

**Canceling Submitted Authorizations using the Cancel Authorization Button** This Quick Reference Guide (QRG) is intended for Providers who utilize the DEEOIC and DFEC programs. It provides step-by-step instructions on how to cancel the submitted authorizations using the new Cancel Authorization button.

 To select the authorization you want to cancel, within the Authorization Request List page select the checkbox beside the desired Auth Request #.

O Close	O Add Ne	Add New Request 🗮 Get New Ta			Initiate Correction	O Car	ncel Authoria	zation			
	uthorizati	ion Reque	st List								
Filter By :			~]			And		~			
		~			Program		~ Sub	mitted In	ast 1 M	lonth 🗸 A	And Status
		Claimant	OWCP	Status	Auth Type		Last	Submitted	Level	Organizatio	on Distri
	Auth Request # ▲▼	Case ID	Provider ID	A V	A.4		Updated ▲ ▼	Date	**	**	Offic
	Request #	Case ID	**		A.4.		A.A.		**	OWCP	

2. Select **Cancel Authorization** located at the top of the page.

O Close	Add No	ew Request	📰 Get New	Task 📰	nitiate Correction	<b>O</b> Ca						
	Authorizat	ion Reque	est List									
Filter	By :		~]			And		~				
		~			Program		~ Sub	mitted In	ast 1 M	lonth v An	d Statu	
	Auth Request #	Claimant Case ID	OWCP Provider ID	Status ▲ ▼	Auth Type ▲▼		Last Updated ▲▼	Submitted Date ▲▼	Level	Organization ▲ ▼	Distr Offic	
											FECA	
	101018995			Approved	Surgical Package		05/16/2022	05/12/2022	3	OWCP	Nation Office	



## **Cancel the Request**

If the selected authorization is eligible for cancellation, the system will show a dialog pop-up message to confirm the **Cancel Authorization** action.

- 3. Select **OK** or **Cancel**, depending on how you want to proceed.
  - To proceed with the cancellation, select OK. The system will update the authorization status and all corresponding service lines as Cancelled.
  - To cancel the request, select Cancel. The system will ignore the cancel request.

eC H	ams" Cev	My Inbox	· Prov	vider -		nbp.com say			ted under this a								
٢	OHCE .	L.	P	rofile: D		want to conti		reques	ted under this a	utnonzat	ion.			@ Ex	ternal Links	<b>9</b> H	leip
-> N	lyinbox )Au	horization F	Request List						ОК	G	ancel						
<b>O</b> Clo	se O Add N	lew Reques	t 📰 Get Ne	w Task	Initiate			_									
ш	Authoriza	tion Requ	est List														
Filte	r By :		<b>v</b> ]			And			<b>v</b>			An	d				
		And		~			Program	DEE		itted In	Last 1 Mon		nd Status		<u></u>		0 G
							-							ar Filter	Save Filt		My Filte
0	Auth Request #	Claimant Case ID	OWCP Provider ID	Status	Auth Type ▲▼	Last Updated	Submitted Date	Level	Organization ▲ ▼	District Office		Program	Claim Examiner/MBE	CE/MBE	Type	Source	Assig Da
	101018702		_	In Review	Physical Therapy/Occupational Therapy	05/20/2022	05/20/2022	3	OWCP	FECA - National Office	Not Assigned	DFEC	Whitaker, Latonya M	540	Correction	DDE	05/11/
	101018280			In Review	Physical Therapy/Occupational Therapy	05/27/2022	05/27/2022	3	OWCP	FECA - National Office	Not Assigned	DFEC	Benelli, Allen	380	Correction	DDE	05/11



## **Authorization Details**

**Notes:** The header section of the **Authorization Details** page will show a new field called **Cancellation Source**. This field displays the source of cancellation for the authorization.

The values that can display in this field are:

- System,
- CE/MBE,
- Operations User, or
- Provider Initiated.

quest Number	: 101018702							
e 🖋 Update	🖨 Generate Co	orrespondence C	Retrieve Correspon	dence/Attachments	Comments	View History		
v Duplicate Auth	orization							
	Program:	DFEC	~		Authorization	Type: Physical 1	herapy/Occi	
Autho	orization Status:			_	Authorization			
Canc	Source: ellation Source:	Operations User		Emer	gency/Urgent Red	quest:		
Requestor In Original Au		ber (For Correction	-					
		Date Requested	d: 05/20/2022	*	Requested By:	100 Carl		
	rmation							



## **Processed Awaiting Decision**

**Note:** Only authorizations that are in **In-Review** status (for both DEEOIC and DFEC) or in **Processed Awaiting Decision** status (only for DEEOIC) can be cancelled.

 Ensure that only one authorization is selected for cancellation. If multiple authorizations are selected, the system will display the error message: "Please select only one authorization for cancellation."

H	OEV	My Inbox				sit.wcmbp.com Please select only		ation fo	or cancellation		OK				Q Ex	ternal L	.ini
Clos	Authorizat	ew Request	Get New	Task	Initiate Correction	Cancel Authoriz	zation										
ilter	By :		•][		)[]	And	~				And		~	•]			
		~][			Program	√ Sub	mitted In	ast 1 M	Ionth 🗸 An	d Status				⊙ Go lear Filter	Save Fil	iter	
)	Auth Request # ▲▼	Claimant Case ID	OWCP Provider ID	Status ▲ ▼	Auth Type ▲▼	Last Updated ▲▼	Submitted Date ▲▼	Level	Organization	District Office	CNSI Reviewer ▲▼	Program	Claim Examiner/MB ▲ ▼	E ID	Auth Request Type	Source	
8	101018995			Approved	Surgical Package	05/16/2022	05/12/2022	3	OWCP	FECA - National Office	Not Assigned	DFEC	Chalmers, Eric	a 219	Initial Request	DDE	
8	101018947			Approved	Physical Therapy/Occupation Therapy	nal 05/09/2022	05/09/2022	3	OWCP	FECA - National Office	Not Assigned	DFEC	Tranle, Linda	159	Initial Request	DDE	
) ,	101018946		-	Approved	Physical Therapy/Occupation Therapy	nal 05/10/2022	05/09/2022	3	OWCP	FECA - National Office	Not Assigned	DFEC	White, Daina	076	Initial Request	DDE	



## Not Eligible for Cancellation

The WCMBP System performs validations to ensure the selected authorization is eligible for cancellation. If the selected authorization is not eligible for cancellation, the system will display an error message: "Cancellation is only allowed for the authorization where all the service lines are in "In-Review" or "Processed Awaiting Decision" status."

eCAMS My Inbox • Provider • Claimant •						it.wcmbp.com s ancellation is only		the au	thorization whe							
	HCE J	thorization Re	equest List			nes are in "In- Rev	view" status				ок				@ Ext	erna
llos	Authorizat	lew Request		Task E Ir	nitiate Correction	nd		1			And					
	er By : V Program						mitted In La		ionth v Anr	d Status				O Go		
													(S) (C)	lear Filter	Save Fi	lter
			OWCP	Status	Auth Type	Last Updated	Submitted Date	Level	Organization	District Office	CNSI Reviewer	Program	Claim Examiner/MB	E ID	Auth Request Type	s
)	Auth Request # ▲ ▼	Claimant Case ID	Provider ID	A V	**	▲ ▼	A T									
	Request #	Case ID	Provider ID	**	Surgical Package	A.		3	OWCP	FECA - National Office	Not Assigned	DFEC	Chalmers, Eric	a 219	Initial Request	D