



## **ESSO WEEKLY MEMO –AUGUST 18, 2011**

### **ACTION NEEDED**

- 1. Summary of ARRA Enhancement Projects**
- 2. Clarification Request**

### **INFORMATION AND RESOURCES**

- 3. Update on our Third Party Administrator System**
- 4. Notice to LESs, Therapists and Other Providers re: 2011 Medicaid Audit Overpayments - MORE CLARIFICATIONS**
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## **UPCOMING EVENTS, MEETINGS, OR TRAININGS**

## **10. Zero to Six Child Welfare Series**

### **ACTION NEEDED**

#### **1. Summary of ARRA Enhancement Projects**

(With 1 Attachment)

During the 09-10 and 10-11 fiscal years, ESSO awarded American Recovery and Reinvestment Act (ARRA) funding to expand and improve the capacity of Local Early Steps to provide high quality early intervention services. Additionally, these funds provided support for programs to implement innovative strategies to improve outcomes for children in our system. The attached file, entitled ARRA Project Summary.xls, was designed to capture a comprehensive picture of the impact that the ARRA expenditures had on the Early Steps system of care. Please thoughtfully complete the summary for each of the ARRA enhancement projects that were awarded in your contracts and return these to [Pamela\\_Porter@doh.state.fl.us](mailto:Pamela_Porter@doh.state.fl.us) by September 30, 2011.

#### **2. Clarification Request**

Whenever you're sending information to anyone at ESSO, or to Gail Underwood or anyone else at ACHA, Medicaid, or anywhere else, please remember to always make sure your fax or mail/package/document clearly reflects to whom it is being sent, what it is, and why you're sending it. Thanks!

### **INFORMATION AND RESOURCES**

#### **3. Update on our Third Party Administrator System**

I am writing today to provide some information to all Children's Medical Services and Early Steps staff about the next ten to twelve months of activity as it relates to the development and implementation of our new Third Party Administrator (TPA) system. With a project of this magnitude it is impossible to involve everyone in system planning and the decision making processes. However, as the backbone of the organization, I feel it is important that you are kept aware of what is taking place.

We are very excited about the efficiencies that this new TPA system will bring to CMS programs. One of the major benefits is that we will all be working in the same system and know what is going on with any child at any time and everyone will have the same information. That alone is a tremendous advance over our current situation.

The MED3000 team is currently furiously at work on programming their system to support our business processes. They are working with outside entities for the connectivity necessary (i.e. FHK, Medicaid Choice Counseling, PBM, DCF, AHCA), programming to accommodate needed files and the processing of those files, programming for benefits configuration issues, and programming for provider management issues. They are also planning the User Acceptance Testing (UAT) phase, the training activities, the TPA Pilot and subsequent TPA Rollout phases.

The activities that will most directly affect several of you are the UAT Phase, and its associated training and then the Pilot Phase. Training for UAT is planned to begin on January 3rd in Pensacola for two one week sessions. The first week will be used for training CMS Network staff selected for this purpose. The selected Early Steps staff will be trained during the second week. Once UAT training is complete the staff selected and trained for UAT will be allowed a certain amount of time to access the test system, work from scripted work flow emulations of actual processes and also try unscripted tasks. The purpose of this is to identify anything that has not been configured properly or may have been left out completely. After UAT is complete MED3000 will correct the issues identified during UAT.

On March 1, 2012 the Pilot phase will begin. This is essentially the initial rollout in which three CMS Offices and three Local Early Steps will be transitioned to the new system. The piloting CMS Offices are Pensacola, Orlando and Viera, and the Local Early Steps piloting locations are Western Panhandle, Central Florida and Space Coast. All clients actively enrolled with each of these locations will be loaded into the TPA system just prior to start of business on March 1, 2012. The Pilot is to last from March 1, 2012 until May 31, 2012. During this time the piloting offices will perform all of their work in the new system. From a claims processing and payment perspective, any claims with dates of service prior to March 1, 2012 will be processed and paid through the existing legacy systems currently being used. All claims with service dates beginning on March 1, 2012 and subsequent will be processed and paid by the TPA. The purpose of this Pilot Phase is to ferret out any issues that were missed in either design/development or during UAT. Anything identified will be corrected as they become known.

After successful completion of the Pilot Phase we will begin the formal Rollout to the remainder of the CMS Network and Local Early Steps offices in three Rollout Phases. The loading of active enrollees and claims processing rationale will be the same as for the Pilot period. The dates below are predicated on a successful three month pilot period and the department accepting the system as ready to be fully implemented.

- **Rollout Phase 1** June 1, 2012 through June 30, 2012

**CMS Network**

Tampa Bay Region  
Southwest Florida Region

**Early Steps**

Bay Area  
Gulf Central  
Southwest Florida

- **Rollout Phase 2** July 1, 2012 through July 31, 2012

**CMS Network**

Panama City CMS  
Tallahassee Region  
North Central Florida Region

**Early Steps**

Big Bend  
North Central  
Northeastern  
North Beaches  
West Central

- **Rollout Phase 3** August 1, 2012 through August 31, 2012

**CMS Network**

Southeast Region  
South Florida Region

**Early Steps**

Gold Coast  
Treasure Coast  
North Dade  
Southernmost Coast

As with any major software/system change, the processes of design, development, and implementation force a business to evaluate its structure and processes which often results in the identification of potential efficiencies. These efficiencies are above and beyond those that the software itself provides but will make possible and support. Every CMS Network Office and Local Early Steps will end up reorganizing some work functions and resource utilization. This is to be expected. This is an example of when change is positive and an opportunity to improve our business. Our overall concept is that this new system will make the CMS program more efficient at what we do to provide necessary services to children with special health care needs and eliminate much of the work intensive manual processes that computers should perform for us.

In closing, we have waited a long time for a system that will meet our current and future needs and it is here. To be sure there will be changes and there will be times when you will wonder what we have done, but we must leave the dinosaurs behind!

Phyllis J Sloyer, RN, PhD, FAHM, FAAP

Division Director  
Children's Medical Services Network & Related Programs  
Florida Department of Health

#### **4. Notice to LESs, Therapists and Other Providers re: 2011 Medicaid Audit Overpayments - MORE CLARIFICATIONS**

A. For "Provider Instructions #2 d. Evidence of provider's protest of amount due to ES claims" please add, "**WITH AHCA RESPONSE**" and note the following:

- If provider submits this form of documentation, note that ESSO is expecting to see with it one of the following:
  - If AHCA has partially accepted the provider's protest, and therefore adjusted the total recovery, we need evidence of how much the total amount to be recovered has been reduced to, and that those same services are not still being submitted for reimbursement by ESSO.
  - If AHCA denies the entire protest, then we need evidence that they are still expecting the total payback, as well as evidence of how the provider is choosing to do that (i.e. copy of EOB, Provider Remittance Advice/CMS 1500 Claims Paid, or other written communication from AHCA)
  - If AHCA accepts the entire protest, then we would like to be notified with detail (and will rejoice with you), but are not expecting any reimbursement request.

B. REMITTANCE PAYEES: Please be sure that the remittance addressee is the same as the provider who was audited (i.e. name of agency or person should match the addressee on the AHCA Audit Letter, with same provider number, and with matching W-9 form registered in Department of Financial Services system.) This is particularly important for those providers enrolled with Medicaid as both an individual provider and as an agency, and/or have multiple provider numbers/locations.

C. PROCESS AND COVER SHEETS: For details regarding who, if and how to request reimbursement for Medicaid claims overcharged due to HMO enrollment at time of service (discovered as a result of either formal Medicaid audit or provider self audit), see the 7/7/11 edition of the ESSO Weekly Memo. For prior additional Q&A's, see the 7/14/11 edition.

D. Q&A'S: For further questions or clarifications, providers should contact their LES. For questions or additional information needed by the LES prior to submittal of claims package requests, the LES should contact Pam Porter ([pamela\\_porter@doh.state.fl.us](mailto:pamela_porter@doh.state.fl.us)).

## **5. Follow-up on A Message from the Ounce of Prevention Fund of Florida**

(With 1 Attachment)

Last week's memo did not include the attached order form for the campaign pinwheels. We are sorry for the oversight.

## **6. Early Intervention Activities That Work - A Course Offered by Motivations, Inc.**

This course teaches creative and effective early intervention treatment activities for children 0-3 years of age, using toys, motor equipment, sensory tools, preacademic crafts, graphomotor activities, in their natural environment. In this course, you will also discuss case studies, learn the do's and don'ts of early intervention, receive materials for family training, and learn about quick, easy and effective documentation. You will learn effective early intervention techniques for treating children with Pervasive Developmental Disorder, Developmental Delay, Torticollis and Hemiplegia. To find out more about the course, please check the following link:

<http://www.cvent.com/events/-321-early-intervention-activities-that-work/event-summary-ce0621dcbcf9425aa68846c865818934.aspx>

## **7. CMS Call on EHR Incentive Program Meaningful Use**

Provider Type(s): All Providers

For the second year of participation in the Medicaid EHR Incentive Program, eligible professionals (EPs) will have to attest to meaningful use of certified EHR for a continuous 90-day period to receive payment. In subsequent years, the meaningful use reporting period is the entire calendar year.

September 5, 2011, is the launch date for registration in the Florida Medicaid EHR Incentive Program. Therefore, Florida EPs will be required to report Stage 1 meaningful use in 2012.

If you intend to participate in the program, the following call may be of interest to you:

## **8. CMS National Provider Call on the Medicare and Medicaid EHR Incentive Program meaningful use requirements - August 18, 2011**

The agenda includes a discussion on meaningful use and Stage 1 requirements, the meaningful use objectives, and a question and answer period.

You must be registered for the call by 1:30pm on August 17, 2011. Registration will close when full, so please register early. For more details, please visit <http://www.eventsvc.com/palmettogba/081811>

Are you Ready? Send questions to: [\*\*MedicaidHIT@AHCA.MyFlorida.com\*\*](mailto:MedicaidHIT@AHCA.MyFlorida.com)

## **9. ESSO Weekly Memo Index**

(With 1 Attachment)

For your convenience, please find the attached ESSO Weekly Memo Index. The index will include the title of each entry in previous weekly memos and will be listed under appropriate category headings.

In the future, a quarterly index will be included in the weekly memo the last week of each quarter.

## **UPCOMING EVENTS, MEETINGS, OR TRAININGS**

### **10. Zero to Six Child Welfare Series**

(With 1 Attachment)

Please see the attached list of Speaker Series being provided by the National Child Traumatic Stress Network (NCTSN) Zero to Six Workgroup. Continuing education credits are available.