

# IYTP/ A-CRA Treatment Provider FAQ

Version Summary	New Questions Added	Answers Revised	Answers Archived
1/30/2015	1-15	n/a	n/a
2/27/2015	7-8, 14-16	n/a	n/a
5/6/2015	16	7, 10, 11, 14, 15	n/a
5/21/2015	18	1, 9, 12, 13	n/a
8/18/2015	17, 20-23, 26-27	7	n/a
5/19/2016	8, 25, 30	7, 12, 28, 29	6, 10

## IYTP Grant

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

**Answer:** Yes, you can be reimbursed for services performed for clients who are found to be ineligible for IYTP funding. There are two ways to be reimbursed depending on if the client has received a GAIN-I in WITS.

- If your agency has not yet performed a GAIN-I in GAIN ABS, you may bill for the services (ex. Screening) through the paper invoice process. Please enter the client name on the invoice submitted.
- If your agency did perform the GAIN-I in GAIN ABS, please complete the claims process in WITS. Follow the user guide on [wits.idaho.gov](http://wits.idaho.gov) under the IYTP tab - IYTP Ineligible Process Guide for more information.
  - For clients enrolled in the "IYTP Ineligible" program in WITS, you will not be required to complete a GPRA Intake or Admission Record to complete billing.
  - Remember: If a GPRA Intake is performed on a client who is found ineligible for IYTP Funding, the remaining 3 GPRA's are then required in WITS and the client cannot be moved to the "IYTP Ineligible" program in WITS.

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

**Answer:** BPA Health will be withholding 5% of claims processed through WITS for IYTP. The SUD performance requirements that affect 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 Health'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 authorization (aka provisional voucher) to BPA Health for authorization. BPA Health will enter authorizations only.

**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 Health.

## 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 Brina Jensen with BPA Health (contact information below).

**Question 6:** Question 6 was related to an activity completed in 2015 and has been archived.

## GAIN Assessments

**Question 7:** When is the GAIN-M90 due for IYTP Clients?

**Answer:** The GAIN-M90 is due at two points in time for IYTP clients:

- 3-month follow-up time frame – completed 90 days after the client's IYTP GAIN-I Interview date
- 6-month follow-up time frame – completed at 180 days after the client's IYTP GAIN-I Interview date

In the GAIN-M90 Assessment Header put the appropriate "Observation Value" to represent the month – "3" (for 3-month GAIN-M90) or "6" (for 6-month GAIN-M90). In addition, type "IYTP" into the "Observation Verbatim" field in the GAIN-M90 Assessment Header.

If the GAIN-I was performed at another agency or in a prior episode (a GAIN-I was not completed in the current IYTP case) complete the GAIN-M90 at 90 days or 180 days after the client's IYTP Intake Date in WITS, *not* 90 days after the GAIN-I interview date. This may require the GAIN-I from the prior agency to be copied to your agency in GAIN ABS. Contact the WITS Help Desk for assistance.

**Question 8:** **Is there a window of time to complete the GAIN-M90?**

**Answer:** Yes. Chestnut has shared that there is a period of time where the information on a GAIN-M90 is most useful. The ultimate goal is to have the GAIN-M90 completed as close to the due date as possible. The windows where the information is useful are:

- On time window – 2 weeks before target due date and 2 weeks after target due date
- Full data collection window – 30 days before target due date and 60 days after target due date

**Question 9:** **Do I need to run a report/summary after performing the GAIN-M90 and entering the GAIN-M90 Activity in WITS?**

**Answer:** No. There is no additional report to run in WITS or to keep in the client's hardcopy file. The GAIN-M90 only needs to be performed and a GAIN-M90 Activity entered in WITS.

Question 10: Question 10 was related to an activity completed in 2015 and has been archived.

**Question 11:** **How will we distinguish IYTP GAIN assessments 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.

If the "Observation Verbatim" field was not completed at the time of assessment, providers will need to add this information to the GAIN Assessment Header later to ensure the assessment has this information. Instructions for updating the GAIN Assessment Header can be found at [wits.idaho.gov](http://wits.idaho.gov) on the IYTP Page.

**Question 12:** **Will we have to have a GAIN-I assessment completed before a client can start in IYTP?**

**Answer:** No, at this time you do not have to have a GAIN-I assessment completed when you send the provisional voucher request to BPA Health. However, BPA Health will need to know the status of the GAIN-I. When submitting the provisional

voucher request, please enter the appropriate information in the “authorization comments” field:

1. If the GAIN-I was completed – note that the GAIN-I was completed;
2. If the GAIN-I is scheduled to be completed – enter the date the GAIN-I is scheduled for;
3. If you will be using a GAIN-I completed prior to the current IYTP case (allowable within the last 6 months only) – enter this information into the comments (such as the name of the other agency if applicable).

BPA Health will review that a GAIN-I is completed by verifying a GRRS is in the information consented to DHW Contractor in WITS.

**Question 13:** Will we have to start doing a GAIN-I Full rather than a GAIN-I Core for IYTP clients?

**Answer:** No, you can perform either the GAIN-I Full or a GAIN-I Core for IYTP clients.

**Question 14:** Will I need to re-do the GAIN-I Full for IYTP clients who received the GAIN-I Core?

**Answer:** No, you do not need to re-do a GAIN-I that has already been completed. IYTP clients can have either the GAIN-I Full or the GAIN-I Core.

**Question 15:** What if another agency completed a GAIN-I assessment before the client began IYTP services with my agency?

**Answer:** There must be a GAIN-I assessment that the clinician determines is valid for this IYTP treatment episode. If the GAIN-I has been completed by another agency and it is less than 6 months old it can be used for the IYTP treatment episode. If the clinician determines that there have been major changes or the assessment is too old, they can complete a new GAIN-I Assessment.

**Question 16:** How do I perform a GAIN-M90 and GAIN-M90 Activity when the GAIN-I assessment was completed by another agency before the client began IYTP services with my agency?

**Answer:** Contact the WITS Help Desk for assistance.

In these situations, the GAIN-M90 assessment should be completed 90 days and 180 days after the client’s IYTP intake date in WITS, *not* days after the GAIN-I interview date.

**Question 17:** How do I perform a GAIN-M90 and GAIN-M90 Activity when the GAIN-I assessment was completed by my agency in a prior episode in WITS before the client began in IYTP services?

**Answer:** Contact the WITS Help Desk for assistance.

In these situations, the GAIN-M90 assessment should be completed 90 days and 180 days after the client’s IYTP intake date in WITS, *not* days after the GAIN-I interview date.

**Question 18:** Can I perform a telephonic GAIN-M90?

**Answer:** Yes, GAIN-M90s can be done telephonically. There are no other requirements.

GAIN-Is must be performed face to face.

## GPRAs Interviews

**Question 19:** What are the GPRAs Follow-up “windows”? What is the timeframe of when a GPRAs Follow-up should be completed?

**Answer:** Both the 3-month GPRAs Follow-up and the 6-month GPRAs Follow-up can be performed and entered into WITS up to 1-month before the GPRAs due date and as late as 2-months after the GPRAs due date. Remember that these are months and not days.

**Question 20:** Can I perform a telephonic GPRAs Interview?

**Answer:** Yes, GPRAs 3-month Follow-up, GPRAs 6-month Follow-up, and GPRAs Discharge interviews can be done telephonically if one of the following is met:

1. The client is more than 30 miles away from your office, or
2. The client is incarcerated, or
3. The client has missed at least 1 attempt to do a face-to-face interview (ex. No show for an appointment)

GPRAs Intake interviews must be performed face-to-face.

**Question 21:** I cannot locate the client to perform the GPRAs Follow-up Interviews, what do I do?

**Answer:** Our primary goal is to have the GPRAs data, but in situations where that cannot happen, the secondary goal is to have the interview completed in the follow-up window.

If you have attempted to schedule a face-to-face interview or a telephonic interview have been unsuccessful, make sure to enter the interview before the window closes and mark the interview as “No interview conducted”.

**Question 22:** Does a GPRAs Interview need to be performed by a clinical staff member?

**Answer:** No, an administrative staff person who completed the training offered by the WITS Help Desk can perform a GPRAs interview too.

**Question 23:** Will I be prompted to conduct a GPRAs Discharge after completing a GPRAs Follow-up?

**Answer:** No, this functionality is not in WITS for IYTP. Providers are responsible for ensuring that all GPRAs Interviews are collected and entered into WITS. If the GPRAs Follow-up window is open at the time of discharge, the provider can enter the interviews both on the same day, using the same data.

**Question 24:** Will I be reimbursed for a GPRAs Interview that was not performed (i.e. No interview conducted)?

**Answer:** No, GPRA Follow-ups or GPRA Discharges that are not performed with the client (either face-to-face or telephonically) are not payable.

**Question 25:** Will I be reminded when a GPRA Follow-up Interview window is open?

**Answer:** Providers should use the "GPRA Discharge Due" and "GPRA Follow-up Due" lists in WITS to assist them in managing when these interviews are due.

## BPA Health Process

**Question 26:** I understand that we do the GAIN-I, then request units for the GAIN-I, and bill it. How long will this take?

**Answer:** BPA Health 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 these requests completed in no more than 2 business days.

**Question 27:** Providers often need to perform services for IYTP Clients 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 Health, 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.

**Question 28:** How do I request Transportation, Childcare, or Staffing be added to my authorization?

**Answer:** Initial requests for Transportation, Childcare, or Staffing, can be sent to BPA Health through an "Authorization Change Request – Note to Authorizer" in WITS. Instructions on how to complete these requests can be found at [wits.idaho.gov](http://wits.idaho.gov).

**Question 29:** What do if I have run low or out of Transportation units or funding and need more?

**Answer:** If you have submitted the initial authorization change request and have been authorized the standard number of units of mileage transportation and would like to request more because the client is going to run out of units, please email Brina Jensen with BPA Health (contact information below) to make that request.

**Question 30:** Where can I find the "paper invoice"?

**Answer:** If you need copy of the invoice in order to submit A-CRA certification activities, contact BPA Health's Accounting / Claims Department (contact information below).

## Reporting

**Question 31:** 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 32:** 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.

## Contact Information

Idaho Department of Health and Welfare

- Program & Technical Assistance | Rob Christensen – 208-334-6546, [ChristensenR@dhw.idaho.gov](mailto:ChristensenR@dhw.idaho.gov)
- WITS | WITS Help Desk – 208-332-7316, Toll-Free: 844-726-7493, [dbhwitshd@dhw.idaho.gov](mailto:dbhwitshd@dhw.idaho.gov)

BPA Health

- BPA Health | Call Center – 208-947-4393, Toll Free: 800-922-3406
- General Process | Brina Jensen – 208-947-1279, [brina.jensen@bpahealth.com](mailto:brina.jensen@bpahealth.com)
- BPA Health Clinical Supervisor | Dean Allen – 208- 305-4439, [dean.allen@bpahealth.com](mailto:dean.allen@bpahealth.com)
- Provider Network | Michelle Barker – 208-947-4377, [michelle.barker@bpahealth.com](mailto:michelle.barker@bpahealth.com)
- Accounting / Claims | Kelly Kelvie – 208-947-1298, [klkelvie@bpahealth.com](mailto:klkelvie@bpahealth.com)
- Contract / Program | Sarah Woodley – 208-947-1304, [sarah.woodley@bpahealth.com](mailto:sarah.woodley@bpahealth.com)

GAIN ABS Support Team

- GAIN Entry | -309-451-7777, [ABSsupport@chestnut.org](mailto:ABSsupport@chestnut.org)