Central Florida Cares Health System

https://cfchsdata.org

Financial Management System: A Data-Driven Invoicing Process

July 2015

Financial Management System Objectives

- Provide an Overview of ...
 - System functionalities
 - The electronic workflow process (live demonstration)
 - Billing rules used in calculating provider payments
 - Financial screens
- Question & Answer session

Note

User Guide is being developed to accompany the software and will be available for Go-Live

General Functionalities

- Create provider Invoices/Payments from service data that was successfully submitted to the Data Management module
 - An Invoice, for a particular month, is based on:
 - Valid services <u>submitted</u> between the 1st day of that invoice month and thru the 10th of the following month;
 - Valid services in which the start date falls within the first day in the current fiscal year and thru last day in the invoice month
- Utilizes an electronic payment approval process involving the Managing Entity Contract Managers, the providers with the applicable financial roles, and the Managing Entity Supervisor
- Apply ME defined billing rules to services in order to calculate provider payments and manage drawdown of contract funds
- System creates automatic adjustments to correct payment for paid services when updates to service records are submitted
 - Updated an already paid record in which service units were changed; deleted an already paid record
- Manage the timely submission of services so that payment is only applied to contracts that are either current or was current no less than 45 days ago; and service records submitted no later than 45 days after the end of the fiscal year

Functionalities: Available to both the ME and Provider

- Review Service Data
 - Prior to period close: 1st day of the Invoice month thru 10th of following month
- Review Payment/Invoice Information
 - After period close, 11th of each month
 - View Draft PDF Invoices along the process of approval
- Participate in the Financial Workflow process
 - Electronically notify (thru automatic email notification) ME and/or Provider progress in reviewing/approving payment
- View OCA and Cost Center Accrual information
 - Review detailed transactional activities that occur at the OCA and cost center levels
- View Sliding Scale Fee Co-payment information submitted by the provider

Functionalities: Only Available to the ME

- Apply adjustments to the invoice
- Supply the number of FACT consumers served (per provider)
- Supply the number of BNET consumers served (per provider)
- Complete the initial and final approval of the invoice with automatic email notification to providers and ME staff

Functionalities: Only Available to the Provider

- Supply co-payment collected information
- Complete the provider certification/approval of the invoice with automatic email notification to the ME staff

Required Financial User Roles

Centr	al Florida Cares Health System					
Home	Contract Management	Data Management	Clinical Management	Financial Management	System Management	Repc
					User Admin	
					Role Admin	
					System Management Reports	

User Roles and Interaction with the Financial Workflow

Process by which the ME and Provider communicate thru automatic email notification in order to approve invoices

Billing Rules

Definition/Purpose

- Set of instructions that are used for calculating provider payments to ensure compliance with the PAM 155-2, accounting, and other business rules
 - Apply 155-2 billing requirements
 - Ex: FACT services

Billing Rules Rule Type Determines whether a service can be processed for payment: • Contract is in a state of complete (approved by both the provider and the ME) Available & • The components of the Modifier4 is found in the contract and revision (if applicable) for the service submitted. Valid Modifier 4 is the combination of the Budget OCA (aka, Parent or Program Contract OCA, Expenditure OCA (aka, Child OCA), and Cost Center combination Service date, for the billed service, falls within the start and end date of a contract and revision (if applicable) Sufficient • System will process a service for payment when there are enough funds remaining in the contract to fully or partially cover the submitted service **Funds Backup OCA** • In the event that there are insufficient funds in a Budget/Parent OCA, the system will look to see if a backup OCA has been assigned. If a backup OCA is assigned, the Payment system will attempt to pay the service from the backup OCA's remaining funds Timely Service record is submitted no later than XX days after the close of the FY or the termination of a contract (see User Guide for details) Submission

Financial System Interacts with Contract Management System



Payment Denied by the Financial System

Payment Processed by Financial System

Partial Payment by Financial System

Billing Rules, cont.

Rule Type	
Prorated Payment	 Fixed monthly payment, spread evenly across the contract term within a fiscal year. Payment is independent of service units submitted. Example: Prevention Partnership Grants where payment is an equal amount paid each month as long as deliverables are met (evidence of ad campaigns, distribution of flyers, etc.)
FACT Services	• Payment is based on the weekly FACT roster/counts submitted by the ME in the FACT screen
BNET Services	• Payment is based on the number of SSNs submitted by the ME in the BNET screen
FEMA Service (1/2 Rule)	 Payment is divided into two equal payments within the FY. One half of the total contract is paid halfway thru the contract, while the other half is paid in the last month of the contract.

Billing Rules, cont.

Rule Type

- Manages the drawdown of funds so that payment is spread across the length of the contract, within each Fiscal Year
- Providers are paid for valid units submitted, up to the maximum payment allowed in the month. Maximum payment allowed in a particular month is based on a combination of:
 - The length of the contract w/n a FY
 - The total monies already paid to the provider in previous months
 - If payment earned in a month <u>exceeded the maximum pay allowed</u>:
 - System will pay up to the maximum and hold/bank additional payment for partial or full reimbursement in a month in which the payment earned is less than the maximum allowed for that month
 - If payment earned in a month is less than the maximum payment allowed:
 - System will pay all valid services and any held/banked payments from previous months, up to but not exceeding the maximum payment allowed for that month.

Maximum Prorated Payment

Example: Maximum Prorated Payment Rule in ACTION...



Menu Items – Financial Module



Functional Differences Across the Financial Screens for Providers

		Screens	
Functionality	Billing Overview	Invoice Overview	Accruals
Review services processed nightly, from the 1 st day in the invoice month thru 10 th day of the following month.	~		
Indicates system denials, identified during nightly processing, that were due to services not being covered by a contract.	~		
Invoice details reflecting the application of billing rules on the 11 th of each month.		~	
Indicates when and the type of billing rule that was applied to a service.		✓	
View a draft PDF version of the Invoice		✓	
Electronically save and notify ME that payment information has been approved/certified		✓	
Transactional details at OCA & Cost Center level			

Billing Overview Screen

_									
							em Administrator		[Change Pass
Centra	al Florida Cares Health System								
Home	Contract Management	Data Management	Clinical Management	Financial Management	System Management	Reports	Performance Me	asures Resources	Sign Out
			C	Billing Overview Invoice Overview					

Billing Overview Screens - "Payment Summary"

- View preliminary payment data/services processed nightly (this does NOT represent the Invoice)

- Tool for reviewing data submissions throughout the open period

Billiı Paym	ng Overview ent Summary					
rt: 07/01/2014		End: 08/10/2014				
rt: 07/01/2014		End: 07/31/2014				
			Search			
			Acciders			
Vendor #	Provider/Vendor	Name	Preliminary Payment			
			\$3,000.00			
View total	View total preliminary payment here					
Click "Do	Click "Detail" to drill down to view preliminary					
	Billin Paym t: 07/01/2014 t: 07/01/2014 Vendor # View total Click "D paymen	Billing Overview Payment Summary t: 07/01/2014 t: 07/01/2014 Vendor # Provider/Vendor View total preliminary p Click "Detail" to drill o payments at each OC	Billing Overview Payment Summary t: 07/01/2014 End: 08/2 t: 07/01/2014 End: 07/3 Vendor # Provider/Vendor Name View total preliminary payment Click "Detail" to drill down to payments at each OCA/Cost			

Billing Overview Screens - "Payment Detail"

- View preliminary payment and system denials at the OCA & Cost Center level



Billing Overview Screens - "Service Detail"

- View individual service details

Se	rvice	Detail

Data Submit Range: 7/1/2014 - 8/10/2014 Service Date Range: 7/1/2014 - 7/31/2014

P	rovider /	Vendor Nar	ne	Prog. Type	Parent Oca	Child	Oca	Cost C	tr Code C	ost Cent	er De	scription	Total Units	Payment Ap	proved	Payme	nt Not Approved
in state it	h Death			AMH	MHA70	MHA7	0	1	As	sessmen			240	\$0.00		\$0.00	
Total Served I	tal Served Participants: 1 Cost Per Unit: \$0.00 < 1 of 1 >																
	Approve / Deny																
Contract #	Funder	SSN	Service Date	Begin Time	Procedure (Code	Mod1	Units	Cost of Sv	c Appr	ve	ME Deny	Reason	Denied	System	Denied	Applied Rule(s)
	SamH		7/1/2014	900	H0031		HN	240	UNK		[
Back											Save						

The individual services falling under the specific program, OCA, and cost center combination will be listed here...

Invoice Overview Screen

					Welcom	ie, ME Syst	t em Administrator Centr	al Florida Cares	[Change Pass
Cent	ral Florida Cares Health System								
Home	Contract Management	Data Management	Clinical Management	Financial Management	System Management	Reports	Performance Measures	Resources	Sign Out
				Billing Overview Invoice Overview	נ				

Invoice Overview Screens - "Payment Summary"

- Invoice of payments that were processed after period close (11th); calculations based on ME defined billing rules.
- Provider review and approve Invoice/payment

COI

	Invoice Overview Payment Summar	/ Y	Defaults to the current invoice month. Note: Able to view previous invoices by selecting from dropdown listing	
Select Invoice Month:		July 2014 V	Sear	rch
			Acc	cruals
* Please click on the "Detail" link to complete your Co-Particle Provider ID Vendor # Provider/Vendor National Pro	er	y Payment View Invoid	Initial Approval Final Approval XL CM Provider CM Supervisor # Not Create Save Approval	. S t reated rals
Ving applicable co-pay data.			View Invoi	ice
Click "Detail" to view payment details at the tract, program, OCA, and cost center level and to enter co-pay collected information al am d	rovider checkbox remain rovider checkbox remain y IS applicable to at least on a void on the other of the other ounts after the provider has en lata and electronically approved	ns disab iya finan Swfrying fight ated paymentitial A Itered co-pay d payment. Provi	Alet Montainer Internet Intern	i: rs: ar) gler)
			(box checked)	

Invoice Overview Screens - "Payment Detail"

- View Invoice at the OCA & Cost Center level
- Enter co-pay information & view updated payment based on Co-pay collected

		Co Pay Details			
Pre Co-Pay Payment	Co-Pay Collected	Apply Minimum Co-Pay	Post Co-Pay Payment	Minimum Co-Pay	
\$1,250.00	\$0.00	N/A	\$1,250.00	\$0.00	
\$983.62	\$0.00	N/A	\$983.62	\$0.00	
\$4.09	\$3.00		\$0.09	\$4.00	
\$5\$2.29	\$2.00	V	\$510.29	\$2.00	
\$200.00	\$3.00	×	\$197.00	\$3.00	
Click "Detail" to	o view information at the individual	service level	\$1,250.00	\$0.00	

Invoice Overview Screens - "Service Detail"

- View individual service details

Service Detail

Invoice Month: July 2014 Data Submit Range: 7/1/2014 - 8/10/2014 Service Date Range: 7/1/2014 - 7/31/2014

Provider / Vendor Name	Prog. Type	Parent Oca	Child Oca	Cost Ctr Code	Cost Center Description	Total Units
211 Brevard	ASA	MSA00	MSA11	47	47	3

Total Served Participants: 3 Cost Per Unit: \$0.17

< 1 of 1 >

Contract #	Funder	SSN	Service Date	Begin Time	Procedure Code	Mod1	Units	System Denied	Applied Rule(s)
211P1	SamH	1	7/1/2014	900	H0008		1		
211P1	SamH		7/2/2014	900	H0008		1		
211P1	SamH		7/5/2014	900	H0008		1		
Back									

The individual services falling under the specific program, OCA, and cost center combination will be listed here...

Accrual Screen													
Invoice Overview													
	Payment Summary												
Select 1	elect Invoice Month: July 2014 🗸												
											Search		
	Accruals												
* Please click on the "Detail" link to complete your Co-Pay information and then save your approval.													
	Initial Approval								Final Approval		XLS		
	Provider ID	Vendor #	Provider/Vendor Name	Pre Co-Pay Payment	Post Co-Pay Payment	View Invoice	СМ	Provider	СМ	Supervisor	#		
Detail			0	\$6,807.34	Pending		\checkmark				Not Created		

Save A	pprovals
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View Invoice

Accrual

- View payment transactional details at the OCA or Cost Center levels

Bill Dates are the 11th day of

Cost Center Accruals

Start Date	End Date	Provider Code					
08/11/2014	08/11/2014	1	\checkmark				
Contract #	Parent OCA	Child OCA	Cost Center				
211P1 V	MHA00 - ME SVCS & SUP PROV ACTIVITY - V	MHA01 - 24 Hour Care (Non-Hospitalization) 🗸	20 - Residential Level 3 🗸 🗸				
			Search				

Show: 10 🗸 Entries

Sort By...

v

Cost Center Accruals															
	Provider Code	Contract #	OCA	Cost Center	Date/Time	Ву	Transaction Type	Notes	Priced Services	Pay from this Cost Center	Pay from other Cost Centers	Pay from Backup OCA	Debit	Credit	Balance
		Ĩ.	MHA01	20	8/11/2014 12:00 AM		009 - Payment Calculation	From Percentage Distribution Parent OCA MHA01	\$20.00	\$20.00	\$0.00	\$0.00	\$0.00	\$0.00	\$1,000.00
			MHA01	20	8/11/2014 12:00 AM		002 - Invoice Billing Pay From This Cost Center		\$0.00	\$0.00	\$0.00	\$0.00	\$20.00	\$0.00	\$980.00

Lets View a Live Demonstration of the Workflow process and screens

Re-cap









Reminder: This power point presentation AND accompanying User Guide will be available with the release of this software.

* Find both under the "Resources" tab

