IWUG Online Meeting Minutes

Thursday, November 20, 2014

Topics discussed:

<u>Announcements</u>

<u>Claim List Item Error in WITS</u>

The error message that was occurring when in Agency>Billing>Claim Item List has been resolved.

<u>GAIN GRRS Data Population Error</u>

When downloading the GAIN GRRS, users system wide were encountering missing fields and incomplete documentation. Chestnut has been notified and the bug has been fixed. The data entered in each assessment has remained intact, and any GRRS reports that were incorrect during the timeframe of 11/19-11/20/2014 should be Re-run. If issues persist, please contact the WITS help desk.

<u>Chestnut System Hardware Update Announcement</u>

Chestnut will be updating system hardware, and the GAIN ABS will be unavailable from Friday, November 21st at 7:00AM to Monday, November 24th at 7:00AM.

<u>New Guidance Documents</u>

New client flow documents can be found on the WITS website www.wits.idaho.gov on the WITS User Guides tab. They offer a visual reference for Treatment Provider Client Flow, and RSS Provider Client flow. The Documents will open in separate windows and will guide action for each provider and funding source: ATR, DHW, IDOC, IDJC, ISC, Medicaid, and Private Pay/Self Pay.

<u>System Enhancement/Website Updates: Current Version Released 11/10/14</u>

- **Authorization List**
  Number of active units will now display on the bottom of the screen.
- **Group Notes**
  When hovering over pencil icon, options have now been split to *create encounter* and *create misc. notes.*
  Column header under *attendees* has been changed to read *individual session notes summary.*
- **Intake**
  Change to language. Underneath referral contact the *add contact* link has been renamed to be *add collateral contact*. Functionality is the same.
- **Referral (Agency Referrals>Referrals In)**
  When reviewing a referral, select the Reason of Rejected by Program. Providers are now required to enter a comment/reason for rejection.
- **Release Notes**
  The new help icon has been turned on in production. It can be identified by three hash marks at top right hand side of the screen. Select tThe question mark to be taken directly to the Idaho WITS website.

- **Diagnosis List**
  On the client activity list there is now an option called diagonisis list. When adding diagnosis to admission or entering a new encounter note, information entered will automatically populate on this screen. This provides a complete history of diagnosis changes in the record.
- **Encounter screen**
  Now when creating an encounter on staff profile; assigned staff profile supervisor will appear at the bottom of encounter note. This feature will be especially helpful for Medicaid Optum clients.

Billing Training Topic, Process and Workflow

Authorizations:
Issues regarding billing against an authorization that still has units/billing against an authorization with negative units.

Error message says," insufficient funds on authorization to create a claim based on the service rate based on this encounter."

Resolution:
- Hit Cancel
- Go to the authorization (Client profile> authorization> review active authorization (pencil icon)

If units and dollar amount are still available, but error message occurs:
This resolution only applies to services that are bundled, and contain different billing rates per unit. Even if the dollar amount and units are available, the variable of units/dollar amoun in the bundled service will reject the authorization. Contact BPA for an authorization change request to increase amount/units.

If units are in negative status:
This resolution only applies to services that are bundled, and contain different billing rates per unit. Billing a negative number of units is acceptable, as long as the billed service are less than the available amount of funds. The dollar amount is what will determine what services will be allowed through BPA. BPA will be able to resolve any issues in regard increasing or redistributing funding/units.

Q: If you have negative units, do you do a new request for new units or for part of that time?
A: The authorization is good through the expiration date of the individual authorization. Billing can be added to the authorization for the funds that are left. An authorization request will need to be made for additional units/funds if the client will be continuing care.

Q & A
Q) How do you get rid of clients that are no longer active? In the Client List, half of them aren't active anymore. Can we delete those out?
A) On the client list, you cannot remove the client from WITS if you've served them in the past. You can restrict your view. If you only want active clients, add in search criteria, clients with open cases, and this will return search results that will restrict who you can see receiving active service. You can also search more specific fields, such as ATR/open cases/closed cases.