CPSE Portal and Medicaid Processing

Overview for Providers





Who we are

- James McGuinness and Associates
- Established in 1979
- Software development
- Preschool software for Counties that is used by 30 NYS Counties (over 15 years)
- CLAIMS Agency management software used by many NYS providers
- Experience with Early Intervention
- Experience with Electronic Billing
- Experience with Medicaid claiming





Overview

- Medicaid processing
- Procedures for Medicaid processing
- CPSE Portal overview
- This is an introduction, we will be holding several webinars over the next few weeks
- Questions are great, but this is not a good forum for questions
- Instead,
 - take in this overview,
 - download this Powerpoint and review
 - Formulate your questions
 - Either submit them to the support system or wait for the webinars





CPSE Portal

- A web based portal that provides a mechanism for exchanging data between the County and providers
- Typically used for billing data
- Also supports Medicaid related information





Medicaid Processing - PSHSP Background

- NYS Counties pay providers for services provided to children in the Preschool (CPSE) program
- When all goes right (STACs in place, etc.), the County gets reimbursed from SED for a portion of the cost
- Additionally, the County can claim for Medicaid reimbursement for certain direct medical services that are provided to children with Medicaid
- Any Medicaid reimbursement helps offset the financial burden to the County





Medicaid Processing Contract for Nassau

- Nassau contracts with an outside vendor to perform the Medicaid claiming processes
- ► The prior vendor's contract was for services through 12/31/2014.
- James McGuinness and Associates was awarded the contract for services beginning 1/1/2015.





Medicaid Claiming - Goals

- Maximize Medicaid revenue
 - Timely filing
 - Error checking
 - Reduce rejections / denials
 - Collect documents sooner
- Increase accuracy
 - Ensure requirements are met
- Collapse cash flow window
 - Submit claims sooner





Medicaid Processing - Documentation

- Required documentation
 - ► IEP
 - Parental Consent
 - Prescriptions / Written Orders / Referrals / Speech Recommendations
 - Attendance / session record
 - Time in/out
 - Location / Setting
 - Diagnosis Codes / Procedure Codes
 - Notes
 - ► Etc.



Prior Vendor Process

- Every few months check child eligibility
- Determine which children have potential claimable services
- Submit requests to providers for documentation months after
- Providers submit documentation
- Vendor submits claim to Medicaid





New process

- Requests for documentation will be made through CPSE Portal
- Regularly, an email will be sent notifying you to check CPSE Portal for outstanding documentation requests
- User will run a report that lists what documentation is needed.
 - Child
 - District
 - School Year
 - Document type (IEP, Prescription, parental Consent, etc.)
- Only documentation of Medicaid children will be requested....for now.



How to get documentation to McGuinness

- Upload through CPSE Portal
- Fax
- Send it US Mail





Upload documentation through CPSE Portal

- Get documentation to electronic format (image / PDF)
 - Scan it
 - Download IEP from IEP Direct
 - Etc.
- Specific screens for Consent, IEP, and Scripts





Documentation Prep

- Requests for Documentation has option to generate PDF of coversheets
- Each coversheet is for a single piece of documentation
 - One child's IEP
 - One child's Parental consent
- Cover sheet has
 - Child information
 - Documentation type





Coversh	eet ®	PORTAL		
	24 Child First Name Child Last Name Child DOB County District Provider School Year Document Type Comments To submit this documentation, print Multiple documents can be sent to	D14-2015 EP Jon Doe 2/2/12 Nassau Westbury My Demo School for Child Therapy Services 2014-2015 IEP I I I I IIIIIIIIIIIIIIIIIIIIIIIIII	Note the barcode	
JAMES McGL & ASSOCIAT Consultan	a) Upload directly to CPSE Portal Scan documentation : Base (http://support.) b) Fax (518) 348-3984 c) Mail it to James McGuinness & Attn: CPSE Portal Mee PO Box Schenectady, NY 1230	I. and upload the scanned document to CPSE Portal. Refer to CPSE Portal Knowledge cpseportal.com) for additional instructions. Associates dicaid Processing 25 CPPPORT	AL	

Documentation Packet

- Create a packet by placing coversheet on top of corresponding documentation
- You can bundle packets as long as there are appropriate coversheets separating them
- You can bundle multiple children's information together, as long as there are appropriate coversheets separating them
- You can bundle multiple documentation types (IEP, Script, Consent) as long as there are appropriate coversheets separating them

The barcoded coversheet is used to route the document to the appropriate child / school year / documentation type/ etc.



Submit documentation

- Option 1 Scan and upload
 - Scan documents to file (PDF preferred, but image is OK)
 - Upload file to CPSE Portal through CPSE Portal Web page
- Option 2 Fax
 - Fax the bundle(s) to the number printed on the barcoded coversheet
- Option 3 US Mail
 - Copy the documentation
 - Assemble packets of the coversheets with documentation copies
 - Mail the bundled packets to the address on the barcoded coversheet



Upload documents without coversheet

- > You can upload electronic documentation without coversheets
- Without coversheets, they can't be routed properly, therefore additional information is needed.
- Script
 - Lookup child

- IEP
- Parental Consent





Upload Parental Consent

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	Date Signed	06/01/2015				
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Upload Written Order / Script







Upload IEP

- IEP Direct can generate a PDF of the IEP
- Just need to lookup the child's name and indicate school year
- Then browse and upload the file
- That saves lots of effort and paper from scanning, printing, copying, faxing, etc.

IEP Upload

- IEP Information				
School Year Session Type	Summ	er 👻		
School Year	201415	5 -		
Effective Date				
Lookup Child (Last Name)	Doe			
Chil	d	DOB	County	
Select doe, jon		3/9/2006	NASSAU	
Child Selected				
File Type	Adobe I	PDF 👻		
File	Brows	e RX	C28ID479)43.pdf
Description				
Upload				



Documentation Summary

- Needed documentation will be reported via CPSE Portal
- Multiple ways to submit documentation (Scan/upload, Upload, fax, US Mail)
- In the future, it may be easier for providers to submit documentation for ALL children (not just Medicaid) as it comes in, rather than retrieving later for submission. That is OK





Treatment Logs?

Two processes

Process #1 - For Service dates 1/1/15 thru either 6/30/15 or 8/31/15

- ▶ Just like IEP, Consent, RX, etc.
- There will be a request
- Print coversheet and fax/upload/mail
- Process #2 For Service dates beginning either 7/1/15 or 9/1/15
 - Data will be put directly into CPSE Portal





What is CPSE Portal

- A website <u>https://www.CPSEPortal.com</u>
- Linked to County Preschool data management system
- Provides for collecting attendance and billing information
- Provides electronic billing services





How does data get into CPSE Portal

Users can data enter into website

- Agencies that use CLAIMS / EnterCLAIMS can upload their data in a file to CPSEPortal
- Agencies that use any other software package can also upload data from their systems. File specifications are available in the knowledge base.





When will we start using CPSE Portal

- Independent providers
 - Data enter for service dates beginning 7/1/15
- Agencies that use EnterCLAIMS
 - Continue as normal. In August, upload July service dates into CPSE Portal
- Agencies that use CLAIMS (and not EnterCLAIMS)
 - Continue as normal. Decide whether to start with July service dates or September.
- Agencies that use other software systems
 - Upload data for service dates starting 9/1/15
- Agencies that don't use any current software system
 - Decide to start data entry process on 7/1/15 (recommended) or 9/1/15



PORTAL

Process overview

- County uploads list of enrollments for provider
- Provider enters attendance information against the uploaded enrollments
- Service provider provides a digital signature to the attendance
- Billing Provider bundles signed attendance entries into an electronic voucher
- Billing Provider digitally signs and submits electronic voucher to County
- Billing Provider prints voucher summary sheets from CPSE Portal
- Paper Voucher summary sheets are signed in pen and delivered to County (US mail, drop off, etc.)
- County staff pulls up electronic voucher corresponding to paper summary
- Preschool software audits electronic voucher against enrollments (frequency, # of sessions remaining, etc.)
- County user processes and posts voucher to Preschool system

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County Preschool is master data source

- The demographic and enrollment data comes from what is entered in the Preschool software system
- Counties upload data regularly
- Data includes
 - Providers/Programs/Rates
 - Child information
 - Enrollments
 - Provider
 - Service
 - Frequency





Billing Provider vs. Service Provider

- A Billing Provider (think Agency or School)
 - Can be an individual or corporation
 - Has a vendor contract with the County
 - Submits bills to County
 - Receives payment from County
- A Service Provider (think therapist)
 - Is an individual
 - Provides the services to the child
- > An Independent Provider can be both a Billing Provider and Service Provider
- An Independent Provider can be incorporated and the Billing Provider is the corporate entity and the Service Provider is the individual person



Billing Provider Account

- Initially, each contracted provider will be set up with Billing Provider admin Account to login to CPSE Portal
- This admin account is used to register other users that can access CPSE Portal under their provider. The system sends an electronic invitation to enroll.
- Types of provider users
 - Billing Provider
 - Basic
 - Admin
 - Service Provider (therapist, teacher, etc.)
 - Supervisor
- Independent providers will have their account marked as both a Billing Provider Administrator as well as a Service Provider



Billing Provider attestation

- Each Billing Provider will choose a PIN. This PIN is used in conjunction with their login to create a digital signature that is primarily used for submitting a bill to the County.
- Each Billing Provider will have an authorized representative complete an attestation indicating that
 - > They understand that entering their PIN equates to creating a digital signature
 - > The digital signature carries the same authority as signing in pen on paper
 - They will keep their login credentials (username and password) as well as their PIN secret and will not share it with anybody
- The attestation is completed on paper and signed in ink
- Billing Providers will not be able to digitally sign and submit electronic vouchers until the attestation has been received and recorded





Service/Rendering Provider attestation

- Each Service Provider will choose a PIN. This PIN is used in conjunction with their login to create a digital signature that is used for sign attendance
- Each Service Provider will complete an attestation for each Billing Provider they provider services for, indicating that
 - > They understand that entering their PIN equates to creating a digital signature
 - They will review all data they have entered PRIOR to signing. They are responsible for signing inaccurately entered information.
 - > The digital signature carries the same authority as signing in pen on paper
 - They will keep their login credentials (username and password) as well as their PIN secret and will not share it with anybody
- The attestation is completed on paper and signed in ink
- Service Providers will not be able to digitally sign attendance until the attestation has been received and recorded





Rendering Provider Attestations

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ALFARO	Oluwafolakemi Adebosipo	SCHENECTADY	2014 - 2015					
AMALFITANO	Mechel	SCHENECTADY	2014 - 2015					
ARISTILDE	Mayana	SCHENECTADY	2014 - 2015					
AUER	Lydia Nicole	SCHENECTADY	2014 - 2015					
BARKET	Leisha	SCHENECTADY	2014 - 2015					
BARKOFF	Ean	SCHENECTADY	2014 - 2015					
BENCAL	Cheikhouna	SCHENECTADY	2014 - 2015					
BHASIN	Daniel David	SCHENECTADY	2014 - 2015					
BODNER	Wakuv	SCHENECTADY	2014 - 2015					
BOTTJER	Eudasia	SCHENECTADY	2014 - 2015					
BOWEN	Rachel Hope	SCHENECTADY	2014 - 2015					
BUCKLEY	William James	SCHENECTADY	2014 - 2015					
CARLAW	Miarie	SCHENECTADY	2014 - 2015					
CARPENTER	Aimee	SCHENECTADY	2014 - 2015					
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Manage Invitations User Type (All) Show Only Pending Search No Invitations found.	Invite Someone	
Invite Someone	First Name Last Name Shari Trudell Email Confirm Email sharitrudell@gmail.com sharitrudell@gmail.com User Type Service Provider • NPI 1164677720 Profession SLP - Speech & Language Pathologist (058) • NYS License Number 123456 Supervisor Send Invite Ø James McGuinness & Associates	





In addition to creating individual invites, you can upload a spreadsheet with the following format, which can be downloaded from the knowledgebase.

	Α	В	С	D	E	F	G
1	First Name	Last Name	Email	Is Supervisor	Profession Code	NPI	NY License
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Service Provider accounts for agency

- Service Provider (teachers, therapists, etc.) will receive an email inviting them to associate with the agency
- Users that already have an account (from a prior agency/ as an independent, etc.) can associate their existing account to the agency
- New users will be able to choose username and password
- They will be asked to enter some basic information including
 - License information
 - Credentials to be used with digital signature





Shari Trudell,

You have been invited to be associated with the agency ACHIEVEMENTS in the CPSEPortal system. Please follow the link below to confirm this invitation, and associate yourself with this agency.

http://localhost/CPSEPortal/People/Invites/AgencyInvitationResponse.ashx?code=b72b420682ac4ad89c62f90d42f7820b

Bererererere	(Login)	& ASSOCIATES INC. Consultants
Home Knowledge Base		
CPSEPortal Invitation You have been invited to be associated with ACHIEVEMENTS as a service provider user re-invite you.	in the CPSEPortal system. Please confirm your details below, select a username and password and then you may log in to	the system. If any of your details are incorrect, please let the agency know and they will
Name Confirmation - Confirm this information is correct. First Name Last Name Shari Trudell		
Service Provider Information - Confirm this information is correct. Please 6 NPI 1164677720 Profession SLP - Speech & Language Pathologist (058) NYS License Number 123456	nter your signature information at this time as well.	
Email Confirmation - Must match address invitation was sent to. You may Email	update your email address after confirming your invitation, if necessary.	
You appear to already be registered with CPSEPortal By accepting this invitation, you are agreeing to associate yourself with this additional	billing provider agency.	
Accept Invitation		
	© James McGuinness & Associates	





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Password	Confirm Password		
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Provider Specific Identifiers

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DONRI, Cordelle	1326290289	9714	Edit					
FONSO, Yaurdin	1760744767	9676	Edit		Users			
LFARO, Oluwafolakemi Adebosipo	1497907604		Edit		Invitations			
MALFITANO, Mechel	1285888578	9702	Edit					
RISTILDE, Mayana		9980	Edit					
UER, Lydia Nicole		9908	Edit					
ARKET, Leisha	1578813101	9749	Edit					
ARKOFF, Ean	1790038800	9942	Edit					
ENCAL, Cheikhouna		9949	Edit					
HASIN, Daniel David	1972859411	9743	Edit					
ODNER, Wakuv	1477799856	9725	Edit					
OTTJER, Eudasia	1609012970	9855	Edit					
OWEN, Rachel Hope		9785	Edit					
UCKLEY, William James		9984	Edit					
ARLAW, Miarie	1598918476	9713	Edit					
ARPENTER, Aimee	1528317377	9918	Edit					
EVALLOS, Jaiveon		9952	Edit					
HOATE, Senguun	1265795314	9783	Edit					
ICALESE, Lynnae	1730432782	9761	Edit					
LAROS, Hickson	1033469762	9739	Edit					
LAY, Coryanah	1992054381	9950	Edit					
OSTA, Matthew	1699021253	9794	Edit					
RESPINERAZO, Aishnee	1912159096	9684	Edit					
ACHS, Jadzia	1689960379		Edit					
AYSCHOTT, AVAN	1851605729	9706	Edit					
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Enrollment Listing







Enrollment Listing

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2 MENDOZAACOSTA	Jeilynn	10/9/2010	F	9/3/2014	12/12/2014	CBRS - OT	GUILDERLAND CSD		Training	gProvider138	9160	к	2x30	Individual		CBRS	1415W00010	96						
3 MENDOZAACOSTA	Jeilynn	10/9/2010	F	9/3/2014	12/12/2014	CBRS - PT	GUILDERLAND CSD		Training	gProvider138	9160	к	3x30	Individual		CBRS	1415W00010	97						
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6 AMONORTEGA	Joleigh	12/23/2010	м	9/3/2014	6/19/2015	CBRS - ST	ALBANY CITY SD		Training	gProvider138	9100	к	4x30	Individual		CBRS	1415W00011	00						
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14 ALMAN	Adley	1/4/2010	м	9/3/2014	12/1/2014	CBRS - ST	ALBANY CITY SD		Training	gProvider138	9160	к	2x30	Individual		CBRS	1415W00011	12						
15 ALMAN	Adley	1/4/2010	м	9/3/2014	12/1/2014	CBRS - ST	ALBANY CITY SD		Training	gProvider138	9160	к	1x30	Group		CBRS	1415W00011	13						
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17 MEDINAESPINOZA	Gregary	3/3/2011	м	9/3/2014	6/19/2015	CBRS - OT	ALBANY CITY SD		Training	gProvider138	9100	к	2x30	Individual		CBRS	1415W00011	15						
18 LANGER	Amy Jesus	6/4/2010	м	9/3/2014	6/19/2015	CBRS - ST	SOUTH COLONIE CSD		Training	zProvider138	9160	к	2x30	Individual		CBRS	1415W00011	20						
19 LANGER	Amy Jesus	6/4/2010	м	9/3/2014	6/19/2015	CBRS - OT	SOUTH COLONIE CSD		Training	zProvider138	9160	к	1x30	Group		CBRS	1415W00011	21						
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21 LANGER	Amy Jesus	6/4/2010	м	9/3/2014	6/19/2015	CBRS - ST	SOUTH COLONIE CSD		Training	gProvider138	9160	к	1x30	Group		CBRS	1415W00011	24						
22 HUNTER	Maritzel	12/27/2010	м	9/3/2014	2/13/2015	CBRS - OT	ALBANY CITY SD		Training	Provider138	9160	к	1x30	Group		CBRS	1415W00011	65						
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25 DRAYION	Yaslene	4/19/2011	F	9/3/2014	6/19/2015	CBRS - PT	ALBANY CITY SD		Training	JProvider138	9160	к	2x30	Individual		CBRS	1415W00011	68						
26 DRAYTON	Yasiene	4/19/2011	F	9/3/2014	6/19/2015	CBRS - OT	ALBANY CITY SD		Training	3Provider138	9160	ĸ	2X30	Individual		CBRS	1415W00011	69						
27 DRAYTON	Yasiene	4/19/2011	r	9/3/2014	6/19/2015	CBRS - ST	ALBANY CITY SD		Training	Provider138	9160	ĸ	2x30	Individual		CBRS	1415W00011	70						
28 URRUTIA	Azrielia	2/13/2010	F	9/3/2014	6/19/2013	CBRS - ST	ALBANY CITY SD		Training	JProvider138	9160	ĸ	3x30	Individual		CBRS	1415000011	/1						
29 PERDOMO	Ankit	2/20/2010	r	9/3/2014	6/19/2015	CBRS - ST	WATERVLIET CITY SD		Training	3Provider138	9160	ĸ	3x30	Individual		CBKS	1415W00011	72						
30 KOGAN	Ashantewa	5/7/2010	F	9/3/2014	6/19/2013	CBRS - ST	ALBANY CITY SD		Training	JProvider138	9160	ĸ	1x30	Individual		CBRS	1415000012	22						
22 KOGAN	Ashantewa	5/7/2010	r c	9/3/2014	6/19/2015	CBRS - PT	ALBANY CITY SD		Training	provider138	9160	K V	1x20 Monthly	Group		CBRS	1415\//00012	23						
	Mikiala	4/21/2010	c	9/2/2014	6/19/2015	CBPS - ST	ALBANY CITY SD		Training	Provider138	9160	K.	2220	Individual		CBRS	1415\//00012	92					1	Å
	Mikiala	4/21/2010	F	9/3/2014	6/19/2015	CBRS - ST	ALBANY CITY SD		Training	provider120	9160	ĸ	1x30	Group		CBPS	1/15///00012	94					S	1
	Halston	11/19/2010	r c	9/2/2014	6/19/2015	CBPS - ST	ALBANY CITY SD		Training	Provider138	9160	K V	2x20	Individual		CBRS	1415\//00012	95					-	1
36 THOMASON	Halston	11/19/2010	F	9/3/2014	6/19/2015	CBRS_ST	ALBANY CITY SD		Training	Provider138	9160	ĸ	1x30	Group		CBRS	1415W/00012	96						
27 DANTONA	Vincent Micheal	9/20/2011	r c	9/2/2014	6/19/2015	CBRS ST	ALBANY CITY SD		Training	a Provider138	9100	r r	4x20	Individual		CBRS	1415\//00012	01						1
38 DANTONA	Vincent Micheal	9/30/2011	F	9/3/2014	6/19/2019	CBRS - OT	ALBANY CITY SD		Training	Provider138	9100	ĸ	2x30	Individual		CBR	1415W00013	02						21
39 DANTONA	Vincent Micheal	9/30/2011	F	9/3/2014	6/19/2015	CBRS - MUS	ALBANY CITY SD		Training	Provider138	9100	ĸ	1x30	Individual		CBRS	1415W00013	03						
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Assigning caseload (agencies only)

Agency users will assign which service providers can enter attendance against which enrollments / children





Assign Children To Therapists

		20	R1	A	L	Hello, Trai	iningUser68 . Y	ou are currently lo	iged in for Training	Provider138 (Logout)	JAMES McGUINNE & ASSOCIATES IN Consultants
Home	e i	File Transfer	Attenda	nce 🔹 I	Billing Look	up 🔹 Reports	Medicaid	People T	My Account	Knowledge Base	
Selec ast N	ame⊿	hild Alloc			Search	[Show Advanced S	Search options]				
		Last Name	First Name	DOB	SED STAC ID	District	County				
Se			Trysten	10/17/200	9 E44333	ALBANY CITY SD	Albany				
		LLOCOA	Гзарспа	112112001	004022	ALDANT CITT 3D	Albany				
							© James	McGuinness & Ass	ociates		





Assign Children To Therapists

	U	KIA		ł	Hello, Training	Jser68 . You	are cu	urrently log	ged in for Trainin g	gProvider138 (L	Logout)	ASSOCIATES IN Consultants
Home File Tr	ransfer	Attendance	Billing	Lookup	Reports 🔻	Medicaid	Pe	eople –	My Account	Knowledge B	ase	
Select an Enro	llment			_								
Sonvio		Enrollment Type	Service Type	Frequency	From Date	To Date	I/G	Assigne	d Therapist/Servi	ce Provider		
Servic		Enforment Type		0.00	0.110.00.10	0.000.000.00						
Select RS1112W0	0014469	RS	PT	2x30	3/19/2012	6/22/2012	1					
Select RS1112W0 Select RS1112W0 Select SE1112W0	0014469	RS RS SEIT	PT ST	2x30 5x30 20x30	3/19/2012 3/1/2012 3/19/2012	6/22/2012 6/22/2012 6/22/2012	1					
Select RS1112W0 Select RS1112W0 Select SE1112W0 Select SE1112W0	0014469 0014485 0002798 0002782	RS RS SEIT SEIT	PT ST	2x30 5x30 20x30 10x30	3/19/2012 3/1/2012 3/19/2012 1/23/2012	6/22/2012 6/22/2012 6/22/2012 3/16/2012	1					
Select RS1112W0 Select RS1112W0 Select SE1112W0 Select RS1112W0 Select RS1112W0	0014469 0014485 0002798 0002782 0014484	RS RS SEIT SEIT RS	PT ST ST	2x30 5x30 20x30 10x30 5x30	3/19/2012 3/1/2012 3/19/2012 1/23/2012 1/23/2012	6/22/2012 6/22/2012 6/22/2012 3/16/2012 2/29/2012	 					





Assign Children To Therapists

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~	- → C	🕈 🏫 🔒 http:	s://training.cpsepc	ortal.com/Atter	dance/Assign_Child	_Therapists_and_Se	rvice_Providers.a	aspx					5	
	nome	The transier	Altendance	Diming	соокар керо	is incuicaiu	reopie	My Account	Knowledge base					

Select a Child

ALLOCCA, Isaberia County: Albany District: ALBANY CITY SD DOB: 1/27/2007 Redo Search

Select an Enrollment

l		Service ID	Enrollment Type	Service Type	Frequency	From Date	To Date	I/G	Assigned Therapist/Service Provider
l	Select	RS1112W0014469	RS	PT	2x30	3/19/2012	6/22/2012	1	
l	Select	RS1112W0014485	RS	ST	5x30	3/1/2012	6/22/2012	1	
l	Select	SE1112W0002798	SEIT		20x30	3/19/2012	6/22/2012		
	Select	SE1112W0002782	SEIT		10x30	1/23/2012	3/16/2012		
l	Select	RS1112W0014484	RS	ST	5x30	1/23/2012	2/29/2012	1	

	Last Name	First Name	NPI	
	ADONRI	Cordelle	1326290289	
	ALFARO	Oluwafolakemi Adebosipo	1497907604	

Av	ailable Therapists		
	Last Name	First Name	NPI
	AFONSO	Yaurdin	176074476
	AMALFITANO	Mechel	128588857
	ARISTILDE	Mayana	
	AUER	Lydia Nicole	
	BARKET	Leisha	157881310
	BARKOFF	Ean	179003880
	BENCAL	Cheikhouna	
	BHASIN	Daniel David	197285941
	BODNER	Wakuv	147779985
	BOTTJER	Eudasia	160901297
	BOWEN	Rachel Hope	
	BUCKLEY	William	
4			- F

Remove Therapist



© James McGuinness & Associates

Add Therapist(s)/Service Provider(s)

Classroom Management

PORI	AL	Hello, TrainingUs	er68 . You a	re currently log	ged in for Traini i	ngProvid	er138 (Logout)		L	AMES MCGUINN & ASSOCIATES I Consultants
Home File Transfer Attendan	ce Billing Lookup	Reports N	ledicaid	People	My Account	Know	ledge Base			
Collapse Filter 1										
Session: Program: Act 2014 - 2015 Winter • • • • • • • • • • • • • • • • • • •	ive During (Select Month & Year)	c.								
Class	Description	School Year	Program	# Students	# Teachers	# Aides				
ttendance Arbor Hill (SY14-15) (0:0:0)	5Hr Program - Robin	2014 - 2015 Winter	9160	7	1	0	Edit Classroom	Assign Children		
ttendance Child's Place (SY14-15) (0:0:	0) 5Hr Program - Jaime	2014 - 2015 Winter	r 9160	2	1	0	Edit Classroom	Assign Children		
ttendance Child's Place(CB)(SY14-15 (0	0:0:0) Centerbased 5Hr Program	n 2014 - 2015 Winter	r 9100	11	1	0	Edit Classroom	Assign Children		
ttendance Ohav-A (SY14-15) (0:0:0)	5Hr Program - Heather	2014 - 2015 Winter	r 9160	6	1	0	Edit Classroom	Assign Children		
ttendance Ohav-B (SY14-15) (0:0:0)	5Hr Program - Stella	2014 - 2015 Winter	r 9160	5	1	0	Edit Classroom	Assign Children		
ttendance Schenectady Day(SY 14-15)	(0:0:0) 5.0Hr Program-Lisa	2014 - 2015 Winter	r 9160	6	1	0	Edit Classroom	Assign Children		
ttendance St.Anthony's(SY 14-15) (0:0:	0) 5.0Hr Program-Melissa	2014 - 2015 Winter	r 9160	7	1	0	Edit Classroom	Assign Children		
ttendance St.Anthony's2.5(SY14-15) (0	0:0) 2.5Hr Program-Katy	2014 - 2015 Winter	r 9165	11	1	0	Edit Classroom	Assign Children		
ttendance UKids (SY14-15) (0:0:0)	5Hr Program - Carrie	2014 - 2015 Winter	r 9160	6	1	0	Edit Classroom	Assign Children		
ttendance Van Rensselaer DHH (14-15	(0:0:0) 5Hr Program - Rachel	2014 - 2015 Winter	r 9160	5	1	0	Edit Classroom	Assign Children		
Create New Classroom				© James Mc	Guinness & Asso	ciates				

JAMES MCGUINNESS & ASSOCIATES INC. Consultants

Classroom Management (Create Classroom)

Consultants

	Hello, Train	ingUser68 . You are curren	tly logged in for Training	gProvider138 (Logout)	JAMES McGUINI
Home File Transfer Attendance Bill	ng 🔻 Lookup 👻 Reports	Medicaid Peop	le 🔻 My Account 🔻	Knowledge Base	
lassroom Information chool Year: Program: 2015 - 2016 Winter • - select more/less lame: escription:	•				
Students: # Teachers: # Aldes: Sudents: # Cachers: # Aldes: Hide Assignments] Only Include in Unassigned List if Discipline Code is Assigned to Classroom	TEACH or AIDE? (will reload lists)				
No people currently assigned to classroom.	Select LastName ADONRI AFONSO ALFARO	FirstName Role Cordelle Teacher Yaurdin Teacher Oluvvafolakemi Adebosio			
	AMALFITANO ARISTILDE AUER	Mechel Teacher Mayana Teacher Lydia Nicole Teacher			
	BARKET	Leisha Teacher			
Select All Unassign ->	< Assign Select All				
		ര്ത			<u>Show all downlo</u>

Classroom Management (Assign Children)

	cc/Assig	n_ennaren_ela	ssioom.asp	A. CIASSI	JohnD-					2
		Hello, Training	User68 . You	i are curr	ently log	ged in for 1	Fraini	ngProvider138 (Logou	it)	ASSOCIATES INC Consultants
Home File Transfer T Attendance Billing Lo	okup	Reports	Medicaid	Peop	ole 🔻	Му Ассон	unt	Knowledge Base		
Classroom: Test										
Assigned to Classroom	Not Ass	gned		Ŀ	+ Filter Unas	ssigned Childre	en]			
No children currently assigned to classroom.	Selec	t Last Name	First Name	District	County	DOB				
		ABBOTT	John aka Jack	ALBANY CITY SD	Albany	3/18/2011	De			
		AMONORTEGA	Joleigh	ALBANY CITY SD	Albany	12/23/2010	De			
		HERNANDEZFUE	NTES Tamiera	CITY SD	Albany	11/13/2012	De			
			Leury	CITY SD MENANDS	Albany	4/12/2012	De			
			reisun	UFSD	Cabulty	40/2011				
	4						•			
Select All Unassign>	< 4	ssign Select	All							
Save Changes										
			© James M	cGuinnes	s & Asso	ciates				





Credentials/Signature

4	→ C	🖰 🏦 🔒 https:	//training.cpsepor	tal.com/M	y_Account/The	rapistProfile.a	ispx										
		PO	RTA	۱L		Hello, Traini	ingUser92 . You a	re currently lo	gged in for Oluwaf	olakemi Ade	bosipo ALF.	ARO (Log	gout)	I		JA & C	MES ASS ons
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	_ Infor	mation in CPSE D	atabase														
	Last	Name						Lice	nses / Certifica	tions / Prof	essions						
	First	t Name	Oluwafolakemi Ad	et					Descripti	on	Credential Type	#	State	NY Profession Code	From	то	Act
	NPI		1497907604					PT F	Physical Therapist	L	icense	006260		062			6
	Sign	ature, Title, and C	redentials David	I Flores, CC	C-SLP			Ac	d								
	(e.g.	.: Mary Brown, CC	C-SLP)														
				Update													
	- Infor	mation from NPPE	S NPI Registry														
	Click	here for NPPES v	vebsite	N	PI 1497907604		This NPI is for	an Individual									
	First	Name COLLEEN				Organization N	ame			Mailing A	ddress 1 709		JNEIN				
	Last I	Name ABBATE				o i gamzation i ta				Mailing A	ddress 2						
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Favorites

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A	dd										
						© James Mc	Guinness & Ass	sociates			





Create PIN

	RTA	Hello,	TrainingUser	92 . You are curre	ntly logged in 1	or Oluwafolakemi	Adebosipo ALFARO	O (Logout)	JAMES McGUI
me File Transfer	Attendance 🝸 E	Billing 🝸 Lookup 🝸	Reports	Medicaid	People	My Account	Knowledge Base		
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You have not yet created a	PIN. You will be unal	ble to digitally sign attend	lance until you	i do so. Please cre	eate one now.				
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			Fasswo	ru venncation					
			For addition	onal security, please	re-enter your log	n password.			
			Passwor	d					
						Proceed			





Licenses and Certifications

	RTAL	Hello, Trainingl	Jser92 . You are cu	urrently logged in for Oluwafo	olakemi Adebosipo Al	FARO (Lo	gout)	10000d		L JAME & ASS Cons	S McGUINNES SOCIATES INC sultants
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Profile											
arsonal and Professio	onal User Information	Favorites 🤍 PIN 🌶									
Last Name	alabase			Licenses / Certificat	ions / Professions						
First Name	Oluwafolakemi Adel			Descriptio	n Credentia Type	I #	State	NY Profession Code	From	То Ас	tive
NPI	1497907604			PT Physical Therapist	License	006260		062			Edit
Signature, Title, and C (e.g.: Mary Brown, CC	credentials David Flores, CC C-SLP) Update	XC-SLP		Add							
	ES NPI Registry										
Information from NPPE		VPI 1497907604	This NPI is for an Ir	ndividual							
Information from NPPE Click here for NPPES w	vebsite M					091 SUZAN	NNE LN				
Information from NPPE Click here for NPPES w First Name COLLEEN	vebsite r	Organization Name	9		Mailing Address 1 7 Mailing Address 2						
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Information from NPPE Click here for NPPES w First Name COLLEEN Last Name ABBATE Credentials PT Primary Y	Taxonomy 172M00000X	Organization Name Type Other Service Providers	e	Classification Mechanotherapist	Mailing Address 1 7 Mailing Address 2 City SCHENECTAD	Y Specializ	ation	State NY Zi	p 1230353 ate IY	247 L 006260-1	icense
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My Caseload

Search

My Caseload

2014 - 2015 Winter 🔹

ESID	Last Name	First Name	County	Provider	District	Enrollment Type	RS Type	From Date	To Date	Frequency	Individual Or Group	
RS1415W0010987	ATKINS	Sakina	SCHENECTADY	TrainingProvider100	ROTTERDAM- MOHONASEN CSD	RS	ST	2/2/2015	6/25/2015	1x30	I	Attendances
RS1415W0011238	BANK	Shays	SCHENECTADY	TrainingProvider100	SCHALMONT CSD	RS	ST	6/15/2015	6/25/2015	2x30	I	Attendances
RS1415W0010516	BIANCHINI	Nirob	SCHENECTADY	TrainingProvider100	ROTTERDAM- MOHONASEN CSD	RS	ST	9/3/2014	6/25/2015	2x30	I	Attendances
RS1415W0017483	MANNIX	Klay	Albany	TrainingProvider100	GUILDERLAND CSD	RS	ST	9/2/2014	6/19/2015	2x30	I	Attendances
RS1415W0017279	NYAHAY	Mikiala	Albany	TrainingProvider100	GUILDERLAND CSD	RS	ST	9/2/2014	6/19/2015	2x30	I	Attendances
RS1415W0017284	NYAHAY	Mikiala	Albany	TrainingProvider100	GUILDERLAND CSD	RS	COR	9/2/2014	6/19/2015	1x30 MONTHLY	I	Attendances
RS1415W0010461	SACCONE	Mahlania	SCHENECTADY	TrainingProvider100	ROTTERDAM- MOHONASEN CSD	RS	ST	9/3/2014	6/25/2015	2x30	I	Attendances





Attendance Entry

- Time In / Time Out
- Setting (Daycare, home, Preschool)
- Co-visit with Supervisor
- Diagnosis
- CPT Codes
- Make Up (and date being Made Up)

CP

Session Notes



Co-Visit with Supervisor		
ild 1]	Child:	
	Not Selected	▼
	Primary Diagnosis Code: Not Selected	
	[Set ICD Code as Default For This Enrollment]	
	CPT Codes: [Lookup]	Units:
	•	
	•	
	•	
	•	
	•	
	Make Up Does Not Meet	t Medicaid Requirements
	Session Notes:	

Entering Attendance on Calendar

Monday Apr 06, 2015	Tuesday Apr 07, 2015	Apr 05, 2015 - Apr 11 Wednesday Apr 08, 2015	, 2015 Thursday Apr 09, 2015	Friday Apr 10, 2015
Monday Apr 06, 2015	Tuesday Apr 07, 2015	Apr 05, 2015 - Apr 11	, 2015 Thursday Apr 09, 2015	Friday Apr 10, 2015
Monday Apr 06, 2015	Tuesday Apr 07, 2015	Wednesday Apr 08, 2015	Thursday Apr 09, 2015	Friday Apr 10, 2015
Monday Apr 06, 2015	Tuesday Apr 07, 2015	Wednesday Apr 08, 2015	Thursday Apr 09, 2015	Friday Apr 10, 2015
	10:15 am to 10:45 am			
	Smith, Mark			
		10:15 am to 10:45 am Smith, Mark Smith, Mark Image: Smith Stress of Stres	Image:	Image: series of the series





Therapist Activity Report

Martin					Printed: 6/24/2015 4:39:15 PM	<i>n</i>
	<u>aerenem</u>	De The	erapist /	Activity	Page 2 of 6	
	0		BOTTJER, E	udasia	Fage 2 01 0	,
Date / Time	Setting	Child	ICD/CPT Codes	Notes		
09/06/13	Daycare	AQUILA, JOHN GARRETT	315.32	THESE NOTES ARE FOR	Notes Entered:	
In: 12:15PM Out: 12:45PM		CBRS1314W0011775(ST- g)	92508x1	DEMONSTRATION PURPOSES ONLY.	Notes Last Modified: 6/23/2015 6:10:10 PM	
					Signed: 10/10/2013 DEMO CREDENTIALS Cosigned: 10/10/2013 NOT COSIGNED	
					Meets Medicaid Requirements:	
09/09/13	Daycare	AQUILA, JOHN GARRETT	315.32	THESE NOTES ARE FOR	Notes Entered: 10/0/2013 11:56:44 AM	
In: 12:30PM Out: 01:00PM		CBRS1314W0011774(ST- i)	92507x1	DEMONSTRATION PURPOSES ONLY.	Notes Last Modified: 6/23/2015 6:10:10 PM	
					Signed: 10/10/2013 DEMO CREDENTIALS Cosigned: 10/10/2013 NOT COSIGNED	



Classroom Attendance Report

Serence de la competitione de la	D					C	las	sr	roo	m	At	ter	nda	anc	e						Prin	nted: 6	/24/2	2015	4:51. Page	:06 Pi e 1 of	и 1		
Classroom: Child's P Month: 4/2015	lace	(CB)	(SY	14-15																	<u>A</u> U - U	ttend Jnsign	ance ed	S -	end Sign	ned			
	W	т	F	S	S N	۱.	тТ	V 1	T F	s	s	М	T١	ΝТ	F	S	S N	Т	W	т	F	s s	М	т	w	Т			
Child Name	1	2	3	4	5 6	;	7 8	3 9	9 10) 11	12	13 1	14 1	5 16	17	18 1	19 2) 21	22	23	24	25 26	5 27	28	29	30			
ABBOTT, John aka Jack	S	s				╈	+			+		S	S	s s	S		5	s	S	s	s		S	s	s	S			
ABIKZER, Tremaine	S					+	+						S	s			5		s		s				s	S			
AMONORTEGA, Joleigh	S	s				+	+			+		S	S	s s	S		5	s		s	s		S	s	s	S			
BLUMBERG, Sayad	S	s				$^{+}$	+	+		+		S	S	s s	S		1	s	S	s	s		S	s	s	S			
DANTONA, Vincent Micheal	S	s				╈	+			\top		S	S	s s	S		5	s	S	s	+		S	S	s				
IANNOTTI, Korveh	S					╈	+			\top		S	S	s s	S		5	s	s	s	s		S	s	s	S			
MEDINAESPINOZA, Gregary	s	s				╈						S	S	s s	S		5	s	s	s	s			s	s	S			
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VAITKUS, Zymea												S	S	ss	S		5	s	S	S	s		S	S	S	S			





Digitally Sign Attendance

Last First Service Service CoVisit Make Up Start End CPT ICD Notes	
MANNIX Klay 5/05/2015 Daycare Sventering my pin number 1/We certify that on the dates selected the SES ONLY.	TION
MANNIX Klay 5/07/2015 Daycare Selected children received the services noted and that documentation exists and is maintained on file verifying the delivery of said services in accordance SES ONLY.	TION
NYAHAY Mikiala 5/11/2015 Daycare with all relevant Federal, State and Local Laws and Regulations governing the Medicaid process.	TION
NYAHAY Mikiala 5/13/2015 Daycare NOTE: Credentials are REQUIRED to sign. Please verify credentials on your DES ONLY.	TION
NYAHAY Mikiala 5/18/2015 Daycare Name & Credentials: Klarica SAMOLINA CCC SLD SES ONLY.	TION
NYAHAY Mikiala 5/19/2015 Daycare NPI: 1508012717 NOTES ARE FOR DEMONSTRATIONAL COLLIGENCE	TION
NYAHAY Mikiala 5/26/2015 Daycare Date: 6/24/2015	TION
NYAHAY Mikiala 5/29/2015 Daycare I agree. NOTES ARE FOR DEMONSTRATION OF DEMONS	TION





Billing Provider PIN

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Home	File Tran	sfer Atte	ndance	Billing	Lookup	Reports	Medicaid	People	My Account	Knowledge Base	
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You f PIN PIN c	nave not yet Number:	created a PIN. essfully.	You will be u	unable to digit e PIN	ally sign attend	fance until you	do so. Please cr	eate one now.			
							© James McC	Guinness & Ass	ociates		





Voucher Management

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CP SE	PO	RTA	L		Hello, Trainir	ngUser68 . You a	ire currently lo	iged in for Trainir	ngProvider138 (Logout)	JAMES McGUINNESS & ASSOCIATES INC. Consultants
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Voucher # Billing Dat Authorized Claimant	AUTO e						Descript Claiman	ion t Title		
						Cano	el Save			
						© James McC	Guinness & Ass	ociates		





Voucher Summary

Provider: Vendor#: Tax ID: Bill To County:

Screekchange TrainingProvider138 00780 SED Provider Code: 491700880269

SCHENECTADY

Voucher Summary

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Page 1 of 1

Bill Date: 4/30/2015 Voucher#: CB150513114018

Service Month: April 2015 Voucher Description: April Int5.0 Tuition

Child Name	ESID	Program Code	Frequency	Rate	Billing Method	Paymt Type	Month	Amount
AQUILA, JOHN GARRETT	CB1415W0007142	9160	5 hrs/day - I	\$658.15	WEEKLY DYNAMIC	R	Apr-15	\$2,632.60
CARAMIHAI, GIOVANNI JR	CB1415W0007251	9160	5 hrs/day - I	\$658.15	WEEKLY DYNAMIC	R	Apr-15	\$2,632.60
CONGERO, Jevek	CB1415W0007438	9160	5 hrs/day - I	\$657.32	WEEKLY DYNAMIC	R	Apr-15	\$2,629.28
HAGERTY, Faelen	CB1415W0007289	9160	5 hrs/day - I	\$658.15	WEEKLY DYNAMIC	R	Apr-15	\$2,632.60
MARINUCCI, Nameer	CB1415W0007219	9160	5 hrs/day - I	\$658.15	WEEKLY DYNAMIC	R	Apr-15	\$2,632.60
PINZON, Satavia	CB1415W0007244	9160	5 hrs/day - I	\$658.15	WEEKLY DYNAMIC	R	Apr-15	\$2,632.60
RAGHAVENDRA, Aidann	CB1415W0007246	9160	5 hrs/day - I	\$658.15	WEEKLY DYNAMIC	R	Apr-15	\$2,632.60
RAPP, ANAE	CB1415W0007422	9160	5 hrs/day - I	\$657.86	WEEKLY DYNAMIC	R	Apr-15	\$2,631.44
REZNIKOV, Arain	CB1415W0007454	9160	5 hrs/day - I	\$657.59	WEEKLY DYNAMIC	R	Apr-15	\$2,630.36
RISKOVICH, Kevante	CB1415W0007087	9160	5 hrs/day - I	\$658.15	WEEKLY DYNAMIC	R	Apr-15	\$2,632.60
SAHU, Jalyianna	CB1415W0007479	9160	5 hrs/day - I	\$656.37	WEEKLY DYNAMIC	R	Apr-15	\$2,625.48
SCHWARTZBERG, Atlanta	CB1415W0007249	9160	5 hrs/day - I	\$658.15	WEEKLY DYNAMIC	R	Apr-15	\$2,632.60
VASILIOU, Aaralyn	CB1415W0007475	9160	5 hrs/day - I	\$657.74	WEEKLY DYNAMIC	R	Apr-15	\$2,630.96
					Grand Total:			\$34,208.32

I certify that on the dates above, the above named child received the services noted and that documentation exists and is maintained on file verifying the delivery of said services in accordance with all relevant Federal, State and Local Laws and Regulations governing the Medicaid process.

Authorized Signature:

Certification:

JAMES MCGUINNESS ASSOCIATES INC. Consultants

Printed: 6/3/2015 4:33:10 PM **PORTAL**

Voucher Summary





RS Voucher Summary







Parent Signature Log

		Preschool Parent /	Caregiver	Signatur	e Log	
Child Name		DOB		Therapist		
District				Discipline		1
County		ND		NPI		License#
Agency				Frequency		Duration
		Month	Yea	r		
Start Time	End Time	Caregiver / Verifying Witness Signature		Start Time	End Time	Caregiver / Verifying Witness Signature
1			1	7		
2			1	8		
3			1	9		
4			2	0		
5			2	1		
6			2	2		
7				3		
8				4		
9				5		
10				6		
11				7		
12				0		
12				0		
13				9		
14				0		
15			3	1		
16						

I certify that on the dates above, the above named child received the services noted and that documentation exists and is maintained on file verifying the delivery of said services in accordance with all relevant Federal, State and Local Laws and Regulations governing the Medicaid process.

Therapist Signature





Schema for Attendance File Upload

http://support.cpseportal.com/kb/a67/schema-for-attendance-fileupload.aspx





Webinars

- Independent Therapists
 - My Profile
 - Entering Attendance

Tuesday June 30th - 4 PM Thursday July 2nd - 10 AM Monday June 6th- 3 PM





Webinars

- Agencies office staff
 - User setup / inviting users
 - Assigning caseload
 - Enrollments

Monday June 29th- 3 PM Tuesday July 7th - 4 PM Wednesday July 8th - 10 AM Thursday July 9th - 3 PM





Claims Clients

Additional Webinar from CLAIMS team showing how to upload from CLAIMS



