

CareNet 101

Pre-Screen through Authorization

NORTHCARE SUBSTANCE SERVICES

CareNet Website

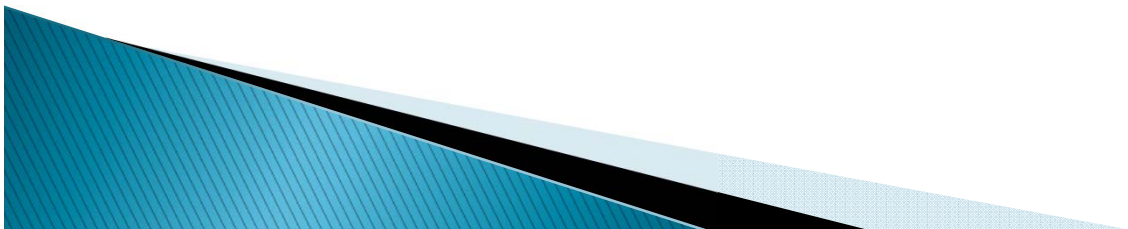
www.statehealth.net/pathways

CA/CDR Website

www.northcare-up.org/subA

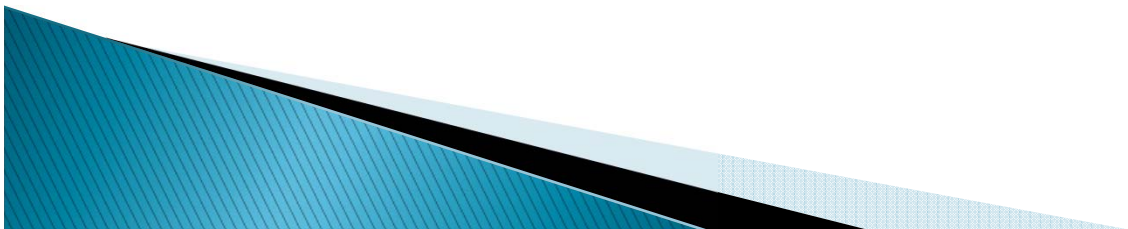
Client Pre-Screening

- ▶ Telephone Screening – usually the first contact by client
- ▶ Client requests appointment for admission to Substance Abuse Treatment
- ▶ What service requesting?
 - Intensive Services – refer to CDR for screening
 - OP services are made directly with provider



Client Pre-Screening Con't

- ▶ Example of Pre-Screening Information:
 - Client name
 - SS#
 - Date of Birth
 - Type of Service requesting – SA, MH?
 - Level of Care requesting – OP, IOP, Residential?
 - Currently in CMH services? Yes? Make referral to CMH for services
 - Pregnant? Refer to Admission Priority Requirements



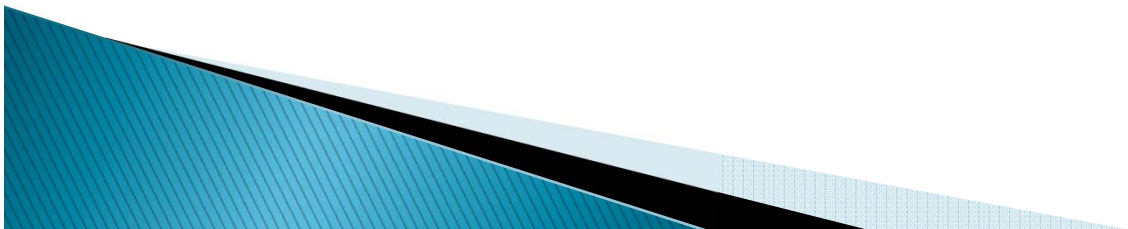
Client Pre-Screening Con't

- IV last 30 days?
- Currently receiving SA treatment at any other agency?
- Insurance/Funding Source (check 271)
 - ABW
 - Medicaid
 - Medicare
 - Block Grant
 - MI CHILD
 - Private Insurance
 - Parent's Insurance



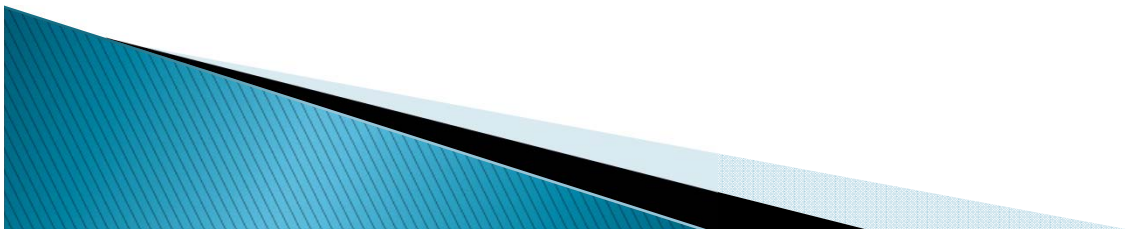
Client Pre-Screening Con't

- Available for Treatment Immediately?
- Household Income
- #Dependents, including self
- Protective Service/Court Involvement open CSP case?
- County of Residence
- 42CFR Part 2 Administered?
- Telephone #



Priority Status

- ▶ This is determined in the Pre-Screening
 - Admit to services according to Contract “Admission Priority Requirements”
 - If unable to admit per requirements above, client must be offered CDR phone number and/or other provider phone numbers to seek timely admission
 - If client declines referral and decides to wait for offered appointment, documentation must be made in comment section of admission



Admission–Key Points

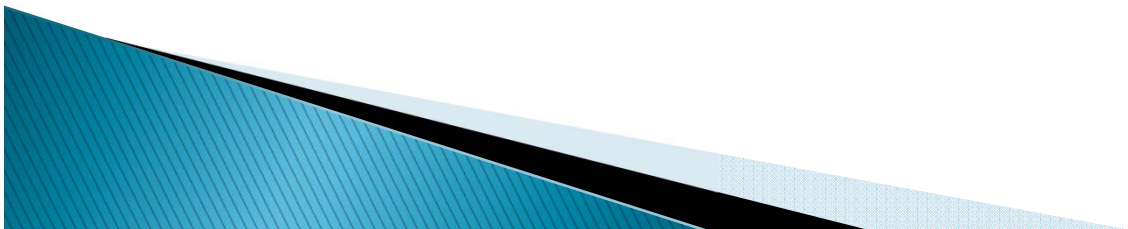
▶ Admission

- Priority Status – Do NOT use **OTHER**
- Initial Contact Date – Date client **called** Tx Provider or CDR, whichever date is earlier.
- First Appointment Offered – First Admission Date **offered** to client by Tx Provider
- NOTES Section **must** explain any and all dates the client was a “no show, called to reschedule, cancelled, etc.” including the date the client **called** to reschedule or cancel.



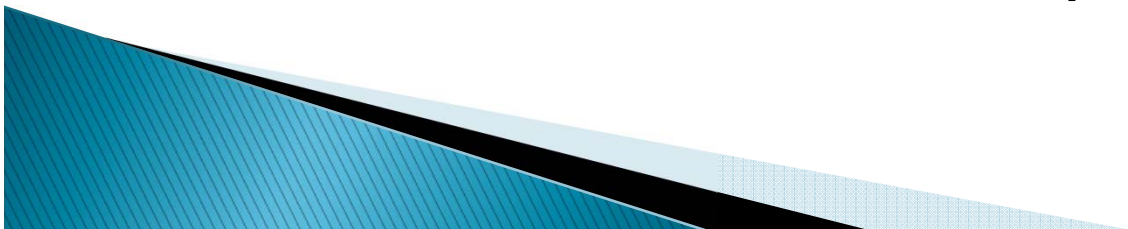
CDR Mandate

- ▶ The CDR is mandated and determined to be qualified by the State of Michigan to determine a level of care and to refer clients to an appropriate provider to receive those determined substance abuse services.
- ▶ A release of information should be secured on the first visit or contact.



Username/Password

- Username and Password must be requested to the CDR by a Supervisor or Director of your Agency
- Username and Password **MUST** not be shared with ANYONE.
- Off-site accessing of the CareNet system is strictly prohibited.
- You may only access the CareNet system from the approved, licensed Provider site
- This practice allows the system to be HIPAA and 42 C.F.R. Part 2 compliant.



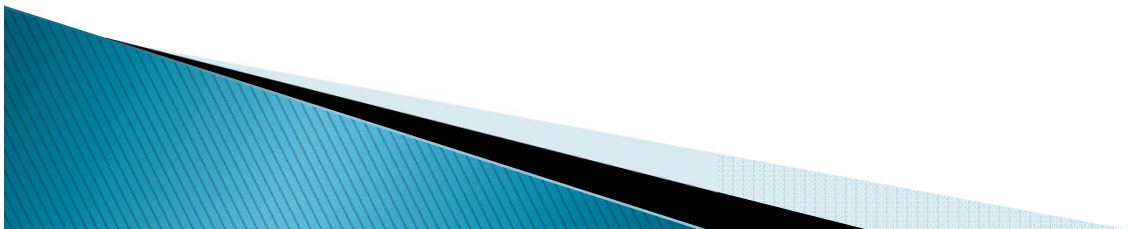
www.statehealth.net/pathways

- ▶ Enter IT address above, this will bring you to CareNet Logo – click on “moving target”
- ▶ Enter **CA/CDR assigned Username/Password** – password can be **changed** at any time on the **Main Menu**
- ▶ This action brings up the Main Menu of CareNet
- ▶ Look/Up Edit Client
 - Enter client’s **SS#** or name – partial or full (Jane Doe or JD)
 - **BE CAREFUL** to type **#** and/or name **correctly** – otherwise you may enter a **client twice** into CareNet system.



Accuracy

- ▶ Accuracy is **ESSENTIAL**. If the SS# and/or client's name are entered incorrectly, a client ends up with two files in the CareNet system
- ▶ Two client files for one client results in more work for **Provider** as well as the **CA/CDR**.
 - Extra time to review
 - Requests for Releases to be faxed when they have been faxed – but under an incorrect SS# or name



Accuracy – Continued

- Incorrect SS# and/or name can result in authorizations and/or units **not approved**. Researching may exceed timeframe allowed to obtain approved authorization.
- Double check the **accuracy of the SS# and spelling** of name when entering into CareNet
- Releases—**Review BEFORE** the client leaves the office to be sure there are no corrections that need to be made.
 - **Clients MUST correct and initial** any change on a release of information.



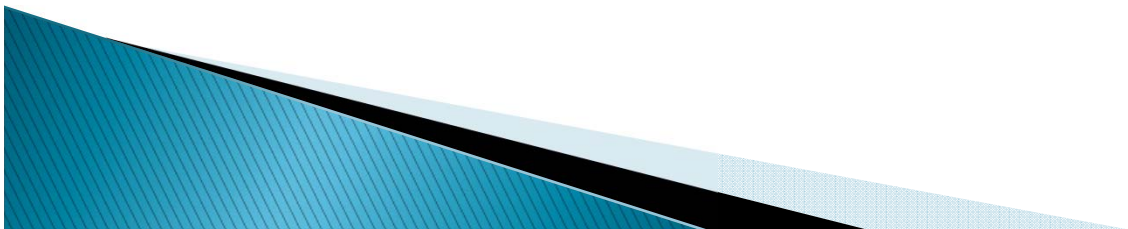
Enter Client Information

- ▶ From Main Menu....Either Add client (enter SS#) or
- ▶ Look/Up Client File (name or partial name)
 - Demographic Page – Enter, Review and update including current address (Save Record)
 - 271, be sure to run for current month and previous months of service
 - Payor Section, click “add payor record” choose from drop down box, enter begin date and also the policy number if Medicaid, ABW, MICHILD or private insurance (Save Record)



Client Information Con't

- **Financial**, enter, review and update as necessary. “Personal Income” CANNOT be larger than “Household Income” (Save Record)
- **CDR Screening**, when appropriate release is received by the CDR, the CDR Screening (if one completed) will be made available for provider view
- **Admissions**, enter current Admission (UNLESS one is already open—the open one would then need to be discharged using the last date of service prior to entering current admission.)



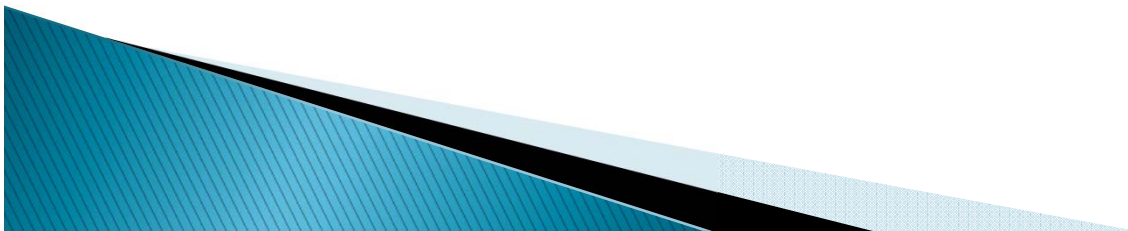
Client Information Cont'd

- **Admission Cont'd**, review Data Manual in the CA/CDR website (www.northcare-up.org/subA) for complete instructions
- **Authorization (initial and reauth)**, if initial, click Initial Request – red bar or Reauthorize–blue link.
 - Enter a begin date and number of days for authorization – system will auto enter the end date
 - Click red bar “request authorization”
 - Complete ALL sections of the authorization – not doing so will result in a pended authorization.



Client Information Cont'd

- ▶ Notes – any comments, notes, etc. that would be pertinent to this client file may be entered into this section.



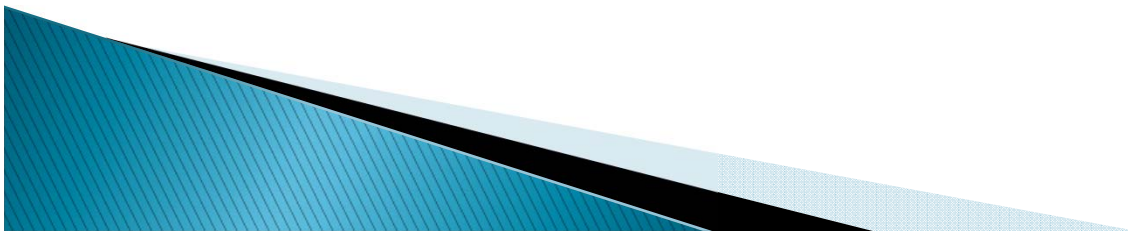
Authorizations

- ▶ Fax release (all services) and certification of eligibility (if intensive services) **PRIOR** to submitting authorization request
 - Submitting the authorization and then faxing release at a later time may result in a pended authorization. If authorization is reviewed and release has not been received, the authorization **will** be pended.



Authorizations–Add'l Info

- ▶ Complete ALL sections of the Authorization
- ▶ Be sure to read and follow the requirements for Amount, Scope and Duration.
- ▶ Comments are helpful if any pertinent information falls outside of the information gathered on the Authorization.



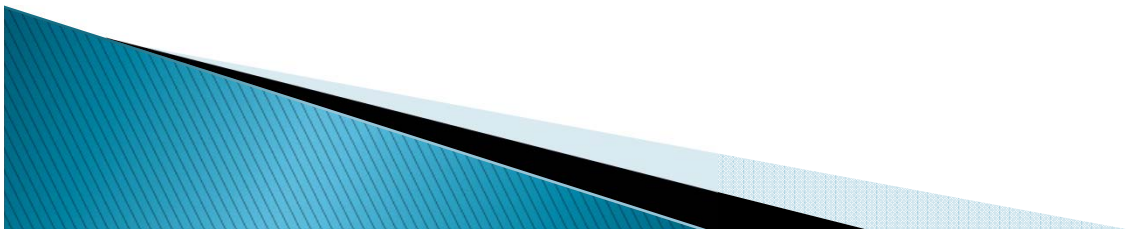
Pended Authorizations

- ▶ Pended Authorizations **ARE NOT DENIALS**
- ▶ **Examples of Reasons for Pended Authorizations** include but are not all inclusive:
 - Release not received by the time authorization reviewed
 - Release information not consistent with information in CareNet System (SS#, spelling of name, DOB, etc.)
 - Authorization information entered not complete



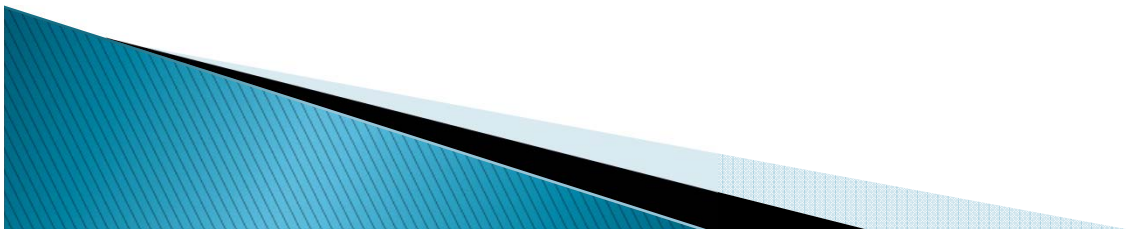
Pended Authorizations–Con'd

- ▶ CDR Review staff require clarification on part of the authorization
- ▶ Admission information not adequate
 - Initial contact date vs First Offered Appt. does not include all dates and reason client did not attend for each date involved
 - Admission corrections must be completed by CA/CDR staff



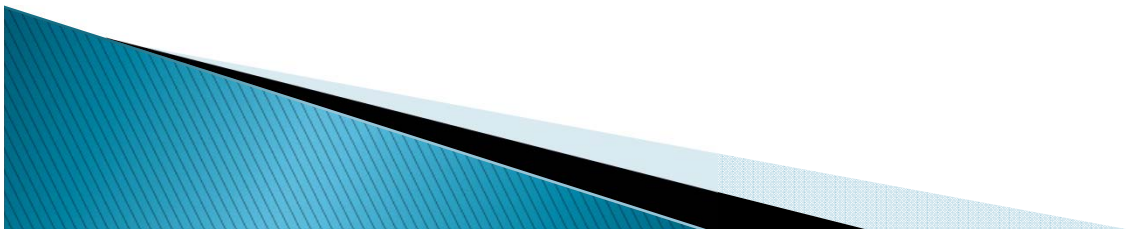
Pended Authorizations Cont'd

- ▶ Provider **MUST** review Pended Authorizations on a regular basis in order to meet the timeline requirements for Authorizations.
- ▶ Pended Authorizations **always** require action on the part of the Provider



Authorizations – Cont'd

- ▶ A Reauthorization request **MUST** be submitted 14 days **PRIOR** to desired begin date in order to be assured review and approval with that begin date – if all other issues are satisfactory.
- ▶ **PLEASE NOTE** – submissions for Initial Authorizations and Reauthorization requirements are **different**.



Provider Manuals

- ▶ NorthCare Substance Abuse Provider Manual is a wealth of information. www.northcare-up.org/subA
- ▶ **Current Provider Manual –**
- ▶ [2011–2012 Provider Manual](#)
- ▶ **Data & Reporting –**
- ▶ [Provider Manual FY2012 – Admission, Discharge and SARF forms on the CareNet System](#)
- ▶ Review of these two Manuals is **Highly Recommended**

