

# SSIS Fiscal Flyer

Issue 60

Social Services Information System

May 27, 2008

## V5.0 workaround addresses APS intakes and TCM CSR issue

The new VA CEP (Vulnerable Adult Common Entry Point) module in version 5.0 includes a requirement for an adult maltreatment report to be created for intakes with the intake type "Adult maltreatment report." There is also a restriction preventing the creation of an APS (Adult Protective Services) case management workgroup from an Adult Services (General) Assessment workgroup.

In previous versions of SSIS some counties were creating intakes with the "Adult maltreatment report" designation in order to open APS workgroups and to record unduplicated counts of vulnerable adults on the TCM CSR (Targeted Case Management Client Statistical Report). This report counts clients for BRASS services 593 and 693 on Line 1 for VA/DD Case Management only if they are in an APS or DD workgroup. The TCM CSR is used to determine county targeted case management rates.

### SSIS Version 5.0 workaround:

1. Create an intake Adult Services (General) intake with the intake type "Service request."
2. Close intake with the reason "Open for case management – Intake complete."
3. Select "Open/Case Workgroup Setup" from Action menu.
4. Create an AS case management WG.
5. Request a data fix via email (<mailto:ssisdata@state.mn.us>) to change the program from Adult Services (General) to Adult Protective Services. Include the SSIS Workgroup #.

In SSIS Version 5.1, counties can create an APS intake using the intake type "Service request." Open an APS case management workgroup from this intake to record services provided to vulnerable adults.

In Version 5.1 counties can also create an APS case management workgroup from an Adult Services (General) assessment workgroup.

### CountyLink Additions & Updates

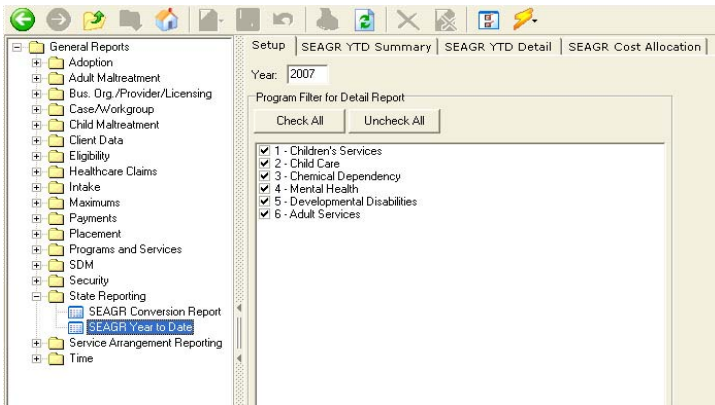
- ◆ Fiscal Mentor Meeting handouts, 5/8/07
- ◆ Fiscal Mentor Meeting minutes
- ◆ Fiscal Mentor Manual
- ◆ Fiscal Mentor lists (Primary and Alternate)
- ◆ V5.1 Data Models—*draft*
- ◆ Partnership Group minutes, 4/23/08
- ◆ Fiscal Software Specs updated:
  - Health Care Claiming-requirements
  - Health Care Claiming-design
  - Health Care Claiming-appendices
  - Payments-design
  - Payments– appendix
  - Service arrangement-design
  - TCM CSR

### SSIS Frequently-Called Phone Numbers

Main Line 651-431-4800 Fax 651-431-7521  
Help Line 651-431-4801 [ssishelp@state.mn.us](mailto:ssishelp@state.mn.us)

## SEAGR Cost Allocation Report

If you want to print the SEAGR Cost Allocation Report after you finish your quarterly report, check out Tools>General Reports>State Reporting>SEAGR Year to Date.



Select the SEAGR Cost Allocation tab, and the cost allocation will print for the latest submitted revision of each quarter's SEAGR Report.

### SEAGR Cost Allocation Report

Year: 2007

#### Period: Q3 (Jul 1 - Sept 30)

Cost Pool Total Purchased Service:	\$4,241,747.23	Staff Provided Social Service Expenditures:	\$723.01
Direct Allocations Staff Hours:	0.00	Total direct allocations:	\$0.00
Total Cost Pool Staff Hours:	199.68	Adjusted staff expenditures:	\$723.01
Average cost/hour:	\$3.620800		

#### Period: Q4 (Oct 1 - Dec 31)

Cost Pool Total Purchased Service:	\$2,955,480.10	Staff Provided Social Service Expenditures:	\$21,495.23
Direct Allocations Staff Hours:	0.00	Total direct allocations:	\$0.00
Total Cost Pool Staff Hours:	106.18	Adjusted staff expenditures:	\$21,495.23
Average cost/hour:	\$202.435100		

## Did You Know?

*Fiscal items of interest in SSIS Version 5.0 Package Release, May 12, 2008*

### Module: Fiscal-Claiming

The 837 claim generation process was updated to process either an UMPI or an NPI.

### Module: Workgroup & Related/Caseload List

*Problem Description:* Some types of client supplemental healthcare records with a workgroup attached were also being deleted when a user deleted that workgroup. The records being deleted along with the workgroup were LTC Screening and Revenue Account.

*User Impact:* When a workgroup is deleted only the workgroup information will be removed from a client's supplemental healthcare records. Users can then edit the records and associate them to a different workgroup.

### Module: Workgroup & Related/Caseload List

*Problem Description:* A workgroup could not be deleted if it was associated with a "Do Not Claim Determination" record.

*User Impact:* Workgroups associated with supplemental healthcare records including a "Do Not Claim Determination" record can be deleted. The supplemental healthcare records are still associated with the client and can be associated to a different workgroup if desired.

### Module: Programs and Services

An end date of 12/31/2007 has been implemented for the HCPCS/Modifiers with modifier HW (for state staff) and any associated claimable services and claimable activities.

## Do Not Claim Detail Report

**Description:** This report lists Do Not Claim eligibility information for clients who have a Do Not Claim record for the selected date range and the selected claim category. The user can include address information, MMIS Recipient Eligibility, PPHP Data, Payments For Claimable Services and Time Records For Claimable services for the claim category of the Do Not Claim record. The MMIS recipient information and the PPHP data will display all of the records for the client. It will not be limited by the date range. The Do Not Claim section will display under each person by claim category. The Payments and Time Records sections will display after the Do Not Claim records. Only the payments and time records for claimable services in the claim category selected that are in the date range selected display.

**Basic logic:** The report is available to run by Worker, Unit, Department or All. If the option is taken to run the report by Unit, Worker or Department, the appropriate Unit, Worker or Department is determined by the workgroup that is selected on the Do Not Claim record. All records display for the All category regardless of whether there is a workgroup selected on the Do Not Claim record.

**Available from:** Tools>General Reports>Eligibility

**This report can be used** to identify a client(s) who has a Do Not Claim record that may have been entered because the client was not receiving MA/MN Care but has since started receiving MA/MN Care services. This report can also be used to monitor claimable services provided to a person with a Do Not Claim record.

To use this report for MSHO clients, select the Reason of MSHO on the Do Not Claim record for the client. The report can then be run for Do Not Claim records that have a Reason of MSHO.

HCPCS/modifiers are no longer associated with time records. The report lists the service and activity from the time record. The HCPCS/modifiers and Claimable Services report lists the claimable services and activities by HCPCS/modifiers. This report is available from Tools>General Reports>Programs and Services in both SSIS Worker and SSIS Admin.

## IV-E pre-test and SSIS/MAXIS interface training scheduled in August

VPC sessions on August 18-19 will teach:

- Case preparation for the state Title IV-E Foster Care Eligibility pre-test to be conducted in fall 2008, and
- The critical relationship between foster care data entered in the SSIS and MAXIS systems and how the information interfaces to and from each system.

This will be valuable training for county and tribal social services agency staff involved in placing children or responsible for completing the IV-E eligibility determination process; child protection and income maintenance supervisors; front line workers doing direct data entry, Title IV-E Coordinators, and other staff involved in preparing cases for the state Title IV-E Pre-test.

Registration information will come in June.