FORWARDHEALTH
STAT-PA SYSTEM INSTRUCTIONS

The ForwardHealth Specialized Transmission Approval Technology-Prior Authorization (STAT-PA) system is an automated voice response system that allows Medicaid-certified providers to receive prior authorization (PA) via telephone rather than by mail or online. Providers answer a series of questions and receive an immediate response of an approved or returned PA.

Providers communicate with the STAT-PA system by entering requested information on a touch-tone telephone keypad or by calling Provider Services. Providers are required to have their provider number to access the STAT-PA system.

The STAT-PA system is available by calling one of the following telephone numbers:
- **Touch-Tone Telephone**
  800-947-1197
  Available 24 hours a day, seven days a week.
- **Provider Services**
  800-947-9627
  Available from 7:00 a.m. to 6:00 p.m., Monday through Friday, excluding state-observed holidays.

REQUIRED INFORMATION
All providers using STAT-PA are required to provide the following information:
- Provider number.
- Practice location ZIP+4 code.
- Member identification number.
- National Drug Code (NDC) or procedure code.
- The appropriate and most-specific *International Classification of Diseases* (ICD) diagnosis code..
- Place of service (POS) code.
- First date of service (DOS).
- Days' supply or total number requested.

Note: When requesting a drug, prescribing provider information is required. Additionally, if a National Provider Identifier (NPI) is entered and the requesting provider is not a retail pharmacy, the taxonomy code is required.

HOW TO USE WISCONSIN STAT-PA
1. Complete the appropriate PA attachment form.
2. Select mode of transmission (touch-tone telephone or Provider Services).

TOUCH-TONE TELEPHONE REQUESTS
To use a touch-tone telephone to submit a PA request:
1. Call 800-947-1197. This connects the provider directly with the STAT-PA system.
2. When the system answers, it will ask a series of questions that providers answer by entering the information on the telephone keypad. The service-specific PA attachments list the information needed in the order it is requested by the STAT-PA system.

Note: When using a touch-tone telephone to enter the NPI, taxonomy code, member ID, NDC or procedure code, the appropriate and most-specific ICD diagnosis code, POS code, requested first DOS, and quantity, always press the pound (#) key to mark the end of the data just entered. The pound (#) key signals the system that the provider has finished entering the data requested and ensures the quickest response from the system.

Providers may be asked to enter alphabetic data, which can be entered by using the asterisk (*) key. For example, a provider is asked to enter a procedure code such as L3216. The first character is an alpha character; therefore, the provider presses the single asterisk (*) key followed by the two digits that indicate the letter. The first digit is the number on the keypad where the letter is located, and the second digit is the position of the letter on that key. For example: Procedure code L3216 should be entered as *53 3 2 1 6.

Alphabet Key:

A = *21	G = *41	M = *61	S = *73	Y = *93
B = *22	H = *42	N = *62	T = *81	Z = *12
C = *23	I = *43	O = *63	U = *82	
D = *31	J = *51	P = *71	V = *83	
E = *32	K = *52	Q = *11	W = *91	
F = *33	L = *53	R = *72	X = *92	

3. Once all data have been entered completely, STAT-PA processes the information, indicates the status of the PA request, and gives providers the chance to finalize, cancel, or change their entered information. Once the PA request is finalized, STAT-PA indicates the PA number and, if approved, the effective dates and authorized number of services.

Once familiar with the STAT-PA system, providers may enter the PA information in the designated order immediately — there is no need to wait for the full voice prompt. Providers may key information at any time, even when the system is processing information. The system automatically proceeds to the next function.

PROVIDER SERVICES REQUESTS

Providers who do not have a touch-tone telephone may call Provider Services at 800-947-9627. The Provider Services correspondent will access STAT-PA and enter the required data requested from the provider.

Provider Services is available to all STAT-PA users. Providers who are experiencing difficulties with the system can select to be transferred to Provider Services for assistance.

DOCUMENTATION INFORMATION

Providers are required to maintain all documentation that supports medical necessity, claim information, and delivery of the approved service(s) in their records for a period not less than five years. Regardless of what STAT-PA method is used, providers will receive a letter by mail indicating the assigned PA number and the STAT-PA decision. Providers with a secure ForwardHealth Portal account will also receive a copy of this letter in their Portal mailbox. This letter should be maintained as a permanent record of the transaction.

Helpful Hints:
*   The provider is given three attempts at each field to correctly enter the requested data. If those attempts are unsuccessful, the provider can select to be transferred to Provider Services for assistance; otherwise, the call will be terminated.
*   Providers are given two attempts to enter data within 10 seconds. If those attempts are unsuccessful, the provider can select to be transferred to Provider Services for assistance; otherwise, the call will be terminated.
*   Providers are allowed 25 PA requests per connection for touch-tone telephone.
*   Providers are allowed up to 25 minutes per connection for touch-tone telephone.
*   The decimal point for diagnosis codes is not required when entering a STAT-PA request by touch-tone telephone; however, all digits of the codes must be entered.
*   The first DOS entered by the provider may be up to 31 calendar days in the future or up to 14 days in the past.
*   Providers who need to end date a PA request due to a change in prescription may do so through STAT-PA if the request was originally submitted through STAT-PA. If a provider needs assistance with the end date process, the provider may select to be transferred to Provider Services for assistance.