security, providers are advised to set up two Admin accounts even for single practitioner entities.

2. Enter your Provider NPI, select Administrator under Account Type. Then click on the “**Begin Registration**” button.

📁 You will be alerted if the NPI cannot be validated.

**Registration**

\* Required Field

\* Provider NPI

\* Account Type  
 User  
 Administrator

**Begin Registration** **Cancel**

3. On the next page, enter the needed information for the “Provider, Contact, and User Account Information” sections.

\* Required Field

[Registration Instructions](#)

**Provider Information**

\* Provider Tax ID

\* Former Provider PIN

**Service Location**

\* Taxonomy

\* ZIP (5 digits)

**Contact Information**

\* First Name  \* Last Name

\* Job Title  \* Phone  x

\* Email  Fax

**User Account**

\* Username 5 - 12 characters

\* Password minimum 6 characters

Show Password

\* Confirm Password

Show Password

\* Security Question

\* Answer to Security Question

**Provider PIN**

-  Required fields are marked with a red asterisk\*.
-  An email address can be associated with only one account, but you may associate multiple NPIs with a single account. This allows individuals working for multiple providers with different NPIs to maintain a single username and password for log in.
-  You will be alerted if the username already exists in ChoicePA and must select another to create your account. (Usernames will display in ChoicePA reports.)

If prompted, select the option that best describes the professional makeup of your **Provider Group**.

\* Provider group is comprised of (select most applicable) **Required**

NO physical therapists, occupational therapists, or speech and language pathologists

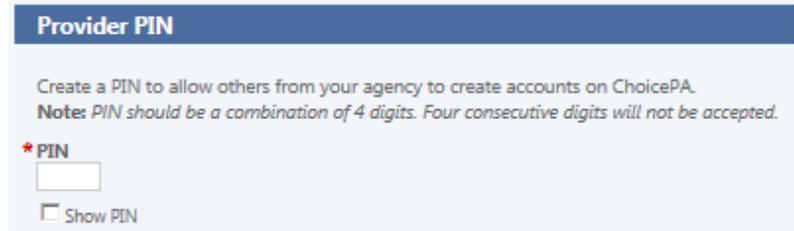
ONLY physical therapists, occupational therapists, or speech and language pathologists

COMBINATION of physical therapists, occupational therapists, or speech and language pathologists **AND** at least one physician

4. Create a Provider Identification Number (PIN).

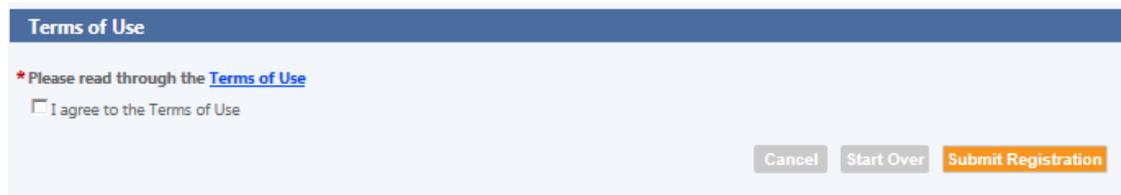
📁 The Admin must share this PIN with other users for their successful registration.

📁 Only the first Admin to register will create a PIN. The second Admin to register can view the PIN after logging in to ChoicePA; either Admin can change the provider PIN.



⚠️ *For security reasons, the PIN displays as asterisks (\*\*\*\*). Click “Show PIN” to view the characters entered.*

5. Review the “Terms of Use” and mark the box to indicate agreement with the terms. Select the “**Submit Registration**” button.



📁 You may also cancel the registration or start the registration process over again.

**Congratulations, you have now set up your Admin account and can log in to ChoicePA.**

### III. USER ACCOUNT

Before you begin, you will need: NPI and PIN (provided by designated ChoicePA Admin).

1. Click the “**Create an account!**” link.

**LOG IN**

Username

Password

Show Password

**Log In**

Forgot Username or Password?  
Not registered? **Create an account!**

## Welcome to ChoicePA!

CCME and the Division of Medical Assistance (DMA) have developed a secure electronic submission process as the required format for submitting Prior Authorization requests. The web based tool additionally allows providers to:

- ✓ Track status of requests
- ✓ View and print authorization notices
- ✓ Respond to CCME with additional information
- ✓ View instructional and training materials

2. Enter your Provider NPI, select User under Account Type. Then select the **“Begin Registration”** button.

## Registration

\* Required Field

\* Provider NPI

\* Account Type  
 User  
 Administrator

**Begin Registration** Cancel

 **Note:** You will be alerted if the NPI cannot be validated.

3. On the next page, enter the PIN and complete **“Contact Information”** and **“User Account”** sections.

## Registration

*\* Required Field*

### Provider PIN

*\* PIN*  
  
 Show PIN

### Contact Information

*\* First Name*  *\* Last Name*

*\* Job Title*  *\* Phone*  x

*\* Email*  *\* Fax*

### User Account

*\* Username* 5 - 12 characters

*\* Password* minimum 6 characters  
  
 Show Password

*\* Confirm Password*  
  
 Show Password

*\* Security Question*

*\* Answer to Security Question*

 For security reasons, the PIN is displayed as asterisks (\*\*\*\*). Click “Show PIN” to view the characters entered.

4. Review the “Terms of Use” and mark the box to indicate agreement with the terms. Select the “**Submit Registration**” button.

### Terms of Use

*\* Please read through the [Terms of Use](#)*

I agree to the Terms of Use

**Congratulations, you have now set up your User account and can log in to ChoicePA.**