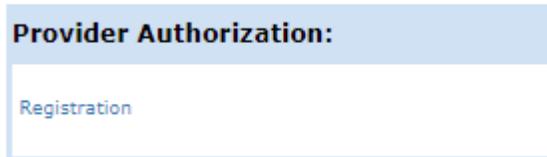# Pediatric Care Network
Electronic Prior Authorization Portal

Thank you for your interest in using the Pediatric Care Network (PCN) Electronic Prior Authorization Portal. This tool allows providers to electronically submit prior authorization requests directly to the Pediatric Care Network. Via the portal providers can also track their prior authorization request and obtain updates regarding its processing.
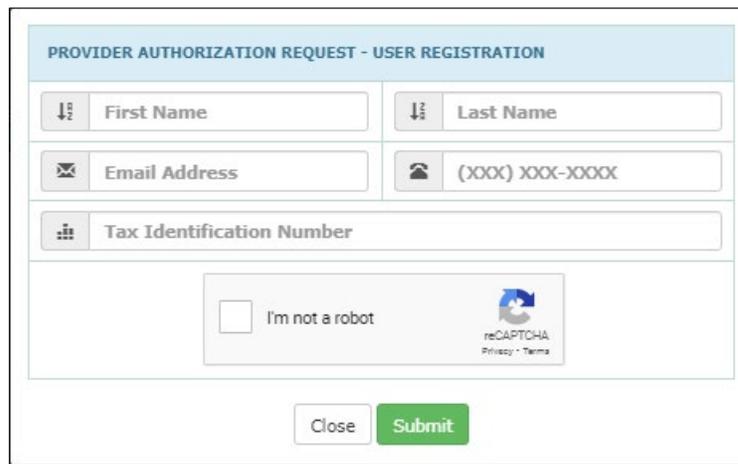
REGISTRATION

- Navigate to: https://www.cmics.org/pcn/Home/Resources
- Select "Registration" under the "Provider Authorization" section

- Each provider representative who will be submitting requests will be required to provide their information. Please note, all provider representatives with the same TIN will have the capability to view, edit, and submit requests on behalf of the provider.

- Upon submission, you should receive a confirmation that PCN has received your registration request. Once approved, you should receive an e-mail confirming your login has been set up.

Navigate to: https://www.cmics.org/pcn
- Select "Provider Sign In"

  ○ Note: the first time you login to this system you will be prompted to set up multi factor authentication to obtain secure access.

Home	About Us	Care Integration	Resources	News	Contact Us	Provider Sign In

- Once logged in, select "Provider Auth Request" under the "Account" heading to be taken to your Provider Authorization Request Landing page.

Home	About Us	Care Integration	Resources	News	Contact Us	Account

NAVIGATING LANDING PAGE

Provider Authorization Request

New Request | Request Extension

Last Name	First Name	DOB	Last Edit Date	Submitted?	In Review?	Authorization Not Created	Completed?	Extension

- From your Provider Authorization Request landing Page you will be able to:
  ○ View all requests submitted that are associated with your TIN
    ■ This landing page will show you if the request has been submitted. It also will allow you to see if it is currently being reviewed by PCN (I.e.- that PCN has accepted the authorization request and is processing) or if an authorization was not created (e.g.- in circumstances where an authorization was not needed).

    ■ You may view the specifics of a request by selecting the eyeball icon 👁

    ■ You may edit any requests that have been started but not yet submitted by selecting the edit icon 🖉

  ○ Submit a new prior authorization request by selecting "New Request"
  ○ Submit an extension of a previously approved request by selecting "Request Extension"
    ■ The ability to request an extension is limited to circumstances where you previously submitted the request via the Electronic Prior Authorization Portal and where you have a valid PCN Authorization number.
    ■ Request for amendments/correction to previously approved authorizations should be called into PCN at 888-670-7261 or faxed to PCN at 888-670-7260

- Creation of a request will take you to an electronic version of the PCN prior authorization sheet.
  - The system will automatically pull in your contact information from registration. Please verify this information remains accurate.
    - Extension requests will pull in applicable fields from your previous request.
  - Most fields are required depending on authorization request type, please verify you are submitting all applicable information. Submitting requests that are illegible or with sections left blank, or requests missing necessary clinical, may delay the review process.
  - To ensure protection of health information, the system will verify member identity against last name, Medicaid ID, and date of birth.
  - Attachments, such as orders and/or clinical documentation, should be attached at the bottom of the sheet.

Section VI -- Attachments	
Attachment Name	Date Added
Choose File No file chosen + Upload	

- Once all applicable fields are completed, and attachments have been uploaded, you can submit the request to PCN by selecting the "Submit" button. If you need more time to work on the request, you may save it for later submission by selecting the "Save" button.

Cancel   Delete   Save   Submit

- Upon submission, you will receive an automated e-mail confirming your request submission. From here you will then receive an e-mail confirming if the request has been turned into an authorization for processing or if the request does not warrant the creation of an authorization. These steps can also be tracked via the Provider Authorization Request landing Page.
- Once your request has been processed, you will receive an initial automated determination alert to your registration e-mail. Any applicable determination letters will be mailed via standard mail.
  - Note: the Provider Authorization Request landing page does not allow for tracking of determinations, if you have not received a determination within applicable time frames please check your e-mail junk box. If unable to locate the determination, please contact PCN at 888-670-7261.

QUESTIONS

- For assistance with the Pediatric Care Network Electronic Prior Authorization Portal, please e-mail ElectronicPA@cmpcn.org.