

ONLINE SERVICES RENDERED

Services Rendered claims must be submitted using the MPER service offering ID.

- Search and focus a client
 - Click Client>Search
 - Enter search criteria
 - Click SHOW
 - With the client in focus, navigate: Service>Services Rendered>Services Rendered List
 - Click New button

In Focus

User Name: Michael Opat
 User ID: X005868
 Agency: MILESTONE CENTERS INC
 Entity Type: Client
 Entity Name: patti page
 Entity ID: 430728
 MCI ID: 1000865301
 Primary Provider:

Services Rendered List
 *Denotes Mandatory Fields

Services Rendered Filter

Filter By Program Office and Claim Category
 DHS Program Office: Office of Behavioral Health
 Claim Category: Mental Health

Filter By Reporting Period
 Reporting Period*: May-2017

Filter By Service Dates
 From Date: [] To Date: []

Filter By Provider Claim ID
 Provider Claim ID: []

Filter By Provider
 Provider: []

Filter By Service
 MPER
 CIPS (Historical)

Filter By Status
 Status: []

Filter By Type
 Type: []

Filter

Services Rendered List

Client ID	First Name▲	Middle Name	Last Name	Provider Claim ID	Provider	Service Offering ID	Specialized Service Code	Service	Service Rendered Date	Status	Type	Eligibility
○												

Note: History of services provided by other agencies is only available to providers who have rendered services to the client within the last 6 months.

New Show Claim History Cancel

- Enter the Service Date - which will change the Reporting Period
- Start typing the service name (start with cost center name such as outpatient) **OR** the service code
- Choose the service code/service name

CIPS MPER SIT Version: 1.0.0 - Internet Explorer

Department of Human Services
Allegheny County, Pennsylvania

CIPS
Client Information & Payment System

Client Service Admin

Services Rendered Services Rendered List Services Rendered

In Focus
User Name: Michael Opat
User ID: X005868
Agency: MILESTONE CENTERS INC
Entity Type: Client
Entity Name: patti page
Entity ID: 430728
MCE ID: 1000865301
Primary Provider:

Services Rendered
*Denotes Mandatory Fields

Specialized Services List

Provider Claim ID	Provider	Specialized Service Code	Specialized Service Name	Service Date	Units	Total Amount	Status	Type	Eligibility

General Information

General Information

Service Date* 03/01/2017 Reporting Period* Mar-2017

Provider* MILESTONE CENTERS INC

Service Name* out CIPS Service (Historical)

90846 - Treatment | Outpatient | Family Psychotherapy - Collateral Only
90837HE - Treatment | Outpatient | Indiv Psychotherapy 53-74 min
M0064HE - Treatment | Outpatient | MD Med. Visit with Med administration
M0064U7 - Treatment | Outpatient | Complex Medication Visit with no medication administration (MD only)
90832EY - Treatment | Outpatient | Interagency Team Meeting | Therapist Participation
90792HE - Treatment | Outpatient | Psychiatric Evaluation by MD
H0034HK - Treatment | Outpatient | Clozaril Monitoring
T1016J6 - Service Coordination | Administrative Management | Service Coordination-Outreach
H2010HK - Treatment | Outpatient | Clozapine Support Services
90834HE - Treatment | Outpatient | Indiv Psychotherapy 38-52 min
90806SC - Treatment | Outpatient | IMH Clinical Evaluation or O Assessment/Intake
M0064HP - Treatment | Outpatient | MD Medication Visit with no medication administration

Search
Service Offering ID
Update Cancel

Provider Claim ID
Specialized Service Code
Place of Service*

Authorized Service Fund
Specialized Service Name
Program

Fund Exception Code
Claim Type
Urgency Code*

Cost (Information Only)
Agency Fee
Client Liability Fee
MA Fee

3:28 PM
5/22/2017

- Choose the Facility in the dropdown list
 - This will populate the MPER service offering ID number

The screenshot shows a 'General Information' form with the following fields and values:

- Service Date*: 03/01/2017
- Reporting Period*: Mar-2017
- Provider*: MILESTONE CENTERS INC
- Service Name*: 90837HE - Treatment
- Facility*: MILESTONE - 712 SOUTH AVENUE
- CIPS Service (Historical):

On the right side, there is a search box with the text '76616' and two buttons: 'Update' and 'Cancel'.

- The Specialized Service Code is populated
 - *The Specialized Service Name will be blank*
- The Claim Type will populate with fee for service or program funded
- Choose the Place of Service
- Program will populate or choose whichever applies to the claim
 - Not Applicable
 - ACHA
 - FFP Rate for FFP claim * See FFP section
 - H2O
 - HACP
 - OBH Transition and Community Integration
 - PCCD Grant
 - Respond
 - Stand Together
- Choose the Urgency Code
- The Unit Type is populated
- Enter the Unit amount
 - The Unit Rate and Total Cost will populate the amounts after the claim is saved
- Enter the Diagnosis Information * Diagnosis information must be entered on the Diagnosis Screen
- Click Save
- Click New to continue entering claims for the client that is in focus

General Information

General Information

Service Date*	03/01/2017	Reporting Period*	Mar-2017
Provider*	MILESTONE CENTERS INC	CIPS Service (Historical)	
Service Name*	90837HE - Treatment Outpatient Indiv Psychotherapy 53-74 min		
Facility*	MILESTONE - 712 SOUTH AVENUE		

Search

Service Offering ID

76616

Update Cancel

Financial Information

Financial Information

Provider Claim ID	Authorized Service Fund	Fund Exception Code	Cost (Information Only) Agency Fee Client Liability Fee MA Fee Third Party Fee County Total
Specialized Service Code 90837HE	Specialized Service Name	Claim Type Fee For Service	
Place of Service*	Program Not Applicable	Urgency Code*	
Unit Type* Event	Units*		
County Claim			
Unit Rate	Total Cost	\$0.00	
<input type="checkbox"/> FFP Claim			
Unit Rate	Total Cost		

- Enter Cost Information if applicable. The payment will process the lower amount between the manually entered County Total and calculated Total Cost
- A copy function can be submitted if applicable

***FFP claim:** If the client is MA eligible, the county does not pay for the claim; however, the provider can submit an FFP claim which will pay a state determine amount.

- Choose FFP rate
- The Unit Rate and Total Cost will populate after clicking Save

The screenshot shows a 'Financial Information' form with the following fields and values:

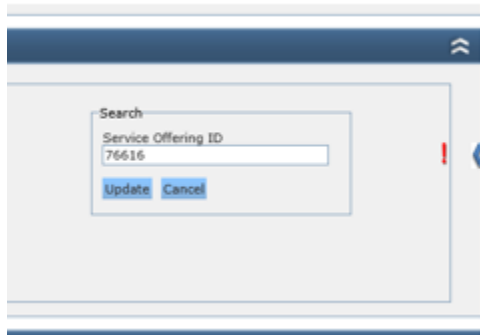
- Provider Claim ID: [Empty]
- Specialized Service Code: T1017U7
- Place of Service*: Community
- Unit Type*: Unit (.25 Hour)
- Authorized Service Fund: [Empty]
- Specialized Service Name: [Empty]
- Program*: FFP Rate (highlighted with a red circle)
- Units*: 1
- Fund Exception Code: [Empty]
- Claim Type: Fee For Service
- Urgency Code*: Emergency
- Cost (Information Only) section: Agency Fee, Client Liability Fee, MA Fee, Third Party Fee, County Total (all empty)
- County Claim section: Unit Rate \$5.00, Total Cost \$5.00
- FFP Claim section (highlighted with a red circle): FFP Claim, Unit Rate \$5.00, Total Cost \$5.00

This is a list of the services that qualify for FFP:

Crisis & Emergency Mental Health Crisis Intervention Mobile Crisis Individual Delivered	15 minutes	FFP_RATE	H2011HE
Crisis & Emergency Mental Health Crisis Intervention Mobile Crisis Team Delivered	15 minutes	FFP_RATE	H2011HT
Crisis & Emergency Mental Health Crisis Intervention Mobile Crisis Team Delivered - CACTIS	15 minutes	FFP_RATE	H2011HA
Crisis & Emergency Mental Health Crisis Intervention Residential	8 Hours	FFP_RATE	S9485
Crisis & Emergency Mental Health Crisis Intervention Walk-In Crisis	15 minutes	FFP_RATE	H2011
Service Coordination Intensive Service Coordination Blended Service Coordination (ICM)	15 minutes	FFP_RATE	T1017U7

Treatment and Service Coordination Family-based Mental Health Services Individual Interaction Family of Identified Patient Interpreter	15 minutes	FFP_RATE	H0004U6
Treatment and Service Coordination Family-based Mental Health Services Individual Interaction Family of Identified Patient Regular	15 minutes	FFP_RATE	H0004UK
Treatment and Service Coordination Family-based Mental Health Services Individual Interaction Identified Patient Interpreter	15 minutes	FFP_RATE	H0004U5
Treatment and Service Coordination Family-based Mental Health Services Individual Interaction Identified Patient Regular	15 minutes	FFP_RATE	H0004
Treatment and Service Coordination Family-based Mental Health Services Individual Interaction Other Agencies Interpreter	15 minutes	FFP_RATE	T1016U3
Treatment and Service Coordination Family-based Mental Health Services Individual Interaction Other Agencies Regular	15 minutes	FFP_RATE	T1016
Treatment and Service Coordination Family-based Mental Health Services Non-Psychiatric Inpatient Admission Interpreter	15 minutes	FFP_RATE	H0004U9
Treatment and Service Coordination Family-based Mental Health Services Non-Psychiatric Inpatient Admission Regular	15 minutes	FFP_RATE	H0004HE
Treatment and Service Coordination Family-based Mental Health Services Psychiatric Inpatient Admission Interpreter	15 minutes	FFP_RATE	H0004U8
Treatment and Service Coordination Family-based Mental Health Services Psychiatric Inpatient Admission Regular	15 minutes	FFP_RATE	H0004HK
Treatment and Service Coordination Family-based Mental Health Services Team Interaction Family of Identified Patient Interpreter	15 minutes	FFP_RATE	H0004U7
Treatment and Service Coordination Family-based Mental Health Services Team Interaction Family of Identified Patient Regular	15 minutes	FFP_RATE	H0004HT
Treatment and Service Coordination Family-based Mental Health Services Team Interaction Other Agencies Interpreter	15 minutes	FFP_RATE	T1016U4

- **Another way to enter information after bringing the client in focus:**
 - Click Client>Search
 - Enter search criteria
 - Click Show
 - With the client in focus, navigate: Service>Services Rendered>Services Rendered List
 - Click New
 - Enter the date of service
 - Go to SEARCH - SERVICE OFFERING ID field (see screen shot below)
 - Type the MPER Service Offering ID
 - Click the UPDATE button. This will populate:
 - Service Name
 - Facility
 - Specialized Service Code
 - Unit Type will populate for fee for service
 - Program
 - Choose Not Applicable
 - **Choose FFP Rate for FFP claim**



- Complete the remaining fields
- Click Save

- Enter claims by navigating to Provider Service Offerings
 - Service>Service Offerings>Service Offerings
 - Fiscal Year defaults to current fiscal year

NOTE: If a service/service code/facility is not listed; a new service offering ID must be created in MPER

- Refine service search by entering entire code/service or the first few numbers or letters to refine search- Click Filter

The screenshot shows the 'Provider Service Offerings' page in the Client Information & Payment System. A blue arrow points to the search criteria section. The search criteria are:

- DHS Office*: OBH - MH
- Provider Name: MANSFIELD PLACE - 1 SMITHFIELD ST
- Fiscal Year*: 2017-2018
- Service: MPER
- CIPS(Historical):

 A 'Filter' button is visible below the search criteria. Below the filter is a table of service offerings:

Service Offering ID	DHS Office	Specialized Service Code	Service	Provider Agency Name	Facility Name	Start Date	End Date
<input checked="" type="radio"/> 20390	OBH - MH	T1017U7	Service Coordination Intensive Service Coordination Blended Service Coordination (ICM)	MANSFIELD PLACE - 1 SMITHFIELD ST	MANSFIELD PLACE - 1 SMITHFIELD ST	7/1/2017	6/30/2018
<input type="radio"/> 20389	OBH - MH	90832HE	Treatment Outpatient Indiv Psychotherapy 16 -37 min	MANSFIELD PLACE - 1 SMITHFIELD ST	MANSFIELD PLACE - 1 SMITHFIELD ST	7/1/2017	6/30/2018

At the bottom of the table, there are 'Show' and 'Cancel' buttons.

- Sort columns by clicking into the column heading
- Choose the Service Offering
- Click Show
- Change the Reporting Period to a previous month
- Choose the client (client only shows if a claim has been entered in previous month(s))

- Click Show
- Click New to proceed to the Services Rendered Screen

Client | **Service** | Admin | SAP Program | Logout

Service > Service Offerings > Service Offerings | **Services Rendered Recent Client List**

In Focus

User Name: **KDTEST5 KDTEST5**
 User ID: **KDTEST5**
 Agency: **MANSFIELD PLACE - 1 SMITHFIELD ST**

Entity Type: **Service Offering**
 Entity Name: **Service Coordination || Intensive Service Coordination || Blended Service Coordination (ICM)**
 Entity ID: **20390**

Services Rendered Recent Client List
*Denotes Mandatory Fields

Services Rendered for DHS

Reporting Period* Search Client
 Client ID First Name Starts With Last Name Starts With

Client List

Client ID	First Name▲	Middle Name	Last Name	Authorization Start Date	Authorization End Date	Hide?
<input checked="" type="radio"/> 3856	Cloudy		Days			<input type="checkbox"/>
<input type="radio"/> 3844	Rainy		July			<input type="checkbox"/>

Client Type

Active Clients
 All Clients

Refine a search by entering the Client ID or Full name>Filter

Services Rendered Recent Client List
*Denotes Mandatory Fields

Services Rendered for DHS

Reporting Period* Jul-2017

Search Client Client ID 3856

First Name Starts With

Last Name Starts With

Client List

Client ID	First Name▲	Middle Name	Last Name	Authorization Start Date	Authorization End Date	Hide?
<input checked="" type="radio"/> 3856	Cloudy		Days			<input type="checkbox"/>
<input type="radio"/> 3844	Rainy		July			<input type="checkbox"/>

Client Type

Active Clients
 All Clients

Show Cancel Hide Unhide

Other options:

- Search from the Home Page
 - Search for Client by name or Client ID
 - Submit A Claim by typing the MPER service offering ID number OR the service name--*this function will not work until claims are submitted for clients*. A client can be chosen from the 'Services Rendered Recent Client List' on the Service Offering Screen as claims are submitted for clients

