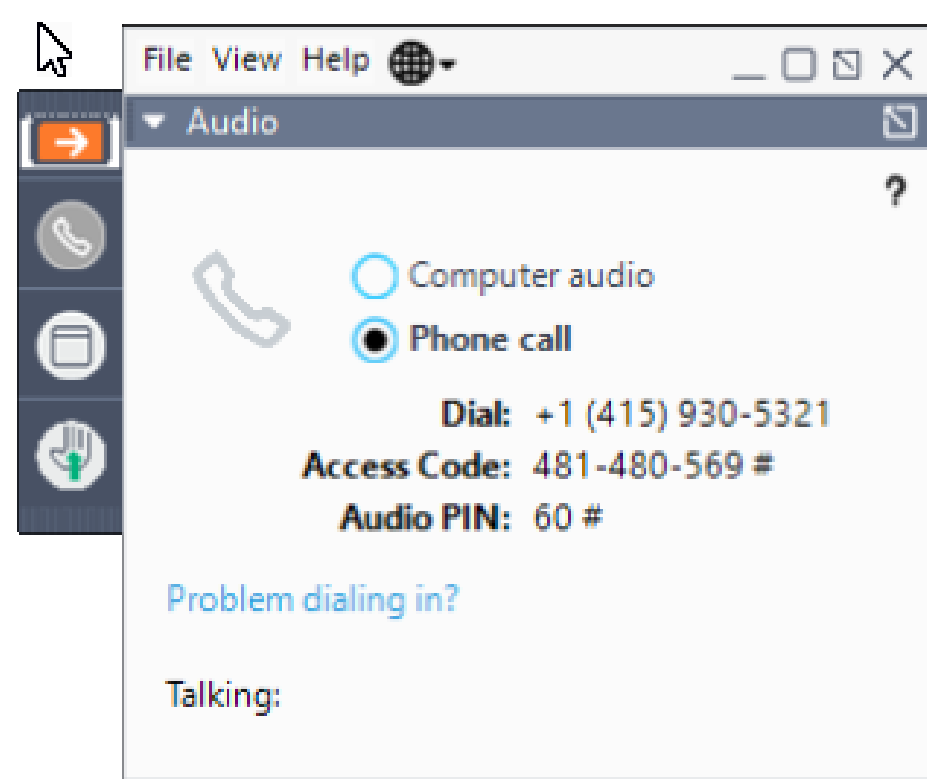


# Using Go To Webinar

# Go To Webinar Control Panel

- \* Control panel is on far right of screen
- \* Orange button with white arrow expands and shrinks control panel

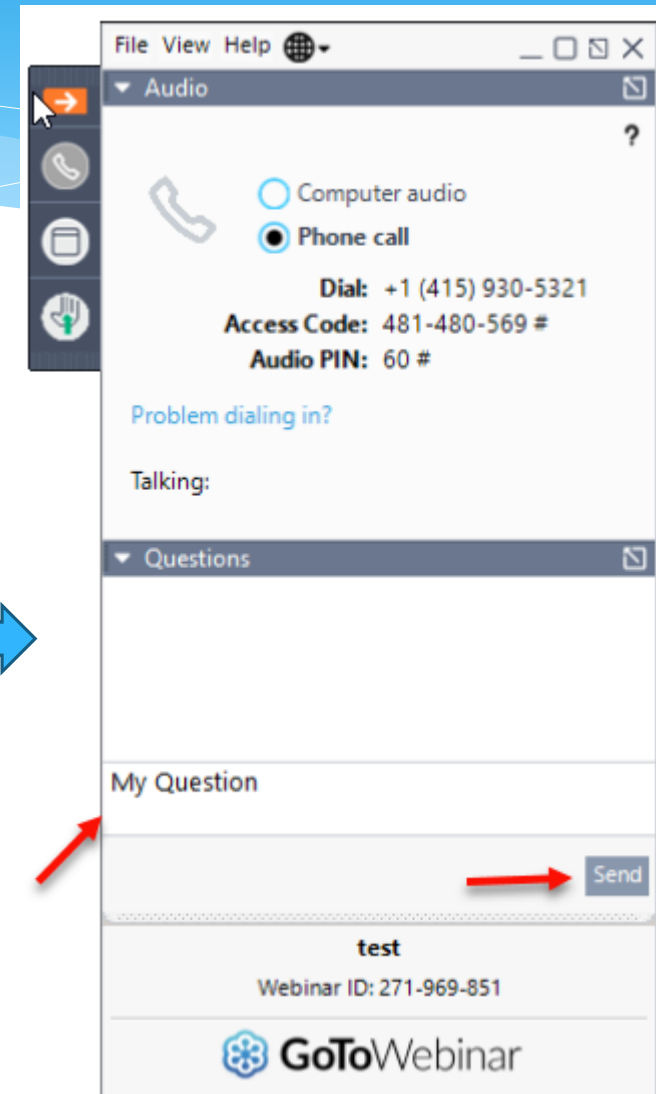
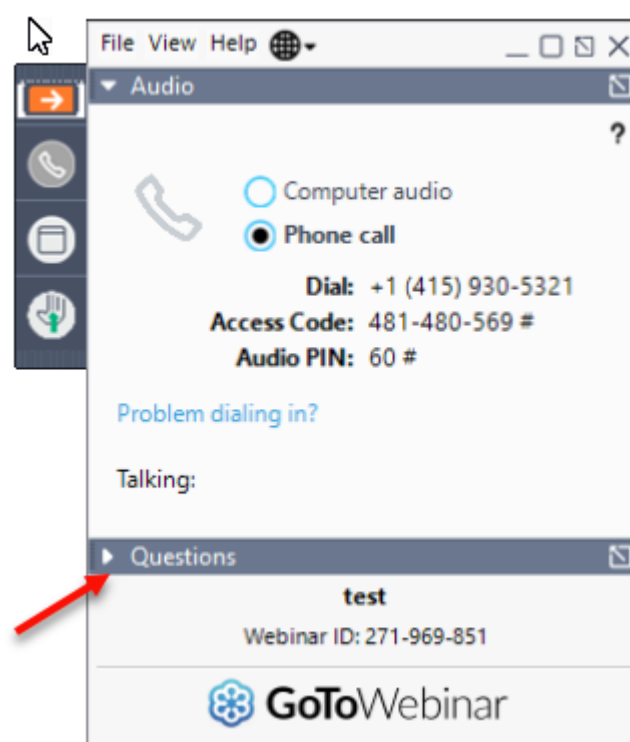


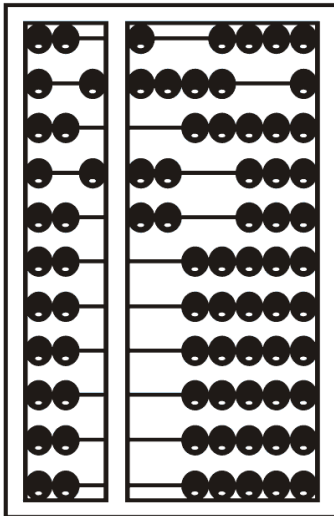
# Communicating with Presenter

- \* All participants are on mute.
- \* You can type in question in the question box.
- \* We will answer your question, and also stop at some point to review the questions and answers for everyone.

# Typing in a Question

- \* Click the question bar to expand questions section
- \* Type in your question and click send





# Billing – Using the CPSE Portal

# Topics Covered

- \* Review of Portal Invitations – **Slide 8**
  - \* Single Service Provider Invite
  - \* Multiple User Template Upload
  - \* Portal Profession Codes
- \* Review Portal Admin- User Access – **Slide 15**
  - \* Viewing/Changing Existing Users
- \* Review of Credential Verification – **Slide 16**
  - \* Credential Verification by Service Provider
  - \* Credential Verification by Agency Office Staff
  - \* When Service Provider License Expires

# Topics Covered

- \* What is an ESID – **Slide 23**
- \* Voucher Terminology – **Slide 24**
- \* Creating a Voucher – **Slide 25**
- \* Why Doesn't Attendance Appear on my Voucher – **Slide 37**
  - \* Items Not Ready to Bill
- \* Submitting a Voucher – **Slide 41**
- \* Cannot Submit Voucher: Problem of “Not Co-Signed” – **Slide 43**
- \* Print Voucher Summary – **Slide 51**
- \* Attendance Denied by County? How to Correct and Re-Bill – **Slide 55**
- \* Voucher Listing Report – **Slide 58**
- \* Submitted Billing Questions – **Slide 60**

# Portal Invitations – Single Service Provider Invite

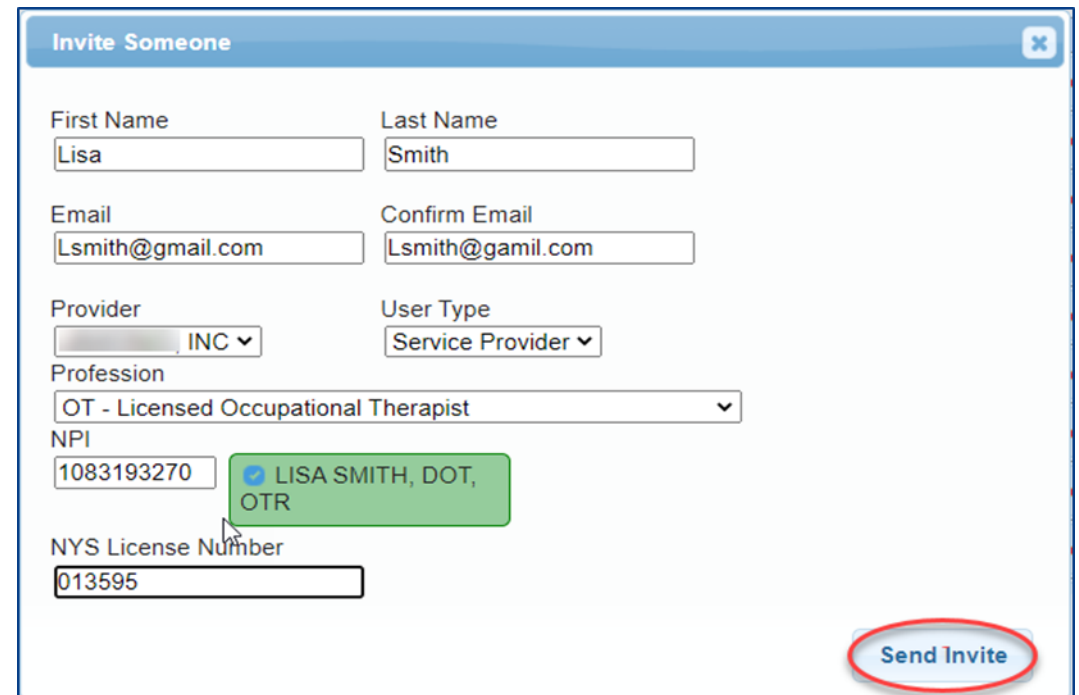
- \* Agencies will send an invitation to a Service Provider. A service provider is a person who is an individual who provides services to the child.
- \* To send an invitation, go to **People > Invitations**.

The screenshot displays the CPSE Portal interface. At the top, the header includes the CPSE PORTAL logo, a greeting "Hello, [redacted] Therapy Group. You are currently logged in for Richard [redacted] (Logout)", and the company name "JAMES MCGUINNESS & ASSOCIATES INC. Consultants". Below the header is a navigation bar with tabs: Home, File Transfer, Activities, Attendance, Billing, Caseload Maintenance, Lookup, Reports, Medicaid, People, My Account, and Knowledge Base. The "People" tab is selected, and a dropdown menu is open, listing various options: Credential Approval Listing, Provider Specific Identifiers, Service Provider Listing For School Year, Service Provider Credential Listing, Service Providers With Multiple Licenses, Service Providers With License Issues, Service Provider Credential Verification Listing, Users, People, and Invitations. The "Invitations" option is highlighted with a red circle. On the left side, there are two profile sections: "User Profile" (showing Username: [redacted] Therapy Group, First Name: Richard, Last Name: [redacted], Email: lmetl@mcguinness.com) and "My Professional Profile" (showing Name: [redacted], NPI: I do not have an NPI, and a signature for Richard T. [redacted] PT). On the right side, there is a "News Feed" section with a "System Maintenance" announcement for 11/10/19 and 11/11/19.



# Portal Invitations – Single Service Provider Invite

- \* After you click Invitations, the following screen appears. Fill in all of the service providers information. Note that the service providers name & credentials will appear next to their NPI #. Make sure this information is correct before clicking “Send Invite.”
- \* The service provider will then receive an email with instructions to follow to accept the invitation.



The screenshot shows a web form titled "Invite Someone" with a close button in the top right corner. The form contains the following fields and options:

- First Name:** Text input with "Lisa" entered.
- Last Name:** Text input with "Smith" entered.
- Email:** Text input with "Lsmith@gmail.com" entered.
- Confirm Email:** Text input with "Lsmith@gamil.com" entered.
- Provider:** Dropdown menu showing "INC" with a downward arrow.
- User Type:** Dropdown menu showing "Service Provider" with a downward arrow.
- Profession:** Dropdown menu showing "OT - Licensed Occupational Therapist" with a downward arrow.
- NPI:** Text input with "1083193270" entered. To the right of this field is a green tooltip box containing a blue circle icon and the text "LISA SMITH, DOT, OTR".
- NYS License Number:** Text input with "013595" entered.
- Send Invite:** A blue button with white text, circled in red at the bottom right of the form.

# Portal Invitations – Multiple User Template Upload

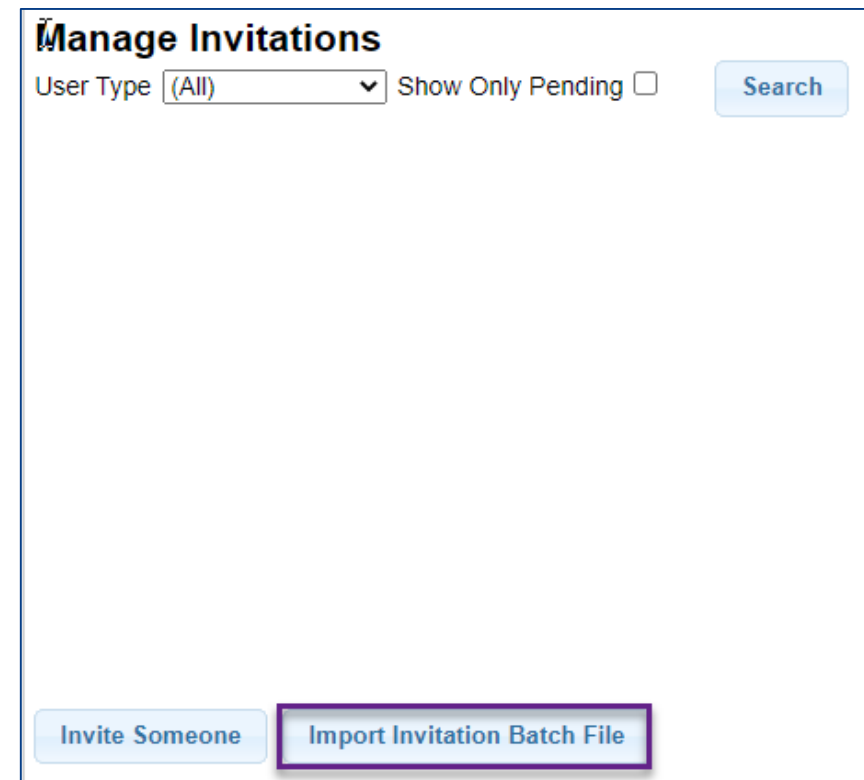
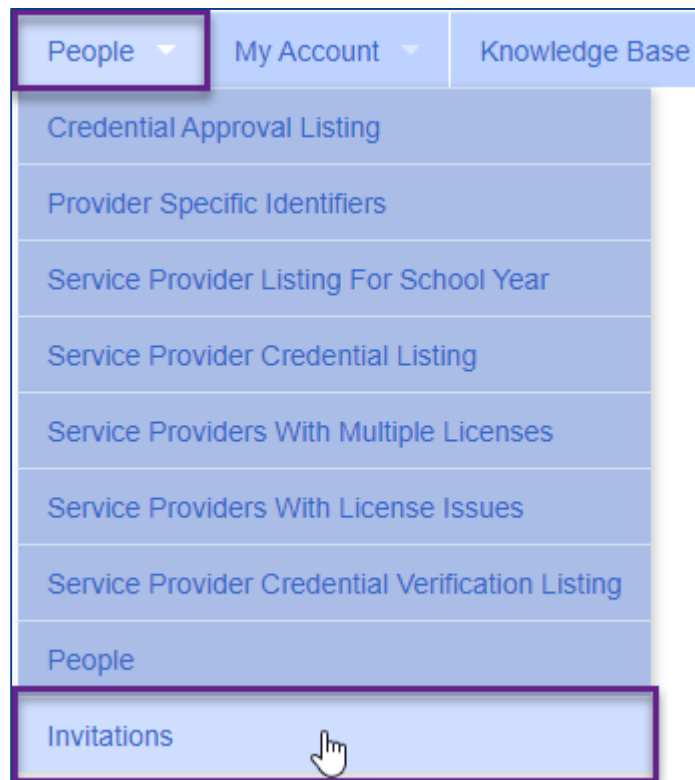
- \* As an alternative the agency can also invite “multiple” service providers at once by completing the template shown below. When complete, this template is imported and all service providers listed in the template will receive the email invitation. Service provider information needed is: First Name, Last Name, Email, NPI & Profession Code.

|   | A          | B         | C     | D                    | E   | F               | G          | H                 | I               |
|---|------------|-----------|-------|----------------------|-----|-----------------|------------|-------------------|-----------------|
| 1 | First Name | Last Name | Email | Provider Specific ID | NPI | Profession Code | NY License | License From Date | License To Date |
| 2 |            |           |       |                      |     |                 |            |                   |                 |
| 3 |            |           |       |                      |     |                 |            |                   |                 |
| 4 |            |           |       |                      |     |                 |            |                   |                 |
| 5 |            |           |       |                      |     |                 |            |                   |                 |
| 6 |            |           |       |                      |     |                 |            |                   |                 |

- \* Additional information can be found in the Knowledge Base:
- \* <http://support.cpseportal.com/kb/a66/service-provider-user-template-to-import-therapists-and-users.aspx?KBsearchID=16175> or (search for “template” or invitations”).

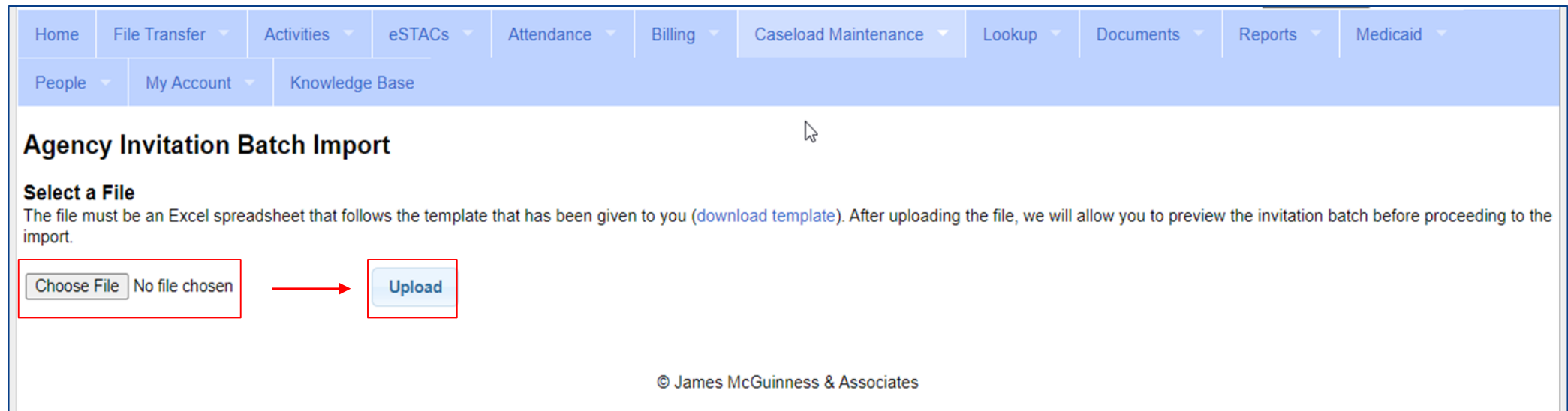
# Portal Invitations – Multiple User Template Upload

- \* To send invitations using the template, go to **People > Invitations**.
- \* You will then choose Import Invitation Batch File.



# Portal Invitations – Multiple User Template Upload

- \* You will then click Choose File, find your template, and click Upload.



The screenshot displays a web application interface for 'Agency Invitation Batch Import'. At the top is a navigation bar with various menu items: Home, File Transfer, Activities, eSTACs, Attendance, Billing, Caseload Maintenance, Lookup, Documents, Reports, and Medicaid. Below this is a secondary bar with People, My Account, and Knowledge Base. The main content area is titled 'Agency Invitation Batch Import' and includes a section 'Select a File'. This section contains instructions stating that the file must be an Excel spreadsheet following a specific template, with a link to 'download template'. Below the instructions, there is a file selection area with a 'Choose File' button and the text 'No file chosen', followed by a red arrow pointing to an 'Upload' button. The footer of the page reads '© James McGuinness & Associates'.

Home File Transfer ▾ Activities ▾ eSTACs ▾ Attendance ▾ Billing ▾ Caseload Maintenance ▾ Lookup ▾ Documents ▾ Reports ▾ Medicaid ▾

People ▾ My Account ▾ Knowledge Base

## Agency Invitation Batch Import

**Select a File**  
The file must be an Excel spreadsheet that follows the template that has been given to you ([download template](#)). After uploading the file, we will allow you to preview the invitation batch before proceeding to the import.

Choose File No file chosen → Upload

© James McGuinness & Associates

# Portal Invitations – Multiple User Template Upload

- \* This screen will show problems as well as successful imported entries.
- \* Click either “Accept & Send Invites” or “Decline & Cancel”.
- \* The service providers will then receive an email with instructions to follow to accept the invitation.

### Agency Invitation Batch Import

#### Invites Preview - Accept or Decline?

Invalid Invites - Will NOT be imported

| First Name | Last Name | Email             | Is Supervisor | Profession Code | NPI | Name in NPI Registry | NY License Number | Invalid Reason      |
|------------|-----------|-------------------|---------------|-----------------|-----|----------------------|-------------------|---------------------|
| Barb       | Jones     | bj@cpseportal.com | N             | SPED            |     |                      |                   | "NPI" must be valid |

Valid Invites - Will be imported & sent

| First Name | Last Name   | Email             | Is Supervisor | Profession Code | NPI        | Name in NPI Registry                    | NY License Number |
|------------|-------------|-------------------|---------------|-----------------|------------|---|-------------------|
| BROOKE     | DEMNER      | bd@cpseportal.com | N             | OT              | 1003003567 | MS. BROOKE DEMNER, OTR                  | 123456            |
| Christina  | LOEWENSTEIN | cl@cpseportal.com | N             | OT              | 1003004102 | LAURIE CHRISTINA LOEWENSTEIN, OTR       | 556677            |
| Jen        | Owen-Jones  | jo@cpseportal.com | N             | OT              | 1003011255 | JENNIFER JEAN OWEN, OTR                 | 888222            |
| NEREIDA    | Wright      | nw@CPSeportal.com | N             | SLP             | 1003001595 | DR. NEREIDA IRENE HILLIER-WRIGHT, PH.D. | 554433            |

Accept & Send Invites

Decline & Cancel

# Portal Profession Codes

- \* The Portal Profession Codes must be entered on the template and can be found in the Knowledge Base article below.
- \* <http://support.cpseportal.com/kb/a66/service-provider-user-template-to-import-therapists-and-users.aspx?KBsearchID=16175> or (search for “template” or invitations”).

The list of profession codes that can be used:

| Profession Code | Description                                |
|-----------------|--|
| AIDE            | Classroom or 1:1 AIDE                      |
| AUD             | Audiologist                                |
| CFY             | Clinical First Year                        |
| COTA            | Certified Occupational Therapist Assistant |
| CSP             | Certified School Psychologist              |
| CSW             | Clinical Social Worker                     |
| INT             | Bilingual Interpreter                      |
| LCSW            | Licensed Clinical Social Worker            |
| LMSW            | Licensed Master Social Worker              |
| LPN             | Licensed Practical Nurse                   |
| MUS             | Music Therapist                            |
| OT              | Occupational Therapist (Registered)        |
| OTA             | Occupational Therapist Assistant           |
| PSY             | Licensed Psychologist                      |
| PT              | Physical Therapist                         |
| PTA             | Physical Therapist Assistant               |
| RN              | Registered Nurse                           |
| SLP             | Speech & Language Pathologist              |
| SPED            | Special Education Teacher                  |
| TD              | Teacher of the Deaf                        |
| TEACH           | Teacher                                    |
| TSHH            | Teacher of Speech & Hearing Handicapped    |
| TSLD            | Teacher of Speech & Language Disabilities  |
| TVI             | Teacher of the Visually Impaired           |

# Portal Admin- User Access

## Viewing/Changing Existing Users

- \* You will check off if a staff member is a Service Provider, Supervisor, a Basic User or a Billing Admin. Some staff may have more than 1 box checked.

| Users                                |            |           |                       |                   |                                     |                          |                          |                                     |                                     |               |        |
|--------------------------------------|------------|-----------|-----------------------|-------------------|-------------------------------------|--------------------------|--------------------------|-------------------------------------|-------------------------------------|---------------|--------|
| Provider <span>ACHIEVEMENTS ▾</span> |            |           |                       |                   |                                     |                          |                          |                                     |                                     |               |        |
| Username                             | First Name | Last Name | Email                 | Associated Person | Service Provider                    | Supervisor               | QA Supervisor            | Basic                               | Billing Admin                       |               |        |
| ALEXA.FLANAGAN12                     |            |           | demo@cpseportal.com   | FLANAGAN, ALEXA   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | update cancel | delete |
| RIKKI.PUCKETT10516                   | Josephine  | Acheta    | demo@cpseportal.com   | PUCKETT, RIKKI    | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | edit          | delete |
| RINA.DOWNING10517                    | Cathy      | Campbell  | lmell@jmcguinness.com | DOWNING, RINA     | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | edit          | delete |
| PENEL.BUCKLEY12095                   | Wendy      | Hill      | demo@cpseportal.com   | BUCKLEY, PENELOPE | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | edit          | delete |
| MITCH.WHEELER14250                   | Katherine  | Agard     | demo@cpseportal.com   | WHEELER, MITCHELL | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | edit          | delete |
| BARBR.MCKEE798                       | RUTH       | AGNE      | demo@cpseportal.com   | MCKEE, BARBRA     | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | edit          | delete |
| ABIGA.COTTON10257                    | Aimee      | Alvarez   | demo@cpseportal.com   | COTTON, ABIGAIL   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | edit          | delete |
| MINA.GILLESPIE3614                   | Abigail    | Andrews   | demo@cpseportal.com   | GILLESPIE, MINA   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | edit          | delete |

- \* Admin- (management/ administrators) can submit vouchers on behalf of the agency
- \* Basic- (clerical/billing staff)
- \* Supervisor (UDO/USO)
- \* QA Supervisor (quality assurance supervisor)

# What is Credential Verification?

- \* A simple process to verify that the information about a Licensed Professional (OT, PT, SLP, OTA, PTA, LMSW, LCSW, etc.) is correctly entered in CPSE Portal.
- \* The individual's information that needs to be verified:
  - \* First Name, Last Name & Signature
  - \* Profession (OT, PT, SLP, ....),
  - \* License #,
  - \* Date of Licensure,
  - \* Date Registered Through
  - \* NPI #



# Credential Verification

- \* All providers licensed through the New York State Office of the Professions (Occupational Therapists, Physical Therapists, Licensed Clinical Social Workers, etc.) as well as non-licensed professionals that work under the direction of an SLP for speech therapy services (TSHH, TSSLD, etc.) provider will need to have their credentials verified.
- \* Verification means that someone (**the therapist and/or agency staff**) will need to review what is on file with the Office of Professions and the NPI Registry to ensure that the information in the Portal is correct and attest that the information is correct.
- \* McGuinness and Associates will review and approve the verified information.

# Credential Verification by Service Provider

- \* A service provider will log into the Portal, and see “REQUIRES VERIFICATION”.
- \* They will then need to Verify their credentials.

The screenshot displays the CPE Portal interface. At the top, the logo consists of the letters 'C', 'P', 'S', and 'E' in colored squares followed by the word 'PORTAL' in large black text. A greeting 'Hello, Betty . You are currently logged in' is visible in the top right. A navigation bar contains links: Home, Activities, Attendance, Caseload Maintenance, Lookup, Reports, My Account, and Knowledge Base. The main content area is divided into sections: 'User Profile' (with a 'Hide' button), 'My Professional Profile' (with a 'Hide' button), 'My License(s)', and 'My signature'. The 'User Profile' section shows: Username: Betty, First Name: Betty, Last Name: Greene, Email: lmell@jmcguinness.com, and an 'Edit User Account' link. The 'My Professional Profile' section shows: Name: Betty Greene, NPI: 1003017674 (BETTY GREENE). The 'My License(s)' section contains a table with columns: Profession, License, Original Date Of Licensure, Registered Through Date, License Lookup, Verification Status, and Verify. The first row shows: Licensed Speech & Language Pathologist, 011587, 12/23/1999, 01/31/2020, Lookup, and a red 'REQUIRES VERIFICATION' status. The 'Verify' link in the last column is circled in red. The 'My signature' section shows a signature and the text 'Betty Greene CCC-SLP' with an 'Edit My Profile' link.

**CPE PORTAL** Hello, Betty . You are currently logged in

Home Activities Attendance Caseload Maintenance Lookup Reports My Account Knowledge Base

**User Profile** [Hide](#)

Username: **Betty**  
First Name: **Betty**  
Last Name: **Greene**  
Email: **lmell@jmcguinness.com**  
[Edit User Account](#)

**My Professional Profile** [Hide](#)

Name: **Betty Greene**  
NPI: **1003017674 (BETTY GREENE)**

**My License(s)**

| Profession                             | License | Original Date Of Licensure | Registered Through Date | License Lookup         | Verification Status   | Verify                 |
|--|---------|----------------------------|-------------------------|------------------------|-----------------------|------------------------|
| Licensed Speech & Language Pathologist | 011587  | 12/23/1999                 | 01/31/2020              | <a href="#">Lookup</a> | REQUIRES VERIFICATION | <a href="#">Verify</a> |

**My signature**  
*Betty Greene CCC-SLP*  
Betty Greene CCC-SLP  
[Edit My Profile](#)

# Verifying Name

- \* Review First Name, if correct click “Verify”
- \* Review Last Name, if correct click “Verify”
- \* Review Signature, if correct click “Verify”
  
- \* After you click the red “verify” button, the status changes to green and says, verified.”

| Verification |  |                                       |
|--------------|--|---------------------------------------|
| First Name   | <input type="text" value="Casandra"/>                | <input type="button" value="Verify"/> |
| Last Name    | <input type="text" value="McKeon"/>                  | <input type="button" value="Verify"/> |
| Signature    | <input type="text" value="Casandra McKeon SLP-CCC"/> | <input type="button" value="Verify"/> |

| Verification |  |  |
|--------------|--|--|
| First Name   | <input type="text" value="Casandra"/>                | <input checked="" type="checkbox"/> Verified |
| Last Name    | <input type="text" value="McKeon"/>                  | <input checked="" type="checkbox"/> Verified |
| Signature    | <input type="text" value="Casandra McKeon SLP-CCC"/> | <input checked="" type="checkbox"/> Verified |

# Verifying License

- \* Compare the CPSE Portal information on left to NYS Office of the Professions on the right to verify it is the same person.
- \* You can edit/update the License #, date of licensure and registered through date.
- \* You can also use the “Update Verification with SED Dates” to fill in those fields.

Verification

|                    |  |   |
|--------------------|--|---|
| First Name         | Casandra                               | <input checked="" type="checkbox"/> Verified                          |
| Last Name          | McKeon                                 | <input checked="" type="checkbox"/> Verified                          |
| Signature          | Casandra McKeon SLP-CCC                | <input checked="" type="checkbox"/> Verified                          |
| Profession         | Licensed Speech & Language Pathologist | <input type="checkbox"/> Verify                                       |
| License No         | 020673                                 | <input type="button" value="Update"/> <input type="checkbox"/> Verify |
| Date Of Licensure  | 12/16/2010                             | <input type="button" value="Update"/> <input type="checkbox"/> Verify |
| Registered Through | 4/30/2019                              | <input type="button" value="Update"/> <input type="checkbox"/> Verify |

License Information From NYSED Office of the Professions

According to data retrieved on: 1/8/2019

Name: **MCKEON CASANDRA PATRICIA** Address: **BALLSTON LAKE NY**  
License: **020673** Profession: **SPEECH - LANGUAGE PATHOLOGY**  
Status: **REGISTERED** Date of Licensure: **12/16/2010** Registered Through: **04/19**

[Update Verification with SED Dates](#)

**NYSED.gov** Office of the Professions

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**Online Services**

**Verifications**

Licenses, by name  
Licenses, by license number  
Permits, by name  
Pharmacy Establishments  
Professional Business Entities (other than pharmacies)  
Help with Searches  
Terms of Use

**Registration Renewal**

Renewal Information

**Verification Searches**

The information furnished at this web site is from the Office of Professions' official database and is updated daily, Monday through Friday. The Office of Professions considers this information to be a secure, primary source for license verification.

**License Information \***

03/08/2021

**Name :** MCKEON CASANDRA PATRICIA  
**Address :** MECHANICVILLE NY  
**Profession :** SPEECH - LANGUAGE PATHOLOGY  
**License No:** 020673  
**Date of Licensure :** 12/16/2010  
**Additional Qualification :** Not applicable in this profession  
**Status:** REGISTERED  
**Registered through last day of :** 04/22

\* Use of this online verification service signifies that you have read and agree to the [terms and conditions of use](#). See [HELP glossary](#) for further explanations of terms used on this page.

\* Use your browser's back key to return to licensee list.

# Credential Verification by Agency Office Staff

- \* Go to **People > Service Provider Credential Verification Listing**
- \* Click “Verify” for staff members that need to be verified.
- \* Office staff will need to verify the same information that the service provider does.
- \* Be sure to compare the **two exactly**, as you are attesting that the information in the Portal is accurate.



Filters

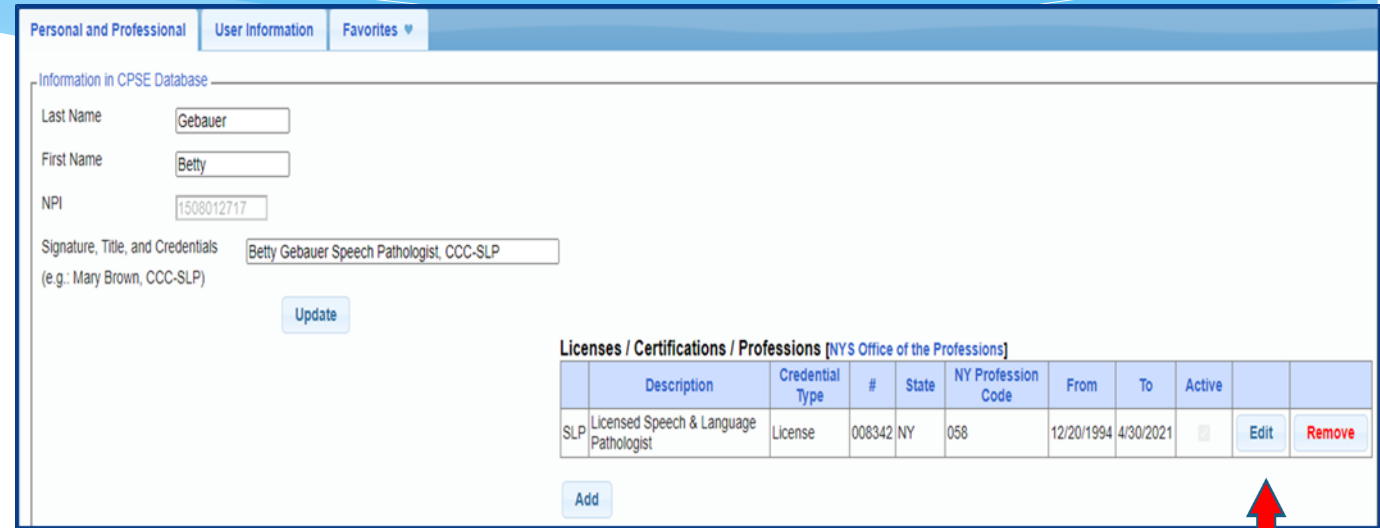
County All Counties Provider ACHIEVEMENTS Retrieve

Profession All Professions ☐ Include Previously Verified

| Person Name          | NPI        | Profession | Credential Type | Credential Number | From Date  | To Date    | Status                | Verify | History |
|----------------------|------------|------------|-----------------|-------------------|------------|------------|-----------------------|--------|---------|
| BEASLEY, MELIDA      | 1346571726 | SLP        | License         | 010753            | 11/12/1998 | 12/31/2020 | REQUIRES VERIFICATION | Verify | History |
| Benner, MaryRose     | 1023261047 | OT         | License         | 009248            | 12/13/1999 | 12/31/2019 | REQUIRES VERIFICATION | Verify | History |
| BLACKWELL, DOMINIQUE | 1992939078 | LCSW       | License         | 080709            | 05/02/2013 | 02/28/2019 | REQUIRES VERIFICATION | Verify | History |
| BRENNAN, MARISA      | 1528203916 | OT         | License         | 007750            | 10/22/1996 | 02/29/2020 | REQUIRES VERIFICATION | Verify | History |
| Brezina, Elena       | 1003051277 | SLP        | License         | 009939            | 01/01/2017 | 02/01/2020 | REQUIRES VERIFICATION | Verify | History |
| CARLSON, CARMEN      | 1811445802 | OT         | License         | 020866            | 08/26/2016 | 07/31/2019 | REQUIRES VERIFICATION | Verify | History |

# When Service Provider License Expires

- \* Go to **My Account > My Profile**.
- \* Under the Personal and Professional tab you will choose the Edit button.
- \* You will then receive the Edit License / Certification / Profession pop up box.
- \* You will enter your new license expiration date.
- \* You will **NOT** change the license Effective Date, as this date will remain your original license start date.



Personal and Professional | User Information | Favorites ▾

Information in CPSE Database

Last Name:

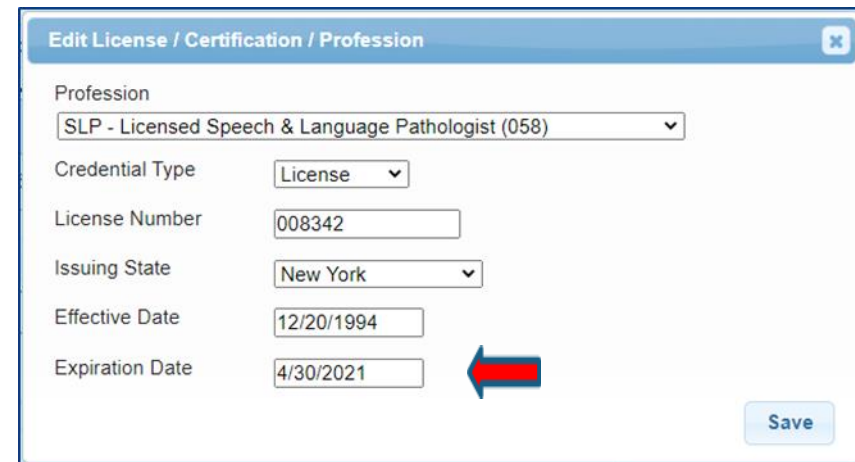
First Name:

NPI:

Signature, Title, and Credentials:   
(e.g.: Mary Brown, CCC-SLP)

Licenses / Certifications / Professions [NYS Office of the Professions]

|     | Description                            | Credential Type | #      | State | NY Profession Code | From       | To        | Active                   |                                     |                                       |
|-----|--|-----------------|--------|-------|--------------------|------------|-----------|--------------------------|-------------------------------------|---------------------------------------|
| SLP | Licensed Speech & Language Pathologist | License         | 008342 | NY    | 058                | 12/20/1994 | 4/30/2021 | <input type="checkbox"/> | <input type="button" value="Edit"/> | <input type="button" value="Remove"/> |



Edit License / Certification / Profession

Profession:

Credential Type:

License Number:

Issuing State:

Effective Date:

Expiration Date:

# What is an ESID

- \* ESID is the abbreviation for Electronic Service ID number. It is the number that identifies the child and the child's particular enrollment in the Portal.
- \* The CPSE Portal gives each County created enrollment a unique identifier called the ESID. This is how we reference enrollments.
- \* In order to be in compliance with HIPAA you should reference all preschool children by their ESID #, not their name. If you need to contact the help desk, you should **ALWAYS** reference the child's ESID #, and **NOT** the child's name.



# Voucher Terminology

## \* **Create Voucher:**

- \* The first step in creating a voucher is to enter its important information, including specifying the billing criteria that the voucher will contain (which county, enrollment type, and school year session).

## \* **Voucher Info:**

- \* Clicking the "Info" button will bring up the same screen as the "Create Voucher" button, but with the voucher's information pre-entered for you allowing you to edit some information.

## \* **Voucher Details:**

- \* This screen is used to add new monthly billing items (and their corresponding attendances) to a voucher, you use this screen. On the left are monthly items that are ready for billing, but not on any voucher yet. On the right are monthly items currently on this voucher. Note: Attendances won't be shown in the "Unassigned" grid until they are signed or co-signed, if applicable. Check which items you would like to move, the click either "Assign" or "Unassign", depending on what action you would like to take. The "Amount Billed" will update accordingly. These changes do not take effect until you click "Save".

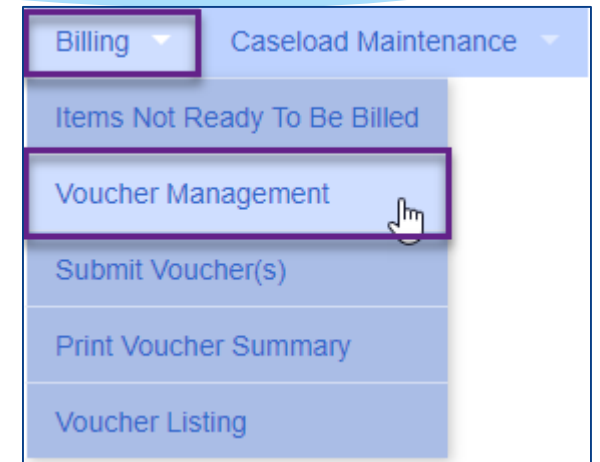
## \* **Recalculation:**

- \* This screen introduces a concept known as recalculation of billing items. You can recalculate pending vouchers individually, or all of them at once. The recalculation process determines monthly billing amounts for any enrollments that match the criteria for the voucher contents. These billing items are summarized to a single item for the month. NOTE: Attendances must go through the recalculation and summarizing in order to be added to vouchers. It will also add any new attendances to a voucher if the enrollment month is already on the voucher.



# Creating a Voucher

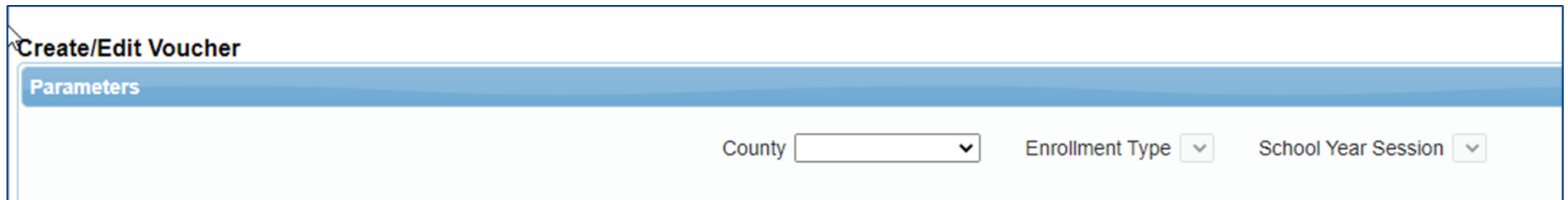
- \* When ready to bill, you will need to create your voucher.
- \* Go to **Billing > Voucher Management**
- \* Click “Create Voucher”



| <div>Recalc All Create Voucher</div> |                  |              |           |         |        |                    |             |               |              |      |         |        |        |
|--------------------------------------|------------------|--------------|-----------|---------|--------|--------------------|-------------|---------------|--------------|------|---------|--------|--------|
| Pending Vouchers                     |                  |              |           |         |        |                    |             |               |              |      |         |        |        |
| Voucher #                            | Vendor Invoice # | County Doc # | Bill Date | Service | County | Time Period        | Description | Enroll. Count | Total Billed |      |         |        |        |
| RS210310122341                       |                  |              | 3/10/2021 | RS      | Albany | 2019 - 2020 Winter |             | 0             | \$0.00       | Info | Details | Recalc | Delete |

# Creating a Voucher

- \* Choose filter options for Parameters of voucher:
  - \* Select County
  - \* Select Enrollment (Service) Type
  - \* Select School Year Session



The screenshot shows a web form titled "Create/Edit Voucher". Below the title is a section labeled "Parameters" with a blue header. At the bottom of this section, there are three dropdown menus: "County", "Enrollment Type", and "School Year Session". Each dropdown menu has a small downward arrow icon.

Create/Edit Voucher

Parameters

County  Enrollment Type  School Year Session

# Creating a Voucher

- \* Once you select the previous filters, then the additional options will open up.
- \* Under the “RS” enrollment type, is the option to choose a specific service type which make the voucher be ONLY for that service type.
- \* By leaving the related service code blank, the vouchers may be submitted with mixed services.

**Create/Edit Voucher**

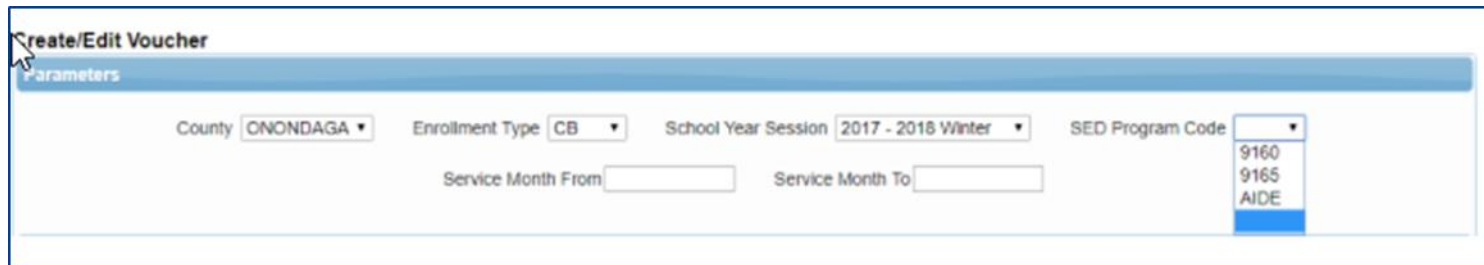
Parameters

|        |  |                    |                                 |                     |   |                      |                      |                  |                      |
|--------|--|--------------------|---------------------------------|---------------------|---|----------------------|----------------------|------------------|----------------------|
| County | <input type="text" value="SCHENECTADY"/> | Enrollment Type    | <input type="text" value="RS"/> | School Year Session | <input type="text" value="2019 - 2020 Winter"/> | Related Service Code | <input type="text"/> | SED Program Code | <input type="text"/> |
|        |  | Service Month From | <input type="text"/>            |                     |   | Service Month To     | <input type="text"/> |                  |                      |

# Creating a Voucher

- \* **Voucher for CB, AIDE and SEIT:**

- \* **Center Based program (CB)** - students will be grouped together under the SED Program Code that you choose (I.E. – all 9160 students will be billed together).
  - \* Also, CB programs can be billed with no attendances, but most counties require attendance. You should follow your county's rules.
- \* **AIDE** – separate AIDE enrollments will be created by the county. When billing, all students receiving AIDE services will be grouped together.
- \* **SEIT** – all students receiving SEIT will be grouped together.



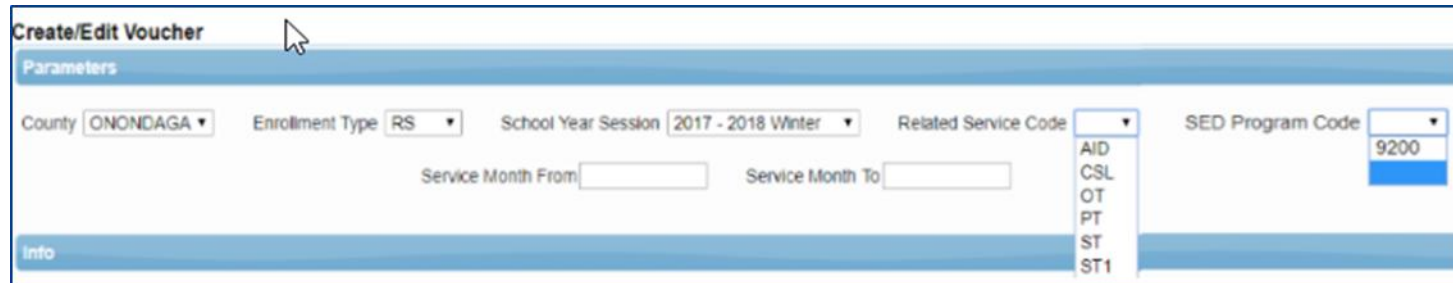
The screenshot shows a web form titled "Create/Edit Voucher" with a sub-section "Parameters". The form contains several dropdown menus and text input fields. The "County" dropdown is set to "ONONDAGA". The "Enrollment Type" dropdown is set to "CB". The "School Year Session" dropdown is set to "2017 - 2018 Winter". The "SED Program Code" dropdown is open, showing options "9160", "9165", and "AIDE", with "AIDE" selected. Below these, there are two text input fields labeled "Service Month From" and "Service Month To", both of which are empty.

| County   | Enrollment Type | School Year Session | SED Program Code | Service Month From | Service Month To |
|----------|-----------------|---------------------|------------------|--------------------|------------------|
| ONONDAGA | CB              | 2017 - 2018 Winter  | AIDE             |                    |                  |

# Creating a Voucher

- \* **Voucher for RS or CBRs:**

- \* **Related Services** - can be billed by individual service (I.E. – all speech) by selecting the Related Service Code or you can bill all related services together by leaving the Related Service Code blank.
- \* **Center Based Related Services (CBRS)** - will be grouped together under the SED Program Code that you choose. **CBRS MUST be billed and voucher submitted to the county at the same time when billing for Center Based (CB) programs.** Your voucher amount for CBRs will be \$0.

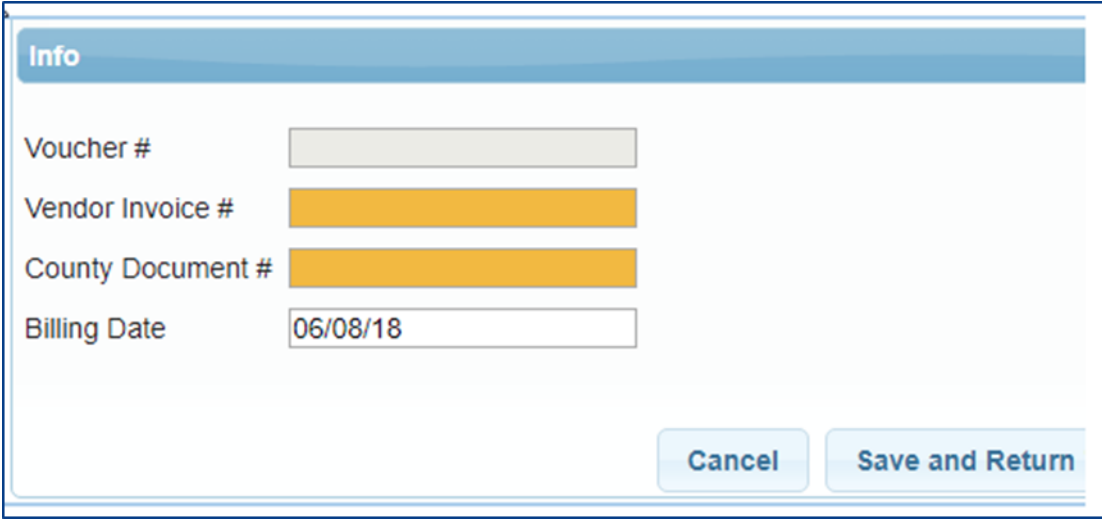


The screenshot shows a web form titled "Create/Edit Voucher". It has two tabs: "Parameters" (selected) and "Info". The "Parameters" tab contains the following fields:

- County: ONONDAGA (dropdown)
- Enrollment Type: RS (dropdown)
- School Year Session: 2017 - 2018 Winter (dropdown)
- Related Service Code: (dropdown menu is open, showing options: AID, CSL, OT, PT, ST, ST1)
- SED Program Code: 9200 (dropdown)
- Service Month From: (text input)
- Service Month To: (text input)

# Creating a Voucher

- \* Voucher numbers are auto-assigned.
- \* The Vendor Invoice Number is how you as the agency might identify your Voucher.
- \* The County Document # is how the County might identify your Voucher (for example a pre-printed County specific numbered Voucher).

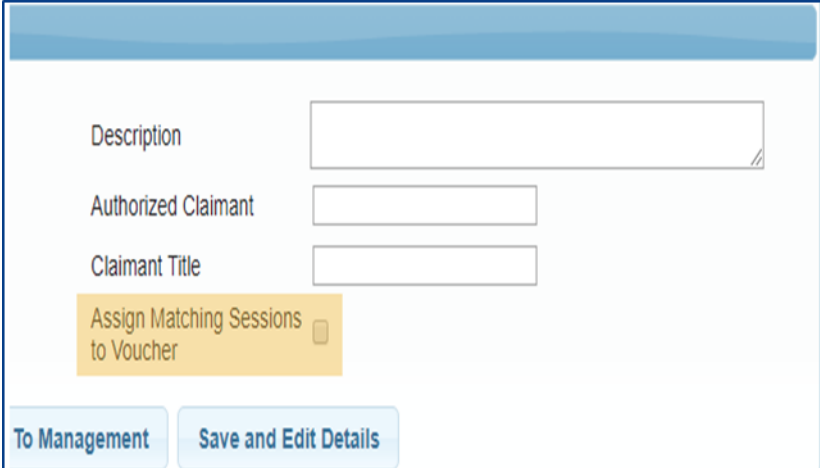


The screenshot shows a software window titled "Info" with a light blue header bar. Inside the window, there are four input fields arranged vertically. The first field is labeled "Voucher #" and is empty. The second field is labeled "Vendor Invoice #" and contains a solid orange bar. The third field is labeled "County Document #" and also contains a solid orange bar. The fourth field is labeled "Billing Date" and contains the text "06/08/18". At the bottom right of the window, there are two buttons: "Cancel" and "Save and Return".

| Info                              |          |
|-----------------------------------|----------|
| Voucher #                         |          |
| Vendor Invoice #                  |          |
| County Document #                 |          |
| Billing Date                      | 06/08/18 |
| <div>Cancel Save and Return</div> |          |

# Creating a Voucher

- \* If you would like the system to automatically assign matches of the chosen criteria, check “Assign Matching Sessions”
- \* This can be used in place of choosing each individually.
- \* These may be unassigned if you do not wish to apply, this is just to skip a step in assigning attendances to a Voucher.
- \* The description is how you can identify the voucher (I.E. – May 2021 SEIT)
- \* Authorized Claimant – for independent provider this is the therapist. For agency this is the billing admin.
- \* Claimant Title – title of claimant (ex. President)
- \* Click Save and Return to Management



The screenshot shows a web form for creating a voucher. It includes the following fields and controls:

- Description:** A large text input field.
- Authorized Claimant:** A text input field.
- Claimant Title:** A text input field.
- Assign Matching Sessions to Voucher:** A checkbox with a yellow highlight.
- To Management:** A button.
- Save and Edit Details:** A button.

# Creating a Voucher

- \* When you create a voucher, a recalculation will occur and attendances matching the criteria will be marked for billing.
- \* Below is a screen shot of a completed created empty voucher.

**Create/Edit Voucher**

**Parameters**

County  Enrollment Type  School Year Session  Related Service Code  SED Program Code

Service Month From  Service Month To

**Info**

|                   |                                       |                                     |  |
|-------------------|---------------------------------------|-------------------------------------|--|
| Voucher #         | <input type="text"/>                  | Description                         | <input type="text" value="May 2021 Speech"/> |
| Vendor Invoice #  | <input type="text" value="ABC123"/>   | Authorized Claimant                 | <input type="text" value="Gloria Gaynor"/>   |
| County Document # | <input type="text"/>                  | Claimant Title                      | <input type="text" value="Billing Admin"/>   |
| Billing Date      | <input type="text" value="06/10/21"/> | Assign Matching Sessions to Voucher | <input checked="" type="checkbox"/>          |



# Creating a Voucher


- \* After creating your voucher go to **Billing > Voucher Management**
- \* This will bring up all pending vouchers waiting to be billed.
- \* Click on the Details of the voucher that you want to bill.



| Pending Vouchers |           |      |             |                    |                       |               |              |      |         |               |
|------------------|-----------|------|-------------|--------------------|-----------------------|---------------|--------------|------|---------|---------------|
| Voucher #        | Bill Date | Type | County      | Session            | Description           | Enroll. Count | Total Billed |      |         |               |
| RS150428091653   | 4/7/2015  | RS   | SCHENECTADY | 2014 - 2015 Winter | RS Jan Feb March 2015 | 39            | \$9,405.00   | Info | Details | Recalc Delete |

# Creating a Voucher

- \* Assign applicable enrollment on left under "Unassigned" by checking each box or check the box at the top and all enrollments will highlight.
- \* Click "Assign"



September 2015 ▾ ☒ Program (Service) ▾ Filter

September 2015 ▾ ☒ 9200

**Unassigned**

| <input type="checkbox"/>            | Last Name | First Name  | Month          | Sessions | Amount       | Svc | ESID           |
|-------------------------------------|-----------|-------------|----------------|----------|--------------|-----|----------------|
| <input checked="" type="checkbox"/> | ALMAN     | Adley       | September 2015 | 5        | \$275.00 (R) | OT  | RS1516W0018372 |
| <input checked="" type="checkbox"/> | ALMAN     | Adley       | September 2015 | 5        | \$275.00 (R) | PT  | RS1516W0018484 |
| <input checked="" type="checkbox"/> | ANTAKI    | ZANI        | September 2015 | 6        | \$330.00 (R) | PT  | RS1516W0017894 |
| <input type="checkbox"/>            | BISCARDI  | Goriola     | September 2015 | 6        | \$330.00 (R) | PT  | RS1516W0018260 |
| <input type="checkbox"/>            | BLOOMER   | Ara         | September 2015 | 6        | \$330.00 (R) | ST  | RS1516W0018191 |
| <input type="checkbox"/>            | BLOOMER   | Ara         | September 2015 | 2        | \$165.00 (R) | ST  | RS1516W0018562 |
| <input type="checkbox"/>            | BLOOMER   | Ara         | September 2015 | 6        | \$132.00 (R) | ST  | RS1516W0018563 |
| <input type="checkbox"/>            | BRATSHPIS | Sheri       | September 2015 | 7        | \$385.00 (R) | OT  | RS1516W0018083 |
| <input type="checkbox"/>            | COLAVITO  | Don-Anthony | September 2015 | 2        | \$110.00 (R) | OT  | RS1516W0018554 |
| <input type="checkbox"/>            | CRUZMEJIA | Janne       | September 2015 | 6        | \$330.00 (R) | PT  | RS1516W0018188 |

Assign -->

# Creating a Voucher

- \* Enrollments that were checked have now been moved to "Assigned" column.
- \* To remove an enrollment from the voucher, check the check box of applicable enrollment and click "Unassign".
- \* Click Save

| Assigned                            |           |               |                |          |               |                |
|-------------------------------------|-----------|---------------|----------------|----------|---------------|----------------|
| <input type="checkbox"/>            | Last Name | First Name    | Service Month  | Sessions | Amount Billed | ESID           |
| <input type="checkbox"/>            | ALMAN     | Adley         | September 2015 | 5        | \$275.00 (R)  | RS1516W0018372 |
| <input type="checkbox"/>            | ALMAN     | Adley         | September 2015 | 5        | \$275.00 (R)  | RS1516W0018484 |
| <input type="checkbox"/>            | ANTAKI    | ZANI          | September 2015 | 6        | \$330.00 (R)  | RS1516W0017894 |
| <input type="checkbox"/>            | DINH      | Keysy         | September 2015 | 5        | \$275.00 (R)  | RS1516W0018486 |
| <input type="checkbox"/>            | DINH      | Keysy         | September 2015 | 3        | \$165.00 (R)  | RS1516W0018507 |
| <input type="checkbox"/>            | EMANUEL   | Zissel Devora | September 2015 | 3        | \$165.00 (R)  | RS1516W0018092 |
| <input checked="" type="checkbox"/> | FUGATE    | Keylen        | September 2015 | 3        | \$165.00 (R)  | RS1516W0018105 |
| <input type="checkbox"/>            | GANGI     | Quatase       | September 2015 | 4        | \$220.00 (R)  | RS1516W0018581 |
| <input type="checkbox"/>            | GODOY     | Nyla-Rae      | September 2015 | 5        | \$275.00 (R)  | RS1516W0018142 |

<-- Unassign

# Creating a Voucher

- \* Anytime a new attendance is added to voucher details screen, a recalculation on the corresponding voucher is required in order to mark the attendance as ready for billing.
- \* Click “Recalc”
- \* New attendance is then automatically added to the voucher.
- \* Click Save



# Why Doesn't Attendance Appear on my Voucher?

- \* There are several reasons why attendances are not available to be put on a voucher and therefore do not appear on the list of items to put on a voucher on the Voucher Details screen. Here are the primary reasons:
- \* **The attendance has been added or modified (matched, signed/co-signed) since the voucher was created:**
  - \* Try using Recalc to have system look for ready attendances.
- \* **The attendance is on an unmatched enrollment (no ESID):**
  - \* Match to County Created enrollment and use Recalc.
- \* **The attendance is missing a Signed Date or Cosigned Date:**
  - \* Have the therapist/supervisor sign or co-sign the attendance.
- \* **The attendance is on another Voucher:**
  - \* If the other voucher has not been submitted you can remove it from that voucher.
  - \* If the County denied that attendance on that other voucher, submit request to [support@CPSEPortal.com](mailto:support@CPSEPortal.com) to rebill for that ESID and date of service.
- \* **The rates have not yet been uploaded:**
  - \* This can be checked by going to Lookup -> Enrollment Lookup -> Select the School Year Session, County, Provider, and Enrollment Type.
  - \* The column on the right that reads "Rates" will show if there is anything there other than \$0.
- \* **The prescription has not been attached to the enrollment:**
  - \* Submit your prescription to the county if you have not already. If you have submitted your prescription, then contact the county.

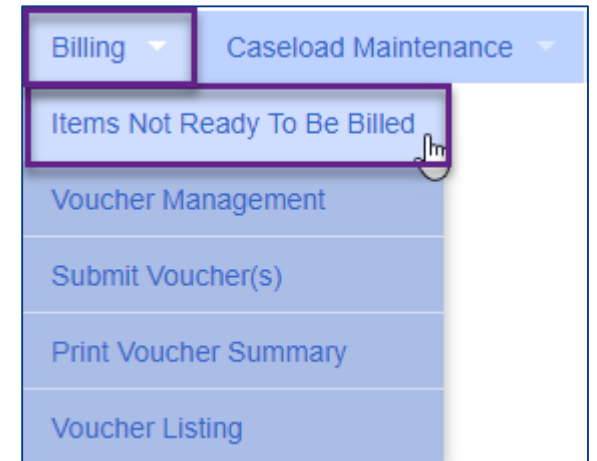
# Items Not Ready to Bill

- \* Another way to see why attendance doesn't appear on your voucher is to run an Items Not Ready to Bill Report.

- \* Go to **Billing > Items Not Ready To Be Billed**

- \* This report will not show unmatched children or unmatched enrollments, but does show:

- \* Attendances missing signatures
- \* Attendances not co-signed
- \* Attendances missing CPT or ICD Codes



# Items Not Ready to Bill

- \* Complete filters needed to sort attendances by provider, month or enrollment type.
- \* You will need to choose the county, as this report will sort attendances by the county and will not combine counties together.

**Items Not Ready To be Billed**  
**Filters**  
Provider:  County:  \*  
School Year Session:  2019 - 2020 Winter Service Month From:  Service Month To:   
Enrollment Type:  Service Type:  Program Code:

# Items Not Ready to Bill

- \* On the Items Not Ready to Bill report there is a column labeled Problem. This will show the reason why the attendance cannot be billed at this time.

## Items Not Ready To be Billed

Filters

Provider:

County:

School Year Session:

Service Month From:

Service Month To:

Enrollment Type:

Service Type:

Program Code:

[Retrieve](#)

| Last Name | First Name | ServiceProvider  | DOB      | ESID           | From     | To       | Month    | Service Dates | Problem    | ServiceType | Frequency | Sessions | Amount   |                             |
|-----------|------------|------------------|----------|----------------|----------|----------|----------|---------------|------------|-------------|-----------|----------|----------|-----------------------------|
| CHERRY    | YONG       | HOFFMAN, KRISTEN | 04/15/15 | RS1920W0015042 | 11/20/19 | 06/26/20 | Mar 2020 | 3/4, 3/11     | Not signed | ST1 (Grp)   | 1x30      | 2.00     | \$103.00 | <a href="#">Attendances</a> |
| CHERRY    | YONG       | HOFFMAN, KRISTEN | 04/15/15 | RS1920W0015043 | 11/20/19 | 06/26/20 | Mar 2020 | 3/2, 3/6, 3/9 | Not signed | ST (Indv)   | 1x30      | 3.00     | \$154.50 | <a href="#">Attendances</a> |



# Submitting a Voucher

- \* To submit voucher(s) to county, go to **Billing > Submit Voucher(s)**.



- \* Select unbilled voucher by checking box (or Select All).

Submit voucher(s) for SCHENECTADY county (unbilled RS vouchers).

SCHENECTADY ▼ RS ▼

Select any Unbilled Vouchers

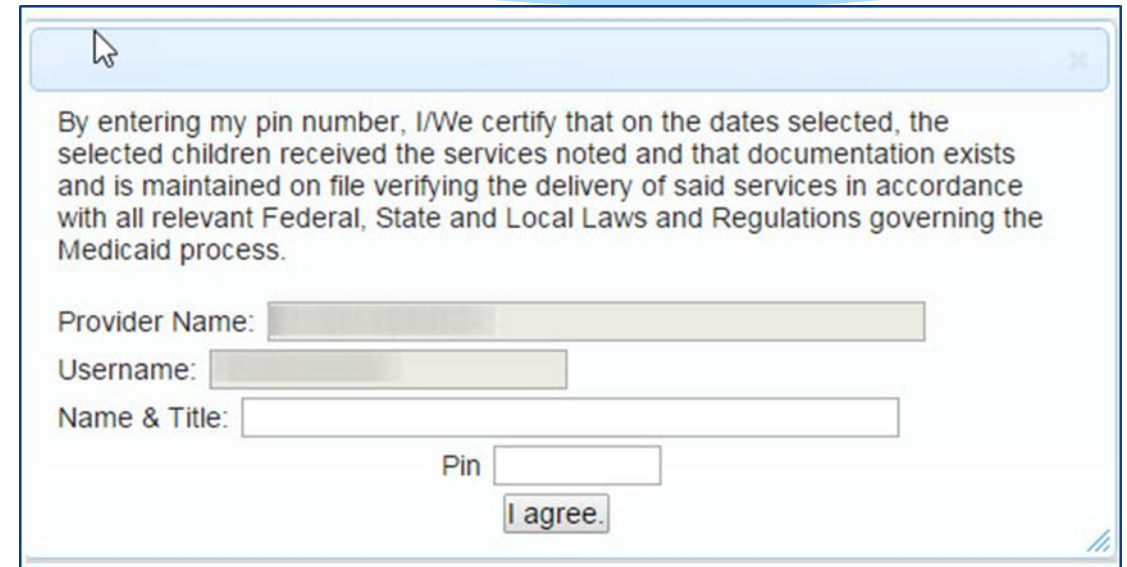
| Select                   | Bill Date | Voucher #      | Description           | Authorized Claimant | Claimant Title | # Enrollments | Amount Billed |
|--------------------------|-----------|----------------|-----------------------|---------------------|----------------|---------------|---------------|
| <input type="checkbox"/> | 4/7/2015  | RS150428091653 | RS Jan Feb March 2015 |                     |                | 17            | \$9,405.00    |

☒ Select All    Total Billed: 0.0

**Submit Voucher(s)**

# Submitting a Voucher

- \* After clicking "Submit Voucher(s)" - You will then get the screen on the right.
- \* Enter your personal PIN – Click “I Agree”.
- \* You will get “Voucher Submitted Successfully” confirmation message at the top of the page.
- \* The voucher summary should pop up automatically upon submission. If for some reason it does not, continue with the following instruction on how to "Print Voucher Summary".



The screenshot shows a web browser window with a confirmation message and input fields. The message states: "By entering my pin number, I/We certify that on the dates selected, the selected children 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." Below the message are four input fields: "Provider Name:", "Username:", "Name & Title:", and "Pin". The "Pin" field is followed by an "I agree." button. The browser window has a standard title bar with a mouse cursor icon on the left and a close button on the right.

**NOTE:** Once you submit a voucher to the county, it is **NO** longer possible to edit it's contents. Should you need to make a change to your submitted voucher, you can go to **Billing > Voucher Listing** to see if the county has downloaded your voucher. If the county has not downloaded the voucher then you can click “Un-Submit”, and retrieve the voucher for corrections and resubmit. If the county has downloaded the voucher, the “Un-Submit” button will not be available to you.

# Cannot Submit Voucher: Problem of “Not Co-Signed”

- \* When submitting a voucher, if you see “Problems on Voucher” and click “View Problems,” you may come across the problem “Not Co-Signed.”



| Last Name | First Name | ESID | From Date | To Date   | Service   | Frequency | Problem       |             |
|-----------|------------|------|-----------|-----------|-----------|-----------|---------------|-------------|
|           |            |      | 9/4/2019  | 6/26/2020 | ST (incv) | 1x30      | Not Co-Signed | Attendances |
|           |            |      | 9/4/2019  | 6/26/2020 | ST (incv) | 1x30      | Not Co-Signed | Attendances |
|           |            |      | 1/2/2020  | 6/26/2020 | ST (incv) | 2x30      | Not Co-Signed | Attendances |
|           |            |      | 1/2/2020  | 6/26/2020 | ST (incv) | 4x30      | Not Co-Signed | Attendances |

- \* When you click on “Attendances,” you will see a listing of all of the attendances for that enrollment.

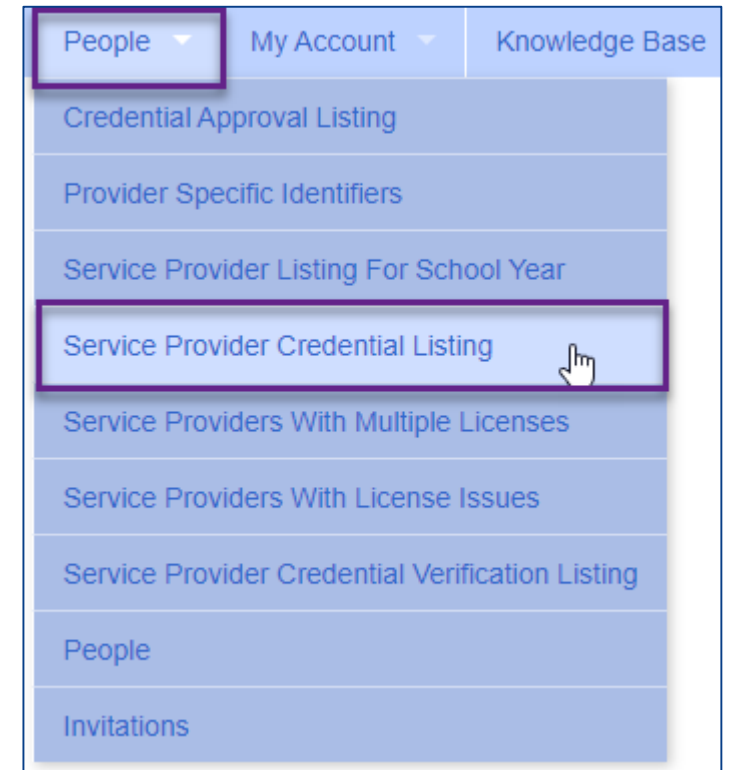
| Service Date | Make Up | Medicaid | Time in  | Time Out | Duration | # Sess | Mins/Session | Service Provider | Setting | Ind/Grp | Signed Date | Co-Signed Date | Voucher # | Treatment Log |
|--------------|---------|----------|----------|----------|----------|--------|--------------|------------------|---------|---------|-------------|----------------|-----------|---------------|
| 02/04/20     |         |          | 1:30 PM  | 2:00 PM  | 30       | 1.00   | 30           | Shannon Stark    | Home    | I       | 03/13/20    | 03/13/20       | Test 1234 | Treatment Log |
| 03/05/20     |         |          | 11:00 AM | 11:30 AM | 30       | 1.00   | 30           | Shannon Stark    | Home    | I       | 04/10/20    | 04/10/20       | Test 1234 | Treatment Log |
| 03/06/20     |         |          | 2:45 PM  | 3:15 PM  | 30       | 1.00   | 30           | Shannon Stark    | Home    | I       | 04/10/20    | 04/10/20       | Test 1234 | Treatment Log |
| 03/09/20     |         |          | 4:30 PM  | 5:00 PM  | 30       | 1.00   | 30           | Shannon Stark    | Home    | I       | 04/10/20    | 04/10/20       | Test 1234 | Treatment Log |
| 03/10/20     |         |          | 1:30 PM  | 2:00 PM  | 30       | 1.00   | 30           | Shannon Stark    | Home    | I       | 04/10/20    | 04/10/20       | Test 1234 | Treatment Log |
| 03/13/20     |         |          | 11:00 AM | 11:30 AM | 30       | 1.00   | 30           | Shannon Stark    | Home    | I       | 04/10/20    | 04/10/20       | Test 1234 | Treatment Log |
| 03/13/20     |         |          | 2:45 PM  | 3:15 PM  | 30       | 1.00   | 30           | Shannon Stark    | Home    | I       | 04/10/20    | 04/10/20       | Test 1234 | Treatment Log |
| 03/16/20     |         |          | 4:30 PM  | 5:00 PM  | 30       | 1.00   | 30           | Shannon Stark    | Home    | I       | 04/10/20    | 04/10/20       | Test 1234 | Treatment Log |
| 04/01/20     |         |          | 12:00 PM | 12:30 PM | 30       | 1.00   | 30           | Shannon Stark    | Home    | I       | 05/11/20    |                | Test 1234 | Treatment Log |
| 04/03/20     |         |          | 12:00 PM | 12:30 PM | 30       | 1.00   | 30           | Shannon Stark    | Home    | I       | 05/11/20    |                | Test 1234 | Treatment Log |

# Cannot Submit Voucher: Problem of “Not Co-Signed”

- \* If a fully licensed provider signs the attendances and their credentials do not require them to have a co-signature, the “Co-Signed Date” will auto-populate with the same information as “Signed Date.”
- \* If the therapist’s credentials expire, ***this will no longer be the case***. If you look at the previous screenshot, all of the attendances through March had this date auto-fill, but starting in April this was no longer the case.
  - \* In the Portal, the therapist’s license end date was listed as 03/31/20. This meant that everything on/after 04/01/20 was registering as needing a separate co-signature; this is why the dates no longer pre-filled.
  - \* The system reads these attendances as not being done by a fully licensed provider until the license end date is updated in the system.
  - \* If the attendances were already on the voucher, you will need to proceed through the following steps. If you noticed this before getting to the voucher, you will be able to skip Step 3.

# Cannot Submit Voucher: Problem of “Not Co-Signed”

- \* Step 1:
- \* There are two ways for the credential dates to be updated:
- \* You, as the agency administrator can make the correction:
  - \* Go to **People -> Service Provider Credential Listing**.



# Cannot Submit Voucher: Problem of “Not Co-Signed”

- \* From here, you will click “Retrieve” and see a listing of all therapists within the given criteria.
- \* You will then scroll to the therapist in question and view the credential dates. If you see below, the “Registered Through Date” for this therapist’s license is 04/30/20.
- \* If you have the option of “Edit,” you will be able to correct this yourself.
- \* If you only see “View,” then the therapist will need to make the correction to their account as they are in the CPSE Portal working with multiple agencies and you cannot make changes.


## Service Providers Listing with Credentials

Filters

County  Provider

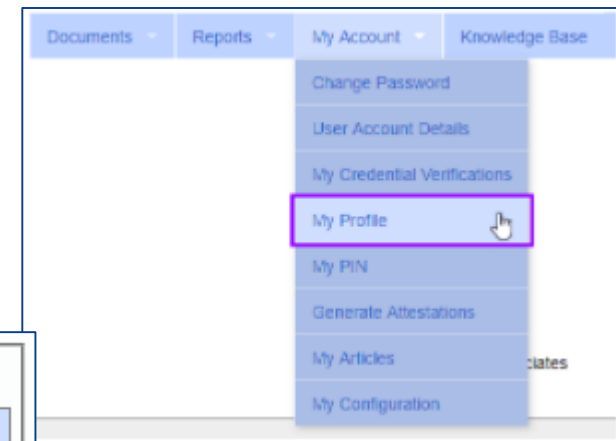
Active on:

| Last Name | First Name | NPI        | NPI Status | NPI Registry Name | Profession                             | License | Original Issue Date | Registered Through Date | Cert # | Username        |                      |
|-----------|------------|------------|------------|-------------------|--|---------|---------------------|-------------------------|--------|-----------------|----------------------|
| HOFFMAN   | KRISTEN    | 1508012717 |            | GEBAUER, BETTY    | Licensed Speech & Language Pathologist | 008342  | 12/20/94            | 04/30/20                |        | KRIST.HOFFMAN73 | <a href="#">Edit</a> |



# Cannot Submit Voucher: Problem of “Not Co-Signed”

- \* You may have the therapist correct this (They must have a login to the CPSE Portal to do so):
- \* The therapist will go to **My Account > My Profile**
- \* Click “Edit” next to the corresponding credential line:



| Licenses / Certifications / Professions [NYS Office of the Professions] |  |                 |        |       |                    |            |           |                          |      |        |
|---|--|-----------------|--------|-------|--------------------|------------|-----------|--------------------------|------|--------|
|   | Description                            | Credential Type | #      | State | NY Profession Code | From       | To        | Active                   |      |        |
| SLP   | Licensed Speech & Language Pathologist | License         | 008342 | NY    | 058                | 12/20/1994 | 4/30/2020 | <input type="checkbox"/> | Edit | Remove |

Add

- \* Update with the necessary end date and click “Save.”

# Cannot Submit Voucher: Problem of “Not Co-Signed”

- \* Step 2:
- \* After the credential dates are updated, the Credential Verification will also need to be re-done. This can be done by the agency or the service provider.
- \* Follow the instructions on the previous webinar slides or click on the links below.
  - \* <http://support.cpseportal.com/kb/a149/credential-verification-agencies.aspx?KBSearchID=14295>
  - \* <http://support.cpseportal.com/kb/a150/credential-verification-providers.aspx?KBSearchID=14295>

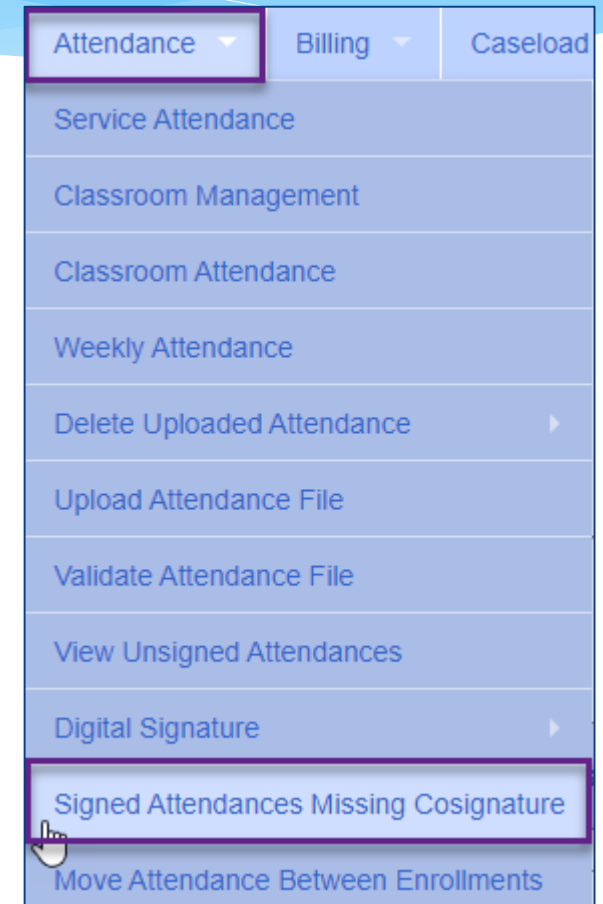


# Cannot Submit Voucher: Problem of “Not Co-Signed”

- \* Step 3

- \* The attendances now **no longer** need to be removed from the voucher, but instead you can "re-check" the attendances.

- \* To do this go to **Attendance -> Signed Attendances Missing Cosignature**



# Cannot Submit Voucher: Problem of “Not Co-Signed”

- \* "Retrieve" for the school year in question and you will see "ReCheck" as a column. If you know that you have corrected and verified the credentials, the "ReCheck" will allow you to refresh without removing the attendances from the voucher or un-signing.
- \* You can also view the credentials from here as well.

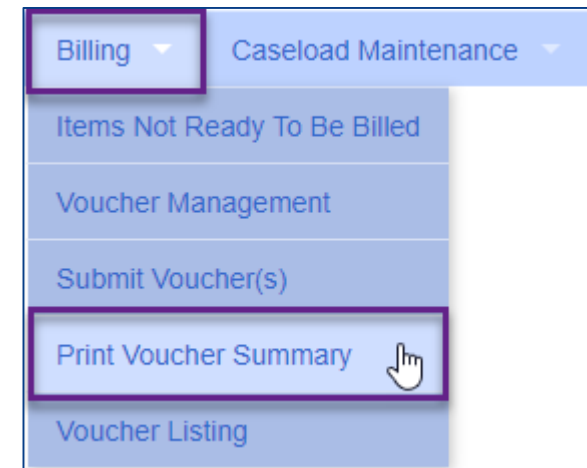
| Signed Attendances Missing Cosignature         |           |            |     |              |         |                     |                      |                             |                 |         |                  |                       |
|--|-----------|------------|-----|--------------|---------|---------------------|----------------------|-----------------------------|-----------------|---------|------------------|-----------------------|
| Filters  |           |            |     |              |         |                     |                      |                             |                 |         |                  |                       |
| School Year: 2019 - 2020 <span>Retrieve</span> |           |            |     |              |         |                     |                      |                             |                 |         |                  |                       |
| Provider                                       | Last Name | First Name | ESD | Service Date | Service | Therapist Last Name | Therapist First Name | Meets Medicaid Requirements | Can Person Sign | ReCheck | Credentials      | Attendance Correction |
|  |           |            |     |              |         |                     |                      | Yes                         | True            | ReCheck | View Credentials | Edit                  |
|  |           |            |     |              |         |                     |                      | Yes                         | True            | ReCheck | View Credentials | Edit                  |
|  |           |            |     |              |         |                     |                      | Yes                         | True            | ReCheck | View Credentials | Edit                  |
|  |           |            |     |              |         |                     |                      | Yes                         | True            | ReCheck | View Credentials | Edit                  |
|  |           |            |     |              |         |                     |                      | Yes                         | True            | ReCheck | View Credentials | Edit                  |

## NOTE:

- \* If the credentials were not changed, and the problem was pointing to the Credential Verification; simply complete the credential verification as noted in Step 2.
- \* Not all counties require the electronic credential verifications.

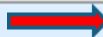
# Print Voucher Summary

\* Go to **Billing > Print Voucher Summary**




# Print Voucher Summary

- \* Complete filters if needed to find a specific voucher.
- \* Click "Print" link for applicable voucher

| Home   | File Transfer ▾ | Activities ▾  | Attendance ▾ | Billing ▾    | Caseload Maintenance ▾ | Lookup ▾       | Documents ▾         | Reports ▾          | Medicaid ▾    | People ▾  | My Account ▾ | Knowledge Base |
|--|-----------------|---------------|--------------|--------------|------------------------|----------------|---------------------|--------------------|---------------|---|--------------|----------------|
| <b>Print Voucher Summary Reports</b>   |                 |               |              |              |                        |                |                     |                    |               |   |              |                |
| Filter By... _____   |                 |               |              |              |                        |                |                     |                    |               |   |              |                |
| School Year Session: (All School Year Sessions) ▾ Enrollment Type: (All Enrollment Types) ▾ County: (All Billed Counties) ▾ Billing Month: (All Billing Months) ▾ Service Month: (All Service Months) ▾ Voucher Status: (Any Voucher Status) ▾ |                 |               |              |              |                        |                |                     |                    |               |   |              |                |
| <button>Apply Filter</button>  |                 |               |              |              |                        |                |                     |                    |               |   |              |                |
| Voucher #  | Enrollment Type | Description   | Billing Date | Total Billed | Submitted Date         | Claimant Title | Authorized Claimant | Destination County | # Enrollments | Print All Voucher Submission Reports  |              |                |
| RS200308133551   | RS              | FEB. 2020     | 3/8/2020     | \$4,261.50   | 3/8/2020               | CCC-SLP        | Betty P. Gebauer    | SCHENECTADY        | 22            | <a href="#">Print</a>   |              |                |
| RS200308133622   | RS              | FEBRUARY 2020 | 3/8/2020     | \$2,926.00   | 3/8/2020               | CCC-SLP        | Betty P. Gebauer    | Albany             | 11            |  <a href="#">Print</a> |              |                |
| RS200213143706   | RS              | JAN. 2020     | 2/13/2020    | \$3,993.00   | 2/14/2020              | CCC-SLP        | Betty P. Gebauer    | Albany             | 10            | <a href="#">Print</a>   |              |                |
| RS200205073831   | RS              | JAN. 2020     | 2/5/2020     | \$5,620.50   | 2/9/2020               | CCC-SLP        | Betty P. Gebauer    | SCHENECTADY        | 22            | <a href="#">Print</a>   |              |                |
| RS200102193725   | RS              | DEC. 2019     | 1/2/2020     | \$2,486.00   | 1/4/2020               | CCC-SLP        | Betty P. Gebauer    | Albany             | 9             | <a href="#">Print</a>   |              |                |

# Print Voucher Summary

- \* You will then see voucher summary:

**PORTAL**

**Voucher Summary**

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Page 1 of 1

**Provider:** GEBAUER,BETTY

**Vendor#:** 02061

**Tax ID:**

**BEDS Code:**

**Voucher Description:** July 2019

**Bill Date:** 8/4/2019

**Submitted :** 8/19/19 04:09 PM

**Time Period:** 2019 - 2020 Summer

**County:** SCHENECTADY

**CPSE Voucher#:** RS190804113625

**Vendor Invoice#:**

**County Doc#:**

**Contract Or Account#:**

| Child Name          | ESID           | Frequency | Service  | Dates Of Service                 | Rate    | Units | Minutes Per Unit | Amount          |
|---------------------|----------------|-----------|----------|----------------------------------|---------|-------|------------------|-----------------|
| HARRIS, RUBEN       | RS1920S0014606 | 2x30 - I  | RS - ST  | Jul 2019 - 3, 16, 18, 23, 25, 30 | \$51.50 | 6.00  | 30               | \$309.00        |
| WINTERS, LEANORA    | RS1920S0014666 | 2x30 - I  | RS - ST  | Jul 2019 - 2, 16, 18, 25, 30     | \$51.50 | 5.00  | 30               | \$257.50        |
| WOLFF, JOSUE        | RS1920S0014564 | 1x30 - G  | RS - ST1 | Jul 2019 - 2, 18, 25             | \$51.50 | 3.00  | 30               | \$154.50        |
| WOLFF, JOSUE        | RS1920S0014563 | 1x30 - I  | RS - ST  | Jul 2019 - 3, 16, 24, 30         | \$51.50 | 4.00  | 30               | \$206.00        |
| <b>Grand Total:</b> |                |           |          |                                  |         |       |                  | <b>\$927.00</b> |

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:** \_\_\_\_\_

# Print Voucher Summary

- \* Depending on your browser and set up for reading Adobe PDF documents you should see icons for saving and printing - Click "Print" icon to print summary:



- \* **NOTES:**

- \* When billing Center Based, the Voucher Summary includes Voucher Billing info as well as Classroom Attendance.
- \* It is **IMPERATIVE** that a voucher for CBRS is created and submitted to the county along with the CB voucher even though it will have a zero billing amount. This is how the county can then bill Medicaid for any Medicaid billable services. Most counties will not pay your CB Voucher unless a CBRS Voucher is also submitted along with the CB Voucher.

# Attendance Denied by County?

## How to Correct and Re-Bill

- \* You **MUST** confirm that the attendances have been denied by the county, and that you understand the removal is permanent.
- \* If a provider makes a mistake and submits the erroneous data on a voucher, the County may choose to deny payment for certain dates of service.
- \* If this occurs, and the provider would like to attempt to correct the data and resubmit on a new voucher, the process is as follows:
- \* The denied attendance needs to be removed from the initial voucher. To do this, you must inform the CPSE Portal support team of the ESID and service dates that you would like removed. To do this, complete the below form and email it to **support@cpseportal.com**
  - \* **RequestToHaveAttendanceRemovedFromSubmittedVouchers.xlsx**

# Attendance Denied by County?

## How to Correct and Re-Bill

\* Example of form:

|    | A  | B   | C | D | E | F |
|----|--|---|---|---|---|---|
| 1  | <i>Complete the form below to request attendance entries to be removed from vouchers so they can</i> |   |   |   |   |   |
| 2  | <i>be corrected and rebilled on a new voucher</i>  |   |   |   |   |   |
| 3  |  |   |   |   |   |   |
| 4  | County   |   |   |   |   |   |
| 5  | Billing Provider Name  |   |   |   |   |   |
| 6  |  |   |   |   |   |   |
| 7  | Electronid Service ID (ESID)<br>(*Child's, not Voucher #*)   | Date of Service<br>(Date Needing to be Removed) |   |   |   |   |
| 8  |  |   |   |   |   |   |
| 9  |  |   |   |   |   |   |
| 10 |  |   |   |   |   |   |
| 11 |  |   |   |   |   |   |
| 12 |  |   |   |   |   |   |

IMG1: Example of form to be completed



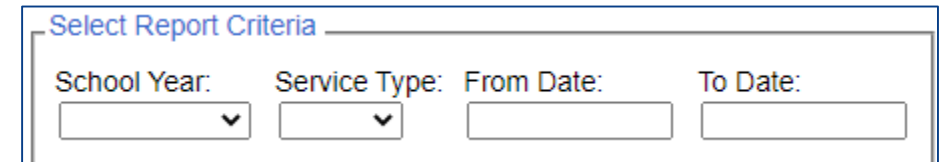
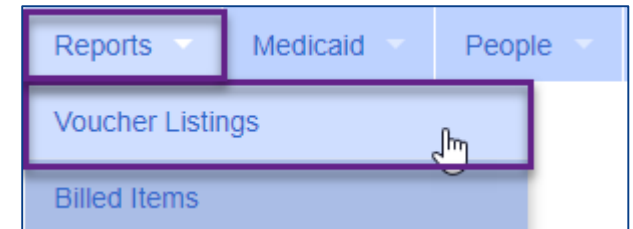
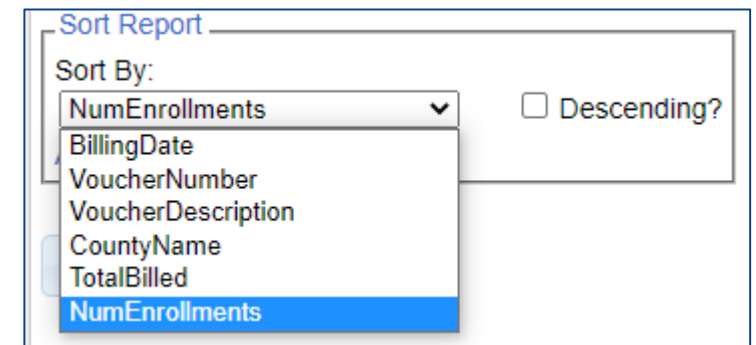
# Attendance Denied by County?

## How to Correct and Re-Bill

- \* Once the attendance is no longer on a voucher:
  - \* If you need to modify the treatment log:
    - \* Since the attendance has already been digitally signed attesting to the fact that everything was reviewed and correct, you must first unsign the attendance and indicate why you need to modify the signed treatment log. Here are instructions for unsigning attendance: <http://support.cpseportal.com/kb/a33/unsigned-attendance.aspx>
    - \* Once the attendance entry has been unsigned, it can now be modified.
    - \* The modified attendance entry needs to be **resigned**.
  - \* If the attendance needs to be moved to a different ESID because the original enrollment dates changed, was rescinded or attendance was entered on the wrong enrollment, here are the instructions:
    - \* <http://support.cpseportal.com/kb/a53/move-attendance-between-enrollments.aspx>
  - \* The attendance can be added to a new voucher and submitted. If the attendance is not appearing, make sure you do a **recalc** on the voucher.

# Voucher Listing Report

- \* To see all Vouchers that have been submitted to the county, you can run a Voucher Listing Report.
- \* Go to **Reports > Voucher Listings**
- \* Enter Criteria, and choose how you want to sort your report.

A screenshot of a form titled 'Select Report Criteria'. It contains four input fields: 'School Year:' with a dropdown arrow, 'Service Type:' with a dropdown arrow, 'From Date:' with a text box, and 'To Date:' with a text box.A screenshot of a form titled 'Sort Report'. It has a 'Sort By:' label followed by a dropdown menu. The dropdown menu is open, showing a list of options: 'NumEnrollments', 'BillingDate', 'VoucherNumber', 'VoucherDescription', 'CountyName', 'TotalBilled', and 'NumEnrollments' (which is highlighted in blue). To the right of the dropdown is a checkbox labeled 'Descending?'.

# Voucher Listing Report

- \* Your report will look like the screenshot below.
- \* You can download or print this report for your records.

CPSE PORTAL

Voucher Listings

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Page 1 of 2

**Report Criteria: School Year: 201819 Service Type: RS Sorted By: NumEnrollments Ascending**

| Voucher Number | Voucher Description | County Name | Billing Date | # Enrollments | Total Billed |
|----------------|---------------------|-------------|--------------|---------------|--------------|
| RS190416194659 | March 2019/Quinn    | SCHENECTADY | 4/16/2019    | 1             | \$268.00     |
| RS180805085528 | July 2018           | SCHENECTADY | 8/5/2018     | 2             | \$450.00     |
| RS180819200723 | August 2018         | SCHENECTADY | 8/19/2018    | 2             | \$400.00     |
| RS180819204244 | July 2018           | Albany      | 8/19/2018    | 4             | \$1,100.00   |
| RS180820185858 | August 2018         | Albany      | 8/20/2018    | 4             | \$605.00     |
| RS181010190803 | September 2018      | Albany      | 10/10/2018   | 6             | \$1,870.00   |
| RS181112190013 | October 2018        | Albany      | 11/12/2018   | 6             | \$2,750.00   |
| RS181208181032 | November 2018       | Albany      | 12/8/2018    | 7             | \$2,365.00   |
| RS190106124044 | DECEMBER 2018       | Albany      | 1/6/2019     | 7             | \$2,090.00   |

# Submitted Billing Questions

- \* **Will providers be expected to print and submit electronic billing each month?**
  - \* No, a provider who works for an agency will not need to submit electronic billing. The agency or Independent Provider will need to submit electronic billing each month.
- \* **Can services be billed on an unmatched record?**
  - \* No, you cannot bill on an unmatched record. The agency or Independent Provider should check for any potential matches frequently in order to bill at the end of the month.
- \* **For related services within a Center-Based program, can an agency bill for a student if scripts have not been submitted?**
  - \* No, a prescription needs to be uploaded and attached to an enrollment for an agency or an Independent Provider to be able to bill for any service.

# Helpful Knowledge Base Articles

- \* Portal Invitations – Multiple User Template Upload
  - \* <http://support.cpseportal.com/kb/a66/service-provider-user-template-to-import-therapists-and-users.aspx?KBsearchID=16175>
- \* Credential verification by individual with login:
  - \* <http://support.cpseportal.com/kb/a150/credential-verification-providers.aspx?KBSearchID=16524>
- \* Credential verification by agency office staff
  - \* <http://support.cpseportal.com/kb/a149/credential-verification-agencies.aspx?KBSearchID=16524>
- \* Cannot Submit Voucher: Problem of “Not Co-Signed”
  - \* <http://support.cpseportal.com/kb/a230/cannot-submit-voucher-problem-of-not-co-signed.aspx?KBSearchID=17202>

# Helpful Knowledge Base Articles

- \* Creating and Submitting a Voucher
  - \* <http://support.cpseportal.com/kb/a62/creating-and-submitting-a-voucher.aspx?KBSearchID=17204>
- \* Why doesn't attendance appear to be put on a voucher?
  - \* <http://support.cpseportal.com/kb/a92/why-doesnt-attendance-appear-to-be-put-on-a-voucher.aspx?KBSearchID=17204>
- \* Attendance Denied? How to Remove in Order to Correct and Re-Bill
  - \* <http://support.cpseportal.com/kb/a81/attendance-denied-how-to-remove-in-order-to-correct-and-re-bill.aspx?KBSearchID=17204>
- \* How to Submit a Ticket to the CPSE Portal
  - \* <http://support.cpseportal.com/kb/a188/how-to-submit-a-ticket-to-the-cpse-portal.aspx?KBSearchID=17204>

# Follow-Up

- \* This presentation will be recorded and the PowerPoint presentation will be uploaded to the Portal Knowledge Base for future reference.
- \* **Additional Helpful Knowledge Base Articles:**
- \* **Resetting Forgotten Passwords**
  - \* <http://support.cpseportal.com/kb/a49/forgot-your-password.aspx?KBSearchID=16316>
- \* **Changing Your Password**
  - \* <http://support.cpseportal.com/kb/a14/change-password.aspx?KBSearchID=16315>
- \* **Choosing a PIN**
  - \* <http://support.cpseportal.com/kb/a125/choosing-a-pin.aspx?KBSearchID=16318>
- \* **Edit User Information**
  - \* <http://support.cpseportal.com/kb/a59/edit-my-user-information.aspx?KBSearchID=16250>
- \* **NYS Licensed Professions**
  - \* <http://www.op.nysed.gov/>
- \* **To change your name with NYSED**
  - \* <http://www.op.nysed.gov/documents/anchange.pdf>
- \* **To update your information with NPPES**
  - \* <https://npiregistry.cms.hhs.gov/>
- \* Search for help in our **Knowledge Base:** <http://support.cpseportal.com/main/default.aspx>
- \* Email the **CPSE Portal Support Team:** [support@CPSEPortal.com](mailto:support@CPSEPortal.com)