

Long-Term Care Foundation

of Washington State

Introduction to ProviderOne Social Service Guides

Presented by:

Jacquelyn Pinkerton, MSW Social Services Billing Program Manager, DSHS Shereice Brown Workforce Development Specialist, Long-Term Care Foundation

Objective

- Know how to navigate hca.wa.gov to find information such as:
 - Where to find billing and resource guides for ProviderOne;
 - Where to find contact information for assistance.
- Understand some foundational information related to:
 - What is considered before an authorization is created;
 - What information you can derive from your Authorization List;
 - Different methods of submitting claims.
- This training is NOT intended to go into significant detail related to authorizations and claims. This is an orientation to these topics that we can build on in later training opportunities.



Washington State Department of Social and Health Services

Agenda

- How to get to the ProviderOne Social Services resource page
- Billing essentials and managing provider data
- Authorizations
 - What goes into an authorization
 - How to view your authorization list
- Billing and Claims
 - Different methods of claims submission
 - Viewing your claims
- Health Care Authority (HCA) contacts



Washington State Department of Social and Health Services

ProviderOne for Social Services Page Navigation

• Show screen recording navigation to ProviderOne social services provider web page.



Billing essentials and managing provider files and users

- <u>Getting started</u> Covers basic navigation, pop-ups and browsers, password troubleshooting, and managing alerts.
- <u>Managing provider data</u>
- <u>Adding new users and assigning profiles</u>
- Social service providers frequently asked questions (FAQ)

- If you haven't reviewed these guides already they have good information that can help you more effectively navigate the ProviderOne portal.
- Knowing about how to manage your provider data can assist you in more easily resolving payment issues.



What happens before an Authorization is created in ProviderOne?



DSHS services are intended to support the client in their home and community not replace the benefits already available to them through their Long-Term Care Insurance, Medicare, Medicaid, or Managed Care Organization.

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Viewing Authorizations

Viewing authorizations

• Viewing authorization list

 It is important to familiarize yourself with how to view your Authorization List so you can more easily identify when there may be issue that could affect your payments.



https://hca.wa.gov/billers-providers-partners/providerone/providerone-social-services

Viewing Authorizations

Viewing authorizations

• Viewing authorization list

- Your authorizations list will show you the authorized service code, rate, and error status for individual service lines.
 - When you start services with a new client, or when new service lines are authorized to you, it can be very helpful to verify the authorized services and rates are consistent with the client's care plan/assessment.



Viewing Authorizations

Viewing authorizations

• Viewing authorization list

- Most rates can be verified against the published rates found here: <u>https://www.dshs.wa.gov/altsa/ma</u> <u>nagement-services-division/office-</u> <u>rates-management</u>
- If your client has been approved for an exceptional rate then you can confirm that the rate authorized matches the exceptional rate communicated by the Case Manager.



Sample Authorization List

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Viewing Authorization List

https://www.hca.wa.gov/billers-providers-partners/providerone/providerone-social-services

Billing/Claims Submission Methods

- **Basic bill**: This process is direct entry, meaning that you will fill in all the needed billing information into a billing form.
 - The direct entry process is the basis for building and submitting templates and for adjusting claims.
- Claims from saved templates: Having templates with previously saved information will help cut down on errors by reducing the amount of data entry for each claim.





Billing/Claims Submission Methods

- **Template Batch**: A group of claims which share the same date of service. The batch allows the provider to create a group (batch) of templates, change the date of service on all the templates at one time, and submit the batch all at once.
- Batch Upload: Social service batch upload billing is an optional billing method to allow providers to extract billing data elements from their current timekeeping and/or billing software and upload the claim(s) data into the ProviderOne system.



Billing Reminders

- Turn off your pop-up blockers.
- ProviderOne pays on Fridays. Claims must be submitted by Tuesdays at 5 pm for payment the following **Friday**.
- Date range and batch billing is only available when:
 - All claims have the same date range.
 - Unit types are daily or monthly.
 - There is no break in service for a client within the submitted date range.



Billing Reminders

- Establish a billing routine (i.e. weekly, bi-weekly, monthly, etc.).
- Adjust paid claims if you need to change units, rates, or remove dates. If you need to "add" dates submit a new claim.
- If there is an error related to the social service authorization work with the case manager.
- If you get a claim error work with the Medical Assistance Customer Service Center (MACSC) with the Health Care Authority.



Social Service Claims

Submitting and adjusting social service claims

- <u>Submitting social service claims</u>
- <u>Creating social service templates</u>
- <u>Adjust, void, and resubmit social service claims</u>

- These guides are for social service (non-medical) claims.
- Creating templates can reduce the risk of errors when submitting claims.
- Templates also will allow you to submit batches of claims for clients with the same billed dates of service.



Social Service Claims

Submitting and adjusting social service claims

- <u>Submitting social service claims</u>
- <u>Creating social service templates</u>
- <u>Adjust, void, and resubmit social service claims</u>

- Submit new claims when it is the first time you are billing for services.
- Adjustments to claims should only happen when you need to change something from a previously submitted claims.
- If you are wanting to add dates of service then you should be submitting new claims NOT adjusting.



Social Service Medical Claims

Submitting and adjusting social service medical claims

- <u>Submitting social service medical claims</u>
- <u>Creating social service medical templates</u>
- Adjust, void, and resubmit social service medical claims

- These billing guides are specific to providers who submit claims for Medical Social Services.
- Examples of Medical Social Services are:
 - Nurse Delegation
 - Private Duty Nursing



https://hca.wa.gov/billers-providers-partners/providerone/providerone-social-services

Social Service Provider Types: Services

Social service medical

- T1020, TD Personal Care Residential - PDN Inclusive
- H2014, U5 Nurse Delegation

Social service non-medical

- T1020, U1 Personal Care AFH
- T2033, U1 AFH ECS Add-on
- T2033, U5 AFH Add-on SBS
- T2033, U6 AFH Meaningful Day Add-on



Batch Claims

Creating and submitting batch claims

- <u>Creating and submitting social service batch claims</u>
- <u>Creating and submitting social service medical batch claims</u>
- <u>ProviderOne batch upload setup guide</u>
- .DAT file formatting requirements

There are 2 different types of batch claims:

- Template batch submission (social service and social service medical).
- ProviderOne bath upload.



https://hca.wa.gov/billers-providers-partners/providerone/providerone-social-services

Viewing Claim Status

Viewing claim status and remittance advice

- <u>Claim status inquiry and viewing remittance advice (RA)</u>
- This provider guide will cover the different details that are viewable from the Claim Inquiry screen in ProviderOne.
- The details that are viewable from your Claim Inquiry list will be useful when reviewing your Remittance Advice.
- This guide also reviews the different pieces of your RA to help you understand your payments.



Viewing Claim Status

• For Social Service Only providers (not Social Service Medical).

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Finding Provider Enrollment and Provider Security

• Show screen recording of HCA web page navigation to P1 Security and P1 Enrollment.



Provider Enrollment

I need help with	Contact
 Provider enrollment and revalidation 	Phone: 1-800-562-3022 ext. 16137 Email: <u>Providerenrollment@hca.wa.gov</u> Fax: 360-725-2144

https://www.hca.wa.gov/billers-providers-partners/apple-health-medicaid-providers/enroll-provider



https://www.hca.wa.gov/contact-hca#collapse5

Sign-in Help ProviderOne Security

I need help with	Contact
 Login information Security 	ProviderOne Security Phone:1-800-562-3022 ext. 59991 Email: <u>provideronesecurity@hca.wa.gov</u>

https://www.hca.wa.gov/billers-providers-partners/providerone/providerone-security



https://www.hca.wa.gov/contact-hca#collapse5

How to find the Secure WebForm

• Show screen recording of HCA web page navigation to MACSC contact info.



Claim Help - MACSC

I need help with	Contact
 Billing and claims 	Medical Assistance Customer Service Center (MACSC) Phone: 1-800-562-3022 (choose "provider services") Online: <u>Secure web form</u>
(medical and social services)Claim	Important! If you need assistance on a claim close to the two-year timely filing deadline, please type "Urgent, timely issue." in the Other Comments box on our <u>secure web</u> form □.
inquiry Service limitations 	 Business hours: Provider general line and social services billers: Monday through Friday 7 a.m. to 4:30 p.m. (Pacific) (except state holidays) Claim line: Monday through Friday 8 a.m. to noon and 1:30 to 3:30 p.m. (Pacific) (except state holidays)



https://www.hca.wa.gov/contact-hca#collapse5

Troubleshooting billing/claims

Provider (verify)

- Pop-up blockers off
- Client indicators correct*
- Claim matches authorized*: Provider ID, service code, dates, units, rate
- For medical-social service claims confirm mandatory fields completed

*When verifying the client indicators and authorization details consider whether it is a data entry issue or source system issue. Client indicators on the claim should be correct and match the client's ProviderOne Profile. If the authorization details need to be modified work with the Case Manager.

- Case Manager (modify)

 Service code
- Dates
- Units
- Rate
- Authorization service line errors

MACSC (ProviderOne)

- Profile questions
- Billing and claims errors
- General navigation
- Technical difficulties
- Other non-authorization related issues

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Contact Information

- Social service batch upload billing
 - For help: <u>hipaa-help@hca.wa.gov</u>
- Authorization errors: contact the Case Manager associated to the authorization
- Claims issues: Contact the MACSC team via phone or their online web form https://www.hca.wa.gov/billers-providers-partners/contact-us
- Questions about today's presentation: shereice@ltcfwa.org

