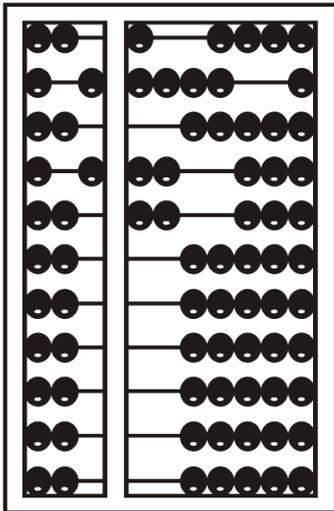


JAMES MCGUINNESS
& ASSOCIATES INC.
Consultants



NEW MEDICAID SCREENS/PROCESSES (For Agencies)

(2025)

INTRODUCTIONS

- ***Deborah Frank, McGuinness Medicaid Specialist***
 - Kelly Knowles, McGuinness Medicaid Team
 - Ellen Farney, McGuinness Medicaid Team

PURPOSE OF WEBINAR

- ❑ Some Medicaid compliance issues have surfaced recently for ***signatures*** and ***service locations*** that required McGuinness to make some changes.
- ❑ In order to address these issues McGuinness is taking a two-step approach:
 - 1) ***The first step*** is education. Every year McGuinness conducts multiple webinars about Medicaid compliance and these particular issues are covered. McGuinness would like providers to take advantage of these trainings.
 - 2) ***The second step*** will be to implement an approval process for ***Signatures, Service Locations and Provider Sites***.
- ❑ Using this two-step approach should result in increasing Medicaid compliance.

TOPICS COVERED

New Approval Processes (for)

- *Signatures (Effective with **February 1, 2025** Service Dates)*
- *Service Locations (Effective Date **TBD**)*

New Screens/Reports

- *Signature Approval / Invalidated Listing*
- *Center-Based Provider Site Entry*
- *Missing CBRS Entries*
- *Attendances not Meeting Medicaid Requirements*

Providers Uploading Attendances from an Outside Source *(other than Portal)*

SIGNATURES

NEW APPROVAL PROCESSES (for Signatures)

☐ Signatures

As per Medicaid Q&A #25 (shown below), a therapist's signature should include the **Name, Title, Signature and Credentials**.

25. Q. What must be included in a session note?

- A.** Session notes specifically document that the service provider delivered certain evaluation and/or services to a student on a particular date. Session notes must be completed by all qualified service providers delivering preschool/school supportive health services that have been ordered by an appropriate practitioner and included in a student's IEP for each service delivered. Session notes must include:
- Student's name
 - Specific type of service provided
 - Whether the service was provided individually or in a group (specify actual group size)
 - The setting in which the service was rendered (school, clinic, other)
 - Date and time the service was rendered (length of session — record session start time and end time)
 - Brief description of the student's progress made by receiving the service during the session
 - • **Name, title, signature and credentials of the person furnishing the service**
 - Dated signature and / credentials of supervising clinician as appropriate (signature date must be within 45 days of the date of service).

[July 21, 2015]

Medicaid-compliant Signature: **Shannon Stark, MA CCC/SLP** (Name, Credentials, Title)

NEW APPROVAL PROCESSES (for Signatures)

- ❑ We have recently discovered scenarios where therapists are not including all of the Medicaid components in their signature, which results in a non-Medicaid compliant signature.
- ❑ Vendors that upload data from outside systems (*other than the Portal*) do not always upload the signature that was “approved,” which allows Medicaid documentation to be signed with a non-compliant (Medicaid) signature.
- ❑ As a result, McGuinness recently developed screens/processes that would enable us to approve every signature on every session note – even if it comes from an outside system.

NEW APPROVAL PROCESSES (for Signatures)

- ❑ All Full-Service Medicaid Counties will be enabling an edit that will require “***approved signatures***” in order to submit billing to the County.
- ❑ This edit will be enabled beginning with **February 1, 2025 Service Dates**.
- ❑ Vendors that upload billing into the CPSE Portal from an “***outside system***,” may want to begin reviewing therapist’s signatures to ensure that the Name, Title, Signature and Credentials are included in the signature so billing to the county is not impacted.

NEW APPROVAL PROCESSES (for Signatures)

- ❑ This process will work similarly to the *Credential Approval Process*, but for **Signatures**.

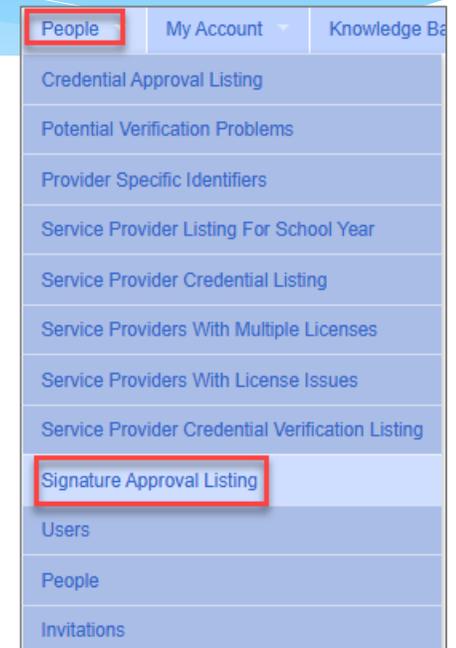
- ❑ Here is how this will work...
 - If the signature has the **Name, Title, Signature and Credentials**, the signature will be **“Approved.”**

 - If the signature does not have the **Name, Title, Signature and Credentials**, the signature will be **“Invalidated.”**

 - If the signature is **“Invalidated,”** attendances with an *Invalidated Signature* will need to be corrected (*unsigned and re-signed with an updated signature that includes the required components*) and the new signature will then need to be approved by McGuinness before the attendances can be submitted to the county for payment.

NEW APPROVAL SCREEN (for Signatures)

- ❑ The new **Signature Approval Screen** can be accessed by going to **People > Signature Approval Listing**.
- ❑ You will filter for either...
 - **Invalid Signatures**, or
 - **Approved Signatures**
- ❑ Click **Retrieve**
- ❑ If approved, the screen will show the approval date. If Invalidated, will show the date of Invalidation and the reason why it was invalidated.



Signature Approvals

Filters

County Provider

Include Invalid Signatures
 Include Approved Signatures

Retrieve

Provider	Last Name	First Name	CPSE Signature	Attendance Signature	Approved	Invalidated	Invalid Reason
						12/23/24	Missing Credential / Title
						12/23/24	Missing Credential / Title

QUESTIONS

Signature Approvals

SERVICE LOCATIONS & PROVIDER SITES

NEW APPROVAL PROCESSES

(for Service Locations)

- As per Medicaid Q&A #164 (shown below), the school, clinic, or other setting where services are delivered should be sufficiently clear that the specific location be discerned.

164. Q. Are session notes that indicate the therapy setting as “Erie 1 BOCES” acceptable for Medicaid billing purposes?

A. The school, clinic, or other setting where services are delivered should be sufficiently clear that the specific location can be discerned. If there is only one address associated with the name “Erie 1 BOCES” it is sufficient. If there is more than one location associated with that same name, then the setting must be uniquely identified in the session note (e.g., the physical address could be recorded). If, upon review of session notes, the school district, county, or §4201 school finds insufficient documentation of the ‘setting’ in which the service was delivered, the school district, county, or §4201 school may have other supporting documentation of where the service was actually furnished that could be used to support a Medicaid claim. Such other documentation may be an attendance log that can be cross-referenced with the session notes to satisfy the documentation requirements. Documentation that is “before the fact” and shows what is intended to occur (e.g., schedules, IEPs) does not provide evidence of what actually happened and is not sufficient. The documentation must demonstrate what actually occurred (e.g., a session note or a transportation log). [December 5, 2011]

NEW APPROVAL PROCESSES

(for Service Locations)

- ❑ The Portal Session Note has two separate fields for the Service Location – the **Setting** and the **Location**.
 - The **Setting** is a list of predefined types of locations such as **Preschool, Daycare, Home**, etc.
 - The **Location** should give enough information to determine the exact location where the service took place.

Medicaid-Compliant Examples:

Setting: *Preschool (Generic)*

Location: *Montessori Preschool, 123 Main St., Albany, NY (Specific)*

- ❑ McGuinness has discovered that some providers are not entering enough information into these two fields on the Session Note to meet Medicaid requirements.

NEW APPROVAL PROCESSES

(for Service Locations)

- ❑ As mentioned earlier in the presentation, McGuinness is recommending a two-step process to address this issue.
 - 1) **The first step** is “educating” or “re-educating” providers. Each year McGuinness conducts multiple webinars on Medicaid compliance. One of the webinars that we offer is **Medicaid-Compliant Session Notes**, which is scheduled to occur this year on **May 1, 2025 and May 2, 2025**.
 - 2) **The second step** is to implement the **Service Location Approval Process**. McGuinness has already developed the screens and processes for our Medicaid Team to be able to review and approve **Service Locations and Provider Sites**.
- ❑ Once McGuinness approves all of the existing service locations and provider sites, an edit will be enabled that will “require” all **Service Locations and Provider Sites** on a voucher to be “**approved**” in order to submit the billing voucher for payment.

NEW APPROVAL PROCESSES

(for Service Locations)

□ How will this *Service Location Process* work?

- The **Settings, Locations and Provider Sites** from your agency's Session Notes have been imported to a **Service Location Approval Screen** in the Portal. Sample shown below.

(This screen is for McGuinness use only.)

Service Location Approvals

Filters

County Provider

Include RS Locations
 Include CBRS Locations

Locations

Select	Provider	EnrollmentType	Setting	Location
<input type="checkbox"/>	ABC	RS	Community Setting	Community Center
<input type="checkbox"/>	ABC	RS	Daycare	Butterfly Kisses Daycare

NEW APPROVAL PROCESSES

(for Service Locations)

- ❑ The McGuinness Medicaid Team will review the **Setting and Location Fields** to determine if there is enough information entered to meet Medicaid requirements.
 - If between the **Setting and Location Fields**, the specific Service Location can be discerned, McGuinness will **“Approve”** the Service Location.
 - If between the **Setting and Location Fields**, the Service Location cannot be discerned, McGuinness will **“Invalidate”** the Service Location.
 - If the **Service Location** is **“Invalidated”** billing will be suspended until the service provider updates the Service Location on the applicable session notes and the service location is subsequently approved by McGuinness.
 - This process will ensure that the Service Location entered on Session Notes meets Medicaid requirements.

EXAMPLES OF SETTINGS / LOCATIONS

(Specific Enough & Not Specific Enough)

The chart below shows examples of Settings/Locations that meet Medicaid requirements as well as some examples that do not meet Medicaid requirements.

Not Specific Enough <i>(Does <u>not</u> meet Medicaid Requirements)</i>	Specific Enough ← <i>(Meets Medicaid Requirements)</i>
Setting: School Location: Therapy Room	Setting: Preschool Location: ABC Preschool, 123 Main St., Albany, NY
Setting: Universal Pre-K Location: Preschool	Setting: Universal Pre-K Location: ABC Preschool, Classroom 3
Setting: Preschool Location: Sensory Gym	Setting: Preschool Location: ABC Preschool, Sensory Gym
Setting: Community Setting Location: Classroom A	Setting: Community Setting Location: Classroom A, 254 South Main Street, Albany NY,

EXAMPLES OF ACCEPTABLE “SETTINGS”

- Home
- Daycare
- Preschool
- Nursery School
- Universal Pre-K
- Medical Site
- Community Setting
- Facility Location/Private Office
- Therapy Room
- Teletherapy
- Classroom
- Cafeteria/Gym
- Head Start
- Flexible Setting

This items shown in this list are examples of acceptable “Settings” that could be entered into the Setting Field on the Session Note.

The Location Field on the Session Note should give enough information to discern where the service is rendered (e.g., the complete address of the location.)

Setting: Therapy Room (Generic)

Location: ABC Preschool, 123 Main St., Albany, NY (Specific)

IEPs

SUMMARY-SPECIAL EDUCATION PROGRAMS AND RELATED SERVICES			
Special Education Itinerant Services: 1:1 : Direct	01/06/2025 - 06/27/2025	5 x Weekly, 1hr.	Home
Special Class in an Integrated Setting: 12:1+2	01/06/2025 - 06/27/2025	5 x Weekly, 5hr.	Special School
Speech/Language Therapy: Individual	11/27/2024 - 06/27/2025	2 x Weekly, 45min.	Home
Occupational Therapy: Individual	01/06/2025 - 06/27/2025	2 x Weekly, 30min.	Facility
			Location/Private Office

- ❑ If the IEP states **Classroom** or **Therapy Room** on the IEP, you can use that for the “Setting” field on the Session; however, in order for an auditor to know “where” the service was rendered, the “Location” field on the Session needs to show additional information such as the name of the school (if it is unique) or the name and address of the school if there is more than one facility with the same name.
- ❑ Some providers have been asking school districts to change IEPs. Please do not ask for amended IEPs. If you need clarification regarding how to enter the Setting or Location, please email Medicaid@cpseportal.com.

ADDITIONAL DOCUMENTATION

To Support the Medicaid Claim for the Service Setting

- ❑ If upon review of session notes an auditor finds insufficient documentation of the “Setting” in which the service was delivered, the school district or county may need to provide “**Additional Documentation**” to show “**where**” the service was rendered in order to support the Medicaid claim.

164. Q. Are session notes that indicate the therapy setting as “Erie 1 BOCES” acceptable for Medicaid billing purposes?

A. The school, clinic, or other setting where services are delivered should be sufficiently clear that the specific location can be discerned. If there is only one address associated with the name “Erie 1 BOCES” it is sufficient. If there is more than one location associated with that same name, then the setting must be uniquely identified in the session note (e.g., the physical address could be recorded). If, upon review of session notes, the school district, county, or §4201 school finds insufficient documentation of the ‘setting’ in which the service was delivered, the school district, county, or §4201 school may have other supporting documentation of where the service was actually furnished that could be used to support a Medicaid claim. Such

- ❑ This may entail providing the **Confirmation of Service Delivery Log**, and/or requesting a **letter** from the preschool/daycare confirming that the child received the service on the requested date of service and/or requesting a copy of the facility’s **sign-in sheet**.

EFFECTIVE DATE FOR SERVICE LOCATIONS – TBD

for Session Notes

- ❑ The effective date for the ***Service Location Approval Process*** ***has not yet been determined.***
- ❑ McGuinness will be reviewing and approving ***Service Locations and Provider Sites*** for the next few months in order to give providers enough time to enter the correct *Service Location* information before the ***Approval Process*** is enabled (for your county) to ensure minimal billing issues.
- ❑ McGuinness will give providers a one-month notification prior to enabling the Service Location edit.
- ❑ Agencies may want to begin a QA Process for the ***Setting/Location Fields*** to prevent any future billing implications; especially if you upload your billing from an outside system.

CASELOAD DEFAULTS

(for Session Notes)

- ❑ The Portal has the ability to create “**Defaults**” on Session Notes for the following fields:
 - **Setting**
 - **Location**
 - **CPT Code(s)**
 - **ICD Code(s)**

- ❑ Once the “Defaults” have been set up (for each enrollment), the default settings will autofill into each subsequent Session Note.

- ❑ If the session note *Default* does not apply to a particular session the “Default” setting can be deleted and changed for that specific session without deleting the “Default” setting.

HOW TO SET UP CASELOAD DEFAULTS

for Session Notes

(Link to KB Article: <https://support.cpseportal.com/kb/a243/setting-up-defaults-in-your-caseload.aspx>)

- ❑ Go to **Caseload Maintenance > My Caseload** to find the enrollment(s) that you would like to set up with defaults. You will need to create **defaults** for each of your enrollments.
- ❑ Click the **“Defaults”** link at the end of the row.

My Caseload

Filter By
Provider: Session: 2024 - 2025 Winter

	Status	ESID	Last Name	First Name	County	Provider	District	Type	From	To	Service	Assigned			
<input type="checkbox"/>		RS2425W002						RS	01/06/25	06/27/25	ST1 2x30 Group		Attendances	Service Confirmation Logs	Defaults
<input type="checkbox"/>		RS2425W002						RS	11/04/24	06/27/25	ST1 2x30 Group		Attendances	Service Confirmation Logs	Defaults



- ❑ Next, enter the default for the **Service Setting** and the **Location**.
- ❑ Next, enter the default **CPT Code(s)**, enter the **# of units** and click the **Add** link (you can enter multiple codes)
- ❑ Next, enter the default **ICD Code(s)**, click **Add** link to save each ICD Code (you can enter multiple codes.)
- ❑ Click the **SAVE** button on the far right of the screen.

ENROLLMENT DEFAULTS SCREEN SET UP

for Session Notes

Enrollment Defaults

Enrollment Info

Child Name: [REDACTED] Electronic Service ID: RS2425W002 [REDACTED] Enrollment Type: RS RS Type: ST1
County: [REDACTED] Provider: [REDACTED] District: [REDACTED]
Service Nickname: [REDACTED]
Enrollment Notes: [REDACTED]

For each new attendance use these default values

Bill each entry as 30 minute session(s) for a total duration of 30 minutes.

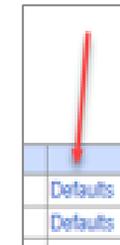
Service Setting: [REDACTED] Location: [REDACTED]

Default CPT Code for new attendance

CPT Code	Description	Units	
<input type="text"/>	<input type="text"/>	<input type="text"/>	Add

Default ICD10 Code for new attendance

ICD 10 Code	Description	
<input type="text"/>	<input type="text"/>	Add



After you click the “Defaults” link at the end of the row, this screen will populate.

Fill in the highlighted information and click the SAVE button at the far right of the screen.



Save

SCREENSHOT OF HOW DEFAULTS POPULATE INTO THE SESSION NOTE

Setting:
Preschool

Location:
Little Red School House, Hurley, NY

ICD Code:
F80.2

CPT Code:
92507

Setting Location

Time In: 09:00 AM Time Out: 09:30 AM

Bill this session as: 1.00 x30 minute session(s)

Co-Visit with Supervisor

[BOYKIN, MATTIE]

Child: [BOYKIN, MATTIE 2030 - ST - 1 01/20/22 - 06/24/22]

Entry Type: [Provided Treatment Session]

Diagnosis Code(s): [F80.2]

CPT Codes: 0 selected	Units:
[92507] TREATMENT OF SPEECH, LANGUAGE, VOICE, COMMUNICATION, AND/ OR AUDITORY PROCESSING DISORDER, INDIVIDUAL	[1]
[]	[]
[]	[]
[]	[]
[]	[]

Does Not Meet Medicaid Requirements

Progress: No Progress Limited Progress Progress

Session Notes:

[]

save cancel

SINGLE SITE

(for Service Locations)

- ❑ As per Medicaid (Q&A #164), if there is **only one name** associated with a location, then the name of the facility is sufficient; however, if there is more than one location associated with that *same name*, then the **setting** must be **uniquely identified** in the Session Note (e.g., the *name and physical address could be entered to satisfy the specific site setting.*)

164. Q. Are session notes that indicate the therapy setting as “Erie 1 BOCES” acceptable for Medicaid billing purposes?

A. The school, clinic, or other setting where services are delivered should be sufficiently clear that the specific location can be discerned. If there is only one address associated with the name “Erie 1 BOCES” it is sufficient. **If there is more than one location associated with that same name, then the setting must be uniquely identified in the session note (e.g., the physical address could be recorded).** If, upon

❑ Examples:

- **Single Site:** If the setting is **Daycare** and the single site location is **Josie’s Daycare**; there is sufficient information to determine where the service is rendered.

SETTING: Daycare
LOCATON: Josie’s Daycare

MUTLIPL E SITES

(for Service Locations)

□ Examples (Continued)

- **Multiple Sites:** If there is a facility that has “**multiple**” locations/sites with the same name, each site will need to show sufficient information to discern the specific site where the service was rendered.
- For Example: **Child Time Preschool** has multiple sites (in Schenectady, Albany and Troy, NY). The setting can be **Preschool**, but the location should show enough information to determine **the specific site** where the service will be performed. Preschool can be entered into the Setting field and the name and address can be entered into the **Location field** (to show where the service will take place).

- 1) Child Time Preschool, **123 Main Street, Schenectady, NY**
- 2) Child Time Preschool, **13 State Street, Albany, NY**
- 3) Child Time Preschool, **324 Swan Street, Troy, NY**

SETTING: Preschool
LOCATON: Child Time Preschool, **123 Main Street, Schenectady, NY**

- The specific location where the service is being conducted should be entered into the **Location Field**.

QUICK REFERENCE GUIDE for Service Locations & Provider Sites

□ This is the Quick Reference Guide on Service Locations that I prepared for service providers. It will be included with the webinar follow-up.

SERVICE LOCATIONS & PROVIDER SITES Quick Reference Guide to Medicaid-Compliant Session Note Entries (For Portal, CLAIMS & CLAIMS Online Users)

What do you enter into the **Setting Field** on the Session Note?

The list shown below are appropriate Medicaid-compliant "Settings" that could be used in the Setting Field.

- Home
- Daycare
- Preschool
- Nursery School
- Universal Pre-K
- Medical Site
- Community Setting
- Facility Location/Private Office
- Therapy Room
- Teletherapy

In addition, you may see "Settings" delineated on the IEP in **the Summary-Special Education Programs and Related Services** Section. Please see the highlighted information on the screenshot below. These designations are also acceptable to use in the **Setting Field**.

SUMMARY-SPECIAL EDUCATION PROGRAMS AND RELATED SERVICES			
Special Education Itinerant Services: 1:1 - Direct	01/06/2025 - 06/27/2025	5 x Weekly, 1hr.	Home
Special Class in an Integrated Setting: 12:1+2	01/06/2025 - 06/27/2025	5 x Weekly, 5hr.	Special School
Speech/Language Therapy: Individual	11/27/2024 - 06/27/2025	2 x Weekly, 45min.	Home
Occupational Therapy: Individual	01/06/2025 - 06/27/2025	2 x Weekly, 30min.	Facility Location/Private Office

What do you enter into the **Location Field** on the Session Note?

The Location Field should show an entry that supports "where" the service was rendered.

For example:

Setting: Preschool

Location: Montessori Preschool, 123 Main St., Albany, NY

Since there are many Montessori Schools with the same name, the Location Field should support the exact location the service was rendered.

Examples of Settings/Locations that are Medicaid compliant and some that are not Medicaid compliant

Not Specific Enough (Does <i>not</i> meet Medicaid Requirements)	Specific Enough (Meets Medicaid Requirements)
Setting: School	Setting: Preschool
Location: Therapy Room	Location: ABC Preschool, 123 Main St., Albany, NY
Setting: Universal Pre-K	Setting: Universal Pre-K
Location: Preschool	Location: ABC Preschool, Classroom 3
Setting: Preschool	Setting: Preschool
Location: Sensory Gym	Location: ABC Preschool, Sensory Gym
Setting: Community Setting	Setting: Community Setting
Location: Classroom A	Location: Classroom A, 254 South Main Street, Albany NY,

PROVIDER SITE ENTRY (for Service Locations)

- ❑ In order to ensure that Center-Based Programs or agencies with multiple offices where therapy is provided have enough information to clearly discern the location where the service will be delivered, agencies will need to enter their **Provider Sites** into the CPSE Portal.
- ❑ The provider sites will filter into the **Service Location Screen** where McGuinness will either “**Approve**” or “**Invalidate**” the Provider Site Entry.
- ❑ Providers that upload their billing into the Portal (from an outside system), will need to log into the Portal to enter their Provider Sites.
- ❑ Provider sites can be center-based provider sites or agencies that have multiple offices with on-site therapy.

PROVIDER SITE ENTRY

(How to Enter the Provider Site)

❑ Go to **My Account > Provider Sites**

My Account ▾	Knowled
Change Password	
User Account Details	
My Credential Verifications	
My Profile	
My PIN	
Provider Sites ←	
Generate Attestations	
Bulk Attestations	
My Articles	
My Configuration	

The following screen will populate.

Provider Sites

Filters

Provider:*

Name	Address	City	State	ZIP	
			NY		Add

PROVIDER SITE ENTRY

(How to Enter the Provider Site)

❑ For each Provider Site for your agency, you will enter...

- The **Specific Name** of the Site
- The **Street Address**
- The **City**
- The **State**, and
- The **Zip Code**
- Click the **ADD** link at the end of the row

Provider Sites

Filters

Provider:*

Name	Address	City	State	ZIP	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="NY"/>	<input type="text"/>	<input type="button" value="Add"/>

❑ You will do this for all of the Center-Based Provider Sites (Locations) for your agency as well as agencies that have multiple offices with on-site therapy.

❑ After all of your provider sites are entered, McGuinness will either “**Approve**” or “**Invalidate**” the **Service Location**.

QUESTIONS

Service Location

PROVIDERS UPLOADING ATTENDANCES FROM AN OUTSIDE SOURCE (Other than the Portal)

- ❑ While McGuinness will be approving **Signatures** and **Service Locations** for everyone (*Portal & Non-Portal users*), most of the non-compliant Medicaid issues have been from agencies that upload their attendance(s) from an outside system.
- ❑ If your agency uses another system to enter attendances, please review and/or update your providers' signatures to ensure that the signature displays the Name, Title, Signature and Credentials in the signature.
- ❑ If your agency uploads attendances from another system (other than the Portal), please Review/QA the information that is entered into the Setting & Location Fields on Session Notes to ensure that the entry is sufficient to discern the specific location of the service.

MISSING
CENTER-BASED
RELATED SERVICES
(CBRS)

NEW REPORT

Missing CBRS Entries

- ❑ Center-Based Services are *all-inclusive* and are paid on a “Tuition” basis.
- ❑ While Agencies receive payment on a tuition basis, the County receives Medicaid reimbursement from the Center-Based Related Services (CBRS) billing.
- ❑ When agencies neglect to submit their CBRS Billing, the county loses the ability to receive Medicaid reimbursement for the related services that are included within the Center-Based Program.
- ❑ In order to give the county and agencies the tools required to track whether or not CBRS billing has been submitted to the County, McGuinness has created a new report to show **“Missing CBRS Entries.”**

NEW REPORT

Missing CBRS Entries

- ❑ Attendances can be **entered**, can **be on a voucher** or **waiting to be submitted** to the County. This report will help the agency to decide what the next step(s) should be to submit the **“Missing CBRS Billing.”**
- ❑ This new report will show the county and the agency if the provider was paid for a particular month for tuition where the CBRS enrollments do **not** have “submitted” CBRS sessions.
- ❑ This report can be accessed by going to **Billing > Missing CBRS Entries**. This report has two tabs.
 - 1) A **Summary Tab**, which shows one row per Child/ESID if there are **Missing Submitted Sessions** for a particular month where the tuition was paid.

Missing Medicaid CBRS entries for Paid CB Months

Filters
County Provider School Year Session Retrieve

Summary of CBRS Months Detail Listing of Missing Months

Excel

County	Provider	Child Name	CPSE Child #	ESID	Description	July	August	Total Submitted	Missing Months
					CBRS (ST) 9100-A 2x30 - I - (07/01/2024-08/09/2024	MISSING	MISSING	0	2

NEW REPORT

Missing CBRS Entries

- 2) A **Detail Listing**, which shows one row per Child-ESID/Month and how much was paid for tuition.
- If this report shows an amount in the last column that means the agency has been paid the monthly tuition.
 - If the monthly tuition has been paid, the CBRS billing ***must*** be submitted to the County.

Missing Medicaid CBRS entries for Paid CB Months

Filters
County ✓ Provider School Year Session 2024 - 2025 Summer Retrieve

Summary of CBRS Months **Detail Listing of Missing Months**

Excel

County	Provider	Child Name	CIN	CPSE Child #	ESID	Description	ServiceMonthDescription	AmountPaid
NASSAU				C280002	CBRS2425S007	CBRS (ST) 9160-A 1x30 - I - (07/01/2024-08/09/2024)	July 2024	\$7,187.50
NASSAU				C280002	CBRS2425S007	CBRS (ST) 9160-A 1x30 - I - (07/01/2024-08/09/2024)	August 2024	\$1,437.50

CBRS BILLING SHOULD BE DONE CONTEMPORANEOUSLY

- ❑ In order to get all of the “**Missing**” **CBRS billing** up to date, McGuinness, on behalf of the County, is requesting that each agency review these screens and submit **all** Missing CBRS Billing for...
 - *The entire **2023-24** school year, and*
 - *The **2024-25** school year (through December 2024)*

- ❑ Moving forward each agency should be reviewing this **CBRS Report “Monthly”** to ensure that CBRS billing ***occurs contemporaneously!***

- ❑ McGuinness will also be running this report “Monthly” to determine if each agency has submitted all of their CBRS billing and will be reaching out to any agency that falls behind with their CBRS billing.

- ❑ If you need assistance with your CBRS Billing, please send an email to Medicaid@cpseportal.com. Someone from the Medicaid Team will assist you with your issue.

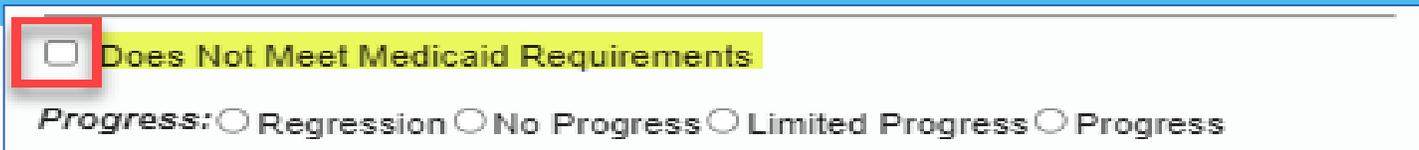
QUESTIONS MISSING CBRS Report

NEW REPORT

Attendances Not Meeting Medicaid Requirements

ATTENDANCES NOT MEETING MEDICAID REQUIREMENTS

(When to use this designation)



Does Not Meet Medicaid Requirements

Progress: Regression No Progress Limited Progress Progress

- ❑ The Portal has a new report that can be used to review attendances that were marked with the “**Does Not Meet Medicaid Requirements**” designation on Session Notes.
- ❑ This designation does **not** need to be marked on the Session Note for a...
 - **Group of 1, OR** for
 - **Make-Up Sessions** (if the session is specifically marked as a Make-Up.)
- ❑ This designation **should** be marked for situations where the provided session does **not** meet Medicaid requirements. Such as...
 - *The child was sleeping during the session.*
 - *The child was picked up in the middle of the session by the parent.*
 - *The child’s behavior did not allow the session to be completed in its entirety.*
- ❑ When using this designation, the CPT Code should be set to **NOCPT**.

NEW REPORT

Attendances Not Meeting Medicaid Requirements

❑ This report can be accessed by going to **Reports > Attendances Not Meeting Medicaid Requirements**. (The County also has access to this report.)

❑ Agencies should review this report prior to each monthly billing period to ensure that the designation is being used appropriately by service providers.

❑ The report gives information on the child, enrollment, Date of Service, Voucher Number and the Submitted Date *for the voucher*.

- Reports
- Medicaid
- People
- My
- Voucher Listings
- Billed Items
- Remittance Batch Details
- Session Listing
- Therapist Activity
- Enrollment Listing
- Child Treatment Log
- Classroom Attendance
- Enrollment Assignments
- Rendering Provider Attestations
- View Child Activities by Therapist
- Enrollments Without Attendance
- CB Enrollments Missing Attendance
- Enrollments Uploaded By County
- County Service Provider Listing
- Submitted Session Listing
- Attendances Not Meeting Medicaid Requirements
- Supervision Activity Report

Entries marked Does Not Meet Medicaid Requirements

Filters
County [dropdown] Provider [dropdown]
School Year Session [2024 - 2025 Winter] From Date [] To Date [] Retrieve

Excel

Does Not Meet Medicaid Requirements
Progress: Regression No Progress Limited Progress Progress

Last Name	First Name	CPSE Child Number	Electronic Service ID	Enrollment Type	Related Service Code	Date Of Service	Start Time	End Time	Service Provider	Voucher Number	Submitted Date
				CBRS	ST1	09/04/2024	12:30 PM	1:00 PM		INCLTUITON 9-24 GRP SP	10/25/2024
				CBRS	ST1	09/18/2024	1:00 PM	1:30 PM		INCLTUITON 9-24 GRP SP	10/25/2024
				CBRS	ST1	11/06/2024	1:00 PM	1:30 PM		INCLTUITON 11-24 SP GRP	12/16/2024

SUMMARY

- ❑ Any Medicaid documentation that is signed beginning with **February 1 service dates** must be signed with a **Medicaid-compliant signature** in order to submit billing to the county .
- ❑ **Center-Based Provider Sites** and/or **office locations with on-site therapy** must be entered into the Portal. Providers should begin entering their sites as soon as possible so billing will not be impacted.
- ❑ McGuinness will provide ample notification (*one month*) to providers as to when the **Service Location Approval** edit will be enabled.
- ❑ McGuinness is taking the time to educate providers regarding service locations to ensure that there is minimal billing issues once the edit is enabled.

FOLLOW-UP

❑ This presentation is being recorded and the PowerPoint presentation will be uploaded to the Portal Knowledge Base for future reference.

- Search for help in our Knowledge Base: <http://support.cpseportal.com/Main/Default.aspx>
- Email: Medicaid@CPSEPortal.com
- Questions/Guidance regarding Medicaid compliance: Contact Deborah Frank – dfrank@jmcguinness.com.

❑ HELPFUL LINKS

❑ MEDICAID REFERENCES

- Provider Policy & Billing Handbook - <http://www.oms.nysed.gov/medicaid/handbook/>
- Medicaid Questions & Answers http://www.oms.nysed.gov/medicaid/q_and_a/q_and_a_combined_revised_12_9_16.pdf

QUESTIONS

THANK YOU!

I want to thank everyone for taking the time to attend this presentation.

I hope you found the content helpful.

Deborah Frank