

This Computes!



Department of Health Care Services Children's Medical Services Network (CMS Net) - Information Bulletin #407

October 2012 Change Cycle

The CMS Net applications will be down from 5:00 p.m., Friday, October 19th until 5:00 p.m., Saturday, October 20th to implement changes included in the October 2012 change cycle further described below:

CMS Net Web:

SAR:

- The Statewide user Security Role has been given the ability to cancel SARs.
- When issuing a SAR to a "physician" provider type, special instructions #1, 8 and 9 (General) are auto populated.
- Change the sort on the SAR summary results to service end date in descending order.
- Add the CCS paneled specialty of the provider as a mouse hover on the provider type field. This is applicable to all SAR screens and SAR search results where provider type is displayed.
- An insurance segment(s) or managed care plan will display real-time when printing, reprinting or viewing online. If an active insurance segment or managed care coverage date falls *within* the SAR service begin and end date the coverage will display on the SAR.
- A "website cannot display the page" error is no longer displayed when searching for a SAR by "Service Begin Date" and "Service End Date". The system will now display the appropriate error: Please select at least one search parameter client or provider.
- User may now select an inactive SCC when creating a pending SAR. The defect for not being able to select an inactive Special Care Center (SCC) has been fixed.
- **SAR - Approval Process (For Counties that participate in Approval Process):** Previously when a user denied or cancelled a SAR, and clicked "Continue" button on the Case Note page, the correspondence was set to

“incomplete” status instead of redirecting the user to the correspondence page to select an approver. This issue has been fixed. Saving the case note or clicking “Continue” button will both redirect the user to select an approver.

- SARs issued to Special Care Centers (SCC) will now display the “Send Authorizations” address.
- Service Description on the SAR will now display the name of the Procedure Code selected.
- Display user’s telephone number on correspondences and SAR. This new change will be implemented for counties who wish to have their user phone number listed for ALL correspondences and SAR. * *See correspondence section for telephone display rules.*

Correspondence:

- GHPP Application Letters (G-34 & G-36) – Added the Department of the Treasury Internal Revenue Service Request for Transcript of Tax Return (Form 4506-T) to the application series letters
- GHPP Medi-Cal Referral Letters (G-38O & G-39O) – Added tickler to follow-up tickler. Tickler is cleared when Medi-Cal (e.g., Recon) indicates client is Medi-Cal eligible (an eligibility status other than 99) or case is closed.
- New GHPP Referral to CCS Letter (G-61). Allows GHPP staff to generate a referral to the CCS Program when clients meet CCS eligibility criteria.
- In CMS Net Legacy "Pending Transfer" screen, when correspondence letters C-20 and C-21 are generated for CMSNet Web, the system will no longer duplicate the correspondence by adding a CC for the primary addressee.
- In CMS Net Legacy "Pending Transfer" screen, the "Out of State" option has been removed from the "New Legal Co" selection list. A case should be closed/denied if a client is no longer residing in California.
- In CMS Net Web, default addresses should not be removed from correspondence. The remove (x) option has been disabled for default addresses in letters.
- User may undelete a deleted letter by searching for the deleted letter. Select the delete letter and clicking on the “Undelete” button to undelete the letter. Once undeleted, the letter will be in “incomplete” status for completion.
- When a letter is deleted, it will have a watermark with the deleted date.
- Disallow reissuing of C-50 (Family DX Eval Cover Letter), C-51(TX/Therapy Auth Cover Letter), C-73 (Distribution Cover Letter) letters.
- Provider name look up has been corrected. For example, Searching for Tri-Counties will display in search results with or without the (-).
- Users may reprint correspondence for client that was previously in their legal county.
- Correspondence Search Results: fixed the sorting by date fields. It will now sort correctly.
- User’s telephone number on correspondences and SAR*
 - This new change will be implemented for counties who wish to have their user phone number listed for ALL correspondences and SAR. **Rules**

for non-participating counties: no changes, system will not display the 'county phone number' after 'issued by user' on the SAR and correspondence.

- **Rules for Participating counties:**

- System will use the phone number of the user who last updated the correspondence or issued the SAR.
- If the user who authorizes the SAR or last updated the correspondence does not have a phone number, the nurse case manager's phone number from patient caseload will be used.
- If nurse case manager from patient caseload is without a phone number, the county phone number will be used.
- If the user who authorizes the SAR or last updated the correspondence is deactivated, the work reassignment user's phone number will be used.
- If work reassignment user is deactivated or without phone number, the nurse case manager from patient caseload will be used.
- If nurse case manager from patient caseload is without a phone number, the county phone number will be used.

Reports:

- New GHPP report that allows GHPP staff to search for Insurance Premium Payment Letters (G-30) tickled 15 days after letter sent date. Select Miscellaneous, Follow-Up Tickler Report, "GHPP Initial Premium Payment Follow-up".
- Update "SAR Authorizations Report" (Reports > SAR) to include legacy authorizations.
- Correct "Authorization Eligibility" and "Top 10 Dx Center Care" reports (Reports > Miscellaneous > Quarterly Reports) to report on all counties every quarter.
- Daily Activity Report –Run Report: Removed the end date requirement when running a Run Report in the Daily Activity Report.
- Correction to the Time From Service Request to Authorization report to take less time to execute.
- Modified the Paneling Reports to include a PMF indicator and Status Change Date columns.
- Added the following new Paneling Reports: Panel Status Summary Report, NPI Pending Report, Status Summary Report, Pending Tracking Report.

Caseload:

- Update Patient access business rules to exclude details from view on any patient assigned to an Administrative Lock caseload. Only members of the Administrative Lock caseload have access to the cases in the caseload.

Case Notes:

- Changed the default sort order for Case Notes to descending order by create date.
- Changed 'Print All' button on the Search screen to allow **ALL** case notes to be printed for a specific client or date range period.
- Users will be able to enter all punctuations and symbols in case notes.

Provider Management (Applicable to State Staff Only):

- Special Care Center (SCC) "Arranged HRIF at" field is editable for NICU, PICU and HRIF centers only.
- SCC provider team field is now editable.
- "Out of State" has been added to the drop down list of counties for Special Care Centers Only.
- Paneling Application Auto denial time frame for Allied Providers has been changed.

Special Instructions:

- In "Special Instructions Maintenance", "UsedByCCS" and "UsedByGHPP" flags have been added to specify which program the instruction is intended for use.
- In "Special Instructions Maintenance" Add/Modify screens, a 4000 max character limit has been added.

MTP:

- In "MTP", when adding a "Managing Physician", a provider's alternate correspondence addresses will be displayed in the selection list.

Web Messages:

- Duplicate Attachments not allowed when sending a web message.

General CMS Net Web:

- Corrected the Select Option feature in Correspondence, Case Notes and PTR Search Result screens to ensure all client records will remain selected when paging forward and backward through multiple pages.
- In "My Profile", the "Select" option has been removed from selection list. Credentials can be added by clicking or Ctrl + Click to add additional credentials. Ctrl + Click will also deselect credentials.
- "Other Field Maintenance" can now be updated without system error.

CMS Net Legacy:

Enrollment/Assessment Fees Screen:

- Updated the business rules for clearing the Payment Due (G-41a) tickler and letters. Currently the user must initiate a Payment Plan to clear G-41 tickler, this change adds an additional business rule where if the Enrollment Fee Date Received contains a date or Payment Status= Full Payment Received, delete any follow-up ticklers or G-41a letters.

Insurance Coverage:

- “Comments”, “Last Updated By”, and “Date” are now displayed independently for each insurance segment. Previously these fields were displayed as one entry for all insurance segments.
- Case notes that are generated on the web due to changes on this screen will appear as one case note per insurance segment per day. Updating a case note, by making additional changes to the insurance segment in CMSNet Legacy, will update the same case note. Updating another insurance segment will create a separate case note on the same day.

Personal Injury:

- PI Indicator field removed.
- “Worker’s Comp” field split into two categories, based on Accident Type. Worker’s Compensation Claim activates field “Worker’s Comp #”. All other accident types activate field “Policy #”.
- Typing “unknown” or “ask client” in the Worker’s Comp # or Pol # fields will save the text “ASK CLIENT” in the corresponding field.

Medi-Cal Coverage Screen:

- “DOS” field removed.
- “Termination” field renamed to “End Date” field and moved down one line.
- “Start Date” field added.
- “Comments”, “Last Updated By”, and “Date” are now displayed independently for each insurance segment. Previously these fields were displayed as one entry for all insurance segments.
- Case notes that are generated on the web due to changes on this screen will appear as one case note per insurance segment per day. Updating a case note, by making additional changes to the insurance segment in CMSNet Legacy, will update the same case note. Updating another insurance segment will create a separate case note for that day.

Patient Registration:

- Corrected system error when a re-referral was saved.

Pending Transfer screen:

- When zip code is entered in the zip field for the New Primary Addressee, the city will auto populate in the city and state field.

Display Eligibility Log:

- Removed the following screens from the Display Eligibility Log:
 - Healthy Families Coverage History
 - Insurance Coverage History
 - Medi-Cal Coverage History
 - Replace Beneficiary ID Card History

Miscellaneous Tickler Entry/ Edit:

- Miscellaneous Tickler Entry/ Edit is converted to CMS web from Legacy. This module is accessible as a drop down option under Program Modules and on the home page as a quick link. Via this module the users will be able to set up case specific reminders with the ability to add, edit, delete, view, print ticklers and generate reports. For further details please refer to manual link below:

<http://www.dhcs.ca.gov/services/ccs/cmsnet/Documents/cmsnetwebsection40.docx>

Provider Electronic Data Interchange (PEDI):**Service Authorization File (SAF)**

- An electronic version of SAF data elements is available for download by Medi-Cal Managed Care and Healthy Families Plans on the Reports Menu. The SAF data dictionary is available on the FAQs link.

Quick Links

- Added a quick links in the header (under FAQ) to the California Code of Regulations, Medi-Cal Service Code Groupings, and Medi-Cal HCPCS/CPT Code listing.

Reports

- When running the Print report for a specified provider and there are no completed letter(s), a system error is no longer generated.

User Maintenance:

- New error message is displayed when attempting to add a PEDI system administrator, who is not an existing CMS Net account holder.
- Added phone number and extension fields.

PEDI New Password Requirement:

- Add a new password requirement below:
 - Password must be exactly 8 characters in length.
 - Password is case sensitive and must contain at least one alphabetic uppercase letter (A - Z).
 - or-
 - One of the national characters (#, @, \$), at least one alphabetic lowercase letter (a-z), and at least one number (0-9).
 - Four consecutive characters from any part of your login as (username), first name, last name or middle name may not be used in your password.
- Effective implementation date, PEDI users are required to change their password. The system will allow entry of the existing password in any case in order to access the change password screen. After implementation, the password is case sensitive and must follow the new password rules.

My Profile page:

- Allow PEDI user to update their profile. On the My Profile page, users may update the following: First and Last name, Email address, and Contact phone number and extension fields.