eMedNY

Obtaining a DVS for Occupational, Physical and Speech Therapy in ePACES

To obtain a DVS prior authorization in ePACES, click on the 'Initial Request' link on the left side under PA/DVS.

Enter the Client ID in the white text box and click on 'Go'.
After clicking 'Go', the general information tab screen will appear displaying the member's information.

Transaction Type: From the drop down, select 'Non Dental – DVS'.

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Ordering Provider

Enter the provider who ordered this service here. If the ordering provider is a Medicaid provider, enter the information on the left side of the screen. If they are not a Medicaid provider, enter the provider's NPI on the right hand side of the screen.

Use an Existing Provider

Select a Name: If using an existing provider in your support file, you can select the name of the provider from the list, and then click on 'Go'.

OR

Last Name: You can also enter the last name of the provider and click on 'Go'.

OR

Provider Number: You can also enter the provider's MMIS ID and click on 'Go'.

Enter a New Non-Medicaid Provider

NPI: If you are entering a new non-Medicaid provider, you can enter the NPI of the provider here.

eMedNY   **Obtaining a DVS for Occupational, Physical and Speech
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Event Information

Facility Type: Select 'Professional/Dental' if you are a fee-for-service provider. Select 'Institutional' if you are a clinic. If you select Institutional, enter the appropriate facility type by picking from the list by clicking on the box to the right.

Service Type: Select the following service type from the list based on the therapy for which you are obtaining a DVS:

- **PT** - Physical Therapy
- **AD** - Occupational Therapy
- **AF** - Speech Therapy

Release of Information: Select 'Y- The provider has a signed statement permitting medical release of information' from the list.

Service Date: Enter the effective date in the 'From' date field for which this DVS should be valid. The DVS will be valid for use on any date of service between the 'From' service date entered until the end of the state fiscal year, which is March 31.

Scroll to the bottom of the page, and click on 'Next.'

eMedNY   **Obtaining a DVS for Occupational, Physical and Speech
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Prior Approval Items

Service Dates: Since the service date is being entered in the General Information tab, this field can be left blank, or you can enter the 'From' date in this field.

NDC/Proc & Modifiers: Enter the procedure code you are obtaining a DVS for in the top box. The four smaller boxes below are for modifiers. Enter the appropriate modifier in the top left box. The entry of a modifier that corresponds to the type of therapy being requested is mandatory. Valid modifiers are:

- **GN** - Speech Therapy
- **GO** - Occupational Therapy
- **GP** - Physical Therapy

Unit Count Basis Meas.: Enter the appropriate service quantity for the date of service for which you are requesting a DVS.

Line Amount: Leave this field blank.

Once you have entered the client's general information and the service information, the request is ready to be submitted.

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Submitting Requests—Single and Repeated

Requests may be submitted either as a **single** submission for an individual client, or as one of a set of **repeated** submissions for the same client. Repeated submissions retain the client's information in between submissions.

SINGLE REQUESTS
Single requests use the **Submit** button. The function submits the request and clears the entire request form in preparation for submitting a new request for a different client.

Use the Submit button when the next request is for a different client.

REPEATED REQUESTS
Repeated requests use the **Enter Another DVS For This Client** button. The function submits the request, but clears only the service information leaving the client information intact in preparation for submitting another request for the same client. Requests may continue being submitted for the same client for each use of the button.

Use the Enter Another DVS For This Client button when the next request is for the same client.

> **NOTE:** When using the Enter Another DVS For This Client function, if the DVS has a different service type from the previous type (for example, the previous DVS was occupation therapy and this DVS is physical therapy), first click on the General Information Tab to change the Service Type and then enter the Prior Approval Items.

ENDING REPEATED REQUESTS
Repeated requests are ended by using the Submit button instead of the Enter Another DVS For This Client button. Using the Submit button submits the request and clears the entire form so that a new request may be made for a different client.

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PA/DVS Response

To view the response of your DVS prior authorization request, click on 'Responses' on the left side under PA/DVS.

The 'Reviewer ID Number' is the DVS number. An action code of A1 and Response Descriptive text of 'Certified in Total' means the DVS has been approved. If the DVS prior authorization has been rejected, the message will display in the Response Descriptive Text.