BPA Frequently Asked Questions regarding October 1, 2013 Implementation Version date: 9/16/13

If you have a suggested question for the next FAQs, please email swoodley@bpahealth.com

1. Does BPA's role change on October 1, 2013?

The new contract resulted in many significant changes in BPA's role. The following represent some significant changes providers will see:

- a. BPA's primary role is to credential and manage the performance of a Statewide Substance Use Disorder Network that can be used by IDHW, IDOC, IDJC and the Supreme Court (ISC).
- b. BPA will continue to manage clients, utilization and claims payment for only certain populations. Here is a summary of who will conduct certain activities based on the state funding source (ex. IDHW Eligibility Screening will be conducted by BPA):

SUD Services						
	Network Management	Eligibility Screening	Initial Authorization	Continued Stay Review	Claims	
IDHW	BPA	BPA	BPA	BPA	BPA	
IDOC	BPA	IDOC	IDOC	BPA	BPA	
IDJC	BPA	IDJC	IDJC	IDJC	IDJC	
Courts	BPA	Courts	Courts	Courts	Courts	

- c. BPA will be combining the requirements of the Facility Approval Audits (previously performed by CASAT) into the BPA audits and site visits. The information collected by BPA during audits will be used by IDHW for the purposes of Facility Renewal for providers in the BPA network.
- d. BPA and providers will begin using WITS on October 1, 2013. Providers will receive authorizations and send claims to BPA in WITS (see question 2).

Although many significant changes are effective 10/1/13, the full contract is being implemented in phases through the rest of the calendar year. This will allow us to ensure we are meeting the Partners' objectives in a timeframe that allows the system to reasonably adapt.

2. How will the change work from BPA's eCura/Provider Connect to WITS?

The "cut off" for data being in one system or the other is the date that the service occurred. Services that occur on or before 9/30/13 will be authorized and paid for in the eCura/Provider Connect system. Services that occur on or after 10/1/13 will be authorized and paid for in WITS.

Additionally, it is important to note that BPA staff will start entering referrals and authorizations that will be effective 10/1/13 prior to that date. Please do not accept the referrals and authorizations in WITS from BPA until 10/1/13.

Providers should expect to utilize both systems until all 9/30/13 and earlier services are billed and paid. Provider Connect will be available for your use until approximately 11/30/13. We will notify providers before Provider Connect is inactive.

3. Do the October 1 changes apply to all populations?

No. It was recently determined that ATR WITS will not be available until approximately 11/1/13. Therefore, ATR clients (existing and new) will continue to be managed in the eCura/Provider Connect system through the month of October. This means authorizations, claims and GPRA interviews will be in eCura/Provider Connect. There will be no changes to GPRA processes for ATR clients until ATR WITS is active: providers will need to submit intake, follow up and discharge GPRAs via Provider Connect.

On 9/17/13, BPA began extending authorization for ATR clients. Any authorization ending 9/30/13 that was originally cut short for the WITS transition, will automatically be extended to the standard length. For example, if you received an authorization for assessment on 9/15/13, the standard end date (30 days) would have been 10/14/13 instead of 9/30/13, and it will be extended. If you received an authorization for assessment on 9/1/13, the standard end date would have been 9/30/13, and it will not be extended.

4. What parts of WITS should providers use starting 10/1?

Provider should plan to use WITS for all SUD client activities including:

- Accepting Referrals
- Accepting Authorizations
- Requesting Service Authorizations
- GAIN
- Program Enrollment
- Admission
- Treatment Plan (Service Plan)
- Encounters
- Miscellaneous Notes
- Billing Claims Batches
- Discharges

All areas except Treatment Plan (Service Plan) are required in WITS for claims to be processed.

5. What will be in WITS on October 1, 2013?

BPA is currently entering all active IDHW and IDOC clients into the WITS system. Beginning on approximately 9/19/13, BPA will enter authorizations for dates of services 10/1/13 and beyond. Any current authorizations that expire past 9/30/13 will be split, with BPA's eCura/Provider Connect system covering until 9/30/13 and WITS starting on 10/1/13.

BPA cannot guarantee that all authorizations will be in WITS on 10/1. Clients still admit into care or receive continuing authorizations every day, therefore it could take several days to get authorizations

that occur in the last few days of September entered into both systems. Please call BPA if you are unable to find an authorization in the WITS system as of 10/1/13.

6. What can I do to prepare for 10/1?

We recommend focusing on the WITS system. Anything you can do to ensure your staff is ready to use WITS will be helpful. Also, making sure any work that you have done in WITS for dates of service prior to 10/1/13 is fully processed will lessen any confusion related to dates of service. If dates of service through 9/30/13 are released to billing after 10/1/13, they will be denied in WITS by BPA. Providers must bill those dates of service through Provider Connect. Please refer to the IDHW document "Preparing for October 1, 2013" for more detail on preparing your WITS environment.

7. With all these changes, who do I call if I have questions or need help?

Getting questions answered quickly will be important during the initial transition period. To help facilitate this we want to point you in the right direction, but please remember you can call BPA's Regional Coordinators or central office staff and we will do our best to help resolve your questions or concerns.

We expect that questions will arise regarding the WITS system. We at BPA are also new users of the system, and many providers have more experience using it than we do. If your question or need involves WITS functionality, it is best to call the WITS Helpdesk. WITS users may contact the WITS Helpdesk via email at DBHWITSHD@DHW.IDAHO.GOV or by calling the central WITS Helpdesk phone line at (208) 332-7316. WITS Helpdesk support is available to answer calls Monday through Friday, 8:00 a.m. to 5:00 p.m. MST. However, during the month of October, the WITS Helpdesk will be providing extended hours in an effort to support you with the transition. The Helpdesk will be available Monday through Thursday, 8:00 a.m.-6:30 p.m.; Friday, 8:00 a.m. -5:00 p.m.; and Saturday, 10:00 a.m. -2:00 p.m. MST.

You should call a BPA Regional Coordinator or the BPA Provider Line for any question about contracts, audits, and training (WITS training information is available on the WITS Helpdesk website). For other questions, please refer to the grid in Question 1 to decide the best place to call. (ex. For a question about an initial authorization for an IDOC client, call IDOC.)

BPA Provider Line	800-688-4013
BPA Regional Coordinators	Nancy Irvin - Region 1 208-964-4868 nancyi@bpahealth.com Dean Allen - Region 2 208-305-4439 dean.allen@bpahealth.com Jaime Goffin - Region 3, 4, & 5 208-921-2342 jaime.goffin@bpahealth.com Doug Hulett - Region 6 & 7 208-921-8923 doug.hulett@bpahealth.com
WITS Helpdesk	(208) 332-7316 www.WITS.dhw.idaho.gov

IDOC	If it is an IDOC offender specific question, please contact the offender's PO.		
	If it is a district level clinical question, please contact the IDOC district		
	clinician, or they can email the district SUD intake box		
	(d1sudintake@idoc.idaho.gov, d2sudintake@idoc.idaho.gov, etc.).		
	If it is a larger, statewide issue regarding the SUD program, please email the		
	SUD team at IDOC Central Office idocsud@idoc.idaho.gov, or call SUD		
	Coordinator Jim Meldrum at 208-658-3425.		
IDJC	Joni Ward		
	Substance Use Disorder Program Specialist		
	Idaho Department of Juvenile Corrections		
	(208) 577-5450 (Office)		
	Sharon Burke		
	Substance Use Disorder Program Manager		
	Idaho Department of Juvenile Corrections		
	(208) 577-5424 (Office)		
Idaho Supreme Court	Ryan H. Porter LPC, CADC		
	Behavioral Health and Quality Assurance Manager		
	Idaho Supreme Court		
	Desk – 208.947.7430		
	rporter@idcourts.net		
	Scott Ronan		
	Idaho Supreme Court		
	Senior Manager, problem-solving courts & sentencing alternatives		
	(208) 947-7428		
	SRonan@idcourts.net		
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Starting on September 24, 2013, BPA will host a weekly provider call in hour during which we can take questions from providers. All questions answered during that call will be used to prepare the next update to the Frequently Asked Questions document. You will receive a separate communication with call in information later this week.

8. I'm getting really short authorization spans on my BPA authorizations. Do I need to call on September 30 to get another authorization?

BPA has been ending all authorization on 9/30/13 in anticipation of the transition to WITS. If you have an authorization expiring on 9/30/13 that under normal circumstances would have had a greater end date, BPA will create an authorization in WITS that starts 10/1/13 and end on the standard end date.

(ex. Currently, if a client had a 30 day assessment authorization issued on 9/15/13 the authorization is set to expire on 9/30/13. An additional authorization will be added to WITS for 10/1/13 through 10/14/13, allowing for the standard 30 day time period). Continued Stay Review (CSR) processes should be followed for providers wishing to extend authorizations for authorizations expiring on or before 9/30/13 if the authorization was for a standard time period (ex. if the authorization, as in the above example, was shortened to 9/30/13 it will be automatically extended as described above; however if an authorization was set to the full 30 days and expired on 9/28/13, a provider would have to submit a CSR). Please review Question 2 above for more on the time frame transition.

If after 10/1/13 you are unable to find an authorization for a current IDHW or IDOC client in WITS (excluding ATR clients), please call BPA.

9. Several hard copy forms we currently use require client signature, and the client signature is audited by BPA Regional Coordinators. What do we do now that everything is electronic and in WITS?

If the client signature is an IDAPA or SAPT Block Grant requirement, providers will be expected to have a client signed version of the form during time of audit. One way to accomplish this is to print the item in WITS, have the client sign and date the printed version, and keep in a client's hardcopy file. For assistance on printing from WITS, please contact the WITS Helpdesk. Client signature requirements currently include:

- DHW Block Grant Release of Information
- Client Rights and Confidentiality Rights/Limitations
- Client Informed Consent
- Client Financial Eligibility Determination
- Notified of HIV/TB Testing
- Client Treatment Plan and Treatment Plan Reviews (also known as Client Service Plan and updates).

10. How are audits changing under the new contract?

We have made several significant changes to the audit process in hopes of streamlining the process for providers. Here are a few notable changes:

- Clinical supervision audits will occur annually. (This is not a change to the current process, but a change from the original RFP request of quarterly.)
- Client record audits will occur annually. (This is not a change to the current process, but a change from the original RFP request of every six months.) The audit sample for client records will be 5% of new clients since the last audit.

- We expect that items that can be audited remotely using WITS will not be reviewed on site.

 Please review question 9 regarding items for which providers must provide a client signature.
- Providers will still be subject to corrective action plans and for cause audits if there are concerns about performance.
- For RSS providers, after an initial Compliance and Training Audit, BPA will conduct desk top audits using WITS. These audits will be conducted annually.
- BPA will conduct RSS provider on site audits under three scenarios:
 - As needed in "for cause" investigations;
 - For a yearly random sample of high volume providers;
 - o At time of facility renewal.
- BPA and IDHW will be modifying the BPA audits to include all items needed for IDHW Facility Renewal. IDHW will use the information collected during BPA audits to inform its Facility Renewal decision. Both BPA and IDHW hope that this will lessen the burden on providers.
 - To accomplish the Facility Renewal needs, BPA and IDHW will be modifying current BPA audit schedules, as needed, to ensure alignment with each agency's facility approval expiration.

As previously mentioned, the full implementation of BPA's contract will take place over several months. Because of this, we are unable to provide all the specifics of how the audits will be changing at this time. We recognize that will cause concern for providers. We also recognize that the introduction of WITS into the SUD system is significant for the recording of client and clinical data used for audits.

BPA will conduct training on the new audit tool when it is finalized. Until that time, as long as a provider is doing their best to comply with IDAPA requirements, BPA expects to exercise flexibility during the first round of audits. If there is a documented statewide outage of part or all of the WITS system, that will be taken into consideration during audits. BPA is not able to be flexible if providers have not taken advantage of trainings offered by IDHW or BPA, or if providers do not keep up to date on provider communications. Continued collaboration and communication are imperative to the success of the SUD Program. We will work with providers to achieve a successful contract implementation.

11. Will the 5% incentive continue after 9/30/13?

The incentive program will continue only for the populations for whom BPA pays the claims - IDHW and IDOC. IDJC and ISC do not plan on continuing the incentive.

For BPA paid populations, the process for the incentive will be modified. For claims that are paid in eCura/Provider Connect, providers claimed and were paid 95% of the total possible fee; for example,

the provider billed and BPA paid \$11.81 for a unit of individual treatment which had a total possible fee of \$12.40. BPA would then bill IDHW \$12.40 for the unit of individual treatment. The difference between \$11.81 and \$12.40 was held in an incentive pool and paid quarterly to the provider.

In WITS, claims will be processed at the total possible fee. This means that WITS will show payment of \$12.40 for 15 minutes of individual treatment. BPA will adjudicate claims batches in WITS, and determine the total amount payable for a batch; for example, a batch of ten 15 minute services is a total of \$124.00. This information will be extracted from WITS and entered into BPA's accounts payable system. BPA's accounts payable system will *withhold* 5% of the batch amount, or \$6.20, and a check will be cut for \$117.80. Quarterly, BPA will pay all withheld funds to any provider who is in good standing with contractual requirements. Any funds not paid out to providers will be returns to IDHW or IDOC for use as available treatment funds.