



COMMISSIONER
Adelaide Horn

January 8, 2008

To: Home and Community-Based Services (HCS) and Texas Home Living (TxHmL)
Program Providers

Subject: Information Letter No. 08-05
Change to the Client Assignment and Registration System (CARE) Waiver Data Entry
Training Agenda

This letter is to inform you of a change to the HCS and TxHmL Waiver Data Entry Class agenda for the classes to be held in 2008 (refer to Information Letter IL 2007-105 for the schedule of classes for 2008). The following will no longer be included in the training:

III. Provider Claims Services

- A. Provider Claims Overview including AA, MHM, and Dental Claims
- B. Assigning New Employees Provider Staff Codes: C13
- C. Staff ID Inquiry: C78
- D. Recording Service Delivery (Billing): C22
- E. Service Delivery Inquiry by IPC (Billing Inquiry): C72
- F. Service Delivery Inquiry by Provider (Billing Inquiry): C73

If you are interested in receiving instruction about how to bill via CARE, please contact Mark Dermit, Manager, Claims Management Department, Special Programs and Services, at 512-438-2120 or email at mark.dermit@dads.state.tx.us.

The revised agenda is attached.

If you have any other questions about the training, please call Stephen Kreger at 512-438-5031.

Sincerely,

[signature on file]

Terry Childress
Manager
Program Enrollment Unit

Attachment

TC:sjk

c: Susanne Elrod, Texas Council of Community MHMR Centers
Carole Smith, Private Provider Association of Texas

HCS and TxHmL Waiver Data Entry Training Agenda

DAY 1

I. Introductions, Housekeeping, and Agenda

II. Provider Services-Billing and Payment

- A. Billing Guidelines
- B. Protocol for Provider Reviews
- C. Minor Home Modifications
- D. Adaptive Aids

Lunch

III. MR/RC and IPC

- A. Overview of Utilization Review
- B. Overview of IPC (backdating, cost cap, consumer holds, non-waiver services)
- C. Overview of MR/RC (CARE inquiry screens, LON increase, ICAP)
- D. Overview of MR/RC form
- E. Frequently asked questions/information

IV. Texas Home Living Overview

V. Security and Keyboard Information

VI. Critical Incident Reporting

- A. Overview
- B. Data Entry of Incidents: 686
- C. Inquiry Screens: 286

VII. Medicaid Eligibility

VIII. Waiver Contract Areas

Day 2

IX. Establishing Provider Locations and Consumer Assignments

- A. Establishing a New Location: C24
- B. Adding a Client Assignment: C26
- C. Modifying the Location Type: C25
- D. Revising the IPC: C02
- E. Location and Assignment Inquiry: C27, C84, C85, C86

X. Renewing an MR/RC Assessment

- A. MR/RC Expiration Inquiry: C65
- B. Renewing the MR/RC: C23
- C. MR/RC CARE Inquiry: C68 and C83

XI. Renewing an Individual Plan of Care (IPC)

- A. IPC Expiration Inquiry: C64
- B. Renewing the IPC: C02
- C. Individual Plan of CARE Inquiry: C62

LUNCH

XII. Transferring a Consumer

- A. Overview
- B. Transferring Provider Entries: C06
- C. Receiving Provider: C09
- D. Receiving Provider: C09
- E. Transfer IPC: C02
- F. Receiving Provider: C06
- G. Consumer Roster: C67

XIII. Discharging a Consumer

- A. Overview
- B. Initiating a Temporary Discharge: C18
- C. Ending a Temporary Discharge: C18
- D. Entering a Permanent Discharge: C18
- E. Discharge Inquiry: C66

XIV. Updating Consumer and Provider Data

- A. Updating Consumer Information: C09, C10, C11, C12, and C20
- B. Updating Provider and Contract Information: C14

XV. Questions and Completion of Evaluation Form

XVI. Go Home