Click agenda item below to navigate to selected presentation section.

IBHIS Fee-for-Service (FFS) Readiness Informational Session

October 9, 2013
1:00 p.m. – 3:00 p.m.

- ✓ **Welcome and Announcements – Karen**
- ✓ **IBHIS Key Concepts (20 min.) - Paul**
- ✓ **FFS Integration (35 min.) - Ruchi**
  - ✓ **Trading Partner Agreement**
  - ✓ **Client Web Services**
- ✓ **ProviderConnect (20 min.) – Giri/Julika**
- ✓ **FFS Reports (10 min.) - Presley**
- ✓ **FFS Readiness Tasks (15 min.) - Karen**
- ✓ **FFS Readiness Groups and Timeline (10 min.) - Karen**
- ✓ **Questions**

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WELCOME

Karen Bollow

IBHIS FFS Readiness Informational Session
October 9, 2013

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WELCOME
Network Providers & Billers

- Announcements
  - Cutoff to start the Integrated System (IS) Electronic Data Interchange (EDI) process for claims is March 18, 2014
    - IS Trading Partner Agreement (TPA) must be received no later than March 18, 2014
    - All IS EDI Certification Testing must be completed no later than April 15, 2014

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WELCOME
Network Providers & Billers

- Announcements (Continued)
  - New IBHIS TPA information – Due October 30, 2013
    - Dun & Bradstreet Number (DUNS)
    - Who will enter the TPA information (IS Logon, Password)?
    - Who will be authorized to sign the TPA?
    - Who are the IT Lead and Business Lead contacts?
    - Payee National Provider Identification (NPI) required for Groups and FFS Hospitals
- Send to CPTT@DMH.lacounty.gov

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IBHIS KEY CONCEPTS

Paul Arns

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IBHIS KEY CONCEPTS

- Episodes and Admission Programs
  - Contracting Providers, Contracting Provider Programs, Performing Providers
- Financial Eligibility
- Additional client data elements (CSI)
- EBPs on Claims (FFS default)
- Authorizations
- Data Conversion

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Episodes in IBHIS

- NEW to FFS2 Network Providers
  - *Program of Admission (shared by all*):*

    [FFS2LE Fee For Service 2 Admission]
  - *Once established, shared by all network providers*
  - *Hook for Financial Eligibility set up*
  - *Additional client data elements to report (State CSI)*
- FFS1 (Inpatient)
  - *Program of Admission and Service*

    e.g., [5005I College Hospital Cerritos]
  - *Discrete Admissions & Discharges per inpatient stay*
- Established via ProviderConnect *(or Webservice)*

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IBHIS Episodes & Claims

Program Of Admission

5009I DEL AMO HOSPITAL

* ***FFS1 facilities do not claim through IBHIS***

Program Of Admission

x FFS2LE Fee For Service 2 Admission

- ***FFS 2 837P claims associate to Group/ Individual 'Contracting Provider Program' and 'Performing Provider'***
- ***Numerous Performing providers under same 'admission'***

Accessing Client History

(via ProviderConnect or Webservice)*

Client: Smith,Joe (000012345)

Associated Legacy IDs: 333444555; 2223389

	Program name	Program Type	Admit/ First Service Date	Discharge/ Last Service Date	Practitioner	Primary Dx Description
From History	5007I BHC ALHAMBRA HOSP.-ADULT	Inpatient	7/7/2010	7/12/2010	Director , Medical	296.20-Major Depressive Disorder
From History	7482A M.H. URGENT CARE CTR AT LB	UCC	9/1/2011	9/1/2011	JENKINS, RICK	298.9-Psychotic Disorder NOS
From Avatar	1906A EDMUND D. EDELMAN-OUTPT	Outpatient	2/1/2014	3/24/2014	KRAMER, SANDRA	296.33-Major Depressive Disorder, Severe

Current IS episode history, supplemented by services submitted via DMH or 837's associate to program NPI, allowing construction of service history for clinical reference

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Financial Eligibility Setup

(via ProviderConnect or Webservice*)

- Set up and ordering of Guarantors (e.g., Medi-Cal) required for claims processing
- ** FFS2 providers will ultimately use ProviderConnect portal, with interim support from DMH*

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EBP's

▼ EVIDENCE-BASED PRACTICES / SERVICE STRATEGIES DOCUMENTED IN THIS PROGRESS NOTE

OPTIONAL - If you want to change the default State-CSI EBP/SS value(s) or assign a LACDMH-specific EBP value to this service, please make the appropriate selection(s) below.

State-CSI Evidence-Based Practices / Service Strategies

- Age-Specific Service Strategy
- Assertive Community Treatment
- Delivered in Partnership with Health Care
- Delivered in Partnership with Law Enforcement
- Delivered in Partnership with Social Services
- Delivered in Partnership with Substance Abuse Services

LACDMH-Specific Evidence-Based Practice

- PCIT
- PEARLS
- PEERS
- Prolonged Exposure for PTSD
- PST
- Reflect Parenting
- School-Based Targeted MH PEI OE
- Seeking Safety

▼ TREATMENT PLAN ELEMENT(S) ADDRESSED IN THIS PROGRESS NOTE

Select Treatment Plan Version

837 contains single State CSI EBP/SS or LACDMH-specific EBP,
<u>FFS 1 & 2 typically default '99'</u>

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FFS 2 Authorizations

- *NO MORE IS PLANS*

<u>837 contains</u>

- Manage Care Authorization #
  - Under Threshold, up to 8 visits/trimester
- Member Authorizations (M-Auths) #
    - Specific to Provider, Funded Program & Client (& limits)
    - Requests via Portal (ProviderConnect)
  - Over Threshold
  - Psychological Testing
  - Professional Services during FFS1 admission (?)
  - Concurrent MH service w/ Day Treatment

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FFS 1 Authorizations

STAR system replacement

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IS to IBHIS Data Conversion

- December 2013/January 2014
- Clients “active” past 10 years
  - De-duplicated: may need “surviving” ID
  - Importance of thorough client searches
- OP Episodes & Diagnoses
  - ***No FFS1 converted (clients will be discharged by Sept. 2014)***
  - ***No FFS2 Episodes at go-live (no existing episodes to convert)***
- Practitioner Updates (snapshot was Feb 2013)
  - DMH will support

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QUESTIONS?

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FEE FOR SERVICE (FFS) INTEGRATION

Ruchi Sukhija

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Overview

- Trading Partner Agreement (TPA) process
- Access to DMH Client Data
- Client Web Service
- Testing Phases and Timelines
- Testing Checklist
- Q/A

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TPA PROCESS

- With the “electronic” process, there will be no need for submitting the paper form(s)
- By clicking a link, you will be able to create, save, update and submit your TPA request
- Upload your signed Trading Partner Agreement and view at any time
- Interactive way of downloading digital keys
- View the status of your request real-time

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TPA PROCESS

- How and Where?
  - The link is accessible from IBHIS main page
  - Use IS credentials to login
  - User Manuals: Step-by-step instructions are posted on the IBHIS main page

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TPA PROCESS

- What?
  - Choice of Transactions
    - 837/835P, Web Services
    - NPI#, Dun and Bradstreet number(DUNS)
  - Authorized person's information
  - **Email Address - must**
  - Hardware to scan the signed documents

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TPA PROCESS

- TPA Request Status
  - a unique TPA number will be assigned to your request
  - Your request's Rollout Phase will be displayed
  - Heat Ticket Number, if any
  - Enrollment Code for downloading the digital keys
  - Certification is 10-Step process

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TPA PROCESS

- New links on the IBHIS website
  - Trading Partner Application (TPA) link
  - User Manuals

- Start Date (Pilot 1b) : 09/16/13
- Others: Start Date Based on Readiness Group(s)

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ACCESS TO DMH CLIENT DATA

- With the decommissioning of Integrated Systems (IS) by September 2014, what will be the mechanism to access DMH client data?
  - Option - 1: Client Web Services
  - Option - 2: ProviderConnect

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OPTION – 1: CLIENT WEB SERVICE

- Web service is an XML-based information exchange mechanism that uses the Internet for direct application-to-application interaction.
- It is a collection of open protocols and standards used for exchanging data between applications or systems.

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OPTION – 1: CLIENT WEB SERVICE – COMPANION GUIDE

- The Companion Guide provides a logical view of all the data elements that will be exchanged between the EHR system(s) and DMH. The purpose of this Guide is to assist with gap analysis and dictionary mapping.

OPTION – 1: CLIENT WEB SERVICES – TECHNICAL GUIDE

- The purpose of this document is to outline the technical design of the Client Web Services of LACDMH, and serve as a basic technical manual to help interpret and use the various Client Web Services operation(s).

OPTION – 1: CLIENT WEB SERVICES – TECHNICAL GUIDE: KEY FEATURES

- Mapping of Business Functions to Web Services Operations
  - Search Client
  - Create and Admit New Client
  - Admit Existing Client
  - Update Client
  - Discharge Client
  - Get Client Information

OPTION – 1: CLIENT WEB SERVICES – TECHNICAL GUIDE: KEY FEATURES

- Security: Authorization & Authentication
  - The Client Web Services will be using Digital Certificate to authorize and authenticate the calling party. The SOAP message must contain:
    - Program Identifier (a.k.a. Provider Number)
    - Digital Certificate (assigned by TPA process)

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OPTION – 1: CLIENT WEB SERVICES

- Links on the IBHIS website
  - Companion Guide
  - Technical Design Document
  - Error Codes and Description
  - Dictionary Values
  - WSDL Documentation
  - WSDL

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TESTING PHASES & TIMELINES

- Digital Key Testing
- Option – 1: Client Web Services Testing
- Option – 2: ProviderConnect
- EDI Claims Testing

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DIGITAL KEY TESTING

- After submitting the TPA request, you will be assigned a Digital Key. The instructions to download the Digital Key is covered in the TPA User Manual.

- Testing Start Date (Pilot 1b): 10/01/2013
- Others: Start Date Based on Readiness Group(s)

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DIGITAL KEY TESTING

- The process of validating the Digital Key is as follows:
  - Using the Digital Key, connect to “new” IBHIS File-drop location.
  - Drop EDI sample files (with “new” Header) into the “upload” folder

DIGITAL KEY TESTING

- New links on the IBHIS website
  - IBHIS Secure File Exchange location
  - EDI Sample 837P Header Format

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OPTION – 1 : CLIENT WEB SERVICES TESTING

- DMH has released the Companion Guide in **August, 2013** and Technical Design Document for Web Services in **September, 2013.**
- FFS Providers and their respective billers or EHR vendors will make appropriate changes to their systems.
- **Testing Start Date (Pilot 1b): 11/04/2013**
- Others: Start Date Based on Readiness Group(s)

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OPTION – 2 : PROVIDERCONNECT

- Training session(s) and material will be made available for your reference

- **Access available (Pilot 1b): TBD**
- Others: Start Date Based on Readiness Group(s)

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EDI CLAIMS TESTING

- DMH IBHIS EDI Companion Guide will be released in **November, 2013**.
- FFS Providers and their respective billers or EHR vendors will make appropriate changes to their systems.
- **Testing Start Date (Pilot 1b): 12/2013**

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FFS PROVIDER TESTING - CHECKLIST

- To help keep track of various activities and timelines, a checklist has been created for your reference.

- Handout at the meeting – posted on the IBHIS website

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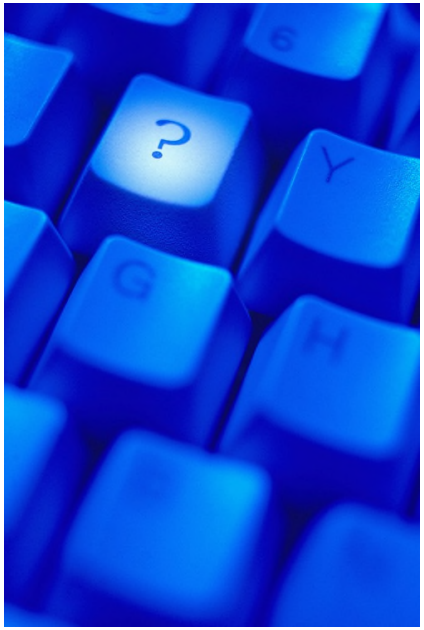
QUESTIONS



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PROVIDERCONNECT

Giri Patterikalam

FFS IBHIS Readiness Informational Session
October 9, 2013

ACCESS

- ProviderConnect is an external interface to the IBHIS system which provides functionality to the provider community.
- It has a web interface which can be accessed thru the internet.
- In order to access ProviderConnect, the provider will need to be registered.
- DMH will issue login credentials for providers.

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FUNCTIONS

- FFS providers will use ProviderConnect to
  - search for clients
  - create admissions
  - create new clients
  - update demographics
  - discharge clients
  - request client history

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FUNCTIONS (CONTINUED)

- FFS providers will use ProviderConnect to
  - submit an OTAR and receive a response on the request from DMH
  - attach necessary documentation supporting the OTAR request
  - enter necessary comments and view comments from DMH

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LOG IN SCREEN

ProviderConnect

A Continuum of Interactive Community Healthcare

Secure Login

Please enter your username and password below.

Username:	
Password:	

LOGIN

When entering your password, please ensure that your Caps Lock key is not depressed.

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MAIN SCREEN

ProviderConnect - Main Menu 9/23/2013 2:19:44 PM Log

You are logged in as:	
Your last login was:	9/23/2013 2:20:00 PM

Main Menu - Provider		
Lookup Client	Add New Client/Client Search	Change Password
Documentation	News	

Logout / Exit

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hope wellness recovery

CLIENT SEARCH

Search Criteria	
Social Security Number:	
Last Name:	
First Name:	
Sex:	Female - F Male - M Other - O Unknown - U *
Date of Birth:	

Search

Back

About ProviderConnect v2.188

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HOPE WELLNESS RECOVERY

SEARCH RESULT

Search Results					
ID	Name	Social Security Number	Date Of Birth	Alias	Score
49	ADMISSION TEST	999-99-9999	07/01/2000	Super Woman	145
88	T TEST				145
244	INTEGRATIOTHREE MIND	987-23-5467	01/21/1981		140
166	INTEGRATIONONE MIND	987-22-1234	01/21/1982		130
188	INTEGRATIONTWO MIND	987-34-1245	01/21/1987		130
29	SET MIND		01/21/1974		130
38	BUNDLE TESTER	987-23-5656	08/01/1982		130
184	DANIEL TESTER	987-23-1212	07/12/2008		130
58	CLIENTA TESTME		01/01/1989		130
5	TESTONE TESTONE				130

Create New Admission

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CREATE ADMISSION

Back

ProviderConnect - Provider Admission Form

Admission Information

Episode Number 1	**Treatment Service** -Please Choose One-
Type of Admission -Please Choose One- *	**Sex** Female - F / Male - M / Other - O
Date of Birth 01/21/1981	**Age** 32
Admission Date	**Admission Time** HH:MM AM/PM
Admitting Practitioner - Please Choose One - *	**Attending Practitioner** - Please Choose One -
Program -Please Choose One- *	**Social Security Number** 987-87-9010

Demographics

Client Last Name Test	**Client Home Phone Number**
Client First Name FFS	**Client Work Number**

Save Admission

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HOPE WELLNESS RECOVERY

UPDATE DEMOGRAPHICS

Client Name:	MIND, INTEGRATIONONE
Member ID:	166
SSN:	987-22-1234

Member Demographics		
Social Security Number 987-22-1234	Date of Birth 1/21/1982	Facility Chart Number
Member Street 1	Member Street 2	Member City
Member County -Please Choose One-		Member State -Please Choose One-
Member Zip Code	Member Phone Number	Member Work Number
Member Language -Please Choose One-	Sex Male - M	Ethnicity -Please Choose One-
Race -Please Choose One-	Client Maiden Name	Veteran
Education Level At Admission -Please Choose One-	Citizenship Status -Please Choose One-	Pre-Admission Disposition
Employment Status -Please Choose One-		
Marital Status -Please Choose One-		

Save Record

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REQUEST OTAR

Member ID
166

- Demographic
- Authorizations
- Provider Admission
- Attachments

Exit to
Main Menu

ProviderConnect - Authorization Requests

Client Name:	MIND, INTEGRATIONONE
Member ID:	166
SSN:	987-22-1234

Au

Provider	Auth Number	Origin	CP Program	Status	Review Status

Create Request

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AUTHORIZATION DETAILS

ProviderConnect - Authorization Request 9/23/2013 2:31:4

Authorization Request

Client Information

CLIENT NAME	MEMBER ID	PROVIDER NAME
HELLO JOE	147	

Care Manager

CARE MANAGER ASSIGNED:	DATE ASSIGNED:

Authorization Information

AUTHORIZATION NUMBER:	CURRENT AUTHORIZATION STATUS:	CURRENT AUTHORIZATION STATUS REASON:
AUTHORIZED LEVEL OF CARE:	TYPE OF AUTHORIZATION:	PERFORMING PROVIDER TYPE:
PLANNED ADMIT DATE:	INITIAL OR CONTINUING AUTH:	NEXT REVIEW DATE:

Diagnosis

Primary Diagnosis	
Secondary Diagnosis	

Funding Source & Benefit Plan Information

Funding Source:	Benefit Plan:	Provider Registration Date For Funding Source:
- Please Choose One - *	- Please Choose One - *	
Program: - Please Choose One - *		

Authorization Group
Leave blank for individual CPT Codes requests.

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ATTACHING FILES

File Attachments

	File Name	Attached By	Date Attached	Notes	
Download	MHS OTAR Request Details.DOC		9/20/2013 12:00:01 AM	NOTICE OF ACTION	Save Changes

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HOPE WELLNESS RECOVERY

AUTHORIZATION SUMMARY

Provider	Auth Number	Origin	CP Program	Status	Review Status	Request Date	Review Date	Begin Date	Expiration Date	Tx Codes	Attachments
[illegible]	42	ProviderConnect		Complete	Approved	9/9/2013 6:56:20 PM	9/10/2013 11:47:59 AM	4/23/2013	4/30/2013	Family Therapy w/ Client	Edit / Add New
[illegible]	36	ProviderConnect		Complete	Approved	9/9/2013 4:37:32 PM	9/19/2013 12:58:03 PM	2/17/2013	4/30/2013	Psychother 45min ff	Edit / Add New
[illegible]	Unassigned	ProviderConnect		Errored	Not Reviewed	9/10/2013 4:09:31 PM	9/10/2013 3:09:31 PM	10/3/2013	12/31/2013		

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HOPE WELLNESS RECOVERY

AUTHORIZATION RESPONSE

Authorization Request
Approved

Client Information		
CLIENT NAME ROGER RABBIT	**MEMBER ID** 145	**PROVIDER NAME** [redacted]

Care Manager	
CARE MANAGER ASSIGNED: CARELINKUSER	**DATE ASSIGNED:** 9/9/2013

Authorization Information		
AUTHORIZATION NUMBER: 42	**CURRENT AUTHORIZATION STATUS:** A - Approved	**CURRENT AUTHORIZATION STATUS REASON:** APPRFULL - Authorization Request Fully Approved
AUTHORIZED LEVEL OF CARE:	**TYPE OF AUTHORIZATION:**	**PERFORMING PROVIDER TYPE:**
PLANNED ADMIT DATE: 4/23/2013	**INITIAL OR CONTINUING AUTH:** 2 - Continuing	**NEXT REVIEW DATE:** 4/30/2013

Diagnosis
Primary Diagnosis
Secondary Diagnosis

Funding Source & Benefit Plan Information		
Funding Source: FFS2 Authorized Outpt Svcs (CGF) MC	**Benefit Plan:** FFS2 Authorized Outpt Svcs (CGF) MC	**Provider Registration Date For Funding Source:**
Program:		

APPROVED- DATES AND UNITS

PROCEDURE CODE	DESCRIPTION	UNITS REQUESTED	UNITS AUTHORIZED
90847	Family Therapy w/ Client	2	2

Authorization Dates
Requested: 4/23/2013 - 4/30/2013 **Authorized:** 4/23/2013 - 4/30/2013

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PROVIDERCONNECT TRAINING

Julika Barrett

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OVERVIEW

- What to expect for training
- What will be covered in training
- How will training be delivered
- Where and when will training occur

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TRAINING GOAL

To provide you with the knowledge and skills to perform job functions using ProviderConnect.

TRAINING OBJECTIVE

To bridge the gaps between your current job functions and the way you will perform job functions in the IBHIS environment.

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WHAT WILL BE COVERED?

- Review and practice entering information – new to job functions.
- Review differences between current and new tasks.
  - New data required, e.g., CSI data, episodes
  - New terminology
  - Continue to capture demographics
  - Client search

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WHAT WILL BE COVERED? continued

Training agenda includes:

- Client search
- View and edit client demographic information
- Create and edit service authorizations

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HOW WILL TRAINING BE DELIVERED?

Mode of delivery:

- Web-Ex training

Duration:

- 1 hour of instruction
- Post training practice

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NEXT STEPS

When will training occur?

- During the readiness process, i.e.:
  - After provisioning
  - Before and/or during testing

How will I know?

- Prior notification regarding training.

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FFS REPORTS

Presley Becerra

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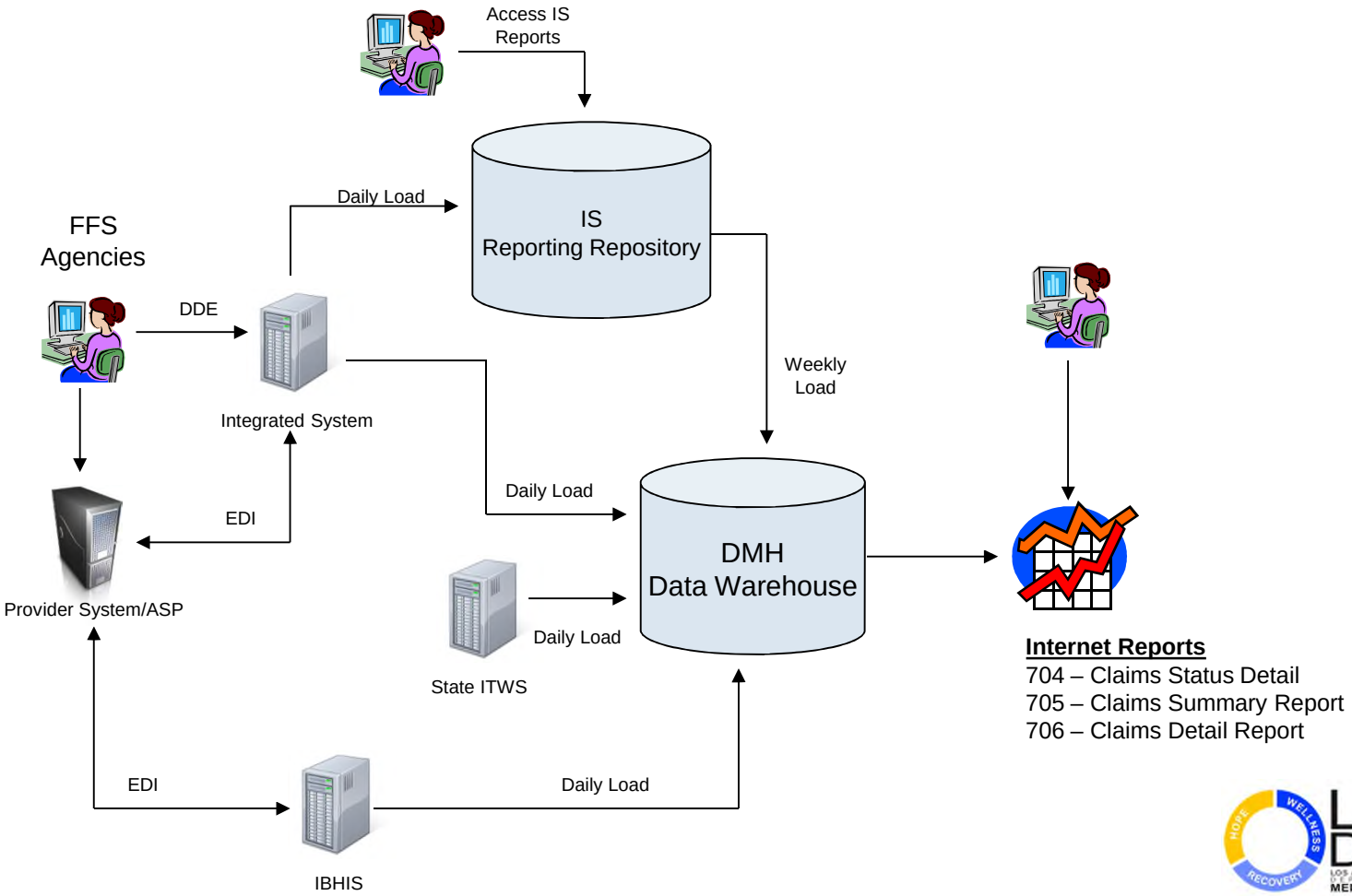
FFS REPORTS

- Overview of data/reports used by Network Providers
  - 704/705/706 Reports

FFS REPORTS


Access IS Reports
IS Reporting Repository
Daily Load
FFS Agencies
DDE
Integrated System
Weekly Load
Daily Load
EDI
Provider System/ASP
DMH Data Warehouse
Daily Load
State ITWS
EDI
Daily Load
IBHIS
Internet Reports
704 – Claims Status Detail
705 – Claims Summary Report
706 – Claims Detail Report

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IBHIS FFS READINESS

Karen Bollow

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OUTLINE

- Overview
- Readiness Areas
- Readiness Tasks
- Next Steps

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WHAT DOES READINESS MEAN

- All business functions, technical processes, training, policies and procedures are completed and in place
- Contractor has successfully completed their “Readiness Tasks”

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KEY READINESS AREAS

1. Practitioner setup in IBHIS
2. Trading Partner Agreement
3. Testing – Web Services and Claims

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KEY READINESS AREAS

4. ProviderConnect (Provider Portal)
5. Reporting

READINESS TASKS

- Handout

NEXT STEPS

- Identify your Readiness Team
- Review the Readiness Tasks
- Develop a readiness project schedule
- Notify your vendor of the testing timeline
- Begin readiness tasks

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NEXT STEPS

- Monitor project schedule
- Contact CPTT if you have questions at:
  - CPTT@dmh.lacounty.gov
- Review the IBHIS EDI Website(s) regularly for updates
  - http://lacdmh.lacounty.gov/hipaa/ffs_IBHIS_EDI_homepage.htm

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IBHIS FFS
READINESS SCHEDULE

Karen Bollow

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IBHIS ROLLOUTS:
FFS PROVIDERS

- Fee-For-Service (FFS) Pilot 1B

  IBHIS Go-Live Feb. 20, 2014

  - 3 FFS Providers

- FFS All Remaining Providers

  IBHIS Go-Live Sept. 3, 2014

  - 273 FFS Providers

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FFS READINESS GROUPS

Pilot 1B: 9/3/13 thru 2/14/14

3 FFS Providers

Readiness Group 6: 4/1/14 thru 6/2/14

29 FFS Providers

Readiness Group 7: 5/1/14 thru 7/1/14

72 FFS Providers

Readiness Group 8: 6/2/14 thru 8/1/14

74 FFS Providers

Readiness Group 9: 7/1/14 thru 9/2/14

95 FFS Providers

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FFS READINESS MEETINGS

Claiming Guide:	December 5, 2013
Readiness Group 6:	March 11, 2014
Readiness Group 7:	April 8, 2014
Readiness Group 8:	May 5, 2014
Readiness Group 9:	June 3, 2014

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QUESTIONS?

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