



**Department  
of Health**

**Office of Children  
and Family Services**



Prepared by CSC State and Local Solutions Inc., A CSRA Company

# **Foster Care Agency Follow-up Webinar: Managed Care Readiness Funds**

February 23, 2016  
9am-10am

# AGENDA

## ➤ Introductions

## ➤ Overview of 1/20 webinar- [Q&As posted](#) to VFCA Technical Assistance webpage

- **Part 1:** Directed to agencies who have already applied or are in the process of applying for an MMIS and/or NPI number and have limited to no experience billing Medicaid
- **Part 2:** Directed to agencies that already have an MMIS and an NPI number and currently bill Medicaid

# Introductions

## New York State Department of Health

- Anna Dean
- Julie Harris

## CSRA

- Rita Guido, eMedNY Outreach Supervisor

# Overview of 1/20 Webinar

- All payments for the Managed Care Readiness funds will be processed through the eMedNY system
  - As a rate add on for agencies with existing MMIS/NPI number
  - As a new rate for agencies obtaining a new MMIS/NPI number or reactivating their MMIS number
- This rate will be in effect for the service period covering 11/1/15 to 3/31/16
- Once rate is approved by Department of Budget (DOB), all agencies will be notified by DOH. Billing can **NOT** occur until this happens.
- Rate = VFCA's approved contract amount/estimated care days over the period 11/1/13 to 3/31/14
- Each agency's allocation amount ***has not*** changed
- All allocations must be spent by **June 15, 2016**
- Final Readiness Fund Report due **8/15/16**
  - The Department will provide agencies with a report template

# PART 1

This portion of the webinar will provide a high level overview of the billing process and applies to the following agencies who need to either apply for a new MMIS/NPI number or reactivate their existing MMIS number:

- AWIXA
- Buffalo Urban League
- Catholic Charities of Saratoga Washington and Warren Counties
- Compass House
- Homespace Corporation
- Native American Community Services
- Sarah Minnie Badger Foster Care
- Harmony Heights School
- Martin De Porres School
- Pathways Inc.
- KidsPeace

# Part 1: MMIS and NPI applications

- Each of your agencies was contacted by DOH or OCFS regarding the need to apply for MMIS and/or NPI numbers
- Your agency should have already applied for, or be in the process of applying for, an MMIS and/or NPI number. Information on these processes can be found at:
  - NPI Application and Information  
<https://nppes.cms.hhs.gov/NPPES/Welcome.do>
  - MMIS Application and Information  
[https://www.emedny.org/info/ProviderEnrollment/child\\_foster\\_care/index.aspx](https://www.emedny.org/info/ProviderEnrollment/child_foster_care/index.aspx)
- Please notify DOH by sending an email to [VFCAManagedCareTrans@health.ny.gov](mailto:VFCAManagedCareTrans@health.ny.gov)
  - When you submit your MMIS application **and**
  - When your agency has received your NPI and MMIS numbers

## Part 1: What are eMedNY and ePACES?

- eMedNY is the electronic Medicaid system of New York developed and implemented by Computer Sciences Corporation (CSC) for Medicaid claims and billing
- ePACES (Electronic Provider Assisted Claim Entry System)
  - This is web-based program that allows enrolled New York Medicaid providers to submit and receive responses for HIPAA-compliant claims, eligibility requests, prior approval requests and claim status requests electronically

# Part 1: Resources

- eMedNY Call Center – 800-343-9000
  - Provides assistance with questions regarding:
    - claims
    - billing
    - electronic and paper remittance
    - new enrollment into the New York State Medicaid program
    - requests for training from Regional Representatives
    - ePACES enrollment
    - Electronic Funds Transfer (EFT)
    - ETIN applications
    - provider maintenance forms
    - Explanation of eligibility responses
- eMedNY Website – [www.emedny.org](http://www.emedny.org)
  - For example - Information, Provider Manuals, Edit/Error Knowledge Base, Listserv




# Part 1: Provider Enrollment



The screenshot displays the eMedNY website interface. At the top, the eMedNY logo is on the left, and a Google Custom Search bar is on the right. Below the logo, a navigation bar contains several buttons: What's New, EHR Incentive Program, Information, Provider Enrollment, Provider Manuals, Provider TRAINING, Contacts, eMedNY HIPAA Support, eMedNY Tools Center, and PTAR. A large red arrow points to the 'Provider Enrollment' button. A dropdown menu is open under this button, listing the following options: Provider Maintenance Forms, Provider Enrollment Guide, Application Fee, How Do I?, OPRA FAQs, Change of Address, and Revalidation Information. The main content area features a large image of a smiling male doctor with a stethoscope, overlaid with the text 'welcome to eMedNY'. To the right of this image, there is a yellow banner asking 'Are you compliant with NYSDOH EFT Requirement?'. Below this banner are several login buttons: Login ePACES (with a link to ePACES Information), Login eXchange (with a link to eXchange Information), Login PTAR (with a link to PTAR Information), Provider Portal (with a link to Web Portal Information), and Enter Facilities Practitioner's NPIs. At the bottom of the page, there are two green buttons: PTAR (click here for more information) and ICD-10 (click here for more information). A 'notice' section at the bottom left indicates a June update: 'Attention: The New York Medicaid Management Information System (NYMMIS) Project'.

[home](#) | [self help](#) | [glossary](#) | [site map](#)



What's New

EHR Incentive Program

Information

Provider Enrollment


Provider Manuals

Provider TRAINING

Contacts

eMedNY HIPAA Support


eMedNY Tools Center

PTAR 

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[Provider Enrollment](#) > Child (Foster) Care Agency (CCA)

## Provider Enrollment




### CHILD (FOSTER) CARE AGENCY (CCA)

### Enrollment information for Child (Foster) Care Agency Providers

Child (Foster) Care Agency Provider ...


Child Care agencies care for, place or board children in approved settings.

If you are ALREADY ENROLLED and need to change your corporate or correspondence address,


 [click here.](#)

Complete the Enrollment Form below if you are:

1. Applying for initial ENROLLMENT or ALREADY ENROLLED and enrolling another NPI, *or*
2. Responding to a letter instructing you to REVALIDATE your enrollment, *or*
3. Seeking REINSTATEMENT or REACTIVATION of your previous enrollment, *or*
4. Reporting an OWNERSHIP CHANGE, *or*
5. Reporting a RECEIVERSHIP



Instructions to Complete Enrollment Form



Institutional ENROLLMENT FORM

Don't forget to come back here for additional forms needed to complete your enrollment package

If you have any questions or concerns, please contact the eMedNY Call Center at 1-800-343-9000 or [click here](#) to send us an email.

Additional forms/information which may be **REQUIRED** to complete your enrollment:

- ✓ [Disclosure Form for Institutions - form #380103](#)
- ✓ [Electronic Funds Transfer \(EFT\) Authorization - form #701101](#)
- ✓ [ETIN Certification Statement for New Enrollments - form #490602](#)
- ✓ [Prior Conduct Questionnaire - form #431001](#)

Supplemental Information:

- [Enrollment Application Fee List](#)
- [Child \(Foster\) Care Agency Manual](#)
- [Office of Children and Family Services](#)
- [NYS OMIG](#)
- [EFT Attestation Form - form #701102](#)

# Part 1: eMedNY Website – Home Page [www.eMedNY.org](http://www.eMedNY.org)

home | self help | glossary | site map

SEARCH:

What's New | EHR Incentive Program | Information | Provider Enrollment | Provider Manuals | Training | Contacts | eMedNY HIPAA Support | eMedNY Tools Center

welcome to eMedNY

tools center

Login ePACES  
[ePACES Information](#)

Login eXchange  
[eXchange Information](#)

Enter Facilities Practitioner's NPIs

eMedNY LISTSERV@

Submitter Dashboard  
[Dashboard Information](#)  
[Test Environment](#)

MEIPASS  
[Information](#)

PAXpress@  
[Information](#)

notice

**JULY 20** **Attention:** New Edits to Verify Medicaid Enrollment for all Referring, Attending and Ordering Providers reported on claims begin a claim "Pend and Release" schedule

**APRIL**



# Part 1: eMedNY Website – Self Help page

**Self Help**

This page provides links to eMedNY help documents and pages that you may find helpful. If you find any information to be incorrect, please [let us know](#).

**\* ePACES**

- [ePACES Announcements](#)
- [ePaces Login Issue with Captcha](#)
- [Frequently Asked Questions](#)
- [Enroll Now](#)
- [ePACES General Information](#)
- [ePACES Help](#)
- [Claim Quick Reference Guides](#)
- [Prior Approval Quick Reference Guides](#)
- [ePACES Reference Sheets](#)

**\* Provider Web Portal**

- [Portal Login](#)
- [Enrolling in the Web Portal](#)
- [Core Web Services](#)
- [Retrieving a forgotten password](#)
- [Reset a forgotten password](#)
- [Web Portal User Guide](#)

**\* Provider Forms**

- [Threshold Override Application Form](#)
- [Prior Approval Forms](#)

**Claim Quick Reference Guides**

**\* ePACES**

- [5010 ePACES Dental Claim Reference Guide](#) (PDF 1.08 MB)
- [5010 ePACES Professional Real Time Claim Reference Guide](#) (PDF 957 KB)
- [5010 ePACES Professional Claim Reference Guide](#) (PDF 1.18 MB)
- [5010 ePACES Institutional Claim Reference Guide](#) (PDF 2.15 MB)

**Refer to ePACES Institutional Claim Reference Guide prior to billing using ePACES**

# Part 1: ePACES Home Screen

**eMedNY ePACES** [Help](#) | [Log Out](#)

Change Provider:  [Go](#)

*welcome to*

**ePACES**

The New York State Department of Health in a variety of HIPAA-compliant Medicaid transactions. On the top right of each page, you will be able to change your provider. If you do not see the necessary links in the menu area, please contact the CSC HelpDesk at 800-343-9000.

Please make sure your Provider Name is displayed correctly. If your Provider Name is incorrect or not available in the "Change Provider" dropdown menu, please contact the CSC HelpDesk at 800-343-9000.

For further information, please visit these sites:  
[eMedNY](#) [DOH](#)

**Claims**

- \*\*\* [New Claim](#)
- \*\*\* [Find Claims](#)
- \*\*\* [Real Time Responses](#)
- \*\*\* [Build Claim Batch](#)
- \*\*\* [Submit Claim Batches](#)
- \*\*\* [Status Inquiry](#)
- \*\*\* [Status Responses](#)

**Eligibility**

- \*\*\* [Request](#)
- \*\*\* [Responses](#)

**PA/DVS**

- \*\*\* [Initial Request](#)
- \*\*\* [Revise/Cancel Request](#)
- \*\*\* [Responses](#)
- \*\*\* [Image Upload](#)
- \*\*\* [PA Roster](#)
- \*\*\* [PA Roster Downloads](#)

**Support Files**

- \*\*\* [Provider](#)
- \*\*\* [Other Payer](#)
- \*\*\* [Submitter](#)

**User Admin**

- \*\*\* [Add/Edit Users](#)

- **Web-based application**
- **Role-based security**
- **Submit claims**
- **Check claim status**
- **Verify eligibility**

# Part 1: Billing Methods

## ➤ Billing Methods

- Paper Claim Form – UB-04
- Electronically – 837 Institutional format (rate-based)  
HIPAA Compliant Software to create and send claims via:
  - eMedNY eXchange, FTP (File Transfer Protocol), SOAP (Simple Object Access Protocol)
  - ePACES (electronic Provider Assisted Claim Entry System)
  - If you choose to bill electronically, you will need to enroll in ePACES

# Part 1: Billing Methods-Electronically

For agencies who choose to bill electronically, you will also need to obtain the following:


- ✓ Electronic Transmitter Identification Number - ETIN Certification Statement for New Enrollments - form #490602
- ✓ Need Electronic Funds Transfer (EFT) Authorization - form #701101  
*(Follow instructions for additional forms/information that may be required)*
- ✓ ERA/PDF Remit application (ePACES enrollment required for ERA/PDF delivered to eMedNY eXchange)





# ePACES Institutional Claim Screen


General Claim Information   **Institutional Claim Information**   Physician Information   Diagnosis/Procedure   Other Payers   Service Line(s)


\* Indicates required field(s)

Facility Type:  



Assignments of Benefits?  



Release of Information?  



Accept Assignment?  

Auto Accident State: NY 

**Admission Information**

\* Admission Type:     \* Statement Covers: From:  

\* Patient Status:     To:  

Admission Source:     Admission Date:  







Admission Hour:

Discharge Hour:

Medical Record Number:

Prior Authorization Number:

**Certification Information**

Certificate Category	Condition Codes
<input type="text"/> 	<input type="text"/>  <input type="text"/>  <input type="text"/>  <input type="text"/>  <input type="text"/> 



## PART 2

This portion of the webinar applies to all agencies who have obtained their MMIS and NPI number including the following agencies that currently bill Medicaid:

- Behavioral Health Services North
- Equinox Inc.
- Family of Woodstock Inc.
- Family Services of Westchester
- HONORehg Inc.
- Liberty Resources Inc.
- Mental Health Association Ulster
- New Alternatives for Children

## Part 2: Billing Medicaid for the Managed Care Readiness Funds

- You will need to bill using the Institutional Claim Form
  - On your claim:
    - You must use rate code **1210**
    - Your agency location, identified by your 9 digit zip code, must match your agency location and zip code that was submitted on your provider enrollment form to eMedNY
    - Each claim will need to include each child and their number of care days per month
    - Please ensure that claim forms are accurate and complete. If they are not completed properly, this will delay the processing of your payment
- CSRA will provide individual training and technical assistance on completing and submitting claims form
  - Please see CSRA contact information on last slide
- Link to eMedNY Foster Care Provider Billing Manual  
[https://www.emedny.org/ProviderManuals/ChildCare/PDFS/ChildCare\\_Billing\\_Guidelines\\_UB04.pdf](https://www.emedny.org/ProviderManuals/ChildCare/PDFS/ChildCare_Billing_Guidelines_UB04.pdf)

## Part 2: Billing Medicaid for the Managed Care Readiness Funds (continued)

- Once the Institutional Claim Form is properly completed, submitted and processed, the claim will initially be *denied*
  - Your agency will receive a **Remittance Statement** outlining the denial
  - Send this Remittance Statement **ASAP upon receipt** to [VFCAManagedCareTrans@health.ny.gov](mailto:VFCAManagedCareTrans@health.ny.gov)
  - DOH and CSRA will review and override the denial
  - Your agency will receive another Remittance Statement from eMedNY indicating that your claim is in “Pending” status
  - Upon notice of this status, notify DOH through the above email
  - DOH and CSRA will process the denial so that the claim can get paid
  - Your agency will then receive another Remittance Statement indicating that your claim is in “Paid” status

## Next Steps

- Once DOB approves the Foster Care rate package and you are notified by DOH, agencies will be able to submit 1 claim for the care days provided from November 2015-March 2016
- Complete application to obtain NPI number
- Enroll in eMedNY to obtain MMIS number
- Contact CSRA for individual agency training and technical assistance from your Regional Representatives on Medicaid Billing and Claiming

# CSRA eMedNY Provider Outreach

## ➤ eMedNY Provider Outreach

- Regional Representatives located in 8 regions
  - *Capital District, North Country/Mohawk Valley, South/Central NY, Finger Lakes, Western NY, Hudson Valley, NYC and Long Island*
- CSRA Regional Representatives are available to offer provider billing training on a variety of topics through numerous methods including:
  - *Individual meetings with providers to train and troubleshoot issues*
  - *Group training seminars and webinars*
- To request a meeting with a Regional Representative call eMedNY Call Center at 800-343-9000
- Other Training
  - *Register to attend a seminar or webinar on the eMedNY website Training page at [www.emedny.org](http://www.emedny.org)*



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