

TO: HCH STAFF
SUBJECT: ENROLLMENT, TRANSFER, & DISCHARGE GUIDE
DATE: April 3, 2015
CC: HCH IMPLEMENTATION TEAM



ENROLLMENT, TRANSFER, & DISCHARGE GUIDE

STEP 1: HCH's should double check the following before sending enrollments, discharges, and transfer requests:

- 1) Check to see if the client is not already enrolled in a HCH (yours or another one).*
- 2) Check to be sure the client is receiving MO HealthNet benefits.*
- 3) Be sure the client's **correct** DCN & Provider ID are on the form.
- 4) Be sure the client's correct diagnosis(es) is on the form.*
- 5) Be sure the action you are requesting has not already been completed.

Common Errors If you need assistance in locating where you can find this information, please contact the HCH Enrollment Coordinator.

Reminders: Enrollment and transfer start dates are effective the first of the month following the request. Discharge and transfer stop dates are effective the last date of the month following which the request was received. Forms must be received by the 25th of the month to ensure the above noted effective dates.

Example 1: Submitted enrollment request form on July 12, 2013. Effective enrollment date will be August 1, 2013.

Example 2: Submitted discharge request form on July 12, 2013. Effective discharge date will be July 31, 2013.

Example 3: Submitted transfer request form from agency A to agency B on July 12, 2013. Effective enrollment date for agency B is August 1, 2013. Effective discharge date for agency A is July 31, 2013.

STEP 2A: After submitting enrollment, discharge, and transfer requests, you should verify the requested changes in the CIMOR HCH Registry after 5 business days. If a request is denied, you will receive an email from the HCH Enrollment Coordinator. If the requests are not reflected in CIMOR, please send inquiries to the HCH Enrollment Coordinator.

- Those granted access to CIMOR, can access the CIMOR HCH registry by the following:
- Logging into CIMOR->Reports->Consumer->HCH Registry.

STEP 2B: It is recommended that you compare your personal HCH enrollment records with the CIMOR HCH Registry at least monthly. At minimum, you should compare the CIMOR HCH Registry with your attestations. When comparing with attestations, keep in mind when you attest, you attest for services provided in the previous month so pay attention to the "start and stop dates" in the CIMOR HCH Registry. You can export both reports in Excel and compare to ensure accuracy in your attestations.

STEP 3: If you believe someone was enrolled, but the individual is not in the CIMOR HCH Registry also check Cyber Access. If an individual should have been enrolled, but you cannot locate them in the CIMOR HCH Registry or in Cyber Access, send inquiries to the Enrollment Coordinator. For any other discrepancies send inquiries to the Integrated Care Liaison.

HCH ENROLLMENTS AND PROACT

- The ProAct Member List displays current and previous clients assigned to the CMHC. CMT uses this for historical data runs.
- CMHC assignment (client attribution) within ProAct is obtained from DMH. CMHC assignment is determined by an open episode of care (EOC). If there are two or more EOCs, the following method is applied. The data is applied to the last six months.

New Client Attribution Criteria for ProAct	
<i>Clients will be assigned to a CMHC based on the following criteria:</i>	
1.	Clients assigned to their active <i>Healthcare Home</i> (based on enrollments, transfers and discharges from the MMIS registry)
Remaining clients continue to step 2:	
2.	Clients assigned to the CMHC with the most recent date of a <i>community support service</i>
Remaining clients continue to step 3:	
3.	Clients assigned to the CMHC with the most recent date of a <i>physician service</i>
Remaining clients continue to step 4:	
4.	Clients assigned to the CMHC with the most recent date of any <i>other service provided</i>

- Assignment (Census Files) Lists are sent to CMT on or about the 3rd business day of the month. To guarantee your HCH enrollment form will be processed in time, you must submit requests by the 25th of each month.
- You must ensure the clients Episode of Care (EOC) was entered/updated in CIMOR before census files are generated to ensure accuracy.
- This means admission and discharge dates in CIMOR must be up to date prior to DMH providing the attribution list to CMT. If these dates were not entered or updated in CIMOR in a timely manner, this will result in client attribution errors, and therefore cause discrepancies in your data, for example MBS completion rates, and the data displaying in ProAct.

Example: If a consumer was admitted to an agency on 8/29/13, but the EOC was not entered until 9/6/13, the individual may not have been pulled into the client attribution list. Similarly, if a

client's HCH enrollment effective date is 8/1/13, but that information was not entered until 9/6/13, the client may not have been included in the file sent to CMT for that month.

- If all previous steps have been reviewed and determined not to be the cause of an attribution error, you should then send inquiries to the CMT representative.
- The monthly DM ProAct refresh occurs on or about the 10th of the month. The ProAct refresh includes all metabolic screening and Medicaid paid clams that occurred during the previous month, and changes to enrollments and discharges that go into effect on the first of the current month. The other runs, (i.e. BPM, IHP and Adherence) are completed as soon as the DMR portion is concluded.

Example: The HCH enrollment list effective 8/1/13 will be uploaded during the August ProAct refresh, as well as all new metabolic screening and Medicaid paid claims data that occurred in July.

- Any discrepancies will be resolved by the following refresh.

FURTHER EXPLANATION OF DATA SYSTEMS

- The CIMOR HCH Registry shows the agency's entire history of HCH enrollees. There will be a start date and stop date for each enrollee. If there is more than one enrollment period for an individual, each will be displayed separately. The CIMOR HCH Registry also includes whether or not the enrollee is part of the Disease Management (DM3700) project. It is recommended to search by DCN versus name due to the fact that names can due to adoption, marriage, divorce, etc.
- HCH and DM3700 status are also flagged in CIMOR on an individual basis (see picture below).



- CIMOR and Cyber Access retrieve data from the MHN MMIS database daily.
- The CIMOR HCH Registry is updated daily; as a result, once the enrollment coordinator makes the change in the MHN database, the CIMOR HCH Registry should display the appropriate changes. However, when viewing on an individual basis, the HCH assignment display/alert (picture shown above) will display effective dates. Additionally, the Disease Management display/alert will not display until an EOC has been opened for that individual.

Example: Submitted HCH enrollment form on July 12, 2013. Individual HCH assignment display/alert will not show until August 1, 2013.

- Cyber Access also displays effective dates.

Example: Submitted enrollment form on July 12, 2013 with an effective start date of August 1, 2013. The Cyber Access HCH assignment will display August 1, 2013.

- Your client should appear in your attestations the following month after the effective enrollment date.

Example: Submitted enrollment form on July 12, 2013 with an effective start date of August 1, 2013. The individual will display on September 5, 2013 for your attestations. This is because you will attest for services provided during the month of August in September.

Reminder: If you do not submit forms by the 25th of the month, there is no guarantee the enrollments will be effective the first of the following month. It is possible the enrollment effective date will be delayed another month.

Example: Submitted enrollment request form on July 26, 2013. The effective date may be September 1, 2013.

CONTACTS:

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