



## **SUBMITTING A PRIOR AUTHORIZATION REQUEST VIA Delaware Medical Assistance Program (DMAP) WEBSITE:**

- Go to the DMAP website: [www.dmap.state.de.us](http://www.dmap.state.de.us)
- From the homepage, select the link for *Interactive Services*.
- Log in using your Web User ID and Web Password.
  - If not enrolled yet, select the *Register* link on the right of the User ID box. To register, you will need your NPI number, taxonomy and PIN number.
  - Please contact Provider Relations if you do not have any of this information
    - 800-999-3371, press 0 then option 2
- Once logged in, click on the *DUR+ PA Criteria* link either in the middle of the page or in the gray box on the left-hand side.
- Enter the client's DMAP ID number (MID) and click Validate MID. When the information is brought up, please verify that it is correct.
- Select *Retrieve Criteria*; you will be presented with a list of all DMAP prior authorization request forms.
- Click on the **NAME** of the request form. (Please note: if you click on the magnifying glass, it will only show you the information on the form, you will not be able to enter any information.)
- All boxes with a red star next to them *must* be filled in for a successful submission.
  - For the diagnosis code, *only* numbers will be accepted in this field, no periods or other characters.
- For medications needing lab values, the actual results do not need to be faxed separately, just typing in the values and date obtained are required.
- For some request forms, you will need to select a medication and dosing from a drop-down box. If an alternative drug or dosing is needed but not listed, select one from the drop-down box and enter the actual requested medication, strength and dosing in the Additional Comments box at the bottom.

- Some requests require additional documentation or paperwork (e.g. sleep study or pain assessment), which must be faxed separately before authorization will be granted. (Fax: 302-454-0224)
- Once all information is entered, click Save Form at the bottom of the page.
  - Any errors will appear in red at the top of the page.
- Once saved, you will be brought back to the list of request forms. A check mark in the box next to the name of the form indicates which forms have been successfully completed.
- You can then complete another form if needed or select *Submit* to submit the request.
  - Please note: if you do not click on Submit, you will have only saved the completed form and we will not receive it.
- After request is submitted, you will be brought back to the original page with the client information and a note will appear “Request has been submitted. Click Reset button if you wish to continue with a new request.”
  - There will be a control number in that field, this is a reference number for the request submitted. Please note this for your records or to later check status of the request. You can also use this to save a request and come back later to finish it.
- Any questions or problems, please contact Pharmacy Services at 800-999-3371, press 0, option