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# IYTP/ WITS Transition and Integration FAQ

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## IYTP Grant

**Question 1.** Will providers be reimbursed for services performed on clients determined to be clinically ineligible?

**Answer:** Providers can be reimbursed for select services that were provided to individuals not eligible for IYTP funding. BPA & WITS Helpdesk staff members are working through how payment for these services will be processed in WITS. Until BPA & WITS Helpdesk issue instructions, please contact BPA with client information.

**Question 2.** Will IYTP claims be subject to the incentive requirements of being entered within 5 business days of service?

**Answer:** BPA will be withholding 5% of claims processed through WITS for IYTP. The SUD performance requirements that affect the withhold do not apply to IYTP. Quarterly, 100% of the 5% withhold will be paid back to IYTP providers. Requirements for timely billing as outlined in the IYTP contract still apply.

## WITS

**Question 3.** What are BPA's and the provider's role in entering IYTP clients into WITS (i.e. entry of intakes, admissions, consents, referrals, authorizations, group enrollments, program enrollments, etc.)?

**Answer:** Providers will determine eligibility and create the client profile in WITS as well as, enter the intake, admission, client group enrollment, and program enrollment. Each provider will also submit a consent, referral, and provisional voucher to BPA for authorization.

**Question 4.** Will there be technical assistance on processes in WITS?

**Answer:** Yes, providers will be given technical assistance through the WITS Help Desk and the IYTP staff (Rob Christensen- contact information below). Other technical assistance needs outside of WITS, should be communicated with BPA.

## Provisional Voucher / Authorization

**Question 5.** Is the initial authorization of 250 units for 6 months of A-CRA services expected to be sufficient to provide treatment in IYTP?

**Answer:** Transportation & GPRA Interviews will be separate services on the authorization with separate units (not included in the treatment authorization for 250 units).

The initial authorization for 250 units will cover all other treatment & RSS (including drug testing). The most important part about the authorization in WITS is that it is based on dollars and not units. Providers have authorizations totaling \$3,000.00 for 6 months. Authorized units may go in the negative, but providers will still be able to bill as long as there are dollars remaining on the authorization.

This amount authorized should be enough for IYTP clients when following the A-CRA model. If providers do run out of money on authorizations before the 6 months, contact BPA.

**Question 6.** When will client data and GPRA Interviews for existing clients be completely data entered into WITS?

**Answer:** Existing IYTP clients' entry into WITS was completed on Friday, January 9th, 2015.

This included data entry of GPRA Interviews previously submitted on paper.

Service providers will be responsible for collecting and entering into WITS any GPRA Interviews not previously submitted, even if outside the reporting window.

## GAIN Assessments

**Question 7.** Is the GAIN M-90 required at 3-month follow-up time frame only, or is it required every 90 days (at 6 months, etc.)?

**Answer:** The GAIN M-90 is required at the 3-month follow up time frame, only.

**Question 8.** Will we be required to go back and do "catch up" GAIN M-90s on our existing clients?

**Answer:** Yes, providers will be required to complete a GAIN M-90 for all previous and current IYTP clients.

**Question 9.** How will we distinguish IYTP GAINs from the rest of our agency participants?

**Answer:** Providers will type 'IYTP' into the "Observation Verbatim" field in the GAIN Assessment Header in GAIN ABS to distinguish the two. Completion of this field is a requirement for reporting.

**Question 10.** Will we have to have a GAIN Assessment completed before a client can start in IYTP?

**Answer:** No, at this time you do not have to have a GAIN completed when you send the provisional voucher request. Please enter the date the GAIN-I is scheduled in the authorization comments field. BPA can run reports to see if we have issues with providers and work with them.

**Question 11a.** Will we have to start doing a GAIN-I Full rather than a GAIN-I Core for IYTP clients?

**Answer:** Yes, you will need to do a GAIN-I Full for all clients entered into the IYTP program through WITS.

**Question 11b.** Will I need to re-do the GAIN for IYTP clients who received the GAIN-I Core?

**Answer:** No, you do not need to re-do a GAIN that has already been completed. Any GAIN Assessment done from 1/1/15 and forward needs to be the GAIN-I Full.

## BPA Process

**Question 12.** I understand that we do the GAIN and then request units for the GAIN and bill it. How long will this take?

**Answer:** BPA will process provisional voucher requests within 2 business days of receipt. Often it is less than 2 business days, but we are committed to having authorization requests completed in no more than 2 business days.

**Question 13.** Providers perform services before they have an authorization (i.e. screenings, GAIN's, etc.). Will provisional vouchers be backdated to cover these services and allow for billing?

**Answer:** When a provider submits provisional voucher requests to BPA, ensure that the start date of the authorization is the first date of services provided (including Assessments and screenings). Once the authorization is approved, providers can bill for those services performed prior to having an active authorization.

## Reporting

**Question 14.** Will there be monthly reports on IYTP assessments?

**Answer:** Yes, a monthly report will be generated by individual agencies, individual staff members of service providers, and by Chestnut Health Systems. A report will be provided by Chestnut categorized by individual agencies and individual staff on IYTP assessments.

**Question 15.** Will there be opportunity in WITS to capture information on the targeted populations, as outlined in the grant?

**Answer:** Yes, in addition to the other fields already capturing gender, race, etc., there will also be a field to capture data on sexual orientation.