



# **Creating Social Service Templates**

## Creating Social Service Templates Provider in Provider

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### **Definitions**



**Batch:** A mass billing of several claims submitted at once.

Client ID: The client's ProviderOne ID number, 9 digits followed by WA, ex: 123456789WA

**Provider ID:** The provider's ID number for ProviderOne, 7 digits. This is the same as the Domain number. You will see this listed on the authorization with a 2 digit location code such as 01, ex: 123456701.

**TCN:** Transaction Control number; also called the claim number. This is an 18 digit number assigned to a claim for tracking purposes.

**Template:** A template is a reusable billing page that automatically fills out certain pieces of information.

## Creating Social Service Templates Provider ne

# **Create a Template**



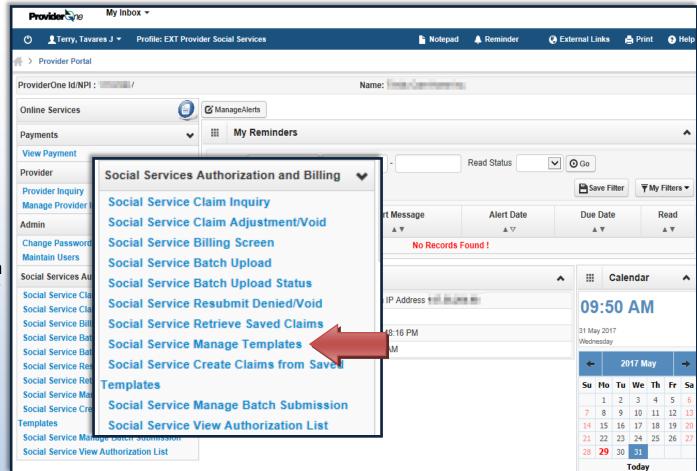


Templates can be used when you have repetitive billing; where the claim is the same, or nearly the same, each time you bill. With a template, you create a billing page that is reusable.

Using templates is a great way to save time and make billing easier.

Having templates with previously saved information will help cut down on errors by reducing the amount of data entry for each claim.

To create a social service template, first log in to ProviderOne using the 'EXT Provider Social Services' profile. Then select 'Social Service Manage Templates'.



#### Note:

Creating a template is not the same as submitting a claim.

Managing templates is for adding or removing templates. No claims can be submitted from the 'Manage Templates' area.





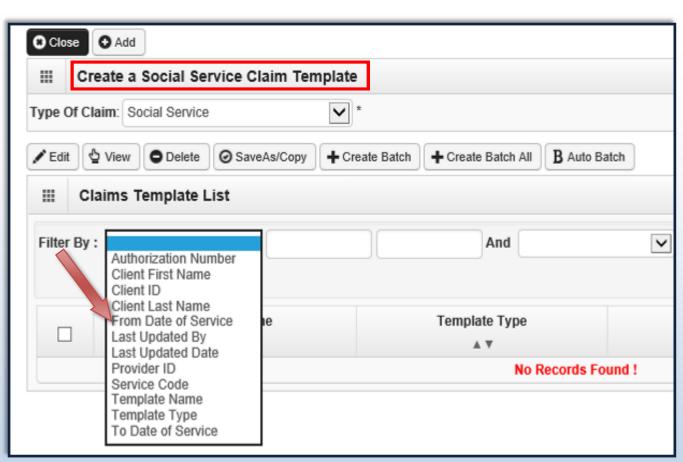
The 'Create a Social Service Claim Template' page appears.

Here you will see any previously saved templates.

When there are a large number of templates you can use the 'Filter By' function to find a template.

(Filter options show in the picture to right.)

Columns can be sorted from A-Z or Z-A by using the \_\_\_\_\_ controls below the name of each column.



#### Note:

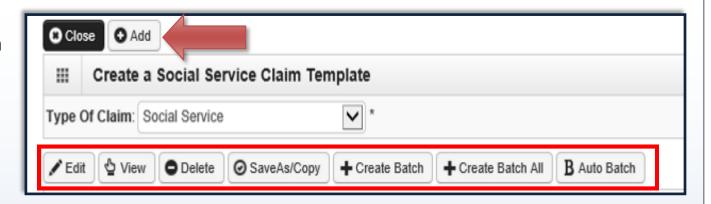
The default 'Type of Claim' is Social Service and should not be changed.

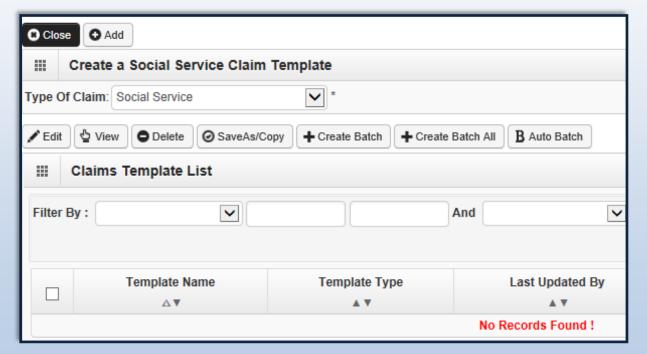




The 'Create a Social Service Claim Template' page can be used to do several things:

- Add a new template.
- Edit a saved template.
- View a saved template.
- **Delete** a saved template.
- Change template name or SaveAs/
   Copy template.
- Create a template batch.
- To create a new template, click on 'Add'.





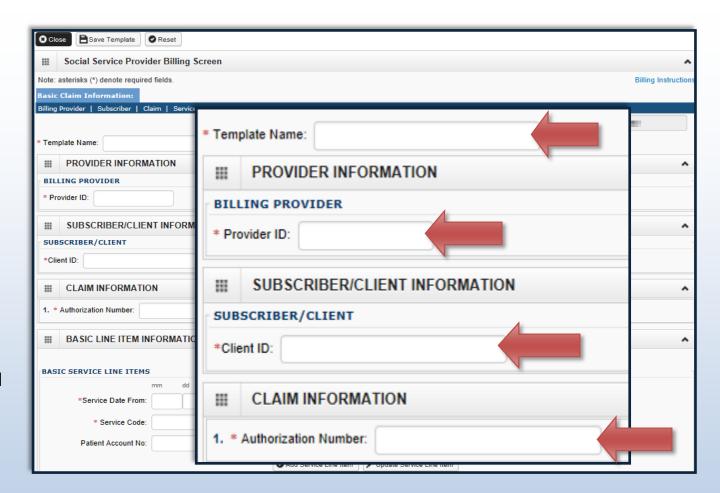




The 'Social Service Provider Billing Screen' appears.

In order to save the template you must fill out these fields:

- Template Name.
- Provider ID as listed on the authorization.
- Client ID as listed on the authorization.
- Authorization Number, as listed on the authorization.
- Basic Line Item Information, as listed on the authorization.



#### Note:

Asterisks (\*) denote required fields.

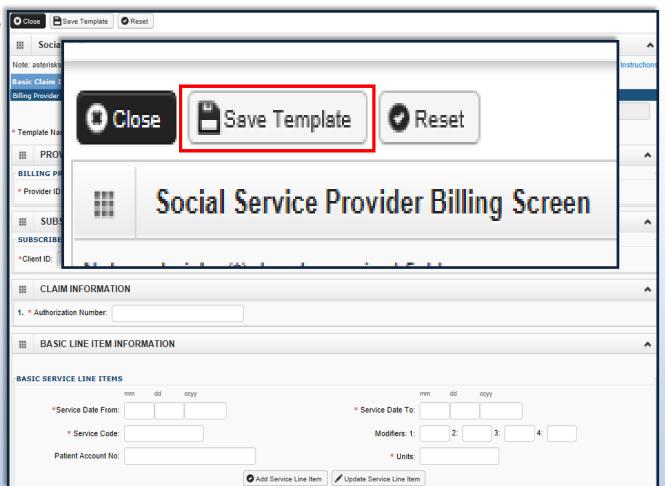
ProviderOne will check that the Client and Authorizations match prior to allowing you to save the template.





Once the required data elements have been entered then you can save the template.

 To save the template, click on 'Save Template' in the upper left corner of the screen.





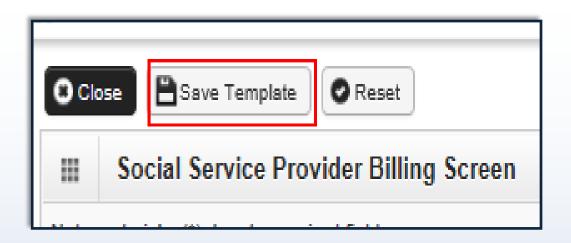


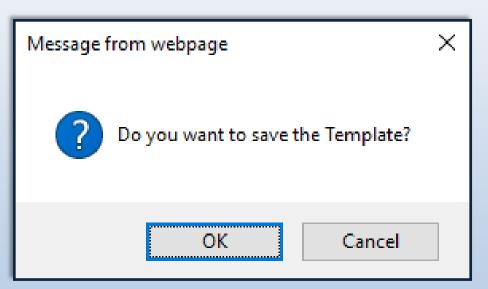
After choosing to 'Save Template', you will be asked, "Do you want to save the Template?"

Select '**OK**' to confirm the save of the template. Select '**Cancel**' if you are not ready to save the template or need to make changes.

#### Note:

In ProviderOne, 'OK' signifies a YES response and 'Cancel' a NO response.







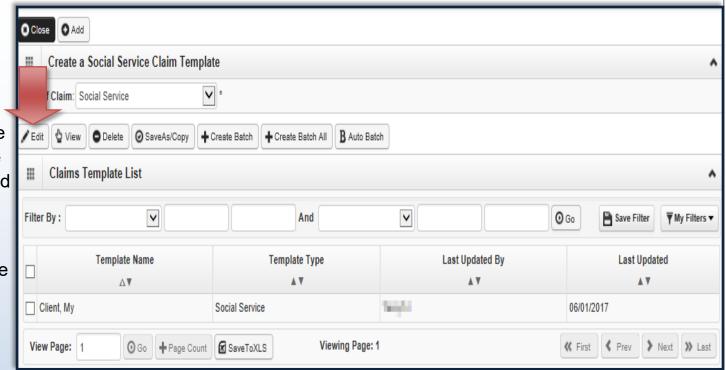


You will now be returned to the 'Create a Social Service Claim Template' page.

Here, you will see the template you have created. You can see the template name, template type, the user who made the last update and the last updated date.

To edit any information on the template, check the box next to the template name and select 'Edit'. Make the needed edits and save the template.

To view or delete the template, check the box next to the template name and choose the appropriate action button.



# Department of Social & Health Services Creating Social Service Templates Provider ne

# **Copy a Template**



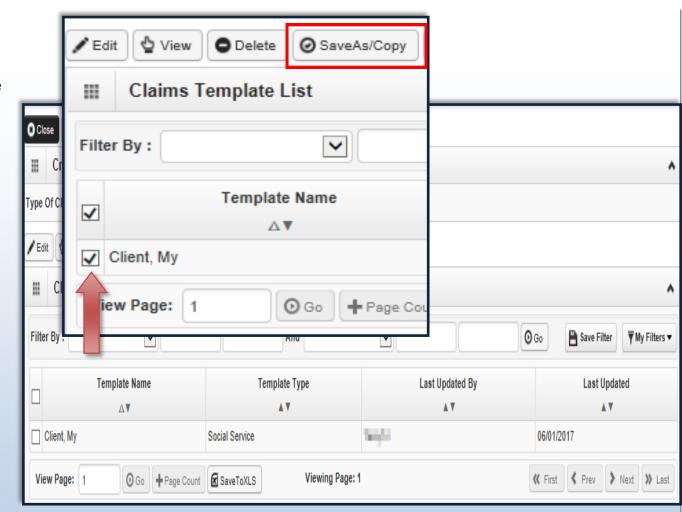


As a way to save time, you can use the template you have just created to make similar templates for other clients.

To do this, you can make a copy of an existing template, change the client information, rename the template, and save.

#### To Copy a Template:

- Check the box next to the desired template name, then
- Select 'SaveAs/Copy'.



#### Note:

Creating new templates from a previously saved template can save you time. However, be mindful of the information being entered.

Incorrect authorization numbers, provider IDs or Client IDs will prevent the template from being saved.





After choosing 'SaveAs/Copy', the original saved template appears.

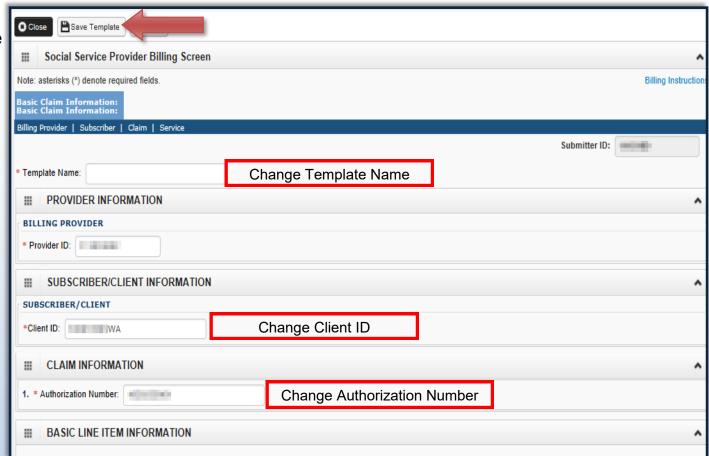
#### To Update the Template:

Change the Template Name,

Change the Client ID,

Change the Authorization Number,

To save the template, click on 'Save Template'.



#### Note:

The **Provider ID** will remain the same when copying a template.



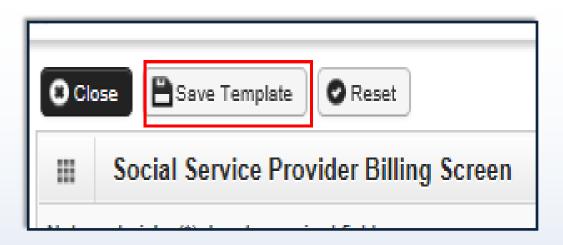


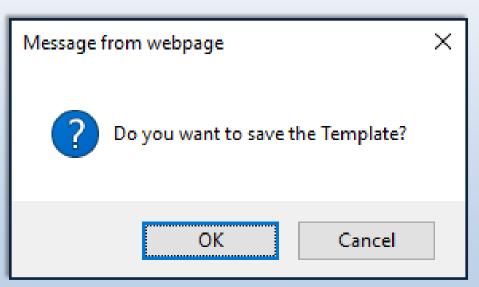
After choosing to 'Save Template', you will be asked, "Do you want to save the Template?"

Select '**OK**' to confirm the save of the template. Select '**Cancel**' if you are not ready to save the template or need to make changes.

#### Note:

In ProviderOne, '**OK**' signifies a **YES** response and '**Cancel**' a **NO** response.









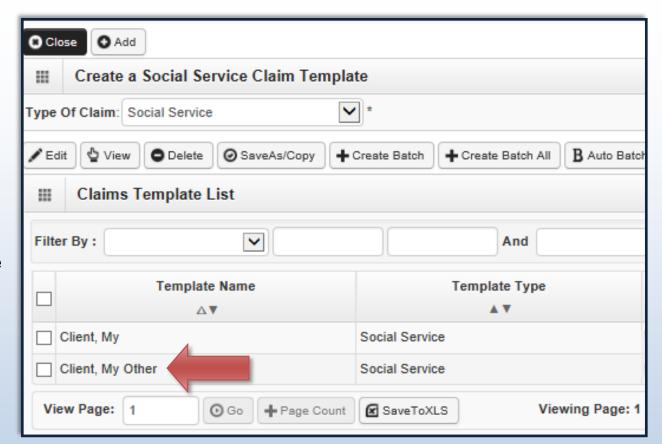
You will now be returned to the 'Create a Social Service Claim Template' page.

The new, saved, template will be show along with the original template.

Repeat the process as many times as needed.

To edit any information on the template, check the box next to the template name and select 'Edit'. Make the needed edits and save the template.

To view or delete the template, check the box next to the template name and choose the appropriate action button.



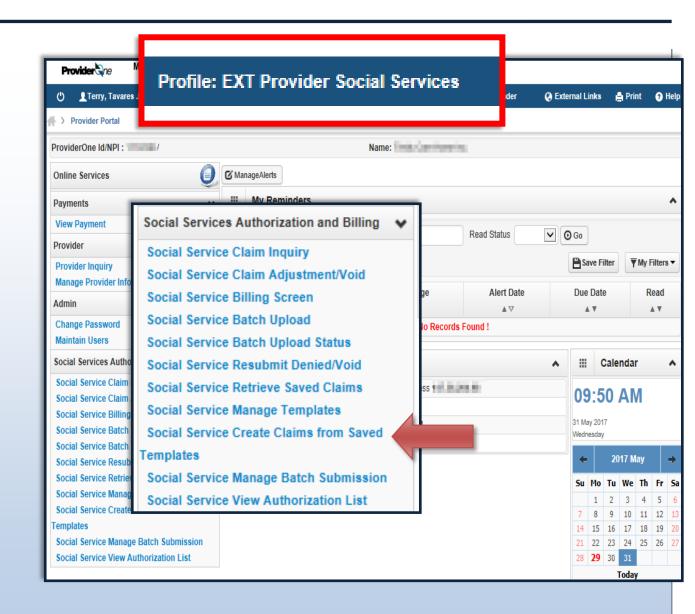
### Creating Social Service Templates Provider

# **Submitting Claims from Saved Templates**

## Department of Social Submitting Claims from Saved Templates Provider & Health Services

As previously mentioned, claims cannot be submitted from the 'Social Service Manage Templates' field.

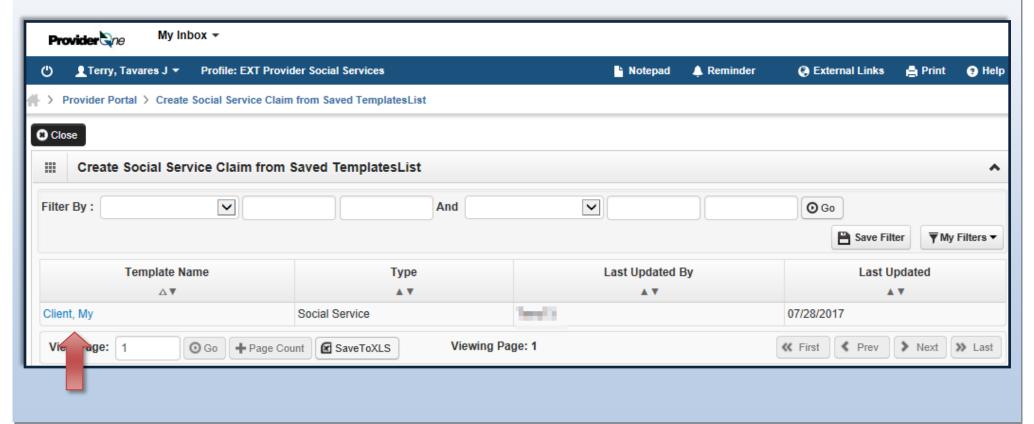
To submit claims using the templates you have saved, first log in to ProviderOne using the 'EXT Provider Social Services' profile. Then select 'Social Service Create Claims from Saved Templates'



The 'Create Social Service Claim from Saved Templates List' appears.

Here you will see the names of all your templates. Take note that the template names are blue hyperlinks. When selected, they will load the information of the saved template.

To continue, click the blue hyperlinked template name.



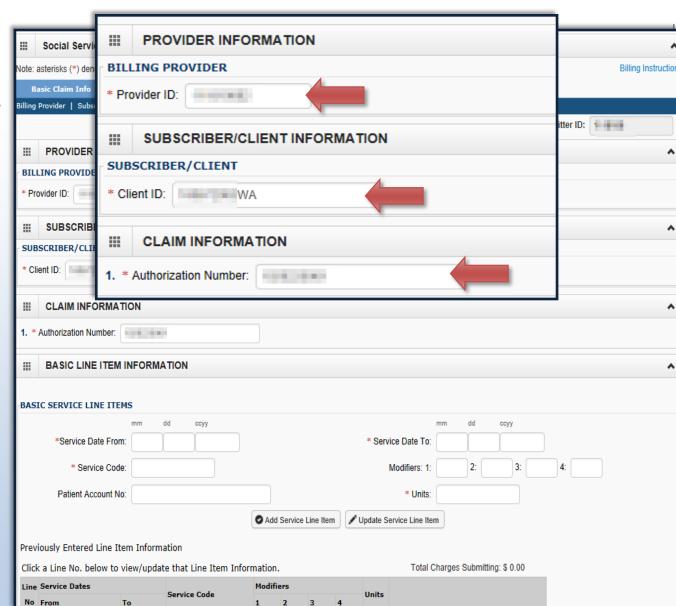
## Department of Social Submitting Claims from Saved Templates Provider & Health Services

You will now see the saved information the corresponds to the chosen template.

#### This will include:

- Provider ID.
- Client ID,
- **Authorization Number.**

Next, enter the 'Basic Line Item Information' data the same as if submitting a basic bill. (see next pg.)



## Department of Social Submitting Claims from Saved Templates Provider & Health Services

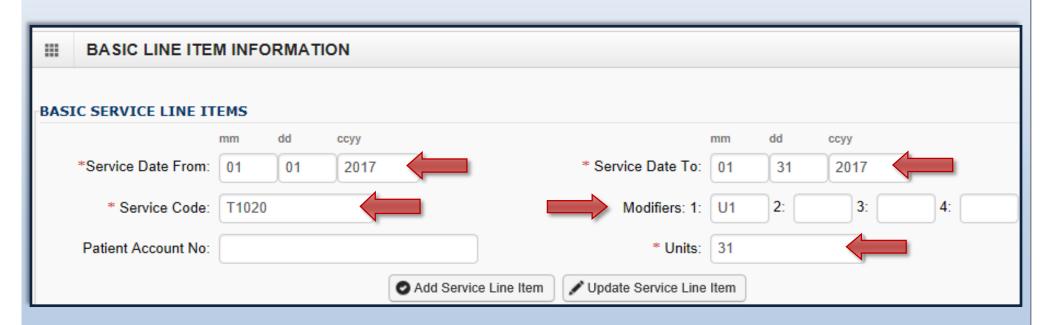
Under 'Basic Line Item Information' fill out the following information:

- Enter 'Service Date From',
- Enter 'Service Date To',
- Enter 'Service Code',
- Enter 'Modifier' (if applicable),
- Enter 'Units'.

#### Note:

You must turn off your pop-up blocker before you begin billing.

Asterisks (\*) denote required fields.



## Department of Social Submitting Claims from Saved Templates Provide & Health Services

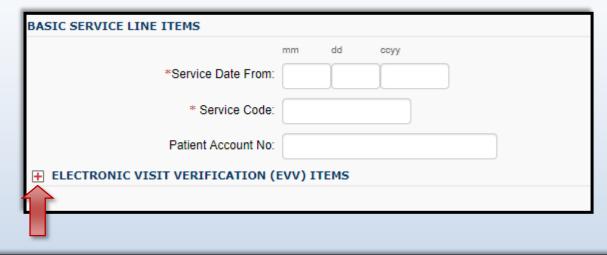
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#### **Electronic Visit Verification (EVV) Items:**

If you are billing for a Home Care Agency or Consumer Directed Employer providing personal care services to independent living clients then EVV information is required to be submitted with your claims. Click on the red + to expand this section.

#### Note:

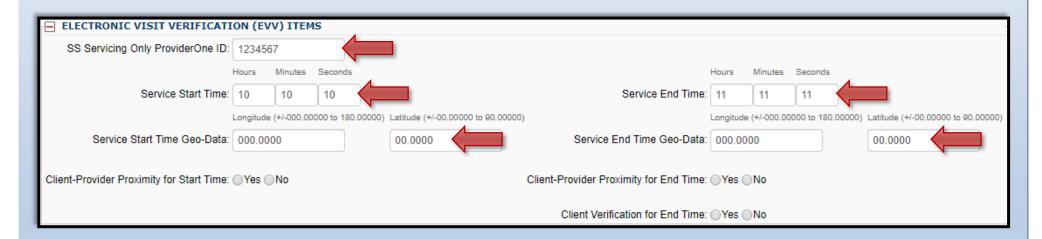
If you are not billing for a Home Care Agency or Consumer Directed Employer providing personal care services to independent living clients, please refer skip pages 22, 23, and 24 then resume on page 25.



E ELECTRONIC VISIT VERIFICATION (EVV) ITEMS								
SS Servicing Only ProviderOne ID:								
Hours Minutes Seconds	Hours Minutes Seconds							
Service Start Time:	Service End Time:							
Longitude (+/-000.00000 to 180.000	00) Latitude (+/-00.00000 to 90.00000) Longitude (+/-000.00000 to 180.	.00000) Latitude (+/-00.00000 to 90.00000)						
Service Start Time Geo-Data:	Service End Time Geo-Data:							
Client-Provider Proximity for Start Time:   Yes  No	Client-Provider Proximity for End Time:   Yes  No							
	Client Verification for End Time:   Yes  No							

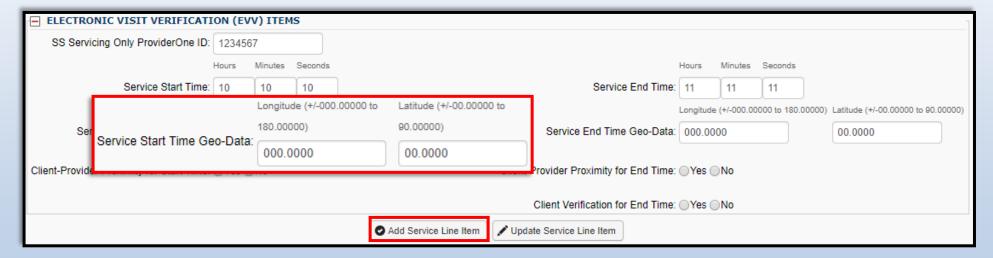
### Department of Social Submitting Claims from Saved Templates Provide & Health Services

- In order to meet the Cures Act requirements, these fields are required:
  - ⇒ SS Servicing Only ProviderOne ID,
  - ⇒ Service Start/End Time.
  - ⇒ Service Start/End Time Geo-Data.
- These fields are optional at this time:
  - ⇒ Client-Provider Proximity for Start/End Time, this refers to if your EVV solution verifies that the provider and the client are nearby at the time the service starts/ends, such as through location technology or an affixed electronic device at the client's location.
  - ⇒ Client Verification for End Time, this refers to if your EVV solution includes having the client verify that the service was performed at the end of the service episode.



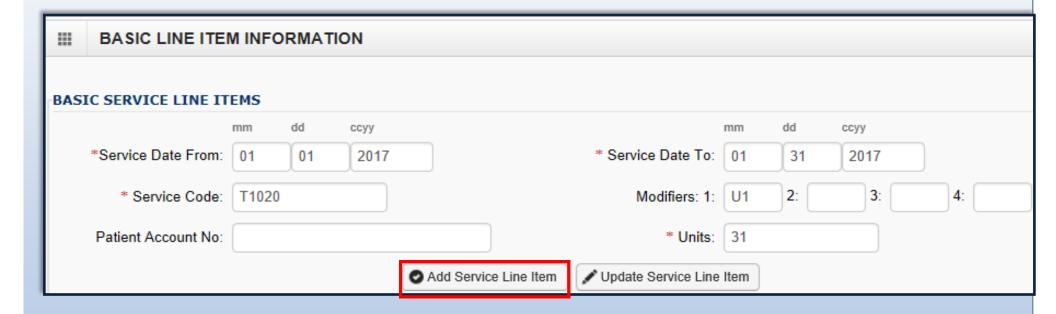
#### **Notes about Geo-Data:**

- All Geo-Data entries must be entered to at least 4 decimal places.
- Geo-Data is required if the Service Start/End Time is at the client's home.
- Geo-Data is optional if the Service Start/End Time is in the community, however, your claim will be denied if either of these fields are left blank.
  - ⇒ Please include the generic Longitude/Latitude values of 000.0000 and 00.0000 if you do not capture Geo-Data in the community.



## Department of Social Submitting Claims from Saved Templates Provider & Health Services

Once all billing information is entered, select 'Add Service Line Item'.



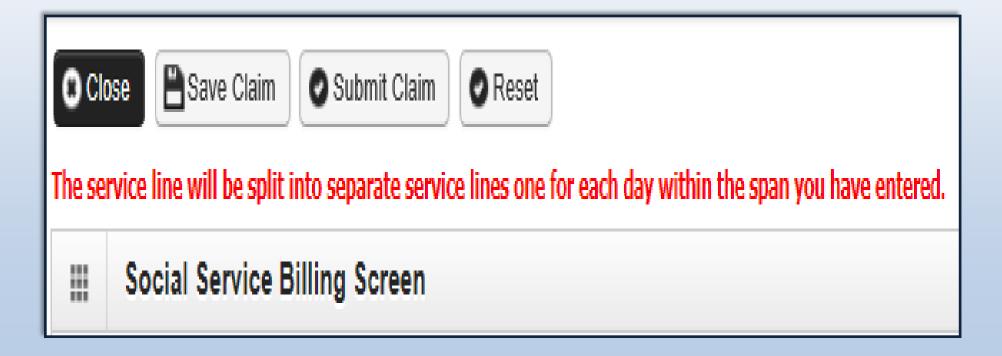
## Department of Social Submitting Claims from Saved Templates Provided & Health Services

ProviderOne will display a message in red that says:

The service line will be split into separate service lines; one for each day within the span you have entered. (This is only applicable when submitting more than one Date of Service for service codes with the **DAILY** unit type.)

#### Note:

ProviderOne will display instructional information before this message if any data entered is incorrect, i.e., Provider ID, Client ID, Authorization Number; or if Service Date To is earlier than Service Date From. Correct data per the message and continue.



### Department of Social Submitting Claims from Saved Templates Provide & Health Services

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The 'Basic Service Line Items' section clears. This allows entry of any subsequent service lines before submitting your claim, i.e., billing for multiple months.

#### Additional service lines must be for the same authorization. Different service codes are allowed if they are from the same authorization.

A claim service line appears under 'Previously Entered Line Item Information'. The claim service line will show service dates, service code and modifier, as well as units entered. The total charges submitted will also be available to view.

#### Check the line information for accuracy.

BASIC SERVICE LINE ITEMS														
	mm	dd	ссуу	mm dd ccyy										
*Service Date	From:			* Service Date To:										
* Service	* Service Code: 2: 3: 4:						4:							
Patient Accou	Patient Account No: * Units:													
	Add Service Line Item  Dydate Service Line Item													
Previously Entered	l Line Item I	Informatio	n											
Click a Line No. be	Click a Line No. below to view/update that Line Item Information.  Total Charges Submitting: \$ 5398.03													
Line Service Dates		Service Co	nde	Modifiers			Units							
No From	То	Service Co	oue	1	2	3	4	Onics				/		
1 01/01/2017 (	01/31/2017	T1020		U1				31	Delete			1		

## Department of Social Submitting Claims from Saved Templates Provider & Health Services

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To enter additional service lines there are two options.

#### Option 1:

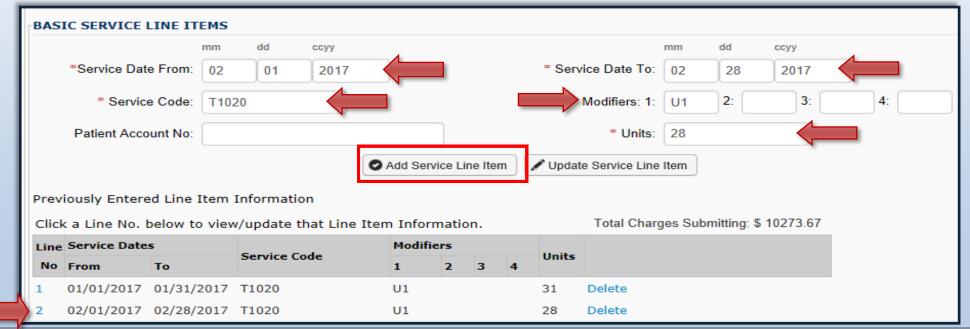
- Enter basic service line information in the cleared fields
  - ⇒ Service Date From/To,
  - ⇒ Service Code.
  - ⇒ Modifier,
  - ⇒ Units.

#### Note:

Each line must be for the **same authorization number**. Different service codes can be used as long as they are from the same authorization number.

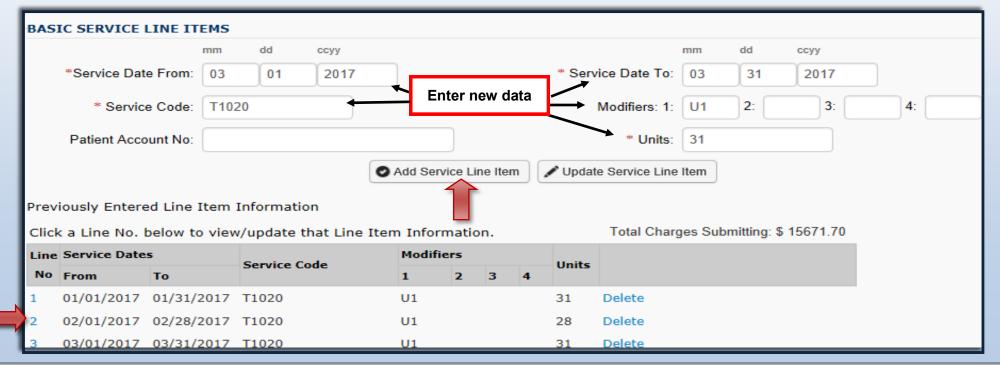
You can add up to 31 service lines per claim.

Click on 'Add Service Line Item'. (The new service line appears; shown below as line #2.)



#### **Option 2:**

- Click on a service line number,
- The entered service line information populates,
- Enter new data,
- Click on 'Add Service Line Item'.
- New service line appears. (Shown below as line #3.)



#### **Editing a Service Line:**

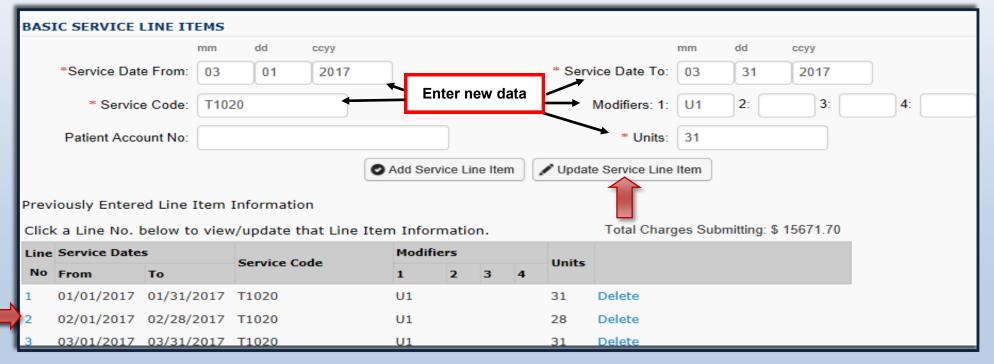
You may see the information previously entered has an error. To correct the data so that the service line is correct:

- Select the line number you wish to edit,
- The service line data appears,
- Make the needed correction to the service line data,

#### Note:

The new data you have entered will now be shown on the chosen line. (Shown below as line #2.)

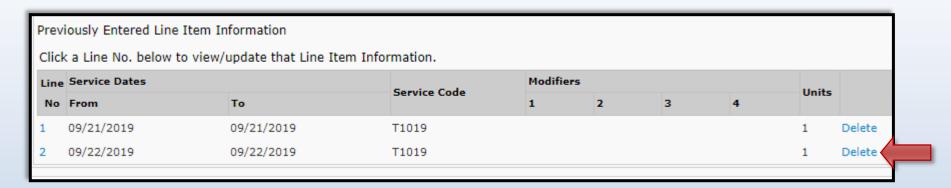
Now select 'Update Service Line Item'.



#### **Deleting a Service Line:**

You may have need to remove a previously added service line. To remove the service line:

- Determine which line needs to be deleted in the 'Previously Entered Line Item Information' section,
- Click 'Delete' at the end of the line you wish to remove,



• The line disappears from the claim.

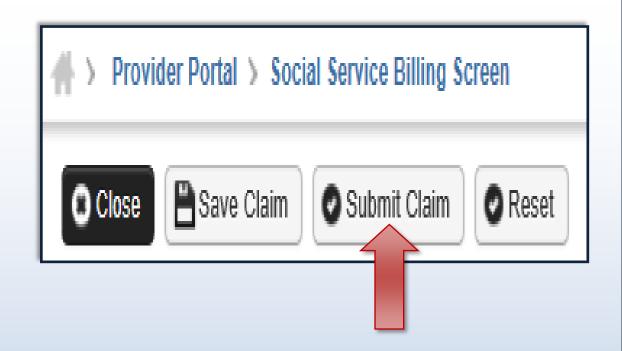
Line	Service Dates From	Service Code	Modifie	Modifiers					
No	From	То	Service Code	1	2	3	4	Units	
1	09/21/2019	09/21/2019	T1019					1	Delete

## Department of Social Submitting Claims from Saved Templates Provider & Health Services

Once all service line information is entered and checked for accuracy, click 'Submit Claim' at the top of the screen.

Your pop-up blockers must be turned off to allow the Claim Detail screen to appear.

If the pop-up blockers are not turned off the screen will flash and no pop-up will appear, making it impossible to complete billing.



## Department of Social Submitting Claims from Saved Templates Provider & Health Services

With the pop-up blockers turned off, select 'Submit Claim'. The 'Submitted Social Service Claim Details' screen appears.

Here you will see the TCN, Provider ID, Client ID, Date of Service and Total Claim Charge.

#### Note:

'No Records Found!' refers to attachments such as backup documentation. Social Service providers will not add attachments.

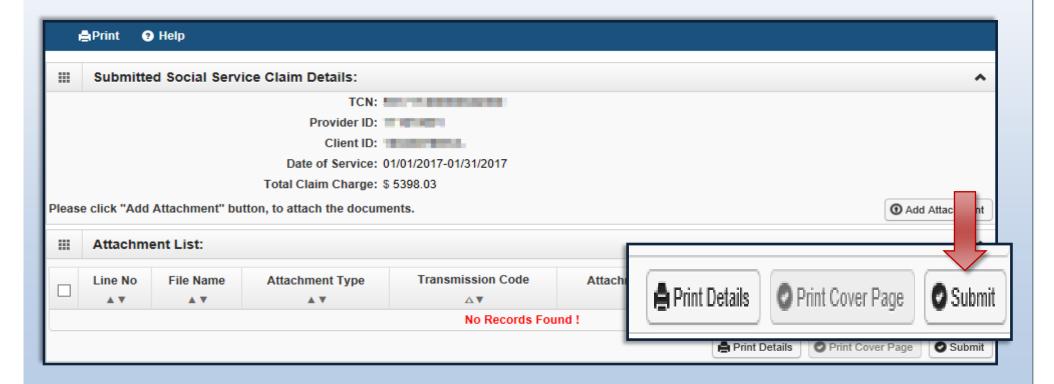


### Department of Social Submitting Claims from Saved Templates Provider & Health Services

When you see the 'Submitted Social Service Claim Details' screen you may want to record the information. You may print, print to a file on your machine or record this information in another manner.

#### \*\*\*However, your claim has not yet been submitted\*\*\*

To submit the claim, you must click on the 'Submit' button (located in the bottom right corner of the page) to complete the claims submission and send the claim to ProviderOne for processing.





## Common Adjustment & Denial Codes Provider



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Below is a short list of common Adjustment Reason and Remarks Codes you may find on your Remittance Advice (RA)

RA adjustment reason/remark code/description	Possible causes	Provider action
142- Monthly Medicaid patient liability amount.	Client responsibility (participation) applied to the claim	You must collect this amount from the client
198- Precertification/authorization exceeded	Social Service Authorization Approved Units have already been claimed	Contact your case worker if you question the number of units authorized
16-Claim/service lacks information or has submission/billing error(s) which is needed for adjudication	Claimed dates of service are not within the authorization period     The authorization line is in error	Contact your case worker if you have questions about the authorization dates     Contact your case worker if you have questions about authorization errors
18- Exact duplicate claim/service	Claimed the same units on two different lines for the same day, or     Claim is an exact duplicate of one already submitted	Adjust the claim and report the number of units on a single claim line     No action is needed if duplication was unintended.
177-Patient has not met the required eligibility requirements	The client is not financially eligible	Contact your case worker if you have questions
A1-Claim/Service denied	The authorization is in cancelled status	Contact your case worker if you have questions
B7-This provider was not certified/eligible to be paid for this procedure/service on this date of service	Your contract may be expired.	Contact your contract manager or case worker if you have questions
N54-Claim information is inconsistent with pre-certified/authorized services	Authorization line is in error	Contact your case worker if you have questions
N63-Rebill services on separate claim lines	A separate claim line is required for each date of service for the service/procedure code entered	If you are billing quarter hour units or for each unit types, do not use a date span (example: 1/1/2015 to 1/31/2015) to bill. Adjust the claim to reflect separate claim lines for the date of service for each service provided and resubmit claim
N362 : The number of Days or Units of Service exceeds our acceptable maximum	Too many units claimed. Example: Provider billed two units on monthly units or provider billed two units on daily units with one day date span	Change the number of units to the correct amount and resubmit your claim