

Policy Overview

About the Application:

Delaware Department of Health and Social Services - Division of Substance Abuse & Mental Health (DHSS DSAMH) has implemented a document management and workflow solution in DocuWare to gain better control of processes for submitting, approving and storing invoices. DocuWare automation replaces the previous manual solution where invoices were either physically scanned or being monitored from an email inbox and tracked in multiple spreadsheets from ingestion through approval.

DocuWare for Invoice Processing provides a seamless solution for invoice management by digitizing paper invoices, capturing other electronic invoices, and subsequently triggering approval workflows based on business rules to ensure accurate and rapid processing and payments.

The solution delivers many productivity benefits to the DSAMH, including the following:

- Capture, sort, and archive invoices processed into DocuWare using an easily searchable file structure.
- Extract details from all invoices, easily enter your GL accounts and cost centers with DocuWare's Intelligent Indexing.
- Approve workflows to accelerate the process based on your business rules.
- Record notes directly on the invoice image with annotation functionality.
- Maintain compliance and a complete audit trail with transparent approval history, automatic document filing and encryption.
- Maintain a secure, organized, and searchable invoice archive for audits and budget planning.

Beginning July 1, 2023, all invoices (CR, Fixed Rate, Fixed Rate SUDS NARR (1-3), FFS-IMD, FFS-SUD, FFS-PROMISE, Operational, and GSS) are submitted through email to the Business Operations Mailbox and will be manually uploaded into DocuWare by OSEC staff.

DSAMH Eligibility and Enrollment Unit (EEU):

The DSAMH Eligibility and Enrollment Unit performs various functions for different DSAMH programs. The EEU verifies Medicaid eligibility and 3rd party insurance enrollment for PROMISE, IMD, and SUD Residential.

For PROMISE, the EEU functions are program related. The EEU team does a brief clinical screening and a program eligibility check to approve the client for the level of care based on the assessment packages provided by the DSAMH Care Managers. Once approved through the EEU, case assignments are made based on the level of care and certifications done for clinical authorizations. The PROMISE Billing Team enters the prior authorization into the Medicaid system (DMES) for provider billing.

For IMDs, the EEU Hospital Placement Unit performs a clinical review for all 24-hour emergency apprehension holds as well as traditional Medicaid clients for placement to an IMD. The EEU Nurses provide and review medical necessity authorizations for DSAMH funded and traditional Medicaid.

For SUD Residential, when the providers make a recommendation for days of treatment, the EEU SUD Team Utilization Reviewer reviews for medical necessity and provides information to the Substance Evaluation Team, or SET, sending a copy back to the provider and entering the authorization into DMES.

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Policies:

Delaware State Code is a selection of statutes, or laws, arranged by subject (titles). The State Code governs all that we do, and the following sections contain specific information related to policies and procedures for this project. <https://delcode.delaware.gov/>

Policy Memorandums are the Department of Health and Social Service (DHSS) clarifications to and links between specific state and federal codes. For this training, the PM of note is the PM37: <https://www.dhss.delaware.gov/dhss/admin/policy/files/pm37.pdf>

DSAMH Provider Policies can be found on the DHSS website at: <https://dhss.delaware.gov/dsamh/policies/ProviderPolicies.html>

Policy Memorandum #7 – Client Service Waiting Lists
<http://www.dhss.delaware.gov/dhss/admin/pm7.html>

EEU PROMISE Application Process: <https://dhss.delaware.gov/dsamh/files/DSAMH043.pdf>

DSAMH IMD Utilization Review:

DSAMH UR Initial Review: <https://dhss.delaware.gov/dsamh/files/DSAMH034.pdf>

DSAMH UR Concurrent Review: <https://dhss.delaware.gov/dsamh/files/DSAMH035.pdf>

DSAMH UR Retroactive Review: <https://dhss.delaware.gov/dsamh/files/DSAMH037.pdf>

Provider Responsibility - PROMISE

Prior to submitting invoices for a PROMISE client, providers must submit a **certification form** to the EEU - this is a clinical certification to begin services by provider. The certification form will be used by the EEU to authorize billing of services.

The provider has 30 days from admission to submit the certification to the EEU. Certification and recertification must include the correct documentation, including a **psychiatric evaluation** done by a psychiatrist or psychiatric nurse practitioner. Without this evaluation, the EEU cannot submit an authorization to bill services. Authorization is **required** for payment of invoices.

Providers are responsible for tracking their clients' authorization dates. Documents for annual recertification must be submitted 30 days prior to the expiration of the current authorization. Invoices submitted without authorization will count as an error in calculating the error rate for the next period.

When uploading PROMISE invoices via FTP to DocuWare, providers must include the invoice cover letter and invoice spreadsheet. While not needed to invoice, you must maintain supporting documentation for later review.

Provider Responsibility - IMD

To be eligible for an IMD, patients must be referred appropriately to secure an authorization for billing:

- Patients in Emergency Room are referred by the hospital placement EEU team EEU through Delaware Treatment and Referral Network (DTRN), or Open Beds.
- Potential DSAMH-funded walk-in admissions must be referred to the hospital placement team (EEU) to confirm medical necessity for IMD placement. This includes patients placed on a 24-hour hold initiated at the IMD.

When submitting invoices to DSAMH, providers must include the invoice cover letter and invoice

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spreadsheet as well as final authorization form and the EOB or underinsured justification (if applicable). IMD providers should complete and save the PM37 forms, Appendix A-C, but do not need to submit them with the invoice.

Provider Responsibility - SUD

To increase treatment access, only SUD Residential/Detox ASAM Level 3.3-3.7 and NARR IV require authorization.

When submitting SUD Residential/Detox invoices, providers must include the invoice cover letter and invoice spreadsheet as well as the final authorization form and the EOB or underinsured justification (if applicable).

When submitting SUD CBHOT invoices, providers must include the invoice cover letter and invoice spreadsheet as well as the EOB or underinsured justification (if applicable).

When submitting SUD Fixed Rate NARR (level 1-3) invoices, only the invoice cover letter and invoice spreadsheet is required.