

Avatar Implementation User Forum

Date: 08/19/2010 **Time:** 1:00-2:30

Location: 7001 East Parkway, Sacramento, Conference room 1

Facilitator: Kacey Vencill **Scribe:** John Sawyer

Attendees: (See sign in sheet)

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Time	Agenda topic	Presenter		
5	Welcome/Introductions Kevin Sullivan was introduced as our on-site Netsmart representative for the EHR project.	Dawn		
15	Bug/Issue Update	Kacey/John		
	 97010 units – issue resolved, will require data cleanup (County will handle). There are over 96,000 services which will require manual processing. 			
	 Denials for emergency services- There are some Medi-Cal aid codes which require that services are flagged as an "emergency" or they will be denied. 			
	 To add the emergency indicator, use the edit service option after the service has been entered. 			
	 Fee override – ticket pending with Netsmart. There are cases where somehow a fee override indicator is being flagged on individual services. This results in the cost of service calculating incorrectly for that individual service. 			
	 Group service edit- ticket pending with Netsmart. There is an issue where editing a closed group service (i.e. adding a modifier) strips the group size, which results in an inflation of the units for that service on service reports. Cost is not impacted because the cost is "locked" when the charges are closed. 			
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20	Claiming Update Claims Correction Spreadsheet Changes to allow for changing funding source and document OHC only re-bills will be coming out soon.	Melony		

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	 Correct usage review If the only issue is OHC denial, you don't need to enter a new service. 	
	 Denials cannot be voided. 	
	 For duplicates, enter a NEW service with the appropriate modifiers and replace the denied duplicate. 	
	 Remember to ZIP and Encrypt all PHI. 	
	 CO177 and CO31 are often an indicator of a bad CIN 	
	Claim Status	
	 ADS through June. The State has not issued July rates yet, so we will be unable to process a claim until they have done so. 	
	MH still working on April for guarantor 3	
10	Retroactive Medi-Cal eligibility process	Kacey
	 If Medi-Cal is granted retroactively and the change impacts already closed services that weren't previously billed to Medi-Cal, fix the eligibility on the Financial Eligibility screen, and then communicate to Avatar-Fiscal which closed services need to be adjusted. 	
10	CSI Submission	Dawn/Kacey
	School of Residence	,
	County cleanup – need information from providers	
	It was reiterated about the importance of entering accurate CSI data and keeping it updated	
10	Reports/Reporting	John
10		John
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10	Reports/Reporting • New Reporting Platform – ETA 8/28/2010 (pushed to 9/4)	John
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For ADS and MH Phase 2 (claimed) services, submit the Claims Correction Spreadsheet to <u>Avatar-Fiscal@saccounty.net</u>.

Remember, All PHI needs to be zipped and encrypted.

- Q. What do we do when we need to replace a claim on a client who has been transferred into another one of our programs?
- A. As program transfers were only processed for programs sharing the same NPI, you can still enter a void and/or replacement on a service for that episode when it was entered in the other program.

Next User Forum: 09/16/2010, 1:00-2:30, 7001 East Parkway, Conf Rm 1