



Provider Portal Instructions:  
How to Check the Status of Prior Authorization for  
Physician Administered Pharmacy Drug Codes for  
Outpatient Medicaid and Marketplace Members

# Enter username and password



ARKANSAS  
PROVIDER PORTAL

## Provider Login:

Username:

\*

Password:

\*

Log In

[Forgot password?](#)

[Register for an account](#)

The Provider Portal makes it easier for you to work with us 24/7. It has critical information and tools to save your practice time.

- Member & Eligibility Search
- Claims Search, EOP & Submissions
- Prior Authorization Search & Submissions
- PCP Roster & Clinical Practice Registry

### New Provider Setup:

- [Check Enrollment Status](#)

### Step-by-Step Guidance:

- [Register for the Provider Portal](#)
- [Reset Your Password](#)

# Select 'Providers' under the left navigation



## MEMBER SEARCH -

Member Eligibility

Coordination of Benefits

Member File Upload

## CLAIMS +

## MEMBER REPORTS +

## USERS +

## PROVIDERS -

## ASSESSMENTS +

## PROGRESS NOTES +

### Collabor8 Diagnosis Coding Validation and Education Portal

CareSource has partnered with Pulse8 to continue to promote Risk Adjustment education and gap closure efforts for CareSource members. Use the link below to learn more, or to access the Pulse8 portal.

- [Quick Reference Guide](#) for Managing Your CareSource Provider Alerts and Resources
- Access the [Collabor8 Diagnosis' Coding Validation and Education Portal](#)

### Inventory Reduction Update

CareSource continues to deliver operational improvements to our health partners, and we are making progress on addressing reported issues. We are pleased to share our metrics and progress in the [Inventory Reduction Progress and Issue Reporting](#) network notification.

### Mass Claims Adjustments

When CareSource implements a system update or correction that impacts previously adjudicated claims, CareSource will automatically reprocess impacted claims. To ease your administrative burden, it is not necessary to resubmit claims for reprocessing, as that result in a denial as a duplicate claim. Similarly, in these situations, filing an appeal is not necessary either. Your health partner relations specialist will communicate the estimated completion date for Mass Claims Adjustments related to system updates and

## Select 'Prior Authorization and Notifications' under the left navigation

### PROVIDERS

Care Management Referral

Dental Provider Login

File Grievance

Laboratory

Pharmacy

Prior Authorization and Notifications

Provider Documents

Provider Maintenance

### - Inventory Reduction Update

CareSource PASSE continues to deliver operational improvements to our health partners, and we are making progress on addressing reported issues. We are pleased to share our metrics and progress in the [Inventory Reduction Progress and Issues](#) network notification.

### Mass Claims Adjustments

When CareSource PASSE implements a system update or correction that impacts previously adjudicated claims, CareSource PASSE will automatically reprocess impacted claims. To ease your administrative burden, it is not necessary to resubmit claims for reprocessing, as the result in a denial as a duplicate claim. Similarly, in these situations, filing an appeal is not necessary either. Your health partner relations specialist will communicate the estimated completion date for Mass Claims Adjustments in updates and corrections.

### Durable Medical Equipment (DME) Update

CareSource PASSE values your partnership, and as we continue to deliver operational improvements to our health partners, we want to share our recent progress on durable medical equipment (DME) issue. Outstanding DME claims that are paid rather than rental are in the process of being corrected.

### Network Notifications

Stay informed with updates that impact claims, clinical guidelines, Provider Portal functions and more. Visit our Updates & Announcements pages:

- [Medicaid](#)
- [Marketplace](#)
- [Medicare Advantage](#)
- [CareSource MyCare Ohio](#)



# Steps to Check the Status for Outpatient Medicaid and Marketplace Prior Authorizations for Physician Administered Pharmacy Codes

Click on status box (it will highlight in blue)  
For CareSource PASSE, Outpatient Lines of Business go to the words, “click here”  
This will take you to the page to check status for Physician Administered pharmacy codes  
Click this link for CareSource PASSE outpatient requests for Physician Administered/Home infusion pharmacy codes

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Quality Enhancer

Radiology Benefits Manager

State Plan Services Claims

SIM Reports

SESSMENTS +

- [Using Cite AutoAuth Presentation](#)
- [Diagnosis Types and Codes](#)
- [Fax Numbers for Pended PA's](#)
- [Frequently Asked Questions \(FAQs\)](#)
- [Email questions related to Cite AutoAuth](#)

Prior Authorization and Notifications

Medical (Inpatient & Outpatient)

Newborn Delivery Notification

Observation

Status

To check the status of a previously submitted Physician Administered Pharmacy Prior Authorization, [click here](#)

Member Id	Medicaid Id	Member Info	Authorization Number	Facility
CareSource ID <input type="text"/>				
Start of Service Date Range (Maximum 180 days)				
Begin Date	<input type="text"/>		*	
End Date	<input type="text"/>		*	

You have now entered the portal for CareSource PASSE outpatient requests for Physician Administered/Home Infusion Pharmacy codes  
This is ONLY for CareSource PASSE outpatient requests for Physician Administered/Home Infusion Pharmacy codes  
Pick the dropdown called 'View Authorization Pharmacy under Prior Authorization Pharmacy' heading

Prior Authorization Pharmacy

Request Pharmacy PA

View Authorizations Pharmacy

### Pharmacy Authorizations

\*Prior Authorization Request Status for Provider

Nothing selected

Show Search Fields

Prior Authorization Request Status

Show  entries

Search:

DATE SUBMITTED	AUTH#	MEMBER NAME	REQUEST TYPE	MEDICATION NAME	INJECTIBLE DRUG	REQUESTING PROVIDER	SERVICING PROVIDER	STATUS	STATUS REASON	PAYER
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Previous1Next

## Pick provider in the dropdown Prior Authorization Request Status

Pharmacy Authorizations

Prior Authorization Pharmacy

Request Pharmacy PA

View Authorizations Pharmacy

\*Prior Authorization Request Status for Provider

Show Search Fields

Prior Authorization Request Status 24

Show  entries

Search:

A user will only be able to view requests for authorizations  
The User ID logged into the system is either Submitting, Requesting or Servicing provider  
Click blue Authorization number to view details of the authorization

TO VIEW DETAILS OF THE AUTHORIZATION, CLICK AUTH NUMBER

Prior Authorization Request

Pharmacy

Request Pharmacy PA

View Authorizations Pharmacy

Pharmacy Authorizations

\*Prior Authorization Request Status for Provider

Show Search Fields

Prior Authorization Request Status

14

Show  entries

Search:

DATE SUBMITTED	MEMBER NAME	REQUEST TYPE	MEDICATION NAME	INJECTIBLE DRUG	REQUESTING PROVIDER	SERVICING PROVIDER	STATUS	STATUS REASON	PA#
07-07-2021	<a href="#">Candy Mark</a>	Prior Authorization Medical Benefit	Unknown Drug Name	J1745-injection efalizumab, 10 mg			<div>Approved</div>	<div>Medical necessity</div>	CareSource Medicaid plans
07-07-2021		Prior Authorization Medical Benefit		0011A-immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) Coronavirus disease (COVID-19) vaccine, mRNA, LNP, spike protein, preservative free, 100 mcg/0.5mL dosage: first dose			<div>In Progress</div>	<div>In Progress</div>	CareSource Medicaid plans
07-07-2021	<a href="#">Candy Mark</a>	Prior Authorization Medical Benefit		0585-injection, quadricumumoxon, 1 unit			<div>In Progress</div>	<div>In Progress</div>	CareSource Medicaid plans
07-07-2021	<a href="#">Candy Mark</a>	Prior Authorization Medical Benefit		03490-unclassified drug			<div>In Progress</div>	<div>In Progress</div>	CareSource Medicaid plans
07-07-2021	<a href="#">Candy Mark</a>	Prior Authorization Medical Benefit		J1745-injection, efalizumab, excludes bimezanar, 10 mg			<div>In Progress</div>	<div>In Progress</div>	CareSource Medicaid plans

You can scroll down through the member, provider, drug, diagnosis, documentation and communication sections for review  
You can also review or print the provider and members determination letters by clicking on the link

Pharmacy Auth Details

Supporting Documents

Uploaded Documents

DOCUMENT NAME	TYPE
<a href="#">Osteo.docx</a>	Clinical Attachment
<a href="#">Osteo.docx</a>	Clinical Attachment

Correspondence

Correspondence

NAME	CORRESPONDENCE TYPE	RECEIVED DATE
<a href="#">Servicing Provider PA Approval Letter</a>		07-07-2021 08:33:41
<a href="#">Requesting Provider PA Approval Letter</a>		07-07-2021 10:37:52
<a href="#">Requesting Provider PA Approval Letter</a>		07-07-2021 08:33:41
<a href="#">Member PA Approval Letter</a>		07-07-2021 08:33:40

Print

Cancel