DATE: November 7, 2013

TO: BPA SUD Provider Network

FROM: Idaho Department of Health and Welfare
Division of Behavioral Health, WITS Helpdesk

SUBJECT: ATR WITS FAQ

**Question #1**: How do I get trained on the ATR module if I was unable to attend one of the ATR trainings?

**Answer**: Go to [www.WITS.idaho.gov](http://www.WITS.idaho.gov) and click on WITS User Guides and scroll down until you see the heading ATR, click on the video link.

**Question #2**: I have staff in my agency who need to complete a GPRA but they don’t have the option in left side navigation menu. What permissions do I need to give staff who complete GPRAs?

**Answer**: The WITS user will only have access to the GPRA if the client record has been referred and accepted as an ATR client, and the user has the appropriate permissions. All Treatment Agency clinical staff who work with ATR clients will need the ATR PROVIDER – CLINICAL and ATR CASE MANAGER permissions added to their staff profile (the GPRA is linked to the ATR Case Manager permissions). All RSS Agency staff will need the ATR PROVIDER – CLINICAL permissions added to their staff profile. All Treatment Agency and RSS Agency billing staff will need the ATR PROVIDER – BILLING permission added to their staff profile.

**Question #3**: Are treatment providers able to complete the GAIN before the GPRA in WITS? Or does WITS force providers to complete the GPRA first?

**Answer**: WITS does not require a provider to complete the GPRA first. Providers should complete the GAIN before the GPRA in WITS. Providers should then proceed to bill both the GAIN and the GPRA.
**Question #4**: When we try to accept an ATR authorization, the system says we need to complete a GPRA first but we haven’t completed the GAIN assessment yet.

**Answer**: This is correct, in the ATR module; you can’t accept an authorization until you have completed the intake GPRA. Once you have completed the GAIN assessment and determined the client meets eligibility, you should complete the GPRA, accept the authorization, and bill the GAIN and GPRA in WITS. We are continuing to work on the process for clients who do not meet eligibility criteria after the GAIN is completed. An updated answer will be sent to providers soon.

**Question #5**: Are we able to upload (sync) an ATR GAIN into WITS now?

**Answer**: Yes, as of 11/1/2013 providers should complete ATR funded GAIN assessments under the ATR intake in WITS.

**Question #6**: How will providers know when GPRAs are due in WITS?

**Answer**: On the left side navigation menu, choose Agency then choose GPRA Follow Up. This screen will allow providers to sort on GPRA’s that are coming due or are past due. GPRAs should be completed by treatment providers.

**Question #7**: How do providers know when GPRA discharges are due in WITS?

**Answer**: On the left side navigation menu, choose Agency then choose GPRA Discharge Due. This screen will allow providers to sort on GPRAs that are in need of a discharge.

**Question #8**: What if the provider completes the follow-up GPRA but forgets to complete the discharge GPRA?

**Answer**: WITS will allow providers to complete the follow-up and then auto-create the discharge for the provider. WITS will ask the provider at the time of the follow-up GPRA if they are discharging the client. Answer accordingly.

**Question #9**: When can providers start billing ATR clients in WITS?

**Answer**: All services rendered 11/1/13 forward should be billed through WITS. All services rendered before 11/1/13 should be billed in Provider Connect.

**Question #10**: When a provider completes the GPRA in WITS will they automatically get paid or do they need to do an encounter note?

**Answer**: An encounter note will need to be completed and released to billing to get paid for a GPRA in WITS. The encounter note cannot be created until the GRPA is entered and the authorization is accepted.

**Question #11**: Can a provider bill for ATR services without doing the GPRA intake first?

**Answer**: No, the WITS system will not allow a provider to bill for any services rendered until you have entered the GPRA intake. An incomplete intake GPRA (completed by the
treatment provider) will also prevent an RSS provider from billing for services for this client.

**Question #12:** I don’t see the admission for an ATR client in WITS, what am I supposed to do?

**Answer:** The ATR module in WITS does not require an admission or a discharge. You only need to open an intake (which is created automatically when BPA refers the client) and then close the intake when the client discharges from services.

**Question #13:** I am a treatment provider who already entered ATR clients into WITS as part of early implementation. Now I have a SUD intake and an ATR intake. Can these items be combined so I can see all of the notes in one place?

**Answer:** No, the ATR module in WITS is a standalone module that can’t be combined with the SUD module. You will need to close the SUD intake and only work from the ATR intake. However, you can still see the records in the ATR intake if needed.

**Question #14:** When I go to add an ATR client to the group roster, the client won’t show up. Why?

**Answer:** The group notes module does not currently allow you to enter ATR clients meaning you will need to create individual encounter notes for ATR clients who attend group. IDHW is working with the vendor FEi to allow for ATR clients to be added to the group module. More information is forthcoming about timelines for this fix in WITS.

**Question #15:** I know I am supposed to do a “Note to Authorizer” to request RSS services (ex. drug testing) but what else am I supposed to do?

**Answer:** For November 1 – 17, 2013: Complete the “Note to Authorizer” on the Authorization Change request in WITS.

For November 18, 2013 – forward: For SUD clients continue to send the “Note to Authorizer” on the Authorization Change request in WITS. For ATR Clients, treatment providers will be required to send a provisional voucher. More detailed information about this process will be published shortly.

**Question #16:** Does the person doing the GPRA still have to be certified and is BPA still offering this training?

**Answer:** The person doing the GPRA still needs to be certified. Providers should contact Michael Bartlett at bartletm@dhw.idaho.gov for training and certification.

**Question #17:** Will I have to re-enter a GPRA into WITS that I already entered into BPA’s system?

**Answer:** No. If you go into an ATR intake and notice that the GPRA has not been completed (yet you completed the GPRA through the BPA system) call the WITS help desk and explain the situation. The WITS help desk will follow up with BPA to get the previously completed GPRAs and enter them into WITS on your behalf.
If you have any additional questions regarding this FAQ please contact the WITS help desk at (208) 332-7316.

Cc: BPA