

This Computes!



Department of Health Care Services Children's Medical Services Network (CMS Net) - Information Bulletin #441

October 25, 2013 Change Cycle

The CMS Net applications will be down at 5:00 p.m. on Friday, October 25th and all day Saturday, October 26th. The CMS Net applications will be available starting at 6:00 a.m. on Sunday, October 27th. This update will implement changes included in the October 2013 change cycle further described below:

CMS Net Web and PEDI:

Updated login, change password, and expired password screens to display a Caps Lock warning that notifies users when their Caps Lock key is on as they are logging in or resetting a password.

CMS Net Web:

Referral Tracking

- Updated allowable referral sources for selection. Includes Family, Legal Guardian, Self, County Office, School, LEA, SELPA, Regional Center/Early Start, In Home Operations (IHO), EPSDT, Private Duty Nurse (PDN) and Other. If one of these referral sources is selected, the only allowable Referral Status is "Accepted for Registration". Referrals received from Providers or Plans may be "Rejected as Inappropriate".
- Updated logic to allow a previously referral that was "Rejected as Inappropriate" to be updated with additional information. May be rejected again or "Accepted for Registration".
- Updated Inappropriate Return Requests Reason:
 - "Other" selection removed.
 - All selections will print pre-defined text on the C-80 Referral Transmittal Correspondence. Refer to [Referral Tracking manual](#) for updated language.

- Added Delete Referral button, previously unable to delete incomplete referrals. Completed case referrals may be deleted only by County System Administrator or a State System Administrator.
- Add new fields to the Daily Extract Files e-chart and patient information. Includes Referral Tracking Number, Referral Received On, and Referral Status. Added logic to indicate when a case initially started in referral tracking and subsequently registered with a flag of “case merged”. Added logic to indicate when a referral entry is deleted to send a status of “deleted”.
- Updated to allow the Date of Birth to be edited for incomplete referrals.
- Updated the Advanced Search by User to allow searching by User Last Name.
- Corrected issue where case is selected on client search and X is clicked to remove the selected case and it is visibly removed but still included in the parameters when the search is executed.
- Fixed Error message created by provider’s phone number extension while reopening a transfer case to a new county.

Registration

- Deleted alias from Patient info screen will not display in the patient search result.
- Add SAR button is added to patient info screen and it will navigate to provider search screen.
- Add Sibling moved from Additional Info screen to Patient info screen
- Updated to allow incomplete records to be marked as duplicate so that CIN may be released.
- Change Caseload in Patient info screen will update the caseload code.
- Add the Caseload Code along with the Temporary assignment flag for cases that are temporarily transferred. This way the user knows the temporary caseload as well as the original caseload for when the case is restored.
- Deleted Dx from registration will update the Face sheet and Medical Eligibility screen whether entered through Referral Tracking, Patient info or Medical eligibility Screen.
- User may update the only Dx on an Active case without an error.
- Reopen pend a closed case with a new referral entered through referral tracking will update the current referral as well as any Dx that was entered to the referral.
- Back button in Correct Historical Referral result screen will navigate to Patient Info screen.
- Addressee tab will display full name and information for any patient Addressee.
- Only Specialist and Medical Home have the Specialist field available.
- Last Updated by and Last Updated on will update based on changes saved in Additional Info Screen.

Case Notes

- County System Admin now have the ability to Transfer Case Notes. In addition, during case note transfer, system/auto-generated case notes are disabled for County System Admin and State System Admin as they cannot be transferred.
- Only State System Admin can flag a case note as error. Removed the “Flag as Error” button for all other security roles.
- Transfer case note: Removed client’s name from default transfer message.

SAR

- Updated to mandatory selection of a Service Category when procedure code Z5999 is present on the SAR.
- Added a safety check that if SAR was already authorized, it may not be set to pending or deleted.
- Denial of a SAR for Spanish speaking client will generate the correspondence in both English and Spanish.
- Added ability for users to print Denied SARs and corresponding letter from View SAR screen.

Correspondence

- Updated C-80 Referral Transmittal Notice to remove the word “Enclosure” at the bottom and inserted a sentence “Please include this letter when submitting additional information related to this referral”.
- Removed the ‘Request from Transcript of Tax Return’ from the Final Notice for GHPP application letter.
- System will now accept any option as relationship to patient for Primary Addressee. Previously, system error when user tried to create letter to primary addressee that had relationship to patient set as provider related.
- Medical Report Series: System will disallow “Medical Report Received Status” entry when letter is NOT in sent status. In addition, system will delete unsent next letter in series, C-14, when user enters status received on C-13.
- Allow future effective date for following letter types: C-38 B, NOA-SAR, and NOA-EPSDT.
- Case notes comments is fixed and displays on View Correspondence screen when approver view request for approval.
- Fixed display on correspondence for Dx with no dot. Dx will now displays correctly.

Caseload

- Added “Hierarchy Only” caseload type to the Organizational Unit creation screen in order to allow counties to create a hierarchical caseload structure.
- Creation to caseload assignment logic for when a case was flagged as duplicate and unflagged. The caseload was not being correctly reset.

MTP

- Add schools to the Agency type table.
- Add a validation to disallow user from entering a DME cancellation date before DME # is added. DME # must exist before adding DME cancellation date.
- Disallow modifying referrals unless it is their own legal county.

PTR

- Add a warning message when creating PTR batches if the batch contains "current month" entries. System will display a message: "This batch contains PTRs for the current month, are you sure you would like to continue?"

Provider

- Display the future end date on Category of Service (COS). Previously, future end date did not display.
- Fixed Provider Search to search for all providers whether entered through Provider Registration or through the Paneling process.

Reports

- Corrected sort break for the Case Distribution Management Report (Caseload) Report.
- Corrected the sort order to County, Name, SAR for the SARs with CMIP Indicator (SAR) Report.
- Added a Statewide selection prompt to the SARs with CMIP Indicator (SAR) Report.
- Made corrections to the Pending Cases with Medical Eligibility Report. Report was not retrieve results previously.
- Created a separate prompt for Miscellaneous Tickler Report generation.
- Moved Miscellaneous Tickler Report
 - Branched Miscellaneous Tickler report out into its own separate report. It was previously listed as a Type under Follow-up Tickler Report.
 - Miscellaneous Tickler report is now displayed under Reports -> Miscellaneous
- Updates to the Follow-up Tickler Report
 - Corrected issue where County selection was not being retained after Type was selected when running report.
 - Remove the text "Follow-up" from the end of all selections under "Type" when running report.
 - Change all entries in "Type" drop-down to capitalize first letter of each word.
 - Change Type selection "Show All Requests" to "Show All Medical Report Requests".
 - Change Type selection "GHPP Medical Report Request Follow-up (GHPP)" to "GHPP Medical Report Request Follow-up"

- On the report: Change title from "Medical Request Tickler Report" to "Follow-up Tickler Report".
- On the report: Add field "Type" between header "Follow-up Tickler Report" and "Date Range". Align center. Font style: same as Date Range.
- Add new select criteria for the Referral Tracking History Report of "case" or "referral" as optional search criteria.
- SAR-Daily Activity Reports is split into two reports: SAR-List of SARs and SAR-Print Authorizations.

Web Messages

- Updated to allow user to view and open an attached case note when the web message is replied to. Currently you may only access the case note from web message if it's forwarded.

Home Page:

- Corrected the Appointment Due count. Previously, the count displaying on Home Page may be different from the tickler results page when viewing the appointment due.

Appointment Scheduling:

- Correction to program error when using the "Advanced Search" to search by User name.

Special Care Center (Provider Services Unit only):

- Correction Provider Team Members phone extension field. Users were previously unable to edit entries.

CMS Net Legacy:

- Fixed Medical Eligibility Diagnosis search. Previously, any ICD-9 Code ending with zero wouldn't come up in the pick list.
- Application Status screen: Data cleanup, delete pending tickler and unsent letter if "Signed app received" has been entered on screen.

PEDI:

- Updated the Referral Report to include all referrals that are associated to a Plan in the Domain. Previously cases that were unregistered were not displaying.