



Unified Business System Provider Training

Presented By:
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June 2018

OVERVIEW

- Authorization and Payment
- Specialized Processes
- Provider Portal
- Claims Submission
- Provider Support

AUTHORIZATION & PAYMENT

- All services require prior authorization
- IDT Staff complete a referral form for every authorized service (see example on next slide)
 - IDT staff send referral form to both provider and Inclusa authorization entry staff
 - Authorization entry staff enter authorization information into clinical business system in 2-3 business days
 - Authorization information is updated between the Inclusa Authorizations System and the Inclusa Provider Portal at 7:00 am, 1:00 pm, & 7:30 pm each day
 - New and changed authorizations are transmitted daily to WPS (Processes Claims for Inclusa)

EXAMPLE OF PROVIDER REFERRAL

[ProviderName] Referral & Authorization Form				
Member Information				
Name (Last, First, MI)		Date of Birth	Phone Number	
Address		City	State	Zip
Pets in Home	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, type of pet:		
Smoker in Home	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Allergies (list):		Others in Home:		
Emergency Contact Name (Last, First, MI)		Phone	Guardian/Activated Power of Attorney for Health Care Name (Last, First, MI) Phone	
Clinical Information				
Hospital of Choice		Primary Physician	Psychiatrist	
Related Diagnosis/Symptoms				
Additional Information				
Insurance Information				
Medicaid Number		Medicare Number	Other Insurance Coverage Name: Contact Info: Policy #:	
Authorization Information				
Date of Referral		<input type="checkbox"/> New Referral <input type="checkbox"/> Updated Referral <input type="checkbox"/> SDS Service		
Vendor #	Provider Name		Authorization Comments:	
SPC	Service Start Date	Service End Date	Units	Frequency
For single authorization referrals, SPC included in the form creation, for multiple authorization referrals, SPC will be a field to enter for the referral with multiple rows to enter more than one SPC and any SPC specific authorization fields				
WWC Social Worker/Care Manager Name (Last, First)		Phone	WWC Nurse Name (Last, First)	Phone
Reason for Referral (Identified goal/outcome)				
Referral Comments (Special instructions/safety)				
Referral Specific Information				



AUTHORIZATION INFORMATION

- One code per authorization
- Authorizations begin with 100000
 - Example: 10000012345 – you must submit your claims with ALL of the numbers
- Member's care plan (MCP) is reviewed every 6 months which will generate new authorizations
- Authorizations are generally for a 7 month period with the exception of:
 - DME Rentals (authorization is for the entire rental period)
 - Nursing Home (authorization is from July through June)
 - AFH/CBRF/RCAC (authorization is from January through December)

AUTHORIZATION & PAYMENT

- Portal and “how to bill” questions- Contact Includa Provider Customer Service
 - Telephone: 888-544-9353
 - Email: customerservice@includa.org
- Authorization specific questions – Contact the care management team
- Claim status questions – Contact WPS
 - Family Care Contact Center: 800-223-6016

THERAPIES: Z CODE PACKAGES

- Packages cover all therapy services – PT, OT, ST, MH, AODA, CSP, and Rehab
- Packages are divided by type of therapy, rate type, and unit type
- Contracts will reflect Z code packages
- For services authorized as general Z code packages – claims must be submitted with specific procedure codes including modifiers listed within the package
- If billed code is not within authorized Z code package, the claim will be denied
- Additional information is available on the Resources page in the Provider Portal and on the Inclusa website
- Current specialized processes will end with June 30 dates of service
 - Providers will no longer need to send claims to the Stevens Point office

THERAPIES: Z CODE PACKAGES



Z Code Packages 2018 Final

Z Package	Rate Type	Authorization Code Description	Billing Code Allowed (HCPC, CPT, or Revenue)	MOD1	MOD2	SPC	SPC SUB	UOM
Z1000	C49	PACKAGE PHYSICAL THERAPY - 15 MINUTES	90901	GP	TF	507	11	15M
		PACKAGE PHYSICAL THERAPY - 15 MINUTES	90901	GP		507	11	15M
		PACKAGE PHYSICAL THERAPY - 15 MINUTES	93797	GP		507	11	15M
		PACKAGE PHYSICAL THERAPY - 15 MINUTES	93798	GP		507	11	15M
		PACKAGE PHYSICAL THERAPY - 15 MINUTES	94667	GP		507	11	15M
		PACKAGE PHYSICAL THERAPY - 15 MINUTES	94668	GP	TF	507	11	15M
		PACKAGE PHYSICAL THERAPY - 15 MINUTES	94668	GP		507	11	15M
		PACKAGE PHYSICAL THERAPY - 15 MINUTES	97001	GP		507	11	15M
		PACKAGE PHYSICAL THERAPY - 15 MINUTES	97002	GP		507	11	15M
		PACKAGE PHYSICAL THERAPY - 15 MINUTES	97012	GP	TF	507	11	15M
		PACKAGE PHYSICAL THERAPY - 15 MINUTES	97012	GP		507	11	15M
		PACKAGE PHYSICAL THERAPY - 15 MINUTES	97016	GP	TF	507	11	15M
		PACKAGE PHYSICAL THERAPY - 15 MINUTES	97016	GP		507	11	15M
		PACKAGE PHYSICAL THERAPY - 15 MINUTES	97018	GP	TF	507	11	15M
		PACKAGE PHYSICAL THERAPY - 15 MINUTES	97018	GP		507	11	15M
		PACKAGE PHYSICAL THERAPY - 15 MINUTES	97022	GP	TF	507	11	15M
		PACKAGE PHYSICAL THERAPY - 15 MINUTES	97022	GP		507	11	15M
		PACKAGE PHYSICAL THERAPY - 15 MINUTES	97024	GP	TF	507	11	15M
		PACKAGE PHYSICAL THERAPY - 15 MINUTES	97024	GP		507	11	15M
		PACKAGE PHYSICAL THERAPY - 15 MINUTES	97026	GP	TF	507	11	15M
		PACKAGE PHYSICAL THERAPY - 15 MINUTES	97026	GP		507	11	15M
		PACKAGE PHYSICAL THERAPY - 15 MINUTES	97028	GP	TF	507	11	15M
		PACKAGE PHYSICAL THERAPY - 15 MINUTES	97028	GP		507	11	15M
		PACKAGE PHYSICAL THERAPY - 15 MINUTES	97032	GP	TF	507	11	15M
		PACKAGE PHYSICAL THERAPY - 15 MINUTES	97032	GP		507	11	15M
		PACKAGE PHYSICAL THERAPY - 15 MINUTES	97033	GP	TF	507	11	15M
		PACKAGE PHYSICAL THERAPY - 15 MINUTES	97033	GP		507	11	15M
		PACKAGE PHYSICAL THERAPY - 15 MINUTES	97034	GP	TF	507	11	15M
		PACKAGE PHYSICAL THERAPY - 15 MINUTES	97034	GP		507	11	15M
		PACKAGE PHYSICAL THERAPY - 15 MINUTES	97035	GP	TF	507	11	15M
		PACKAGE PHYSICAL THERAPY - 15 MINUTES	97035	GP		507	11	15M
		PACKAGE PHYSICAL THERAPY - 15 MINUTES	97036	GP	TF	507	11	15M
		PACKAGE PHYSICAL THERAPY - 15 MINUTES	97036	GP		507	11	15M
		PACKAGE PHYSICAL THERAPY - 15 MINUTES	97039	GP	TF	507	11	15M
		PACKAGE PHYSICAL THERAPY - 15 MINUTES	97039	GP		507	11	15M



PHARMACIES: OTC ITEMS

- Over the counter (OTC) items will be grouped into a budget amount for the period of the authorization
- All OTC items will be authorized with procedure code T1999
- **All OTCs with the same dispensing date should be combined and billed on one line to WPS**
- Medicaid items will be authorized separately using the applicable procedure codes
- Pharmacies are responsible to ensure only authorized items are dispensed to members

TRANSPORTATION

- WPS Business rules for billing
- Applicable to Transportation providers that have both a “trip” and a “mileage” service code
- Utilizes either Electronic Data Information (EDI) or paper claim submission method
- Allows providers to bill for all miles associated with each authorized trip

SUPPORTED EMPLOYMENT

- Inclusa utilizes an outcome based model to reimburse providers for services
- Currently services are authorized through “Z” codes
- As of July 1, services will be authorized with “Y” codes

MEMBER ABSENCE NOTIFICATION

- A temporary absence is defined as absences that occur where the member does not return in 24 hours
- This is applicable to:
 - All residential providers (AFH, CBRF, RCAC)
 - CSL
 - SHC Days
- Exceptions
 - Visits with family
 - Vacations (less than 14 calendar days)
 - Camp Attendance

MEMBER ABSENCE NOTIFICATION FORM - RESIDENTIAL

Available on the
 Provider>Resources
 page at
www.Inclusa.org



**Member Absence Notification Form
Residential Care**

Residential Provider: _____

Complete all areas needed and send all notification forms via fax or email. Fax to: 608-785-6315 or email to: absenceandchangereporting@inclusa.org. Please use one form per member.

This section must be completed and submitted to Includa within 24 hours of absence, or by Monday morning if absence occurs during weekend/holiday hours, if the member does not return within 24 hours.

Exceptions to reporting an absence include visits with family, vacations, or camp attendance that is less than 14 calendar days in length. All other absences must be reported.

Date Completed:	_____
Member Name:	_____
Provider Name:	_____
Facility/Home Name:	_____
Community Resource Coordinator:	_____
Health & Wellness Coordinator:	_____
Submitted By:	_____
Submitter Phone Number:	_____

Date member left residence: _____

Reason for leaving: _____

Expected Length of Absence (select one): _____

2 weeks or less
 Longer than 2 weeks
 Permanent
 Unknown

Date of return to residence, if known: _____

*Internal Directions: Receptionist sends form to AES. *Hospitalizations greater than 10 days require a Family Care Change Form submitted to the Change Routing Form mailbox.*

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5/10/2018
Member Absence Notification Form – Residential Care
Page 1 of 1



INCLUSA PROVIDER PORTAL WEBSITE PAGE

- Visit our Provider Portal page at <https://www.inclusa.org/providers/provider-portal/> to access:
 - Provider portal administrator application
 - Complete online or on a printable PDF
 - Provider portal login
 - Legacy CCCW Central Region/CareDirector portal for services prior to 7/1/18

INCLUSA PROVIDER PORTAL WEBSITE PAGE

Call Us Today! 877-622-6700 | info@inclusa.org

[FIND A PROVIDER](#) [CONTACT US](#)

 [About](#) [Members & Family](#) [Providers](#) [Commonunity®](#) [Q](#)

Provider Portal

Home / Providers / Provider Portal

The Inclusa Provider Portal gives you convenient access to authorization information, including the details you need to complete your claims. You can also use the portal to confirm your authorizations per state and federal requirements.

- [Inclusa Provider Portal Login](#)
- [Portal Administrator Application Form \(Complete Online\)](#)
- [Portal Administrator Application Form \(printable PDF\)](#)
- Customer Support: customerservice@inclusa.org or 1-888-544-9353

[Click here for the Legacy CCCW Central Region/CareDirector portal.](#) See our [Business System Transition](#) page for portal transition updates and resources.

[Business System Transition](#)

[Claims & Billing](#)

[Contracting](#)

[External Links](#)

[Provider Partners](#)

[Provider Portal](#)

[Resources](#)

[Restrictive Measures & Client Rights](#)



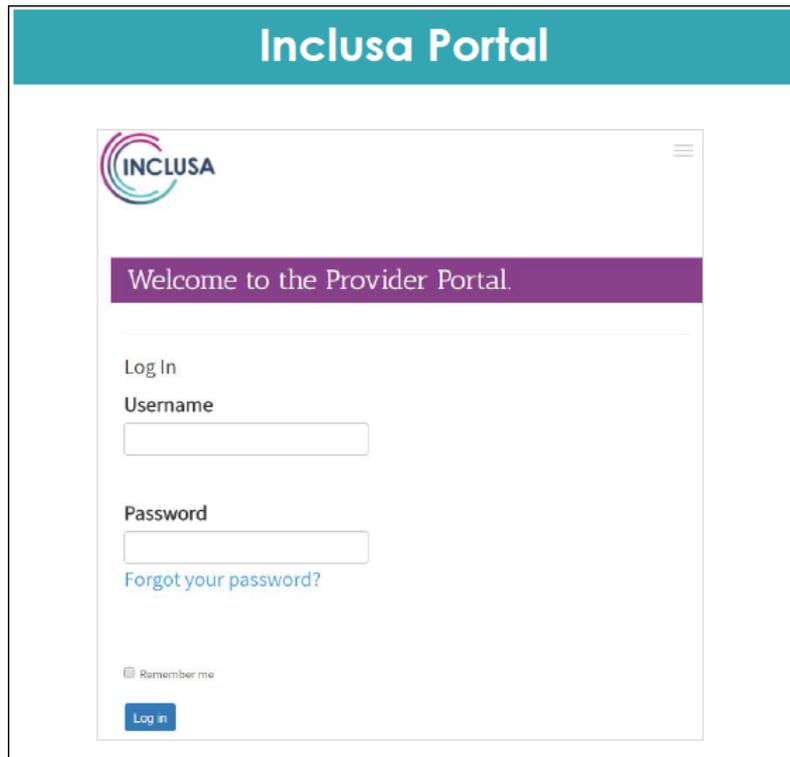
PROVIDER PORTAL

- Provider's Portal Administrator maintains user access and permissions within the Manage User settings tab
- Multiple provider staff can have access
- Providers must confirm authorizations prior to submitting claims
- User can export authorizations to a report in Excel as well as single authorizations in a PDF format

PORTAL COMPARISON

Login to the Inlusa portal for
dates of service on and after
07/01/18

<https://providerportal.inlusa.org>



The screenshot shows the Inlusa Portal login page. At the top, there is a teal header with the text "Inlusa Portal". Below the header is the Inlusa logo. A purple banner reads "Welcome to the Provider Portal." The main content area has a "Log In" section with fields for "Username" and "Password". Below these fields is a link for "Forgot your password?". At the bottom left, there is a "Remember me" checkbox and a "Log in" button.

Login to the CareDirector portal for
dates of service on and before
06/30/18

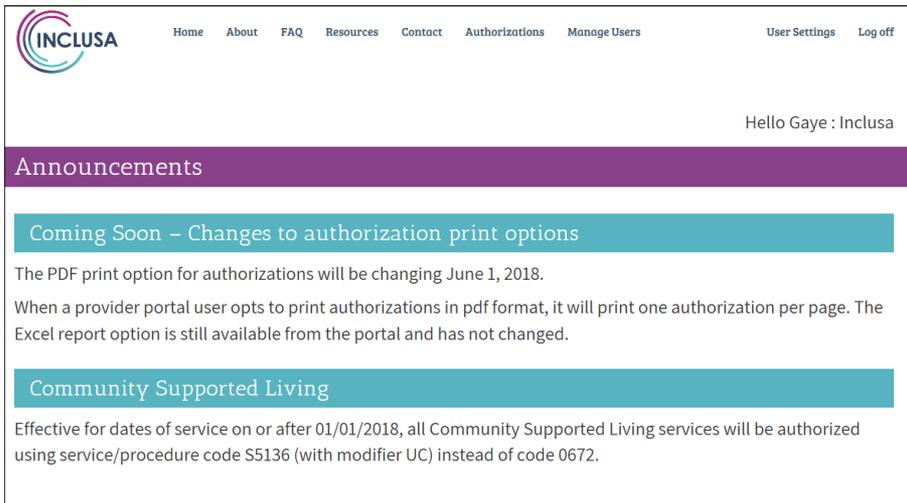
<https://providerportalcccw.crmhosts.net>



The screenshot shows the CareDirector Portal login page. At the top, there is a dark blue header with the text "CareDirector Portal". Below the header is the Inlusa logo. A navigation bar contains links for "Home", "About", "FAQ", "Contact", and "Announcements". The main content area has a "Welcome to the Central Region (CareDirector) Portal" message. There is a section for "Important News about this Portal" with a detailed update about the system transition. To the right, there is a "Provider Login" section with fields for "E-mail" and "Password", a "Forgot Password" link, and a "Login" button.

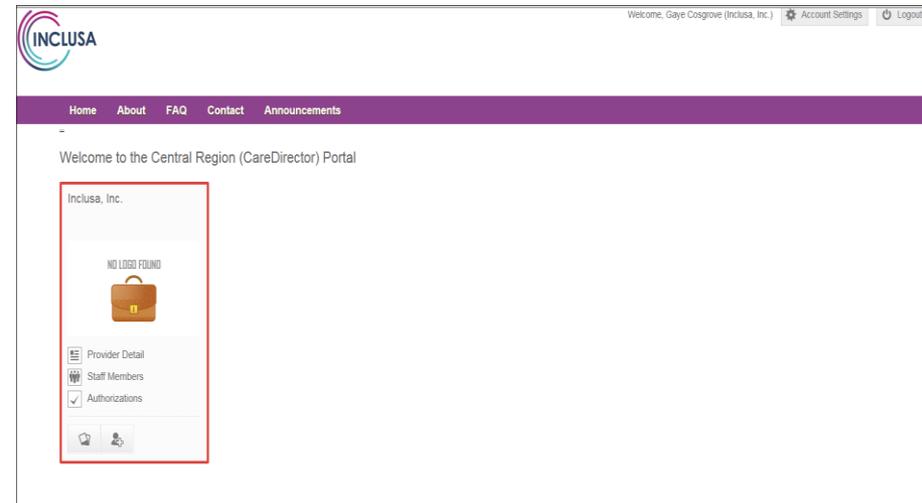
PORTAL COMPARISON – HOME PAGE

Inclusa Portal



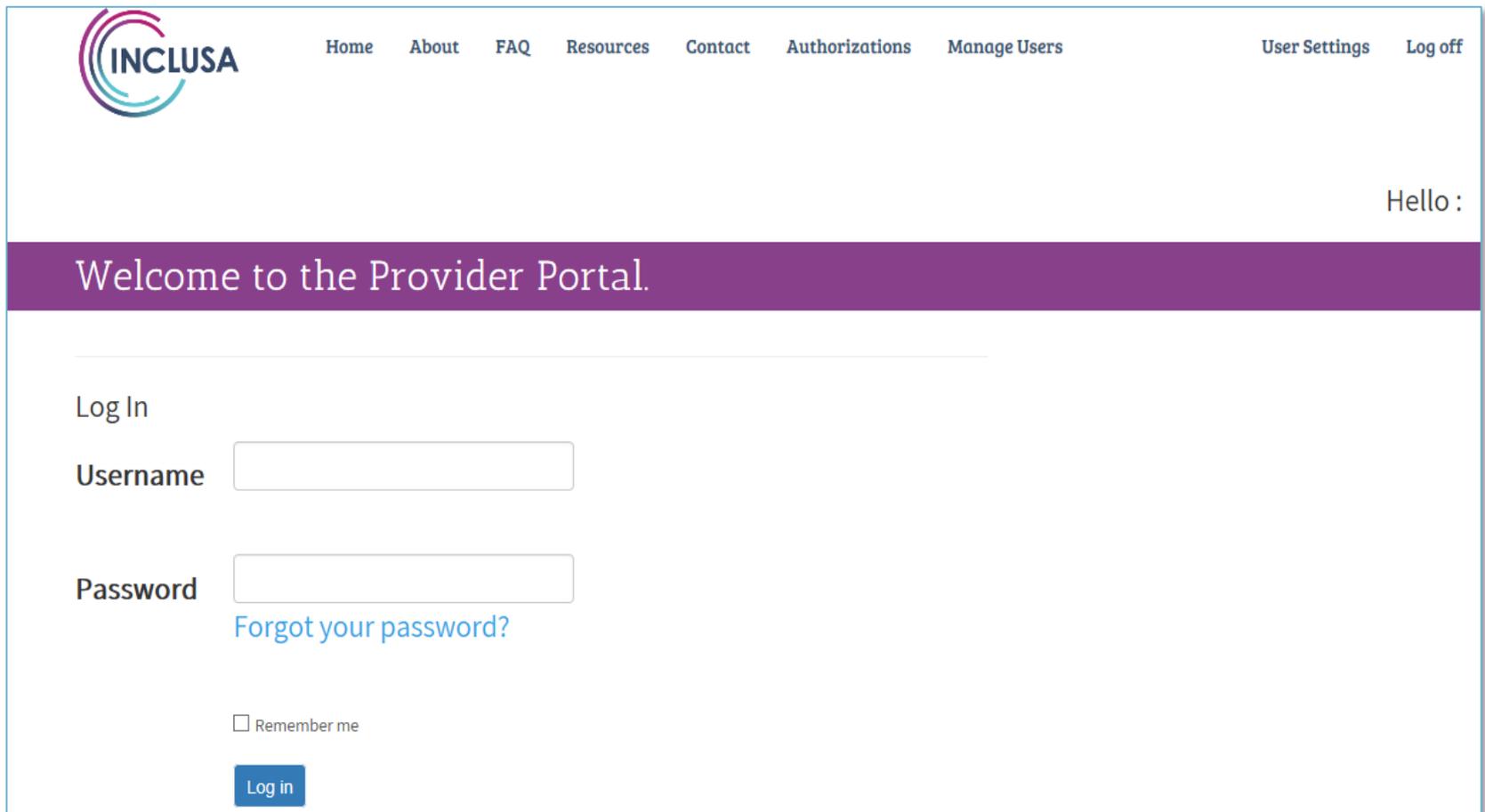
The screenshot shows the Inclusa Portal home page. At the top left is the INCLUSA logo. The navigation menu includes Home, About, FAQ, Resources, Contact, Authorizations, and Manage Users. On the right side, there are links for User Settings and Log off. Below the navigation, it says "Hello Gaye : Inclusa". A purple banner labeled "Announcements" contains a teal box with the text "Coming Soon – Changes to authorization print options". Below this, a paragraph states: "The PDF print option for authorizations will be changing June 1, 2018. When a provider portal user opts to print authorizations in pdf format, it will print one authorization per page. The Excel report option is still available from the portal and has not changed." Another teal box labeled "Community Supported Living" contains the text: "Effective for dates of service on or after 01/01/2018, all Community Supported Living services will be authorized using service/procedure code S5136 (with modifier UC) instead of code 0672."

CareDirector Portal



The screenshot shows the CareDirector Portal home page. At the top left is the INCLUSA logo. The navigation menu includes Home, About, FAQ, Contact, and Announcements. On the right side, there are links for "Welcome, Gaye Cosgrove (Inclusa, Inc.)", Account Settings, and Logout. Below the navigation, it says "Welcome to the Central Region (CareDirector) Portal". A red box highlights a search area with the text "Inclusa, Inc." and "NO LOGS FOUND" above a briefcase icon. Below this, there is a list of items: "Provider Detail", "Staff Members", and "Authorizations" (which has a checkmark). At the bottom of the list are icons for a person and a group of people.

PROVIDER PORTAL (INTRO AND FIRST LOG IN VIDEO)



The screenshot shows the INCLUSA Provider Portal login interface. At the top left is the INCLUSA logo. The top navigation bar includes links for Home, About, FAQ, Resources, Contact, Authorizations, Manage Users, User Settings, and Log off. On the right side, there is a 'Hello :' greeting. A purple banner below the navigation bar reads 'Welcome to the Provider Portal.' The main content area features a 'Log In' section with input fields for 'Username' and 'Password'. Below the password field is a blue link for 'Forgot your password?'. At the bottom left of the login section is a checkbox labeled 'Remember me' and a blue 'Log in' button.

 Home About FAQ Resources Contact Authorizations Manage Users User Settings Log off

Hello :

Welcome to the Provider Portal.

Log In

Username

Password

[Forgot your password?](#)

Remember me

PROVIDER PORTAL SECTIONS

- **Home Page:**
 - The Home page will contain Inlusa announcements
- **About Page:**
 - The About page contains information about Inlusa
- **FAQ Page:**
 - The Frequently Asked Questions page will contain valuable information and resources for users
- **Contact Page:**
 - The Contact page contains Inlusa’s contact information for the Provider Portal, Inlusa customer service, and WPS EDI Customer Service and Contact Center
- **Resources Page:**
 - The resources page contains information regarding different processes as well as training videos for the provider portal.
- **Authorizations Page:**
 - The Authorization page will contain authorizations the logged in user has permissions to view
 - A user will ONLY be able to view authorizations for their organization based on their assigned User Group permissions
- **User Settings:**
 - The User settings page allows users to change their password

PORTAL COMPARISON – CONFIRMING AUTHORIZATIONS

Inclusa Portal

- Authorizations that have not been confirmed will not appear on the Authorizations page
- A Provider Authorization Confirmation box will be shown at the top of the Authorizations page
- Only staff authorized to confirm authorizations will be able to do so

CareDirector Portal

- Authorizations are confirmed with an electronic signature each time provider user selects "Authorizations" on the home portal page

PORTAL COMPARISON – CONFIRMING AUTHORIZATIONS

Inclusa Portal

Provider Authorization Confirmation

004 has 236 authorizations that require confirmation. Authorizations that are unconfirmed will not be visible on this page.

[View Unconfirmed Authorizations](#)

CareDirector Portal

Message from webpage

 Selecting this box serves as an electronic signature, attesting to the following statement, as a contracted CCCW provider:
In acceptance of this service authorization, it indicates receipt of the detailed authorization that describes the Member Centered Care Plan (MCP) components that are relevant to your services.

Furthermore, by submission of a claim for payment from CCCW, signifies that services have been provided as requested by the IDT, in support of the member's MCP.

AUTHORIZATION AND UNCONFIRMED AUTHORIZATIONS INSTRUCTIONS (VIDEOS)

INCLUSA Home About FAQ Resources Contact Authorizations Manage Users User Settings Log off

Inclusa has 0 authorizations that require confirmation. Authorizations that are unconfirmed will not be visible on this page.

[View Unconfirmed Authorizations](#)

Authorizations

Member Name: Start Date: to

SPC Code: End Date: to

WPS Status: Valid Between: and

[Filter](#) [Clear](#)

Authorization ID	WPS Status	First Name	MI	Last Name	Birth Date	SPC Code	SPC Description	Change Date	Revised	Date Confirmed
100000 [REDACTED]	Cancelled	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	60400	Care management & Support - Care Manager	12/30/2016	<input type="checkbox"/>	12/29/2016 12:30 PM

PDF AUTHORIZATION



3349 Church Street, Suite 1, Stevens Point, WI 54481 | 888-544-9353 | www.inclusa.org

Provider Servicing Information:
 [REDACTED]
 [REDACTED]
 [REDACTED]

Provider Billing Information:
 [REDACTED]
 [REDACTED]
 [REDACTED]

Member Name: Bugs Bunny
ID#: [REDACTED]
Facility:
Street Address:
Address Line 2: [REDACTED]

Date of Birth: 2/9/1992
Inclusa #: [REDACTED]
City: Rhinelander
State: WI **Zip:** 54501

Authorization For Services

Authorized on: 4/9/2018 **Authorization ID:** [REDACTED] **Revised Authorization**

Description: Physical Therapy – Visits Therapy Placeholder
 If more description is necessary it would go in this position in this style of type.

Note:
 PT visit twice weekly #8 visits monthly

Start Date	End Date	Service Code	Modifiers	Units Per Frequency	Frequency	Total Units	Unit Cost
5/1/2018	9/30/2018	97602	U9	8.00	Monthly	40	\$0.01

Total Cost: \$0.40

Community Resource Coordinator
 [REDACTED]
 715-420-[REDACTED]

Health and Wellness Coordinator
 [REDACTED]
 715-420-[REDACTED]

All services must be pre-authorized before payment will be made. The Authorization is valid provided the member is eligible for program at the time of services. Inclusa payments are based on the WI Medicaid fee-for-service, Medicare, contracted or negotiated rates.

If you have any questions, please contact the Inclusa Member Authorization Department at 1-888-544-9353, via fax 1-608-785-5336 or email customerservice@inclusa.org.

Additional billing information is on our website at www.inclusa.org. In acceptance of this service authorization, it indicates receipt of the detailed authorization that describes the Member Centered Plan (MCP) components that are relevant to your services. Furthermore, by submission of a claim for payment from Inclusa, signifies that services have been provided as requested by the IDT, in support of the member's MCP.

CLAIM SUBMISSION REMINDERS

- WPS (our TPA) processes Inclusa Claims
- 3 options for claims submission
 1. EDI (Electronic Data Interchange)
 - Faster payments, verification of receipt, submission flexibility, etc.
 - Clearinghouse or PC-Ace
 - Dedicated EDI Helpdesk representatives
 2. Excel Spreadsheet
 - Multiple members on each spreadsheet, faster turnaround time, etc.
 - Microsoft Excel or Openoffice.org
 3. Paper
 - HCFA 1500, UB04, or CLI paper claim form
 - Data accuracy (legible, black/blue ink, data in appropriate fields)
 - Mailed to:
 - Family Care
 - c/o WPS Health Insurance
 - PO Box 211595
 - Eagan, MN

PORTAL DECOMMISSION

- Information in the CareDirector (Central) portal is valid through 06/30/18
- Any changes after 06/30/18 **will not** be reflected in the Central portal
 - Beginning 07/01/18, providers will receive mailed updates for any authorization changes for services on or before 06/30/18
- Central portal will be decommissioned as of 10/31/18
 - **No available access after that date**
 - Please download or print all authorizations details as needed for your business

POST JULY 1 PROVIDER SUPPORT

Additional provider support available post July 1

- One hour meetings available by appointment only
- Phone or video chat
 - July 30 – August 31
- In person meetings
 - Hayward – Tuesday, July 31
 - Rhinelander – Tuesday, August 7
 - Stevens Point – Tuesday, August 14
 - Janesville – Tuesday, August 21

POST JULY 1 PROVIDER SUPPORT



Inclusa Provider Portal Support

*For providers transitioning to the Inclusa Business System on 7/1/2018

Appointments Available
July 30 – August 31, 2018

Inclusa is offering additional support opportunities surrounding claim submissions, authorizations, and your provider portal account. Appointments will be made available to you with an Inclusa representative via phone, video chat, or in person at one of our office locations in Hayward, Rhinelander, Stevens Point, and Janesville. Please note that meetings are by appointment only, and we request a 72-hour advance registration.

Registration Details

Contact Laura Lambert at:

608-785-6212, or
Laura.Lambert@inclusa.org

Phone or Video Chat:

- July 30 – August 31
- Monday through Friday, 9:00 am – 3:00 pm
- One hour meetings by appointment only

In-Person Meetings:

- One hour meetings by appointment only between 9:00 am and 3:00 pm
- Hayward – Tuesday, July 31
 - Rhinelander – Tuesday, August 7
 - Stevens Point – Tuesday, August 14
 - Janesville – Tuesday, August 21

Reservations must be made no later than the Thursday prior to the Tuesday meetings

CONTACT US



CONTACT US

Thank you for taking the time to attend this training.
If there are any questions or comments, please feel free to contact us via any method listed below.



Address

3349 Church Street
Stevens Point, WI 54481



Phone

Provider Customer Service
1-888-544-9353



Email

customerservice@inclusa.org



Website

www.Inclusa.org

