

AGENDA

Contract Providers Transition Team Workgroup Tuesday January 19, 2016

- ✓ Welcome and Announcements (7 min.) *Gordon Bunch*
- ✓ WebEx Instructions (3 min.) *John Flynn*
- ✓ IBHIS Update (20 min.) *Gordon Bunch*
- ✓ Provider Advocates Office (5 min.) *Charlie Diaz*
- ✓ PATS/PBM Update (5 min.) *Abel Rosales*
- ✓ Integration Update (45 min.) *Ceci Bolanos – Juan Fermin*
- ✓ Electronic Bilateral Referrals (10 min.) *Racheal Burgess*
- ✓ Provider Connect Update (5 min.) *Gordon Bunch*
- ✓ Questions/Comments (20 min.)

IBHIS UPDATE

Gordon Bunch

**Presentation to CPTT Workgroup
January 19, 2016**



Legal Entities – Data Exchange

Client Level Services

- Of 137 active Legal Entities (LE's), 121 provide client services that require electronic data exchange with DMH to manage client data and claims
 - Client data will be exchanged via Web Services
 - Claims data will be exchanged via 837P for outpatient and residential services and 837I for inpatient services

Legal Entities – Data Exchange Community Outreach Services (COS)

- LE's with EHR systems will exchange COS data with DMH via the 837P
- Eight LE's provide only COS for DMH
- COS-only providers do not have EHR systems and will not interface directly with IBHIS

Legal Entities – Data Exchange COS (continued)

- DMH will determine a solution for data exchange to IBHIS with COS-only providers
- COS-only providers will be among the last LE providers to go-live to IBHIS
 - Determine solution
 - Build solution, if necessary
 - Train Users
 - Go-Live

Legal Entities – Data Exchange Bed Control Programs

- LE's whose service mix includes Bed Control will soon be given specific instructions from Countywide Resource Management (CRM) regarding the management of beds in IBHIS
- Eight LE's provide Bed Control only for DMH and these agencies will not interface directly with IBHIS
 - CRM will enter data into IBHIS on their behalf

Legal Entities Live To IBHIS

- Four LE's went live to IBHIS in early 2014
 1. Five Acres
 2. Pacific Lodge Youth Services
 3. Community Family Guidance Center
 4. Foothill Family Service
- LE rollouts were suspended in June 2014
- LE rollouts resumed November 2015
 1. Dignity Health

Legal Entities – IBHIS Readiness

- To date 51 LE's not yet live to IBHIS have achieved IBHIS certifications for both Web Services and Claims
- Although these LE's are IBHIS certified, many are not IBHIS ready
 - Over the course of the IBHIS Rollout Period, EHR vendors must update EHR systems to the most current Web Services release, deploy changes to their customers, and may need to retrain system users
 - Vendor development timelines for Web Services updates vary

Short Term Rollout Plan

- Five LE's will go-live with claims to IBHIS on **February 1, 2016**
 - For The Child, Inc.
 - Homes For Life Foundation
 - Maryvale
 - Para Los Ninos
 - Social Model Recovery Systems, Inc.

Short Term Rollout Plan

- No go-live events will occur in March
- Candidate list for April through June is under review

Short Term Rollout Plan

- The February 2016 rollout will be limited to providers with the same EHR systems and service mixes as the five LE's presently live to IBHIS
- Thereafter, when possible we will add LE's with a broader mix of services and those with EHR systems not yet interfacing with IBHIS in production
- Rollouts after March 2016 will include some LE's with high claim volumes
- Most rollout groups will include no more than 10 LE's

Short Term Rollout Plan

- Contractors in the initial rollouts will be prioritized based upon
 - EHR Vendor and Contractor readiness
 - And, ideally
 - 2 or more years live to their EHR system
 - 2 or more years EDI claiming to the IS
- Rollouts after March 2016 may also include Contractors new to EDI and some who've recently implemented EHR systems
- Later in 2016, Contractors will be selected based primarily on their readiness and estimated claims volume

Guiding Principles for Rollout

- Experience has taught us that the duration and pace of an enterprise wide rollout involving large numbers of external partners cannot be neatly and accurately predicted from start to finish with a high degree of confidence
- The rollout plan and schedule must be driven by experience as we move forward with each rollout group

Guiding Principles for Rollout

- As rollouts progress, we will internally target LE's for subsequent rollouts approximately 6 months in advance
- Monitoring will be ongoing throughout the rollout process and adjustments to schedule and participating Contractors will be made where indicated based on lessons learned

Guiding Principles for Rollout

- We plan to give Contractors 8 weeks notice of rollout group placement
- To the greatest extent possible, rollout dates will be set by mutual agreement
- We expect LE rollouts to continue at least through June 2017

Steps to Ensure Successful Rollouts

- IBHIS Provider Dedicated Helpdesk
- Assigned Support Representatives to help Contractors through IBHIS go-live preparation and post go-live transition
- IBHIS Pre-Go Live Information
 - Review IBHIS go-live procedures/processes
 - Provider Extracts
 - Orientation to IBHIS Reports for claims reconciliation

Steps to Ensure Successful Rollouts

- Integration Support
 - Web Services go-live event two weeks prior to claims go-live
 - Claims go-live event
 - Simplified process for Financial Eligibility
 - Practitioner Registration and Maintenance via Web Services (between April and June 2016)
 - Integration Presentation provides more details

IBHIS Readiness Workflows

- The Readiness Workflow has been revised
- Pre-Certification Workflow
- Post-Certification Workflow
- Provider Connect tasks are only relevant to Day Treatment and/or Concurrent Mental Health Services providers
- See Handouts

Claims Submission At IBHIS Go-Live

- The fiscal year you go-live to IBHIS is your IBHIS transition year
- A “new” claim is an original (first time) claim for services rendered in the IBHIS transition year
- Your IS claims cut-off date will be communicated to you well in advance of your go-live date

Claims Submission At IBHIS Go-Live

- On your IBHIS go-live date you will:
 - Submit to IBHIS all “new” claims for services rendered in the IBHIS transition year
 - Submit Voids and Replacements to either IBHIS or IS depending upon which system received the original claim
 - Claims submitted to IBHIS must complete the claims cycle in IBHIS
 - Claims submitted to IS must complete the claims cycle in IS

Claims Submission At IBHIS Go-Live

- LE's scheduled for IBHIS go-live shortly following the beginning of a new fiscal year (e.g. August/September) may decide to hold claims for services rendered July 1 up to their IBHIS claims go-live date

QUESTIONS



PROVIDER ADVOCATES OFFICE (PAO)

Charlie Diaz

Presentation to CPTT Workgroup
January 19, 2016



Provider Advocates Office (PAO)

- IBHIS Provider Dedicated Helpdesk
 - Separate 800 telephone number
- Assigned Support Representatives to help Contractors through IBHIS go live preparation and post go live transition
- Data review before IBHIS go live

DECOMMISSION OF THE PHARMACY AUTHORIZATION AND TRACKING SYSTEM (PATS)

Abel Rosales

CPTT Workgroup Meeting
January 19, 2016



STATUS

- DMH has completed the implementation of its e-Prescribing solution to all Directly Operated clinics
- A preferred Pharmacy Benefits Manager (PBM) vendor has been selected via RFP solicitation process
- Negotiations with the PBM vendor **have concluded**
- Awaiting Board date (Jan/Feb) to present agreement

NEXT STEPS

- Trading Partners are not required to acquire and implement an e-Prescribing solution prior to **or following** the decommission of PATS
- We anticipate (2) separate workflows to accommodate those who have implemented an e-Prescribing solution and those who will utilize prescription pads
- We will be asking for volunteers to assist with testing these workflows once the PBM system is **operational**

QUESTIONS?

Abel Rosales

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IBHIS INTEGRATION UPDATE

Solutions Delivery Team

CPTT Workgroup Meeting
January 19th, 2016



Overview

- Trading Partner Provisioning
 - TPA
 - Provisioning access to IBHIS
 - Provisioning Reminders
- IBHIS Integration
 - Client Services
 - V201502
 - Certification
 - Reminders
 - Practitioner Registration and Maintenance
 - Interoperability Roadmap

Overview

- Go-Live
 - Preparation
 - Candidates
 - Activities

Trading Partner (TP) Provisioning

Cecilia Bolanos



Trading Partner Agreement

- Trading Partner Application updates
 - Provide more information status to TPs
 - Improved workflow
 - Better experience for TPs
 - Updates to the TPA are required prior to Go-Live (if applicable)

Provisioning Access to IBHIS

- Provisioning
 - Initial certificates were SHA-1
 - SHA-1 is being phased out by the industry
 - DMH is moving to a SHA-2 based certificate
 - Trading Partners will be issued a new certificate
 - Starting with Trading Partners in Production
 - Then prioritizing by expiration date of current SHA-1 certificate
 - Our goal is to replace all SHA-1 certificates by summer 2016

Provisioning Reminders

- IBHIS File Transfer Accounts
 - Require connectivity every 90 days
 - Accounts will suspend if TP does not connect within any 90 day window
 - Trading Partner certificates must be renewed every two years
 - Please forward changes in relevant contacts/staff to DMH
 - Waiting to update information may cause delays in renewal and ultimately disrupt your service connectivity to IBHIS

IBHIS Integration

Juan J. Fermin



Client Services

- DMH released v201502 of Client Services to Production on 1/12/16
- Release includes:
 - ICD-10 functionality
 - Additional information collected on admissions
 - Changes to Race/Ethnicity
 - Changes in the use of Guarantor Plan operations

V201502 Client Services

- createClientDiagnosis operation allows for multiple diagnoses in a single submission
- createClientDiagnosis operation should be used when submitting new or additional diagnosis entries

V201502 Client Services

- updateClientDiagnosis is intended to provide Trading Partners error correction functionality
- Previously submitted diagnoses (ICD9/DSMIV) are available on the getClientDiagnosis and getClientDiagnosisHistory operations

V201502 Client Services cont'd

- On Admissions DMH is now collecting smoking assessment information
- Client Race/Ethnicity have been modified for consistency with Federal reporting guidelines
- Client Service return messages have been modified to omit <XML/> tags when the attribute is empty

V201502 Client Services cont'd

- The use of GuarantorPlanDetail operations are only required for 3rd party coverage/benefits. Use of the operation is no longer required for tracking Medi-Cal coverage/benefits.
- To claiming Medi-Cal services TP should use the Medi-Cal PAuth.
- To claiming Indigent services TP should use the LACounty PAuth.

Client Services Certification

- In late December, DMH updated Client Service Certification Scripts
- Certification is divided into 2 categories
 - Trading Partners working toward certification
 - Trading Partners who have previously completed certification
- Scripts are located on the DMH IBHIS site:

http://lacdmh.lacounty.gov/hipaa/IBHIS_EDI_Certification.htm *

*Spaces in address are underscores



Client Services Certification cont'd

- Prior versions of scripts will not be accepted after Jan 20th (tomorrow)
- Trading Partners who have not completed certification on a prior version of scripts can port applicable progress to the latest certification scripts.

Client Services Certification cont'd

- Trading Partners who have not begun the IBHIS certification process are strongly encouraged to begin as soon as your EHR vendor has updated to the most recent release of Client Services

Client Services Certification cont'd

- Script requirements are determined by your organizations service delivery:
 - Trading Partners who provide Outpatient services are required to complete scenarios 1A,2A,3
 - Trading Partners who provide 24 Hr based services are required to complete scenarios 1B,2B,3
 - Trading Partners who provide both Outpatient and 24 Hr based services are required to complete 1A,2A,1B,2B,3

Client Services Certification cont'd

- Trading Partners who have certified on any prior version must:
 - Validate new features and enhancements
 - Document and submit Scenario #4
- Once all scripts are completed, Trading Partners are asked to upload all completed scenarios to their respective EFT certification folders.

Client Services Certification cont'd

- DMH will verify the submitted information and provide feedback on certification status.
- Once certified, Trading Partners with no prior certification will move onto Claiming certification.
- Trading Partners who achieve Client Services and Claims certification are placed in a candidate pool for IBHIS Go-Live consideration.

Client Service Reminders

- The IBHIS Integration Test environment houses release candidates which provide a preview of upcoming functionality (<https://b2btst.dmh.lacounty.gov>)
- Service promotion always begins in the IBHIS Integration Test environment. In this environment EHR vendors analyze, develop, and test against an operational endpoint.



Client Service Reminders cont'd

- As services are promoted, the next environment to be updated is IBHIS Integration QA environment.
- QA is pre-production environment, which mirrors DMH's production environment in terms of architecture and versioning.

Client Service Reminders cont'd

- Trading partner testing and certification prior to Go-Live must be completed in QA. (<https://b2bqa.dmh.lacounty.gov>)
- Trading partners who obtained Client Services certifications earlier will also use the QA environment to test/verify against new Client Services releases prior to IBHIS Go-Live
- Trading Partner test certificates provide access to both Test and QA environments.



Client Service Reminders cont'd

- The IBHIS Integration Production environment provides full access to production clients and care coordination information. (<https://b2b.dmh.lacounty.gov>)
- Trading Partner production certificates provide access to the production environment.

Practitioner Registration & Maintenance

- The Practitioner Registration & Maintenance application is intended to capture, validate, and maintain eligible practitioner information for LA County service providers.
- Previously Information submitted to PRM also needed to be maintained in IBHIS.
 - High manual overhead required
 - Delays in updating information could potentially impact claiming

Practitioner Registration & Maintenance

- In December of 2015 PRM was integrated with IBHIS.
 - Submissions to PRM are sent real time, electronically to IBHIS.
 - No additional manual submission is needed to keep the systems in sync.
- IBHIS Trading Partners are able to submit practitioner information more reliably and efficiently.

Interoperability Roadmap

- Streamlined Claiming and Admission
 - In the coming version of client services, DMH will eliminate the need for Trading Partners to establish or maintain Financial Eligibility and Guarantor Plan information. DMH will maintain FE as part of the admission and client update process

Interoperability Roadmap

- Currently the Katie A. Demonstration Project Identifier is transmitted to the State when a Katie A Guarantor has been established via Client Services.
 - In the next version of client services the Katie A. guarantor will be removed
 - A change is being made to claiming to accept a Katie A. Demonstration Project Identifier on the claim

Interoperability Roadmap

- Providers will be responsible for sending the Katie A Demonstration Project Identifier for all services provided to Katie A clients
- The Katie A Demonstration Project Identifier will be transmitted to the state whenever it has been sent on the Inbound claim to LA County Mental Health
 - These changes will be in place 2nd calendar quarter of 2016.



Interoperability Roadmap

- Practitioner Registration and Maintenance Services
 - DMH is currently developing a web service interface for integration with IBHIS Trading Partners
 - Our goal is to provide an endpoint which will allow Trading Partners the ability to register, update, and maintain practitioner information from their respective EHRs.
 - Pilot endpoint will be available by Summer of 2016.

IBHIS Go-Live Preparation

- In preparation for Go-Live we strongly recommend working with your respective EHR vendors.
- Please reach out to your vendor to learn more about your vendors plan for development, release, and training.
- Integrating with IBHIS successfully requires collaboration of Trading Partners, vendors, and DMH.

IBHIS Go-Live Candidates

- DMH has resumed Trading Partner roll-outs as of December 2015.
- At this time, Trading Partners are considered for Go-Live based on their respective client/service delivery mixture.

IBHIS Go-Live Candidates

- When an entity is called up for Go-Live, Trading Partners are asked to:
 - Work with their respective vendor to ensure their organization has received applicable EHR updates, analyze workflow, and schedule EHR training as needed.
 - Complete Scenario #4 if they have not done so already (see Client Service Certification slides)
 - Update Practitioner Information in the PRM application



IBHIS Go-Live Candidates cont'd

- As Trading Partners are identified for Go-Live, a DMH resource from the Provider Advocacy Office will work directly with Go-Live candidates to ensure a successful transition.
- Integration, Provisioning, and PAO staff will continue to work with Trading Partners until Go-Live date(s) are identified and scheduled.



IBHIS Go-Live Candidates cont'd

- Trading Partners will be provided:
 - Cutoff date for claiming to the IS
 - Client Services Go-Live date in advance of claiming
 - IBHIS Claiming Go-Live date

IBHIS Go-Live Activities

- Client Services Go-Live date in advance of claiming
 - Newly on boarded IBHIS Trading Partners can transition to new workflow
 - Trading Partners can establish necessary clients and update pertinent domains of information such as Financial Eligibility

IBHIS Go-Live Activities

- Advanced access is determined by the Trading Partners volume and service mixture.
- Typical Go-Live gap is two weeks but may be extended for higher volume service providers

IBHIS Go-Live Activities cont'd

- On scheduled Client Service and Claiming Go-Live dates, DMH will establish a WebEx meeting for collaboration between Trading Partners, EHR vendors and DMH staff.
- As the Trading Partner send real time transactions to IBHIS, DMH staff will observe, confirm, and validate.
- Our goal is to make your Go-Live a success and provide support throughout the process.



IBHIS Contacts

- For Client Service related inquiries please contact the IBHIS Web Service Support Team: IBHISWSS@dmh.lacounty.gov
- For Trading Partner Agreement related inquiries please contact the TPA team: TPA@dmh.lacounty.gov
- For detailed documentation on IBHIS interfaces please reference: http://lacdmh.lacounty.gov/hipaa/IBHIS_EDI_homepage.htm

QUESTIONS



ELECTRONIC BILATERAL REFERRALS

Racheal Burgess

Presentation to CPTT Workgroup
January 19, 2016



Electronic Bilateral Referrals

- DMH plans to use the IBHIS “Referral In” functionality when a client is referred from a DMH Contractor to a DMH directly operated program AND
- “Referral Out” when a client is referred from a DMH directly operated program to a DMH Contractor
- Referrals can be sent electronically from or to DMH via Netsmart’s CareConnect software.

Electronic Bilateral Referrals

- CareConnect is a connection mechanism to bridge contract provider eHRs with IBHIS
- Continuity of Care Documents will be electronically transmitted between agencies in the referral transaction
- CareConnect uses direct messaging to transmit incoming and outgoing referrals

Electronic Bilateral Referrals

- Contract Providers do not require NTSTs CareConnect software to transmit referral to and from DMH.
- Secure email addresses are required for incoming and outgoing referrals
- DMH will contact agencies to begin referral discussions early February 2016.

QUESTIONS



PROVIDER CONNECT

Gordon Bunch

CPTT Workgroup Meeting
January 19, 2016



WHAT IS PROVIDER CONNECT?

- ProviderConnect is a web-based interface to IBHIS.
- Providers will request authorizations for Day Treatment and for Concurrent Mental Health services.
- ProviderConnect replaces the current Day Treatment system after IBHIS is fully implemented.

ACCESS

- DMH will issue login credentials to each authorized user, once the provider is registered into IBHIS and requires access to ProviderConnect.
- User access to ProviderConnect will require a user name and password distributed by DMH

CHECKLIST for “GO-LIVE”

- Request access to ProviderConnect
 - After notification of your IBHIS go-live date, identified system users working for Day Treatment and Concurrent Mental Health Services providers will complete a set of PDF fillable forms located on the web site: http://lacdmh.lacounty.gov/hipaa/IBHIS_EDI_Forms.htm
 - After scanning the completed forms, email them to: DMHPAO@dmh.lacounty.gov
- Attend classroom training and use online training video, as needed for review: http://file.lacounty.gov/dmh/cms1_214742.wmv
- Upon go-live, login to ProviderConnect and verify active authorizations

Training

Day Treatment and Concurrent Mental Health Service providers will be trained to:

- Perform Client Search
- Create and Edit Service Authorizations for Day Tx and Concurrent Mental Health Services
- View Authorization Status

How Will Training Be Delivered

Two modes of delivery:

- Instructor-led classroom training
- On-line training materials/Videos

Duration

- 3 hours of classroom instruction
- Post training practice

QUESTIONS?

