JAMES McGUINNESS & ASSOCIATES INC. Consultants



Digital Speech Recommendation

SSHSP / PSSHSP

- * The acronym is Medicaid's abbreviation School Supportive Health Services Program and Preschool Supportive Health Services Program.
- * The SSHSP guidelines recognize covered services which include OT, PT, ST and Psychological counseling, plus a few others
- * Most information for SSHSP can be found at http://www.oms.nysed.gov/medicaid/
 - * Provider Policy and Billing Handbook
 - * Questions and Answers
 - * Training Materials
 - * Medicaid Alerts

Written Orders for SSHSP (Medicaid)

* Per the Medicaid Provider Policy and Billing Handbook

"The written order/written referral (prescription) is the documentation that establishes medical necessity for the related service to be furnished and constitutes medical direction of the ordering professional. In order to bill Medicaid, a written order/written referral from a qualified Medicaid provider is required. Written orders/written referrals must be prospective and must be kept on file. "

Required Elements of a Written order

(from Medicaid Provider Policy and Billing Handbook)

- 1. The time period for which services are being ordered;
- 2. The service(s) being ordered (including specific frequency or per IEP)
- 3. Child's name
- 4. Patient Diagnosis
- 5. Provider's contact information including address and phone #
- 6. Ordering practitioner's NPI or license #
- 7. Signature
- 8. Date the order was written and signed

Digital Signatures

- * Per Medicaid Provider Policy and Billing Handbook
 - * "* Please note that stamped signatures are not allowable. Electronic signatures affixed by someone other than the actual ordering/referring practitioner are also not allowable."
- * From Questions and Answers
 - "electronic signatures are acceptable if adequate security is in place and confidentiality is maintained. The use of an electronic signature has the same validity as a signature affixed by hand. However, providers must be prepared to authenticate or prove that the record was electronically signed by the person authorized to sign the record. Electronic signatures affixed by someone other than the actual practitioner are not allowable. An exception to this rule would apply where the applicable statute or regulation specifically requires a handwritten signature. The provider's electronic medical record must have control features, such as pass codes, for electronic signatures. "

What is a "Digital Speech Order"

- It is a written order for Speech Therapy Services that is created on the computer and digital signed, rather than written on paper and signed with a pen
- It follows all the requirements of a paper written except that it is signed digitally



What are the benefits of preparing a digital order in CPSE Portal vs a hand-written order?

- ✓ The process is simple with most of the fields pre-filled
- The electronic digital order, ensures that all the fields are filled in correctly and that you have created a Medicaidcompliant order
- The resulting digital order does not have to be scanned and uploaded to the Portal saving the SLP and/or their agency the time that it takes to scan, upload and type in the order details



- ✓ You do not need to re-enter Contact information, License / NPI information on every order. Once the ordering practitioner's contact information, License/NPI information are set up in the Portal it will be entered automatically on each digital order,
- The child's name, date of birth, county, district and agency is prefilled for you
- Only the prescription date range (if the default is not used), the ICD code and electronic signature needs to be entered to each digital order; only two (or possibly three) out of the eight criteria. The remaining five elements are entered to each digital order automatically.

Setup (one time)

- * Three elements of the written order are the same for all children. These are configured once
 - * Provider contact information including address and phone #
 - * Ordering Practitioner name and/or license
 - * Signature
 - * Signature Title and Credentials
 - * PIN

Provider Contact Information

- * The provider contact information can be entered on the Billing Provider Profile, which is under the My Account menu
- * This is done by the billing provider
 - * If you are a therapist that independently have a vendor contract with the County and bill the County directly, they you are a billing provider
 - * If you are a therapist employed by an agency, then the agency is the billing provider and they must complete the step

Provider Contact Information

	My Account Know		
Billing Provider Profile	Change Password		
Provider Info	User Account Details		
Billing Provider	My Profile		
Name PROGRESSUS THERAPY, LLC	My PIN		
Billing Address	Billing Provider Profile		
Address 1 Address 2 City State Zip			
Update Update			

Agency Contact Information Missing

The selected billing provider does not have adequate information entered into CPSE Portal. To create orders under this provider, please ensure that the billing provider has the following fields entered in their profile: Address, City, State, ZIP, and Phone Number. Billing providers can edit this information via My Account->Billing Provider Profile.

Create Digital Order

Adams, Amy	County: NASSAU	District: Amityville	DOB: 6/6/2015	Redo Search

And the second s

Ordering Practitioner Information

- The ordering practitioner is the Licensed Speech and Language Pathologist
- * Their NPI, License and Signature information can be accessed under the My Profile screen which is under the My Account menu
- * The SLP can set or change their PIN for digital signatures by using the My PIN screen under the My Account menu

Ordering Practitioner Information

								My Ac	count	Knov	vledge Ba
								Change Password			
								User /	Account	Details	
/ Profile								My Cr	edentia	I Verificatio	ns
Personal and Professional User Information Eavorites							_	My Pr	ofile		
Information in CPSE Database								My PI	N		
Last Name Stark	Licenses / Certifications / Prof	essions [NY Credential	S Office	of the P	NY Profession	From	To	Antiva			
First Name Shannon NPI 1003129438	SLP Licensed Speech & Language Pathologist Pathologist	Type License	# 010654	NY	Code 058	9/15/1998	12/31/2021	e Active	Edit	Remove	
Signature, Title, and Credentials (e.g.: Mary Brown, CCC-SLP)	Add										
Update											
Information from NPPES NPI Registry Click here for NPPES website NPI 1003129438 This NPI is for an Individual											
First Name SHANNON Last Name STARK Credentials M.A. CCC/SLP	Mailing Address Mailing Address City BINGHAM	3 1 205 CROC 3 2 TON	KER HIL	L RD	tate NY Zip 1390	42513					

PIN for digital signatures

Username: sStark

Password:





From the Medicaid Provider Policy and Billing Handbook

"It should be noted that the written order/written referral must be in place prior to the initiation of services (prospective*), including evaluations."

This means that the order must be created and signed **<u>before</u>** the first session is provided.

* Medicaid Provider Policy & Billing Handbook (Update 9) - http://www.oms.nysed.gov/medicaid/handbook/sshsp_handbook_9_march_21_2018_final.pdf

Two ways to get Digital Speech Order

- * Best Method is to use Prescriptions for Caseload under Caseload Maintenance menu
- * Can also use Create New Order under Caseload Maintenance menu



Prescriptions for Caseload

* If you are an SLP, then

- Services that do not have a written order recorded in CPSE Portal will show option for "Create Speech Recommendation"
- * If you are not an SLP, this is not available

Prescriptions / Written Orders for Caseload

Filter By									•
Provider: PROGRESSUS THERAPY, LLC Session: 2018 - 2019 Winter Search									
ESID	Last Name	First Name	From Date	To Date	Description	Rx Status	Rx Entry	Rx Image	
RS1819W0013688	BARNES	EARL	9/4/2018	6/26/2019	ST 1x30 Individual	ENTERED	View	View	
RS1819W0013678	BAXTER	DAVIDA	9/4/2018	6/26/2019	ST 2x30 Individual	MISSING	Enter Rx Info	Upload Rx Image	Create Speech Recommendation
RS1819W0013664	BOWMAN	JAIME	9/4/2018	6/26/2019	ST 2x30 Individual	MISSING	Enter Rx Info	Upload Rx Image	Create Speech Recommendation
RS1819W0013696	CORNEJO	MATT	9/4/2018	6/26/2019	ST 2x30 Individual	MISSING	Enter Rx Info	Upload Rx Image	Create Speech Recommendation
RS1819W0013697	CORNEJO	MATT	9/4/2018	6/26/2019	ST1 1x30 Group	MISSING	Enter Rx Info	Upload Rx Image	Create Speech Recommendation
RS1819W0013687	COULTER	LOYD	9/4/2018	6/26/2019	ST1 1x30 Group	MISSING	Enter Rx Info	Upload Rx Image	Create Speech Recommendation
RS1819W0013824	HYATT	ARRON	9/4/2018	6/26/2019	ST 2x30 Individual	MISSING	Enter Rx Info	Upload Rx Image	Create Speech Recommendation

Creating the Digital Order

Create Digital Order Child Lookup ____ Fills in automatically. BAXTER, DAVIDA County: SCHENECTADY District: Schenectady DOB: 10/8/2014 Redo Search Create recommendation for Speech Services -PROGRESSUS THERAPY, LLC Prescription effective date range -Applies to entire school year 2018 - 2019 T Defaults to "Applies to Entire School Year, Applies to specific school year / session 2018 - 2019 Winter • but you can select the other options. Applies to specific date range Reason for Services — ICD F80.2 F80 Type in the ICD Code(s). Reason Preview and Sign **Click Preview and Sign**

Preview & Sign Digital Order



Speech Recommendation for Services

A Speech and Language referral for services is recommended in accordance with the request by the Committee on Preschool Special Education. Services, when provided, will be in accordance with the Individualized Education Program designed by the Committee.



By entering my pin I am signing this recommendation for speech services							
Signature: Shannon Stark, M.A. CCC/SLP							
NPI: 1003129438							
Date: 1/14/2019	Enter PIN						
F							
l agree.	Click "I Agree"						

Required elements of a Written Order



- 1. The time period for which services are being ordered;
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- 3. Child's name
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- 5. Provider's contact information including address and phone #
- 6. Ordering practitioner's NPI or license #
- 7. Signature
- 8. Date the order was written and signed

Downloadable / Printable copy

If you are not successful in creating your digital speech recommendation, look at where the information is pulling from (as noted in red) and try to determine if anything needs to be entered.

Items to Check:

- Create Digital Order Screen
 - ✓ Data Entered by SLP
- My Account>Billing Provider Profile
 - ✓ Address/Phone #
 - My Account>My Profile
 - Name, NPI, License
 - ✓ Signature & Credentials
 - ✓ Digital Signature Set-up

The Signature fills from the "My Profile Screen (My Account>My Profile). If your signature credentials are not filled in, the order cannot be created.

Period Covered: 201819 School Year (Jul 01, 2018 to Jun 30, 2019) Speech Recommendation for Services

A Speech and Language referral for services is recommended in accordance with the request by the Committee on Preschool Special Education.

Services, when provided, will be in accordance with the Individualized Education Program designed by the Committee.

Student Name						
Date of Pieth	DARINES, EARL					
Date of Birth		10				
Agency/Provider	PROGRESSUS THERAPT, I					
CPSE District	Schenectady					
County	SCHENECTADY					
ICD Code(s)	F80.0: Phonological disorder					
Reason for Services			1			
Reason for services	·					
A						
Agency/Provider Conta	ict information					
Name: P	ROGRESSUS THERAPY, LLC					
Address 1: 1	23 Main Street					
Address 2:						
City, State, Zip: A	Ibany, NY, 12345					
Phone: 8885551111						
Received and a second	Public Laboration and					
Licensed Speech and La	inguage Pathologist Information					
Name: Stark	Shannon					
NPI: 1003129438						
License: 010654						
Distally size ad how						
Digitally signed by:						
Shannon Stark M A	CCC/SLP	01/14/2019				
Name		Date				

This block of information fills in automatically when you click on the "Create Speech Recommendation" link.

This fills from the "Create Digital Order" Screen. This is a field that is entered by the SLP.

This block of information fills in from the Billing Provider Screen (My Account>Billing Provider Profile). If this is not filled in, the order cannot be created.

This block of information fills in from the My Profile Screen (My Account>My Profile). If this is not filled in, the order cannot be created.

The date fills in automatically when created.

How does this work when County doesn't create enrollment until after service starts?

- Billing providers have the ability to create "Unmatched" children and enrollments
- Unmatched children and enrollments are placeholders. They exist so that you can create a temporary records while waiting for the County to enter the official ones
- * With an Unmatched child and/or enrollment, you can record treatment logs, create digital orders, attach prescriptions, etc.
- * You just can't bill for an unmatched enrollment
- * When the County creates the official record, the billing provider "matches" the temporary record to the County created official one. The matching process moves all the written orders, treatment logs, etc. to the County created official record and then deletes the temporary record

How do I know if a digital speech recommendation has been completed?

There are two ways to run a report to check the status of what has been entered and/or missing.

Medicaid>Missing Documents>Missing Scripts
 This report will show what is missing.

Caseload Maintenance>Prescriptions for Caseload

This report will show the status for each child on your caseload. (*Missing, Verified, Entered, Invalidated/Reason*)

Troubleshooting

I filled in all the fields to generate the digital speech recommendation and entered my Pin #, but could not complete the process. Why?

- There is a <u>one-time</u> set-up (for both the billing provider and the therapist) that fills in some of the "required" components of the digital speech recommendation. Have both profiles been completed?
 - ONE FOR THE BILLING PROVIDER (My Account>Billing Provider Profile), complete address and phone number including area code, and,
 - ONE FOR THE ORDERING PRACTITIONER (My Account>My Profile) including:
 - ✓ The ordering practitioner's name
 - ✓ NPI and license numbers
 - ✓ Signature, title and credentials
 - Pin # (for the digital signature)

Did you enter an ICD Code? (This is a required field. The order will not be completed without an ICD Code.)

Did you click "<u>Preview and Sign</u>" to <u>preview</u> and <u>digitally sign</u> the completed order? (This is a required field. The order will not be completed without a digital signature.)

Questions?

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

- Search for help in our Knowledge Base: <u>http://support.cpseportal.com/Main/Default.aspx</u>
- Email: <u>support@CPSEPortal.com</u>

Medicaid References:

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