

HCSIS Provider Access FAQs

This document contains answers to the most commonly asked questions regarding the Provider Access website. Use the following links to go directly to the topic you want:

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Getting Started

★ **What roles do I need to adjust information on the Provider Access website?**

The Provider Registration Data Entry role can update all information on the Provider Access website except the information on the *Identification* screen. To make changes to the *Identification* screen, explain the reason for the change on agency letterhead with an authorized signature (CEO or Director) along with a copy of their FEIN documentation, and fax or mail it to the HCSIS Help Desk.

Additionally, this role can run the *Provider Service Status Report* which lists the service history for the provider in HCSIS. Refer to the *Provider Updates Tip Sheet* or the *HCSIS Provider Registration Job Aid* on the home page of the Provider Access website for step-by-step instructions to run this report.

★ **Can the Office of Long Term Living (OLTL) providers modify their data?**

Currently, the OLTL Central Office is responsible for updating and maintaining information for OLTL providers in HCSIS.

Site Not Specified

★ **What is the purpose of Site Not Specified? Should I add services to it or create another site for the same address?**

Note: Site Not Specified applies only to providers who have registered in HCSIS before HCSIS Release 5.8.0 on April 28, 2007.

As a result of HCSIS Release 5.8.0, providers with a Site Not Specified location have the option of changing the name (Site Not Specified) to represent a specific address. Previously, the provider's business address was used to create one site for every provider. This site is referred to as Site Not Specified, because it is based on the business address, which may or may not be an address where services are offered. Refer to the next question for instructions on how to change the name of Site Not Specified.

Do not create another site for the same address for any reason. If services are offered at the address of Site Not Specified, the provider can add those services to the site just like any other address. This site also may be used for ODP services that cannot be associated with a specific provider location (e.g., transportation services).

If a service has the same rate at multiple addresses, the service could be added to Site Not Specified. This may be helpful from a data tracking perspective, since the provider's payment file groups claims by service location ID.

Office of Long Term Living (OLTL) Central Office uses Site Not Specified for all OLTL services. Do not change OLTL services if any appear on the Provider Access website.

★ **How do I change Site Not Specified?**

Providers can change the name of Site Not Specified to represent a specific address. Providers can do this by going to the *Sites* screen, selecting the option button to the left of Site Not Specified and clicking [Edit]; this will allow you to change the name.

Please note that a name change to Site Not Specified has to be verified by the Master Provider Index (MPI) team that meets every two weeks. For instructions to provide the necessary documentation to the HCSIS Help Desk for verification, refer to *Appendix A* of the *Provider Access Updates Tip Sheet*.

Sites (Addresses and Service Locations)

★ **How do I remove sites?**

To remove a site, you must first delete or end-date the services associated with the site. Refer to the question "**How do I remove services?**" in this document for more details regarding deleting or end-dating services. After all services associated with a site are deleted or end-dated, the provider (using the Provider Registration Data Entry role) or AE personnel (using the County Provider Administration role) can remove the site.

Sites can be deleted from the Provider Access and HCSIS websites, but they cannot be deleted from MPI! When a provider's address is verified by the HCSIS Help Desk and MPI, it is saved in MPI and assigned a service location ID. No information can ever be deleted from MPI; it can be updated, but it cannot be deleted. Therefore, the provider and AE personnel can remove services from the HCSIS and Provider Access websites via the delete options, but those addresses will always be in MPI as service locations.

Refer to the *Provider Updates Tip Sheet* for step-by-step instructions to remove services and sites.

★ **What is a service location ID?**

A service location ID is a 4-digit code that represents one physical address and one provider type. Provider types are 2-digit codes that describe providers by the services they offer. Thus, a service location ID is generated based on the combination of a provider type and a physical address. Specialty codes do not affect the service location ID as they are based on the provider type. The service location ID is generated by MPI and is used by providers on claims submitted to PROMISE™.

★ **Can more than one service location ID be added to one site?**

Yes. A service location ID is created for each unique combination of a site physical address and a provider type. If the provider already exists in MPI, there may be existing service locations that can be copied directly into HCSIS. **It is important to check for any existing MPI Service Locations to avoid duplication in HCSIS and PROMISE™.** Before creating any new service locations in HCSIS, review all existing service locations on the *MPI Location* screen in HCSIS.

★ **How do I add a new service location to a site?**

A new service location is necessary if a provider is going to bill for services rendered at a specific site for a specific type of service (e.g., services for the provider type 51-Home and Community Services). If the provider type and address combination does not exist for the provider, a new service location can be created on the Provider Access website via the Provider Registration Data Entry role.

Adding a new service location to an existing site requires the activities described below. Refer to the *Provider Updates Tip Sheet* for step-by-step instructions to perform these activities.

- First the provider should review all the addresses and service locations on the *Sites* screen on the Provider Access website. Select the option circle to the left of the site name to be edited and click [Continue]. The *Service Location* screen appears for the selected site. Click [Add] and select the appropriate provider type, specialties, and NPI and Taxonomy, if applicable. Click [Save] to save the information.



Note: If the address is not listed on the *Sites* screen, the provider should create a new service location for a new address. This process is explained step-by-step in the *Provider Updates Tip Sheet*.

- ☑ The provider sends the required documentation to the HCSIS Help Desk (refer to *Appendix A* of the *Provider Updates Tip Sheet*) so the new provider type can be verified in HCSIS and MPI. After the new provider type is verified, a new service location ID is created automatically in MPI and displayed in HCSIS.
- ☑ After the new service location is verified in HCSIS and MPI, the provider can add services to the site on the Provider Access website. At that time, AEs can create service contracts and services can be added to plans in HCSIS.
- ☑ Before the provider can bill PROMISE™ for these services, the provider has to enroll the service location in PROMISE™. Refer to the last question in this document for instructions to enroll service locations in PROMISE™.

★ **What should I do if a site address is moving?**

The existing address should be end-dated as of the last date that services will be rendered from that site. A new site for the new location should be created on the Provider Access website. This is explained in more detail below. Refer to the *Provider Updates Tip Sheet* for step-by-step instructions to perform these activities.

On the Provider Access website, the services at the existing address should be end-dated and a new site (address) created. The provider has to send documentation to the HCSIS Help Desk (refer to *Appendix A* of the *Provider Updates Tip Sheet*) so the change of address can be verified by the HCSIS Help Desk and MPI. After verification, the services and contracts for the new site can be entered into HCSIS, and the provider can enroll the new service locations in PROMISE™ for billing. Refer to the last question in this document for instructions to enroll service locations in PROMISE™.

If errors occur when end-dating services for the old site address, the provider or the AE can run the *Provider Service Status Report* in HCSIS to review all the service information for the old site address. The report lists all the services associated with the site and lists the dates of any contracts with any AE, or if the service has been added or requested (i.e., service request) on plans. Refer to the question "**How do I remove services?**" in this document for more details regarding end-dating services.

★ **Why am I seeing a site providing services to an AE where the site is not located?**

Providers can offer services to an AE regardless of where the provider's site is actually located. The county where a provider's site is located can be completely independent of the county or counties with which the provider offers services. Thus, a provider can offer services to multiple counties at the same site.

★ **Why is it important to close sites and keep service locations up-to-date?**

Updating site and service information in Provider Access prevents counties from creating new service contracts for services offered at unused sites. If service contracts are created at unused sites, SCs can select these services and add them to plans. Best practice for providers is to end-date the services and delete sites no longer in use.

★ **How many times must sites be entered if funding is received from separate counties?**

Sites are entered once; however, providers will have separate service offerings and contracts (and different rates, potentially) for each county. Thus, service locations are entered once. On the *Services* screen, the services available can be offered to various counties via one service location ID.

★ **What is the [Reuse MPI#] button on the Sites screen?**

The [Reuse MPI#] button allows users to see the service locations already enrolled in PROMISE™ and not known to HCSIS for that provider type. If a service location is selected from this list, the information in PROMISE™ is copied into HCSIS. **In this way, HCSIS/PROMISE™ mismatches are prevented and users do not have to enter the same data in multiple systems.**

Services

★ **How do I remove services? Why can't I end-date a service?**

Providers can remove services by end-dating or deleting them on the Provider Access website via the Provider Registration Data Entry role. If a service's end-date is in the past, the service will no longer appear on the provider's list of service offerings. If all services associated with a particular address are end-dated or deleted, that address can be removed from the Provider Access website as well.

If errors occur when trying to end-date or delete services, the error informs the user why the service cannot be end-dated or deleted. The most common reason for error is because the end-date or the deletion conflicts with other information recorded in HCSIS for that service. For example, if a service is contracted until 6/30/2007, an error will occur if the user tries to delete or end-date the service prior to 6/30/2007. A service can have a contract and/or a service request (a Supports Coordinator has requested a provider's uncontracted service on an individual's plan). Both contracts and service requests have start and end-dates which are taken into consideration when a service is end-dated. Here are the different types of records that have end dates that can conflict with the date on which you want to end a service.

1. Contracted rates: set by the AE.
2. Service requests: Supports Coordinator requested this service for a specific timeframe in the plan even though the service does not have a contracted rate.

The provider or the county can run the *Provider Service Status Report* and the *Impact of Service Removal Report* in HCSIS to view what is preventing a service from being end-dated or deleted. If contracts or service requests exist, they can be deleted so that the service can be deleted. However, deleting contracts and service requests requires extra work to revise plans and delete contracts. Instead, you can end-date the service with a date on or after all the contracts and service requests expire. For step-by-step instructions to end-date or remove a service, refer to the *Provider Updates Tip Sheet*.

★ **How do I know if a service is attached to a plan before attempting to delete the service?**

AEs have access in HCSIS to run the *Impact of Service Removal Report*. This is an overnight report that identifies all of the plans that contain the service for which the report is run.

★ **Why can't I find a service in the list to add to a site?**

Only services associated with verified provider types and specialties are displayed for selection on the Provider Access website. For example, if you want to add a respite service, and the site has the provider type for transportation only, you will be able to add transportation services only and will not be able to add a respite service.

The provider should add to the site the provider type and specialty **associated** with the service to the site and send the appropriate documentation to the HCSIS Help Desk for verification of the new provider type. After the new provider type is verified by MPI and DPW, a new service location ID for the new provider type and address combination will be assigned to the site. Now the provider can return to the Provider Access website to add the services associated with the new provider type. To bill for these services, the provider has to enroll the new service location in PROMISe™.

★ **How are rates given to the services I add?**

When services are added to a site on the Provider Access website, all the selected services appear automatically in HCSIS so the County Contract Administrator role can enter rates for the services. Only the County Contract Administrator role has HCSIS access to these rates. The rates appear in HCSIS and on the *View Services* screen on the Provider Access website. The rates also appear in the internal Services and Supports Directory (SSD) that Supports Coordinators use to add services to plans.

★ **How do I offer services from one site to many AEs?**

Providers have to list all the services they offer by AE and address. For example, if a provider offers five services to three different AEs, there will be 15 service lines listed on the *View Services* screen on the Provider Access website.

First the Provider Access website requires the provider to select the Program Office, County/Joinder and Site to which they want to add services. You must then select each service that is provided through this site and contracted with the selected AE. You will then be prompted to enter a tentative begin and end date. The **end date** field is not required. Even if you have a contract for a service that ends on a certain date, leave this field blank unless the provider will no longer be offering the service as of a specific date.

For step-by-step instructions to add services on the Provider Access website, refer to the *Provider Access Updates Tip Sheet*.

When updating a service location, make sure that the services associated with the site are end-dated or deleted if the provider will no longer offer the services.

★ **On the Services screen under contract rates, what happens if rates change in the middle of the year? Is there a way to see the history of rates for the fiscal year?**

Only current rates are listed on the *Services* screen, however, the person with the Provider Registration Data Entry role has access to view service authorization notices (*Tools > Notices > Service Authorization Notice*). The historical notices are available and will contain the original rate.

★ **Why do AEs have the ability to modify services?**

Smaller providers requested AE support because those providers often do not have the time or technology to make the additions or changes quickly enough to support claims processing. AEs have been instructed to notify providers when changes are made to site or service data on behalf of a provider.

Verification Process

★ **How does the verification process work and how long can verification take?**

The verification process begins with the updates made on the Provider Access website. Based on the change made, the provider will fax information to the HCSIS Help Desk. Refer to *Appendix A* in the *Provider Updates Tip Sheet* for a detailed list of the information necessary for verification.

The verification process is dependent upon the type of change to the provider's information. Verifications that need the approval of the MPI team (provider name changes, business address changes, FEIN changes, etc.) can take at least two weeks based on the MPI team's review of the change requests. Other changes, such as the addition of new sites or new provider types (each prompting new service locations) may take only a few days to verify.

After verification by the HCSIS Help Desk and MPI, the new service location should be enrolled in PROMISE™ so it can be used to bill for services rendered. Refer to the last question in this document for instructions to enroll service locations in PROMISE™.

★ **How can I tell if something has been verified or not?**

There are two different statuses:

1. **Verification Pending** status means that the update has **not** been accepted or rejected.
2. **Verified** status means that the update was accepted or rejected. If an update is rejected, the address reverts to its original **Verified** status without the updates! Therefore, seeing **Verified** in the Status column means that a decision



has been made regarding the update. You must review the address to determine if the update was accepted or rejected.

To check the verification status of the provider's service locations and sites, refer to the *Sites* screen on the Provider Access website. To check the verification status of the provider's business, mailing and payment addresses, refer to the *Addresses* screen on the Provider Access website. For step-by-step instructions, refer to the *Provider Access Updates Tip Sheet*.

★ ***Is verification required when site information is modified?***

Any changes to Site/Service location information (including specialty codes) requires verification via a letter/fax to the HCSIS Help Desk. Once verified, the service location ID will be updated and **Verified** will appear in the Status column.

★ ***When verification documentation is submitted, can we send in the PROMISE™ application at the same time?***

Yes, but DPW must first verify the site and, therefore, the PROMISE™ application is likely to be delayed.

★ ***What should I do if my provider name is changing?***

The provider name is read-only on the Provider Access website. To change the provider name, the provider should explain the reason for the name change (e.g., typographical error, merger of two providers, etc.) on agency letterhead with an authorized signature (CEO or Director). The provider should also attach a copy of their FEIN documentation, and fax or mail both to the HCSIS Help Desk. Any provider name change must be approved by the Department of Public Welfare (DPW). The key point to consider when requesting to change the information in Provider Access, which ultimately updates MPI, is that the provider has to bill PROMISE™ with the same NPI # and/or MPI# that is used in Provider Access.

★ ***If the company CEO isn't readily available to notify the HCSIS Help Desk of changes, can a designated person sign the letter?***

If the CEO or Director is not available, a designated person who can make changes (registered user) can request changes on behalf of the provider. The designated person should complete the required information on the agency letterhead and sign for the CEO or Director.

★ ***Can you edit a site name without faxing verification to Help Desk?***

Any changes to the site or service location information requires verification.

Other

★ ***Why does site and service information in Provider Access change without my changing it? How can the county change this information?***

Any person employed by the provider with the Provider Registration Data Entry role can update the provider's site address and service information via the Provider Access website. Some providers may have more than one person with this role.

Additionally, the County Provider Administrator role can make changes to a provider's information via the HCSIS website, using the County Access to Provider functionality. This AE role can update the provider's services offered in their county only, and they can also update the provider's address information.

Verification of AE Updates: If the AE makes address changes on behalf of a provider, the provider is responsible for providing the proper documentation to the HCSIS Help Desk for verification of the change. If the provider is unwilling to send in the documentation or is no longer in business, the AE is authorized to submit and sign the verification documentation. Service changes do not require verification.

★ **What is a National Provider Identifier (NPI)? When is it required?**

An NPI is the unique identifier that DPW uses to track providers who offer services to individuals through DPW programs (ODP, OLTL, OMHSAS, etc).

For more information and answers to your questions about NPI #s, please refer to the following link:

<http://www.dpw.state.pa.us/Business/NPIinfo/>

★ **What other information is available to help me?**

- ☑ PROMISe™ is managed by the Office of Medical Assistance Programs (OMAP) so you can direct questions about PROMISe™ to the OMAP website: www.dpw.state.pa.us/omap. To enroll service locations in PROMISe™ for billing, follow these steps:
 - Click the [Provider Info](#) link;
 - Click the [Provider Enrollment Info](#) link;
 - Click the [Enrollment Application/Provider Agreement](#) link; and
 - Complete the form and mail or fax it to the ODP Provider Enrollment, Room 413, Health & Welfare Building, Harrisburg, PA 17101 (fax 1-717-783-5141).
- ☑ A *Provider Registration Job Aid* and a *Provider Updates Tip Sheet* are available on the Provider Access home page. Go to www.hcsis.state.pa.us and click the [Provider Access](#) link.
- ☑ All training materials discussed in this document are available on the Learning Management System (LMS). Go to www.hcsis.state.pa.us and click the [Learning Management System](#) link. After logging into the LMS, select the [My Curriculum](#) link and find the [PROV100I OMR Provider Access Working Session](#) course, which lists all the training materials you can download for reference. Your LMS User ID must include the Provider Registration Data Entry or the County Provider Administration role to have access to these materials.



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