



## **V17.2 Release Training**

- ❖ CFC Report
  - ◇ New Proofing Message
  - ◇ Other changes in determining IV-E Eligibility and IV-E Reimbursability
- ❖ CFC Claims Grids – New Columns Available
- ❖ Rates entered for Northstar Foster Care
- ❖ Payments
  - ◇ New Report – Potentially Eligible Northstar Payments
- ❖ Healthcare Claiming Code Changes
- ❖ Reminders & Resources

# Child Foster Care Report



## New Proofing Message #1188

❖ "Rule Code" must match the "Maintenance" claim "Rule Code."

Tree Data Clean-up

Mapcy, Vijay - 11/01/2015 - 11/3

Errors And Warnings

Payment: "MAPCY Adjustment" "Rule Code" must match the "Maintenance" claim "Rule Code."

Error Help

Help Description

The "Rule Code" must match the "Rule Code" of a "Maintenance" claim. A "Maintenance" claim does not exist for the service dates or "IV-E Claim" = "No" (Message #1188)

Child Foster Care Claims | Payment Proofing | Claimed Payment Proofing | Child Count Ratios | Child Count Detail | Child Count Proofing | IV-E Recoveries | IV-E Remittance Advice

Continuous Placement   
  Client   
  Service Dates  
 Court Actions   
  IV-E Eligibility   
  Other Errors  
 Extended Foster Care   
  IV-E Reimbursability   
  MAPCY / DOC Warnings  
 Placement   
  IV-E Service Type   
  Other Claim Warnings

Client Name

Svc Code	Spec Cost Code	Service Start Date	Service End Date	Warrant/ Eff Date	Amount	Primary Worker
181	19	11/01/2015	11/30/2015	12/02/2015	\$295.80	Holte, Deanna
Payment: "MAPCY Adjustment" "Rule Code" must match the "Maintenance" claim "Rule Code."						
181		11/01/2015	11/30/2015	12/02/2015	\$660.90	Holte, Deanna
Payment: The "License #" must have a value to claim IV-E.						
Warning - Payment: "License #" does not have a value and the child has been in placement more than 2 months. Placement "Start Date" (08/10/2015).						
Client Name : Non-IV-E, Fantasia						
Client Name : Non-IV-E, Gallagher						
Client Name : Non-IV-E, Haddie						

## Proofing Message #1188 Example

- ❖ This message displays if the Maintenance claim has Rule Code "NYL" and the MAPCY or DOC adjustment claim has a different Rule Code because the foster home license was associated to the adjustment payment, but not to the maintenance payment
  - ❖ Create an Adjustment Reversal and Correcting Entry Adjustment for the Payment associated to the Maintenance claim
  - ❖ Select the license number on the Correcting Entry Adjustment
  - ❖ A Payment Modification is not needed for the payment associated to the claim with the DOC or MAPCY Adjustment

## Changes for Reasonable Efforts

- ❖ New Monthly Reimbursability Test in MAXIS

Reimbursable Client

- Address/Phone/Email/State Detail
- Adolescent Services
- Name/Race
- Relationship
- Employment
- Disability/Diagnosis/Substance
- Health/Insurance
- Medication/Checkup
- CW/Education/Infant and Toddler Intervention
- CMH Screenings and Assessments
- Court Actions
- Permanency
- MAPCY/DOC Assessments
- SEY
- Workgroups & Intakes
- Client Eligibility Log
  - IV-E Eligibility
  - IV-E Reimbursability
  - IV-E Eligibility Submission Worksheet
  - IV-E Reimbursability Submission Worksheet
  - IV-E Submissions to MAXIS
- Healthcare Eligibility from MMS
- Supplemental Healthcare Eligibility
- Fiscal Details
- Special Studies
- Attached Files
- Documents

Monthly Reimbursability Test Results — Reimbursable

Dup. assistance: Pass

Maintenance agreement: Pass

Reasonable efforts to prevent picmt: Pass

Reasonable efforts to finalize perm plan: N.A.

*Note: This change will not affect agencies much. If adjustments were needed, most have already been completed previously.*

## Child Foster Care Report Proofing Handouts – Updated!!

- ❖ Child Foster Care Report – Proofing Messages
  - ◇ Sorted numerically
  - ◇ Separated by Proofing Category
- ❖ Child Foster Care Report – Reference Document for Payment and Claimed Payment Proofing
  - ◇ Sorted numerically
  - ◇ Use to help work through errors and warnings on the Child Foster Care Report

7

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05/31/2017

## New Columns for CFC Claims Grids

- ❖ Now Available as Optional Columns
  - ◇ Basic Per Diem
  - ◇ Supplemental Per Diem

Child Foster Care Claims   Payment Proofing   Claimed Payment Proofing   Child Count Ratios   Child Count Detail   Child Count Proofing   IV-E Recoveries   IV-E Remittance Advice													
Client Name													
IV-E Service Type	Service Start Date	Service End Date	Warrant / Eff Date	Service Vendor	Rule Code	Vendor Payment Amount	Total Non-Reimbursable Amount	Total IV-E Amount	Total FFP Amount	Northstar Amount	Basic Amount	Supplemental Amount	
Client Name : IV-E Washington, Elsa													
Maintenance	06/01/2015	06/30/2015	07/05/2015	Allen Child Foster Care	1	\$2,234.10	\$0.00	\$0.00	\$0.00	\$2,234.10			
						\$2,234.10	\$0.00	\$0.00	\$0.00	\$2,234.10	\$0.00	\$0.00	
Client Name : IV-E Washington, Eva													
Maintenance	02/01/2015	02/28/2015	03/15/2016	NORTHWOOD CHILDREN'S HOME	5	\$3,139.36	\$245.50	\$2,893.86	\$1,446.93	\$0.00			
						\$3,139.36	\$245.50	\$2,893.86	\$1,446.93	\$0.00	\$0.00	\$0.00	

- ❖ Available in the following grids:
  - ◇ Child Foster Care Claims tab on CFC Report
  - ◇ Child Foster Care Claims Search

*Note: These columns will be blank for all claims with service dates before 07/01/2017.*

8

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05/31/2017

## **New Northstar Rates Available**

The new Northstar Foster Care rates are effective 07/01/2017 – 06/30/2018.

- ❖ Begin entering Service Arrangements now for Northstar Foster Care Services with service dates starting 07/01/2016
  - ❖ Use the Advanced Service Arrangement Search to find and duplicate existing Service Arrangements for clients in Northstar classified placements by adding the MAPCY Level field to the grid
- ❖ Northstar Kinship RCA CT Benefit Agreements can also be completed now that these rates are available and entered in SSIS.

9

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# Questions?



10

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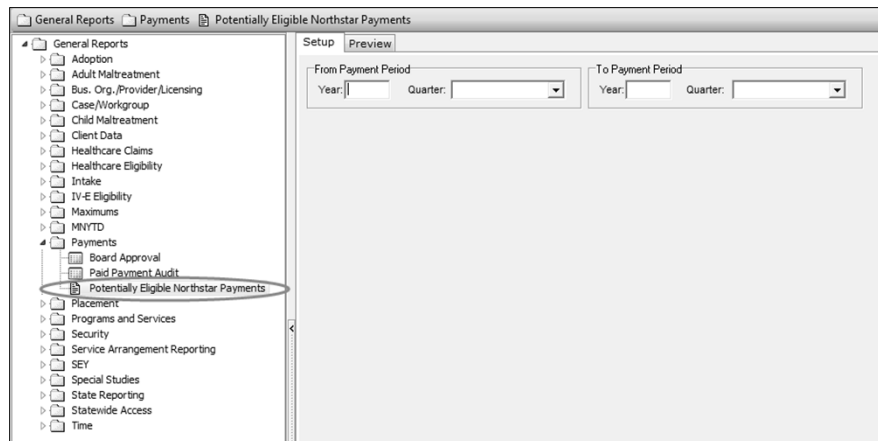
# Payments



11 SSIS Fiscal V17.2 Release Training

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## New Report – Potentially Eligible Northstar Payments



12 SSIS Fiscal V17.2 Release Training

05/31/2017

## Potentially Eligible Northstar Payments - Page 1

### Potentially Eligible Northstar Payments

Payment Period: Q1 2015 - Q1 2015

Payment Breakdown			
Payment Period	Total Paid	Total Claimed	Total Not Claimed
2015 Q1	\$212,693.81	\$109,619.36	\$103,074.45
Total	\$212,693.81	\$109,619.36	\$103,074.45

Not Claimed Breakdown				
Non - Claimable SCC	No License #	Invalid License	Discharge Date	Other Errors
\$13,867.12	\$999.75	\$5,525.66	\$4,642.16	\$78,039.76
\$13,867.12	\$999.75	\$5,525.66	\$4,642.16	\$78,039.76

Percent Not Claimed of Total Paid		
Payment Period	Total Claimed %	Total Not Claimed %
2015 Q1	51.54%	48.46%
Average	51.54%	48.46%

Not Claimed Breakdown Percent of Total Paid				
Non - Claimable SCC	No License #	Invalid License	Discharge Date	Other Errors
6.52%	0.47%	2.60%	2.18%	36.69%
6.52%	0.47%	2.60%	2.18%	36.69%

Not Claimed Breakdown by Percent						
Payment Period	Non - Claimable SCC	No License #	Invalid License	Discharge Date	Other Errors	Total Not Claimed
2015 Q1	13.45%	0.97%	5.36%	4.50%	75.71%	100.00%
Average	13.45%	0.97%	5.36%	4.50%	75.71%	100.00%

13

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05/31/2017

## Potentially Eligible Northstar Payments - Page 2

### Potentially Eligible Northstar Payments

Non-Claimable Special Cost Code Breakdown							
Payment Period	Clothing (SCC 01, 02)	Admin (SCC 14)	Corrections (SCC 94)	Not COFR (SCC 95)	Non-Reim FC (SCC 96)	Non - Reim EFC-SIL (SCC 97,98)	All Other SCC
2015 Q1	\$8,370.00	\$5,448.96	\$0.00	\$0.00	\$13.16	\$0.00	\$35.00
Total	\$8,370.00	\$5,448.96	\$0.00	\$0.00	\$13.16	\$0.00	\$35.00

Non-Claimable Special Cost Code Percent of Total Paid							
Payment Period	Clothing (SCC 01, 02)	Admin (SCC 14)	Corrections (SCC 94)	Not COFR (SCC 95)	Non-Reim FC (SCC 96)	Non - Reim EFC-SIL (SCC 97,98)	All Other SCC
2015 Q1	3.94%	2.56%	0.00%	0.00%	0.01%	0.00%	0.02%
Average	3.94%	2.56%	0.00%	0.00%	0.01%	0.00%	0.02%

Non-Claimable Special Cost Code Percent of Not Claimed							
Payment Period	Clothing (SCC 01, 02)	Admin (SCC 14)	Corrections (SCC 94)	Not COFR (SCC 95)	Non-Reim FC (SCC 96)	Non - Reim EFC-SIL (SCC 97,98)	All Other SCC
2015 Q1	8.12%	5.29%	0.00%	0.00%	0.01%	0.00%	0.03%
Average	8.12%	5.29%	0.00%	0.00%	0.01%	0.00%	0.03%

14

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05/31/2017

## Advanced Payment Search - Example

Searches: [dropdown] Max results: 500 Search on open 0.30 Secs, 1 Results

Payment #: [input] Payment status: [dropdown] Payment type: [dropdown]

Date filters:  
 Date type: [dropdown] Date range: [dropdown] From: [input] To: [input]  
 Warrant / eff. date: [dropdown] Custom [dropdown] 1/1/2015 [dropdown] 3/31/2015 [dropdown]  
 Service dates partially within: [dropdown] Custom [dropdown]

Vendor filters:  
 Vendor type: [dropdown] Business name: [input] County vendor #: [input] SSIS bus. org. #: [input]

Client filters:  
 Client first name: [input] Client last name: [input] County person #: [input] SSIS person #: [input] PMI #: [input]

Service filters:  
 "Service" equal to "180 - Treatment Foster Care" [input]  
 "Service" equal to "181 - Child Family Foster Care" [input]

Chart of accounts filters:  
 [input] [input] [input] [input]

Additional filters:  
 Filter by: [dropdown] Special cost code: [input]  
 Special cost code: [dropdown] 96 - Additional foster care (non-reimbursable) [input]

Search [button] Clear [button]

Payment Type	Payment Status	Warrant / Eff Date	Amount	Service Vendor	Service Start Date	Service End Date	Client Name	COA Code
Correcting entry adjustment	Paid	02/09/2015	\$13.16	Chambersburg Family Foster Home	01/28/2015	01/31/2015	MAPCY, Ariel	11-430-710-3810-6077
Count: 1			\$13.16					

15

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05/31/2017

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16

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# Healthcare Claiming



17 SSIS Fiscal V17.2 Release Training

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## HCPCS/Modifier Changes

- ❖ Ended (Effective 08/31/2016)
  - ❖ H2017 UD – Transition to Community Living
  - ❖ H2017 HM UD - Transition to Community Living by a mental health rehabilitation worker
  - ❖ 90882 UD – Transition to Community Intervention
  - ❖ 90882 HM UD – Transition to Community Intervention by a mental health rehabilitation worker

18 SSIS Fiscal V17.2 Release Training

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## **HCPCS/Modifier Changes cont.**

- ❖ New (Effective 09/01/2016)
  - ◇ H2017 U3 – Basic living and social skills, transitioning to community living (TCL), mental health professional or practitioner
  - ◇ H2017 HM U3 – Basic skills, transitioning to community living (TCL) by a mental health rehabilitation worker, less than bachelor's degree level
  - ◇ 90882 U3 – Environmental or community intervention; transition to community living (TCL) intervention
  - ◇ 90882 HM U3 - Environmental or community intervention; transition to community living intervention, less than bachelor's degree level, mental health rehabilitation worker

## **HCPCS/Modifier Changes cont.**

- ❖ Description Changed
  - ◇ 90882 – Environmental or community intervention, mental health professional or practitioner
  - ◇ 90882 HM – Environmental or community intervention, mental health rehabilitation worker
  - ◇ T2038 – Trans Serv Deposits/Moving Exp

## **New Remittance Advice Adjustment Reason Codes**

- ❖ 278 - Performance program proficiency requirements not met. (Use only with GroupCodes CO or PI) Note: Refer to the 835 Healthcare Policy Identification Segment (loop 2110 Service Payment Information REF), if present.
- ❖ 279 - Services not provided by Preferred network providers.

## **New Claim Rate Adjustment Reason Codes**

- ❖ 2R - Inpatient transition cutback
- ❖ DS - Inpatient dsh add-on
- ❖ MN - Inpatient cost outlier add-on
- ❖ TI - Inpatient transition add-on
- ❖ TN - Inpatient ten percent add-on
- ❖ WA - Inpatient mental health drg add-on
- ❖ WB - Inpatient neonate add-on
- ❖ WC - Inpatient normal newborn add-on
- ❖ WD - Inpatient ob vag deliv metro add-on

## **New Claim Rate Adjustment Reason Codes cont.**

- ❖ WE - Inpatient ob vag delv nonmetro add-on
- ❖ WF - Inpatient ob cesarean drg add-on
- ❖ WG - Inpatient oth obstetric drg add-on
- ❖ WH - Inpatient transplant drg add-on
- ❖ WI - Inpatient trauma drg add-on
- ❖ WJ - Inpatient oth drg child hosp add-on
- ❖ WK - Inpatient oth drg non-child hsp add-on
- ❖ WL - Inpatient other drg adult add-on

23

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05/31/2017

# Questions?



24

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## DEX to SQL Migration

- ❖ Preparation for Centralization to Citrix
- ❖ Currently in process
  - ◇ Several agencies successfully migrated
  - ◇ Completed for all agencies by August 2017
- ❖ SSIS will contact agencies to schedule each migration – approx. 6 each week
  - ◇ Agencies need to respond to Laura via email with:
    - ◇ **Two** possible dates to migrate
    - ◇ A fiscal contact to act as the main contact and tester
    - ◇ An IT contact to address firewall issues, if needed

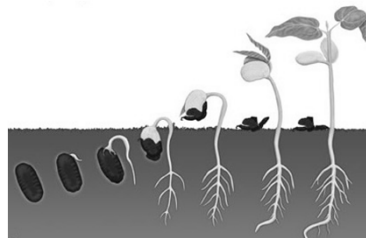
25

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05/31/2017

## DEX to SQL Migration cont.

- ❖ Agencies **WILL NOT** have the capability to manually run Payment Interfaces and Vendor Interfaces after the migration
  - ◇ Payment Interfaces and Vendor Interfaces will run at scheduled times
- ❖ See SSIS Update #464 for more information



26

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05/31/2017

## What should you remember?

- ❖ Regenerate Healthcare Claim Batches
- ❖ Generate or Regenerate Q2 State Reports
- ❖ Review V17.2 documents
  - ◇ Release Notes
  - ◇ Known Defects
  - ◇ What's New in 17.2
  - ◇ PowerPoint Presentation
  - ◇ Child Foster Care Report Proofing Messages
  - ◇ Child Foster Care Report – Reference for Proofing Messages
  - ◇ Fiscal Reports and Descriptions
  - ◇ SSIS Update #464

## Available Resources

- ❖ SSIS Help Desk
  - ◇ Email – [dhs.ssishelp@state.mn.us](mailto:dhs.ssishelp@state.mn.us)
  - ◇ Phone – (651) 431-4801
- ❖ Northstar Policy Questions
  - ◇ Email – [northstar.care@state.mn.us](mailto:northstar.care@state.mn.us)
- ❖ SSIS website
- ❖ Fiscal & Worker Mentors

# Questions?



29

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05/31/2017

# Thank You!



30

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