

# MAPP Health Home Tracking System Provider Contact Updates & Email Notifications

January 2024

#### **Provider Members (Organization Contacts)**

- MCPs, HHs, and CMAs can access the *Provider Members* screens for their organizations. This information can be viewed/edited by the Organization's MAPP Gatekeeper.
- As mentioned in the Release 4.3 & Release 4.4 Webinar presentations, there are significant updates to the Provider Member screens and functionality as part of Release 4.4. Therefore, <u>all contact data was purged at the time of Release 4.4</u> <u>implementation</u>. The purge that occurred on December 16, 2023, was a <u>ONE-TIME</u> purge of information in the HHTS.
- The MAPP Gatekeeper should enter contact information for their organization as <u>soon as possible</u>.
- A *new* file, *Provider Contact Download,* will be available to all providers as part of Release 4.5 (Spring 2024). This file will contain all active contacts in MAPP HHTS.



### How to Add & Edit Organization Contacts



#### **Updating Your Organization's Contacts (Provider Members)**

Login to MAPP HHTS using the MAPP **Gatekeeper** role and click on the "<u>My Providers</u>" quick link. There is a 60-90 second pause before the screen populates with the reference ID.

| ome           | 15    | My Providers X<br>My Providers |                   |                   |         |
|---------------|-------|--------------------------------|-------------------|-------------------|---------|
| ▼ Quick Links | tcuts | Reference                      | Name              | Primary Category  | Address |
| User Search   | 0     | 01024567                       | UEALTH DUAN. INC. | Managad Care Dian |         |

\*MAPP Gatekeeper updates are completed by the organization submitting a completed MAPP Gatekeeper form to MAPP CCC. MAPP Gatekeeper forms can be found at the following link: <u>https://www.health.ny.gov/health\_care/medicaid/program/medicaid\_health\_homes/mapp/docs/mapp\_gatekeeper\_add\_re\_move\_form.docx</u>



#### **Updating Your Organization's Contacts (Provider Members)**

When you click on your organization's MMIS ID (which will be located under the *Reference* column on the screen), you will be directed to the screen of your organization's profile. You will need to select the tab that contains the information you want to view or edit.





#### **Updating Your Organization's Contacts (Provider Members)**

The *Provider Members* (an organization's designated contacts) will be listed in the relationships tab, under the *Provider Members* inner tab as shown.

To add a new "Provider Member" (contact from your organization), click on "New" and enter the individual's information in the required fields

| Home   Identity   Crede | ntials Relationships | Contact Provider Not | tes |                      |          |           |
|-------------------------|----------------------|----------------------|-----|----------------------|----------|-----------|
| Provider Members        | Provider Members     |                      |     | a star a star a star |          | New Q @ ? |
| Provider Org Unit       | Name                 | From                 | То  | Role                 | Position | Status    |
| Provider Relationships  |                      |                      |     |                      | 1        |           |
| Provider Merged History |                      |                      |     |                      |          |           |



#### Adding a New Provider Member (Organization Contact)

1. In the pop-up box, add the information for the staff person and assign the appropriate role and select and add position(s).

2. Add the begin date that the position is effective.

3. Select the position(s) on the left side of the screen and click the arrow to assign the position to a staff member.

4. Multiple position types can be selected, if applicable.

5. Click "Save".

|                    |             |               | * required fit     |
|--------------------|-------------|---------------|--------------------|
| Name               | Joe Testing |               |                    |
| Street 1           |             | Apt/Suite     |                    |
| Street 2           |             | City          |                    |
| State              | New York    | Zip           |                    |
| Country Code       | 1           | Extension     |                    |
| hone Number        | 5555555     | Email Address |                    |
| Area Code          | 555         | Fax Number    |                    |
| tole *             | МСР         | Title         | HH Program Manager |
| rom *              | 9/1/2023 🥘  | To            |                    |
| osition Type       |             |               |                    |
| PP/HH TRACKING     |             | A Primary C   | ontact             |
| S Contact          |             |               |                    |
|                    |             |               |                    |
| ir Hearing Contact |             |               |                    |



### **Editing Provider Member Information**

If any edits need to be made to an existing *Provider Member*, click on the green action arrow and select *Edit* from the drop-down menu. Make any needed edits and click on save. If you have added a *Provider Member* in error, select delete to cancel.

| HE<br>Mome Identity Cre | ALTH PLAN, INC   | orded 😰 Not Records | ed |      | 01234567 Approve | ed     |        |
|-------------------------|------------------|---------------------|----|------|------------------|--------|--------|
|                         | Provider Members |                     |    |      |                  | New    | 227    |
| Provider Members        | Name             | From                | То | Role | Position         | Status | ~      |
| Provider Org Unit       | hanne.           | 7/44/2022           | 10 | HOR. |                  | Status |        |
| Provider Relationships  | Jane Doe         | //11/2023           |    | MCP  | MAPP/HH TRACKING | Active |        |
| Provider Merged History |                  |                     |    |      |                  |        | Delete |



## **Available Position Types in MAPP HHTS**

- **Organization Contact**: contact person authorized to make decisions/sign on behalf of the Organization (CEO/COO/Director/ President) and for DUA/BAA updates.
- **Primary Contact**: main contact person for managing and sending updated information to DOH on behalf of the organization.
- Alternate Contact: alternate contact person for the organization when primary contact is unavailable.
- **MAPP/HH Tracking:** MCP contact person(s) to receive POC upload email notifications.
- **Referral Contact**: contact person who manages referral questions and accepts potential member referrals from providers/CBOs.
- Billing Contact: contact person providing oversight of Health Home Billing.



#### **Available Position Types in MAPP HHTS (Continued)**

- **HCS Contact**: contact person(s) for access to HCS to send/receive secure files and changes to HCS Director or Coordinator.
- Fair Hearing Primary Contact: contact person providing oversight of Fair Hearing process
- Fair Hearing Secondary Contact: alternate contact person that supports Fair Hearing process
- **Criminal Justice Contact**: contact person for carceral facilities/CBOs for referrals for an individual being discharged from incarceration.
- **Technology/HIT Contact**: contact person who manages the HIT/data, including Health Home systems, EHR, and tracking HH CMART.



## How to Add & Edit Other Organization Information



### The Organization Profile in MAPP HHTS

Information on the Home, Identity, Credentials, Relationships, Contact, and Provider Notes tabs can be viewed. You may update <u>some</u> of the information contained in these screens.





### **Edit Capability on Profile Screens**

You are not able to edit all fields contained in the screens, as some updates require HH Program approval. Other fields are populated directly by a data feed from another system, such as MDW and therefore can't be edited.

If you attempt to make edits to a field you are not authorized to edit, you will receive an error message (shown below).



If the data shown on the screen is incorrect, you can submit an email with a screen shot to MAPP CCC. If the field can be edited, we can do so on your behalf. If the change requires HH Program approval, the request must be sent to the HH team mailbox. See next slide for details.



### **Updating Other Screen Information**

| Tab            | Inner Tab/Screen   | View<br>Only | Edit | Field Updated by  |
|----------------|--|--------------|------|---|
| Home           |  |              |      |   |
|                | Main screen  |              | Х    | Manual (CM Platfrom/EHR)  |
| Identity       |  |              |      | e de la companya de<br>No |
|                | Program Identifier   | х            |      | Outside Data Source   |
|                | Program Name   | x            |      | HH Program Approval   |
| Credentials    |  |              |      |   |
|                | Categories   | х            |      | HH Program Approval   |
|                | Licenses   | x            |      | n/a   |
|                | Specialties/Languages  |              | х    | n/a   |
|                | HH Partner Network   |              | х    |   |
| Relationships  | a ta da Santa Arresta Santa Arresta S<br>S   |              |      |   |
|                | Provider Members   |              | х    | Manual  |
|                | Provider Org Unit  | x            |      | n/a   |
|                | Provider Relationships   | х            |      | HH Program Approval   |
|                | Provider Merged History  | х            |      | n/a   |
| Contact        | <ol> <li>Contract of California and Californi and California and California and California and California a</li></ol> | 5 P. 1       |      |   |
|                | Addresses  |              | х    | Outside Data Source   |
|                | Phone Numbers  |              | х    | Outside Data Source   |
|                | Web Addresses  | e<br>K       | Х    | Manual  |
|                | Counties Served  | х            |      | HH Program Approval   |
| Provider Notes |  | х            |      | MAPP CCC Request  |

Requests for field changes listed as "HH Program Approval", require submission to the HH Team mailbox and <u>may</u> require a Notification of Change (NOC) form or other forms to be submitted:

https://apps.health.ny.gov/pubpal/ builder/email-health-homes

If your change request is approved, the HH team will request the MAPP HHTS update on your behalf.



# **Receiving POC Notification Emails**



#### **Email notifications to MCPs for Comprehensive POC**

System generated email notifications will be sent to the *MCP* **MAPP/HH TRACKING** contact type, as indicated in the *Provider Members* inner tab screen when a HH uploads a POC:

- Adult New POC
- Child New POC
- Adult Update POC
- Child Update POC

These notifications are grouped to one email per above scenario (not a separate email for each uploaded POC) per day, notifying the user when at least one member in the category had a new/updated POC uploaded to the system. That email will then include instructions for how to identify the Plans of Care within the system.

To receive these emails, the email address of the MCP contact will need to be added to MAPP HHTS by the \*MCP MAPP Gatekeeper. (Instructions on how to complete this update are on the next few slides).

\*The non-mainstream plans do not have MAPP Gatekeepers. Plans will need to submit a MAPP CCC ticket for this update to be made in MAPP HHTS on your behalf.

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#### **POC Email notifications to MCPs**

- All fields can be completed for the contact's information.
- The highlighted fields are required fields to receive the email notifications.
- The *Role* selected is MCP.
- The *Position type* selected is MAPP/HH Tracking.
- More than one contact from an MCP can be added to the MAPP/HH Tracking position.
- If MCP role is selected, you will receive POC notification emails.





# **Questions?**



#### **DOH Health Home Team Contact Information**

- MAPP HHTS resources and past presentations can be found here: <u>https://www.health.ny.gov/health\_care/medicaid/program/medicaid\_health\_homes/mapp/index.htm</u>
- MAPP HHTS issues and questions should be directed to MAPP Customer Care Center at (518) 649-4335 or <u>MAPP-CustomerCareCenter@cma.com</u>
- Health Home policy questions and Notification of Change (NOC) forms should be submitted to the DOH Health Home team mailbox found here: <u>https://apps.health.ny.gov/pubpal/builder/email-health-homes</u>

