ADSA Web Access – County Training

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Overview

The **ADSA** (Aging & Disability Services Administration) **Web Access** is a system designed to support County services for the Developmental Disabilities Administration (DDA) clients. *Please note that ADSA is now known as ALTSA (Aging and Long-Term Administration).*

ADSA Web Access (AWA):

- Offers a consistent and reliable interaction for Counties statewide.

- Provides a County connection to specific areas of CARE (Comprehensive Assessment Reporting & Evaluation) application.

- Collects more information from Providers to monitor quality.

- Automates the billing and service authorization processes.

- Connects to ProviderOne for payment. ProviderOne is a modern and efficient payment system that provides timely payment, reduces payment errors and fraud, and maximizes federal matching dollars.

About this Workbook:

This workbook provides exercises to get you up and running quickly on AWA. The exercises are self-paced and designed to first tell you about a course of action, and then give you an opportunity to try it, step-by-step.

Help:

Please direct all questions about the AWA system to the ALTSA Help Desk at:

- o In the Olympia Area: 360-725-2460
- o Statewide: 1-800-818-4024
- o E-mail: ALTSAHelpdesk@dshs.wa.gov

When you contact the ALTSA Help Desk you will receive a response within 24 hours and will be given a tracking number. All contacts will be tracked in a database to ensure a resolution is established.

Please see the *Login – Security* information on page 6 of this manual for additional information about logging in for the first time.

Please turn to the next page to get started.

Get Started

Web Browser – Get Around – Quick Review

Launch the browser:
Launch your web browser as you normally do.

Menus and Links:

For Internet Explorer 11 or Firefox:
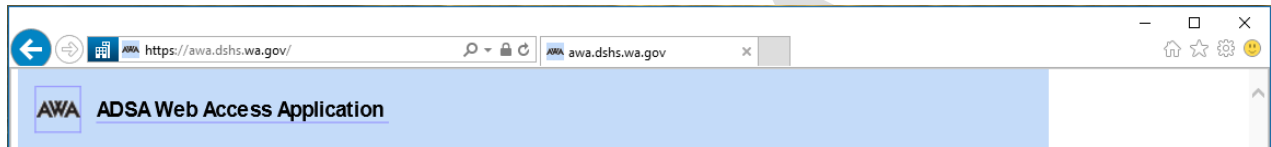
Navigation Buttons:

- The "Home" ⌂ button returns you to the main page – all browsers
- The "Back" ⬅ button returns you to the previous page(s) – all browsers.

Launch ADSA Web Access:

 Enter the ADSA Web Access address: https://awa.dshs.wa.gov/

Tip if you have problems viewing information – CMIS screens are getting cut off - you can always change your view through a couple of quick keyboard combinations:

- **Hold CTRL and press** + to increase text size – all browsers
- **Hold CTRL and press -** to decrease text size – all browsers

Please turn to the next page for information on how to login.

Login

The ADSA Web Access is a site on the web where many users can access data. There are several other groups besides Counties who need limited access to client data. Some of these people will use the same ADSA Web Access; however, their security group will only allow access to the specific site they need.

Prior to Login you need to obtain you Username and Password thru the ALTSA Helpdesk (see page 4 for contact information).

1. Please *type* in your username.

2. *Enter* the Password and select *AWA County* for the domain and *click* Login.

Sign in to AWA

Please log in to your ADSA Web Access account:

Username:

Password:

Select a Domain:

Login

3. *Pull down* the County menu and *see* your County(s).

4. *Click* Continue. The Work List will be displayed.

5. Notice the upper right corner of the screen. You will see your Username and the County where you are logged in. You will also see a <u>Help</u> link.

6. *Click* the Help link and explore it now. (Close when you are finished.)

Please turn to the next page for information on login security.

Login - Security

We've implemented SSL (Secure Sockets Layer) to the ADSA Web Access. This will make the web site more secure by preventing others from gaining access to sensitive private information. Internet Explorer needs to be configured for the ADSA Web Access so that the SSL will work smoothly.

Internet Explorer 11:
When you first go to the website, you will see the following dialogue box:
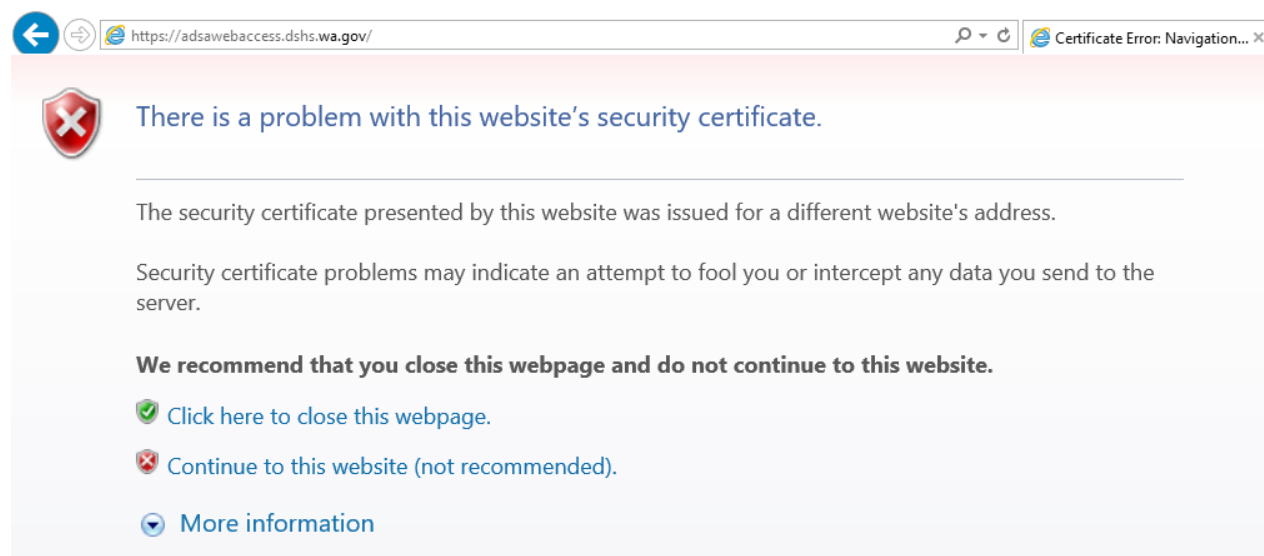
You see this error message because IE 11 has a detection system that checks to see if a website's security certificate is signed by a valid third party organization. IE 11 does not understand that we (like many small organizations that exist today) sign our own security certificate.

You will have to specifically tell IE 11 that ADSA Web Access is a trusted site.

Please turn to the next page for more information on login security.

Login – Security continued

1. To resolve this, *click* "Continue to this website (not recommended)".

2. When ADSA Web Access is displayed, *click* on the box with the words "Certificate Error"; it should have a red shield with an **X** next to it. A pop-up will appear:
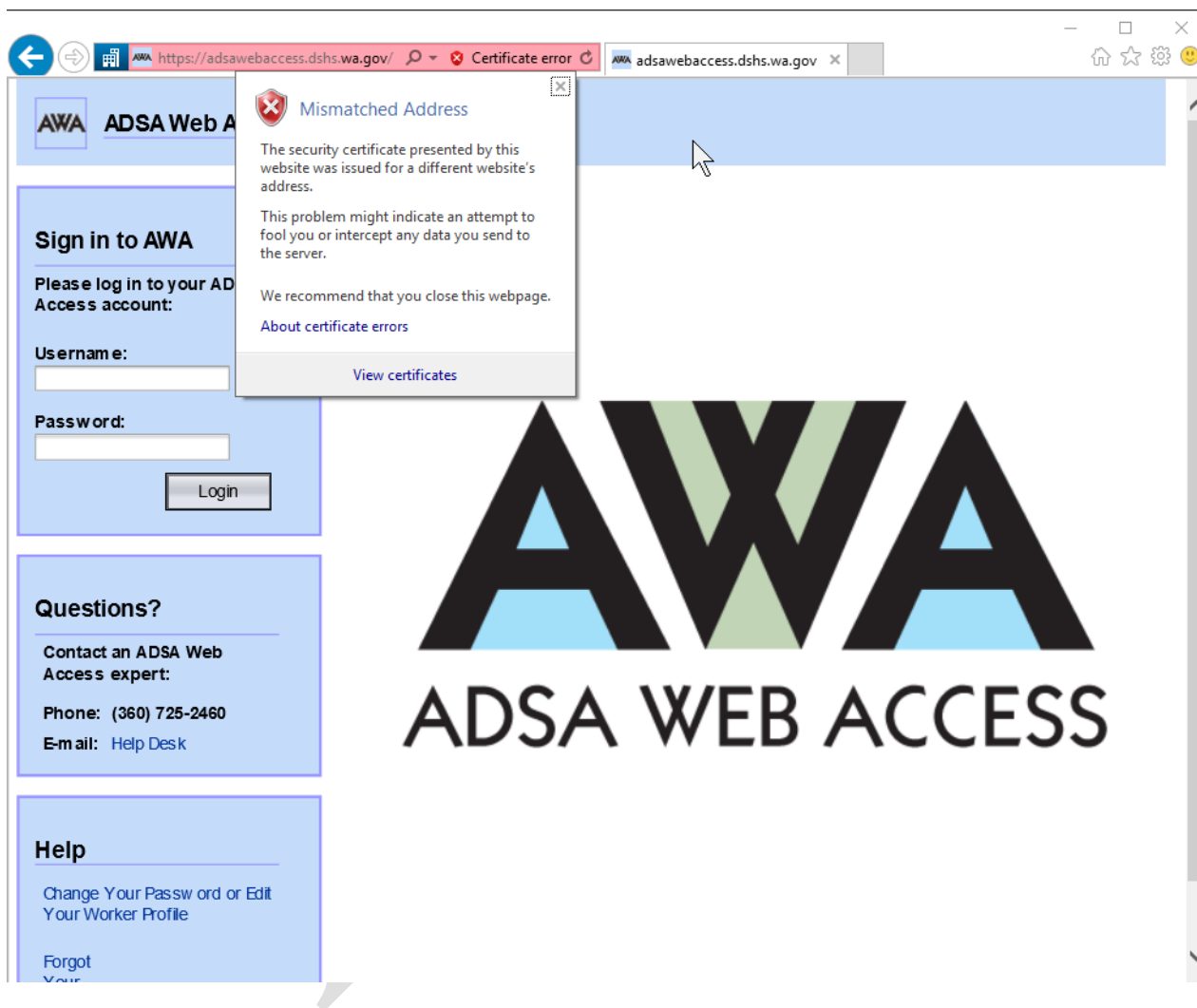
3. *Click* View Certificates; the Certificate will appear.

4. *Click* the "Install Certificate" button, and *follow the Wizard* to install the certificate.

Please turn to the next page for more information on login security.

Login – Security continued

Firefox:
For Firefox, you will see the following warning when you first access the site:
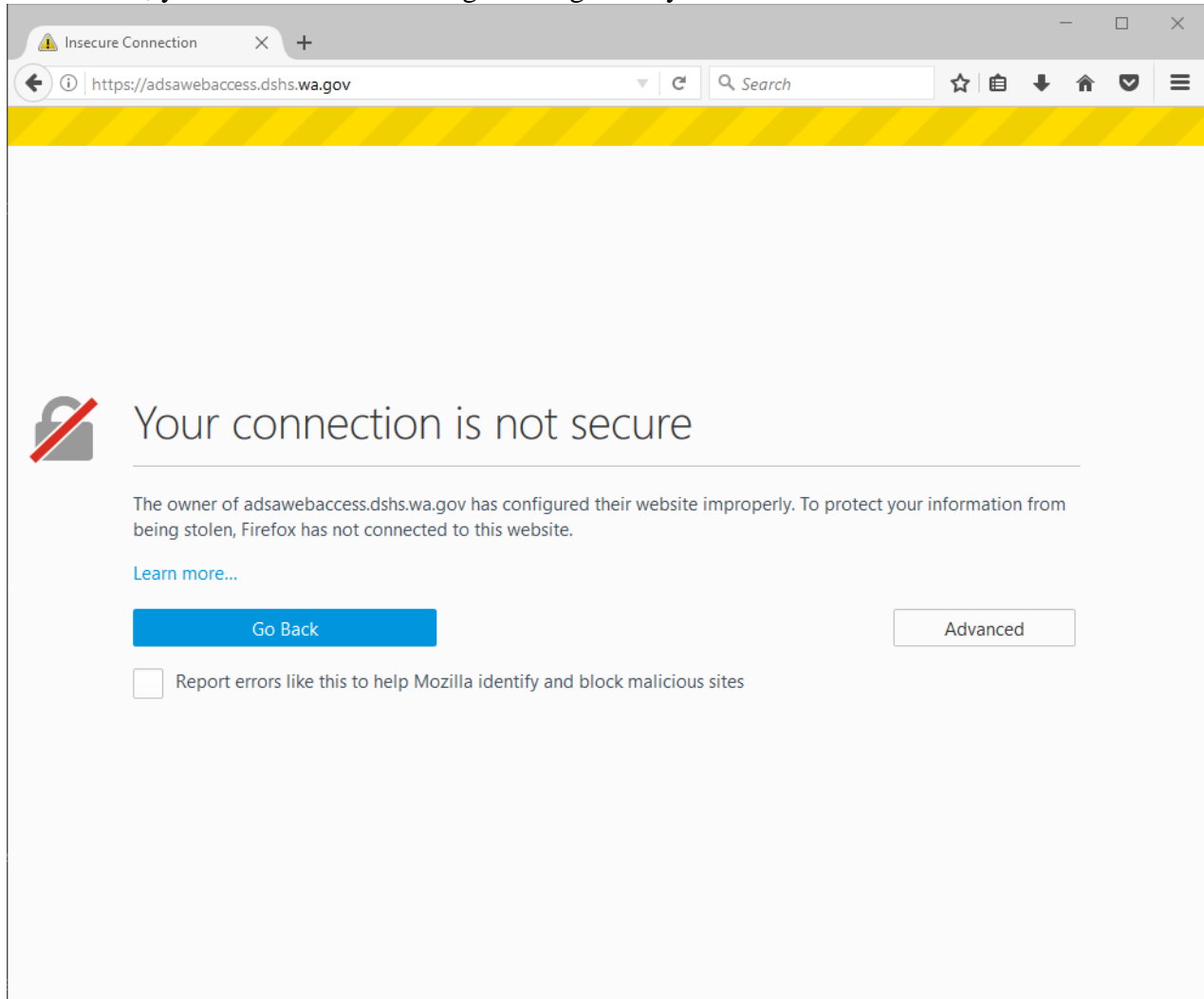
1. *Click* the Advanced button.

2. *Click* the Add Exception… button that appears below.

3. *Click* the Confirm Security Exception button in the resulting dialog box to complete importing the certificate.

If you are using a different browser and you have questions, please contact your IT support person, or contact the ALTSA IT Helpdesk.

Please turn to the next page for an overview of the Work List.

Work List – Get Started

Overview

The Work List displays notices and current activities about the status of referrals and authorizations. The Work List is dynamic and changes daily as work is performed.

The initial information in the Work List comes directly from client information entered into CARE (Comprehensive Assessment Reporting & Evaluation) by the DDA Case Manager.
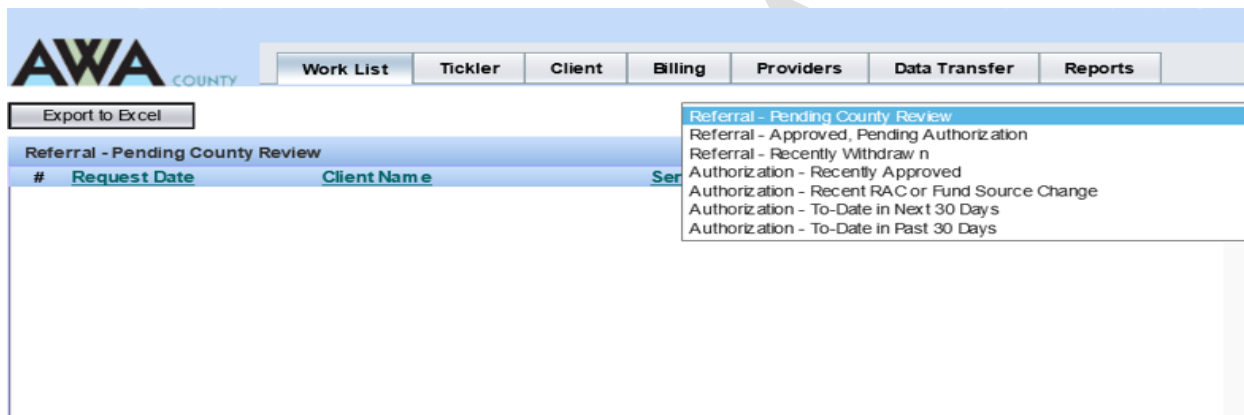
The Work List provides a method to manage the review/approval processes flow.

     Look at the items in the Work List:
1. *Pull down* the menu and *select* each choice to see the different lists.
       Choices include:
   a. Referral - Pending County Review
   b. Referral – Approved, Pending Authorization
   c. Referral – Recently Withdrawn
   d. Authorization – Recently Approved
   e. Authorization – Recent RAC or Fund Source Change
   f. Authorization – To-Date in Next 30 Days
   g. Authorization – To-Date in Past 30 Days

2. *Return* to "Referral – Pending County Review" when you are finished.

     To Sort any list:
3. *Click* a column header and the list will sort by that column. (Click again and the sort will go in the opposite order.)

Turn to the next page to practice navigating through the Referrals – Pending County Review.

Work List

Referral – Pending County Review

The DDA Case Manager will enter County referrals into CARE. When the Case Manager completes the information and marks the status as "Pending County Response" a notice is added to the AWA Work List.

The Service County will deny or approve the referral. When the County finalizes the referral, the DDA Case Manager will receive a "Tickler" the next day that the referral is ready for authorization or withdrawal.

If you click on a <u>Request Date</u> or <u>Client Name</u>, a screen detailing the County Service Referral Request will be displayed.

> **Try it:**
> 1. *Click* on a client's request date or name.
>
>   The Referral Request detail screen will be displayed. ***(We will work with this screen next!)*** Note: Once you are looking at a client's record, you have exited the Work List.
>
> 2. *Click* the Work List tab to return to the Work List.
>   Note: You have now exited the Referral Request and are back on the Work List.
>
> 3. Let's look at a client – choose a client from "Referral – Pending County Review."

Turn to the next page for information about the Referral Request detail screen.

Referral Request Detail Screen Overview

The Referral Request detail screen is divided into three (3) sections. The top section **"County Service Referral"** is populated from the CARE application that the DDA Case Manager completes, *and is view only*.

When you view the Referral Request detail screen you will see <u>links</u> to the client's information screens (Left column. We will explore these screens later).
The Resident County Response section is auto populated with information about the client's residence. **This is informational only.**

You can print this document to use as a planning tool when you are talking with the Provider. *Click* the **Print** button at the bottom of the screen–a PDF document will open. (Close when you are finished.)

Turn to the next page to finalize the client's referral request.

Finalize the Referral Request

Sample scenario:

Our client is a 21-year old student. The client recently graduated from school and is transitioning to adult services with a new job. The client has been referred to an Individual Employment Provider. Provider had determined that they will be supporting this client 16 hours/month.

1. You should be viewing your client's Referral Request detail screen.

2. *Scroll down* to the Service County Response section.

3. *Enter* the information into the fields. TIP: You can click into the next field, or press the [Tab] key to jump.

4. If you enter the "Response" first you will see that some items turn red and you will receive a "System Message" about required fields. Change the Response to be blank and continue.

5. Enter the "Planned Start" date, it cannot be earlier than the "Tentative Start Date" provided by the Case Manager.

6. The Unit Type will auto populate based on the selected Service Type.

Turn to the next page to continue an overview on finalizing the client's referral request.

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7. Confirm the Case Manager's chosen Provider by selecting the same one.
   Note: If you know something about this provider, like they are at capacity, reject the referral and make a comment to the Case Manager. In fact, if you notice any errors, like the service type doesn't seem appropriate, reject the referral and make a comment to the Case Manager.

8. Enter the Maximum units in a month or "Max Units/Month". This represents the service hours a client can expect to receive from the service provider in a month.

9. Enter the Maximum unit rate or "Max Rate/Unit". This should be consistent with your County's Rate / Fee Schedule and is connected to the "Unit Type" chosen.

10. Make sure to choose "**Approved**" for the Response) and "**Finalized**" for the Processing Status. The request can now be processed.

Here is an example of a referral ready to be finalized:

When the Service County changes the Processing Status to "Finalized" the client's DDA Primary Case Manager will be notified the next day.

NOTE: The "Planned Start Date" will be the default "From Date" on the Service Authorization.

Turn to the next page to continue an overview on finalizing the client's referral request.

Save the Referral Request

The `Cancel` button is like an "undo" button. It will cancel all the entries.

- If the screen is view only, the "Existing Authorization" box will be checked. This means that the request was previously finalized and an authorization already created.
- If DDA has withdrawn the request, the "Processing Status" field will display "Withdrawn" and the screen will be view only.

Click the `Save` button.

You will be returned to the Work List.

- Once you have finalized and saved the referral request, it will be dropped from the "Referral – Pending County Review" Work List. ***(Look at this Work List to see.)***

- The DDA Primary Case Manager will then authorize or withdraw this approved request in CARE.

- The request is added to the "Referral – Approved, Pending Authorization"

Turn the page to see what a case manager views in the CARE for Referrals / Authorizations.

Work List

DDA Case Manager Client Referral / Authorization Screen

DDA Case Managers use this County Referrals/Authorizations screen in CARE to process both referral requests and authorizations. This is what a Case Manger sees:

Referral Request +

Date	Service Type	Status	Response	Auth
02/10/2017	Individual Employment	Withdrawn		☐
06/23/2016	Individual Employment	Finalized	Approved	☑

Process

Authorization

Auth Number	Service Type	Provider Name	From	To
1234	Individual Employment	Provail	07/07/2016	06/30/2017
5678	Child Development Services	Kindering Center	06/16/1997	11/21/1997
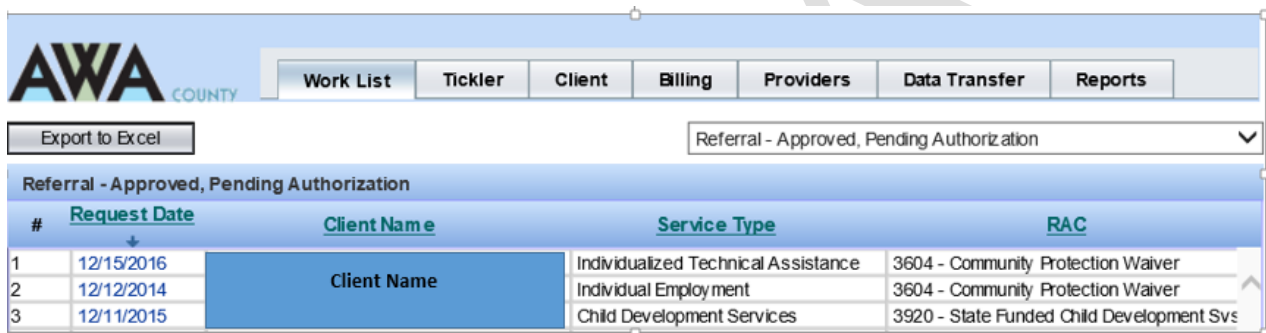
Turn to the next page to look at the Referral – Approved, Pending Authorization.

Work List

Referral – Approved Pending Authorization

"Approved, Pending Authorizations" are referrals that have been approved and are in finalized status. When you finalize a referral request, the DDA Case Manager will receive a tickler the next day in CARE. Clients will remain on this list until the referral request has been withdrawn, or an authorization has been created.

1. *Click* the Work List tab.

2. *Pull down* the Work List menu; *choose* "Referral – Approved, Pending Authorization".

	Work List	Tickler	Client	Billing	Providers	Data Transfer	Reports

Export to Excel				Referral - Approved, Pending Authorization		

Referral - Approved, Pending Authorization

#	Request Date	Client Name	Service Type	RAC
1	12/15/2016	Client Name	Individualized Technical Assistance	3604 - Community Protection Waiver
2	12/12/2014		Individual Employment	3604 - Community Protection Waiver
3	12/11/2015		Child Development Services	3920 - State Funded Child Development Svs

NOTE: Clicking client's name or request date will return you to the Referral Request detail screen. (Click the Back button on your browser to return to your place in the Work List.)

Referral – Recently Withdrawn

If DDA withdraws the referral, the request will be removed from the Approved, Pending Authorization list and placed on the "Referral – Recently Withdrawn" list. Referrals on this list have a status of "withdrawn" within the last thirty (30) days. Clients will remain on this list for thirty (30) days. They will be removed from this list after that time.

1. *Pull down* the Work List menu; *choose* "Referral – Recently Withdrawn".

Export to Excel			Referral - Recently Withdrawn	

Referral - Recently Withdrawn

#	Request Date	Client Name	Service Type	RAC
1	01/24/2017	Client Name	Child Development Services	3920 - State Funded Child Development Svs
2	01/25/2017		Individual Employment	3919 - State Funded Adult Employment or D
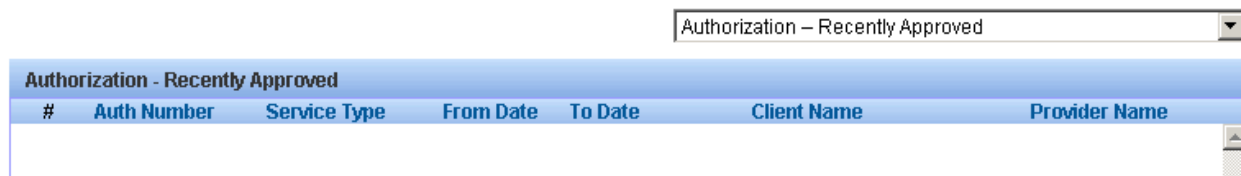
Turn to the next page to look at the Authorization – Recently Approved.

Work List

Authorization – Recently Approved

Once DDA has authorized the service, the referral will be removed from the Approved, Pending Authorization list and placed on the "Authorization – Recently Approved" list. *Recently Approved* authorizations are those that have been completed within the last thirty (30) days. Clients will remain on this list for thirty (30) days. They will be removed from this list after that time.

1. *Return* to the Work List; *choose* "Authorization – Recently Approved".

| Authorization – Recently Approved | ▼ |

Authorization - Recently Approved

#	Auth Number	Service Type	From Date	To Date	Client Name	Provider Name

Note: the number in the "Auth Number" column is a link.

2. *Click* the "Auth Number" to go to the County Service Authorization detail screen:
    This screen is view only.

Service Type:
Individual Employment

Provider Name: **Provider Number:**
PROVAIL   P337012

Address:
3670 Stone Way N

City: **State:**   **Zip:**
SEATTLE   WA   98103

Authorization Period

From Date: **To Date:**
02/28/2017   09/30/2017

RACs

RAC	Start	End
3602 - Basic Plus Waiver	02/28/2017	09/30/2017

Funding

| Source	Start	End

Status

Open

NOTE: Each Authorization is now required to have an end date. The end date (To Date) can be extended for one year at a time, with the exception of child development services. The "To Date" for child development services will auto populate with the date one day prior to the client's 3rd birthdate.

Turn to the next page to view the Authorization – Recent Funding Source Change list.

Work List

Authorization – Recent Recipient Aid Category (RAC) or Fund Source Change

"Recent RAC or Fund Source Change" records are authorizations with a second or subsequent **RAC Start Date** within the last thirty (30) days. The dates are recorded in the RACs table. Clients will remain on this list for thirty (30) days. They will be removed from this list after that time.

1. *Return* to the Work List; *choose* "Authorization – Recent Funding Source Change".

	Export to Excel					Authorization - Recent RAC or Fund Source Change	⌄

Authorization - Recent RAC or Fund Source Change

#	Auth Number	Service Type	From Date	To Date	Client Name	Provider Name	Closed
1	1234	Individual Employment	10/31/2015	02/28/2017	**Client Name**	Work Opportunities	☐
2	5678	Individual Employment	07/01/2015	06/30/2017		Work Opportunities	☐

2. *Click* the authorization number to go to the same Service Authorization detail screen.

    The **RAC** table displays funding history and shows the start date for each funding source for this service. Note: The "Funding" table shows a history of funding prior to RACs, January 1, 2016.

Authorization Period

From Date:	To Date:
10/31/2015	02/28/2017

RACs

RAC	Start	End
3919 – State Funded Adult Employment or Day	10/01/2016	02/28/2017
3602 – Basic Plus Waiver	06/01/2016	09/30/2016
3602 – Basic Plus Waiver	10/31/2015	05/31/2016

Funding

Source	Start	End
B+	10/31/2015	
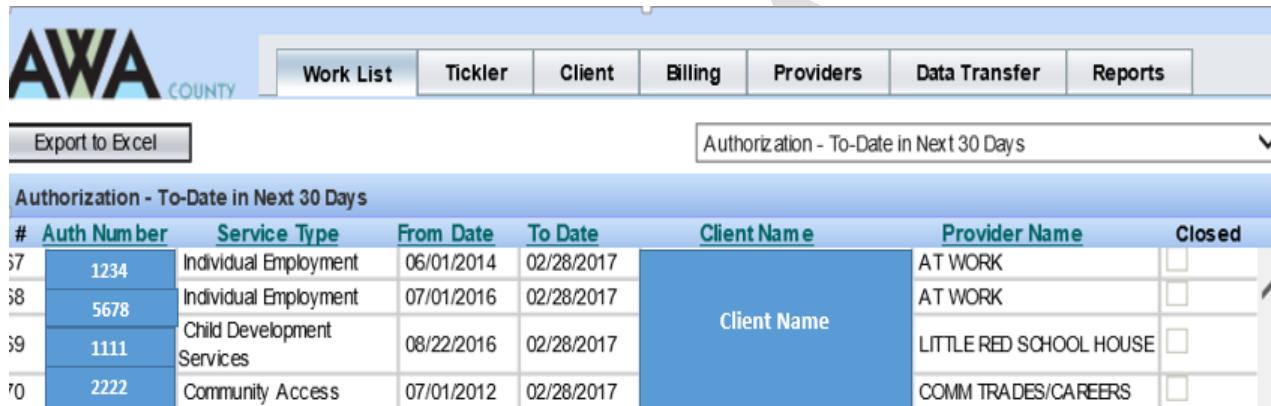
Turn to the next page to view the "Authorization – To Date in Next 30 Days" Work List.

Work List

Authorization – To Date in Next 30 Days

The "To Date" in "Next 30 Days" screen lists authorizations with a "To Date" (end date) within the next thirty (30) days. Clients will remain on this list for thirty (30) days. Within 30 days you must renew the authorization or it will be removed from this list and go to the Date in Past 30 Days.

1. *Return* to the Work List; *choose* "Authorization – End Date in 30 Days".

#	Auth Number	Service Type	From Date	To Date	Client Name	Provider Name	Closed
57	1234	Individual Employment	06/01/2014	02/28/2017		AT WORK	
58	5678	Individual Employment	07/01/2016	02/28/2017	Client Name	AT WORK	
59	1111	Child Development Services	08/22/2016	02/28/2017		LITTLE RED SCHOOL HOUSE	
70	2222	Community Access	07/01/2012	02/28/2017		COMM TRADES/CAREERS	

NOTE: Clicking the authorization number will take you to the same Service Authorization detail screen.
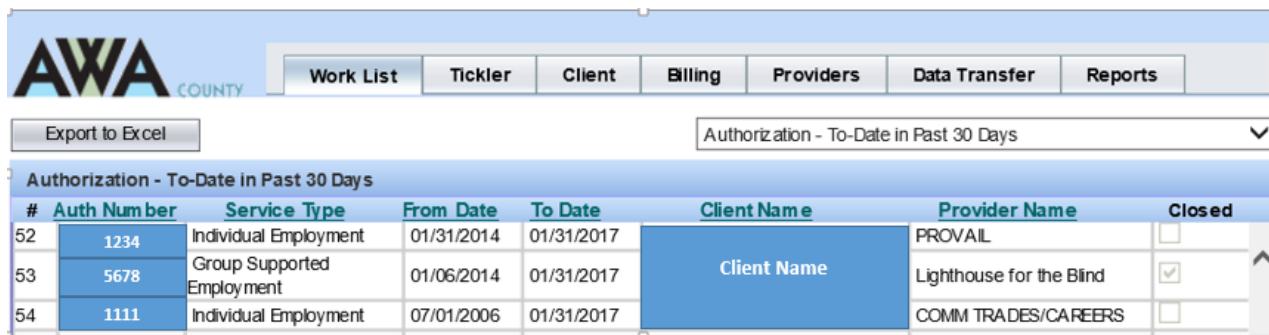
Turn to the next page to look at the Authorization – To Date in Past 30 Days.

Work List

Authorization – To Date in Past 30 Days

Authorizations with a "To Date" within the last thirty (30) days will be listed. Clients will remain on this list for thirty (30) days. They will be removed from this list after that time.

1. *Return* to the Work List; *choose* "Authorization To Date in Past 30 Days".

Note: the "To Date" means --- do not pay after this date!

You have finished with the Work Lists.

Turn to the next page to practice searching for a client.

Client

Search

The Search function will retrieve clients currently or previously living in the County, (active and inactive) with a referral or authorization.

1. *Select* the Client tab.

2. *Enter* your search criteria into one (or more) of the fields, and *click* Search.
    Note: You can enter a partial last name or a partial first name. The SSN and ADSA ID fields will require exact matches.

3. *Sort* the columns by clicking in the column header if the list is long.

4. To view the client's record *click* the client's name and his/her Demographic screen will be displayed.

    TIP: There are two ways to return to the search screen.

    (1) Return to your search list: *Click* the back button and you will be returned to your search list. View another client from the list.

    (2) Notice the "Client Search" link (at the top of the left column):
    Click to return to a blank screen

Turn to the next page for a quick overview of the Demographics screen.

Client

Demographics

Information on the Client Demographics screen is populated from the CARE data screens. The information is view only.

1. The Demographics screen:

Client Demographics

Last Name:	First Name:	MI:	Client Status:
XXXXXXXX	XXXXX		Active

DOB:	Age:	SSN:	ADSA Id:	Date of Death:
06/12/1990	26	XXX-XX-XXXX	XXXXXXX	

Gender:	Marital Status:	Education:
Male	Never Married	8th grade or less

Speaks English:	Understands English:	Interpreter Required:	Need to Translate Documents:
Yes	Yes	No	No

Spoken Language:
English

Language Description:

Is Client Hispanic/Spanish/Latino:
No

Tribal Enrollment:
No Tribal Affiliation

Race
White

☐ Community Protection   ☐ Alien Marr

School

District:	Name:	Reviewed Date:

Transition Fund Year:
2011

The client's **age** is system calculated from the date of birth. The **"Transition Fund Year"** (anticipated graduation year) is also system calculated from the date of birth.

Turn to the next page for information about the Overview screen.

Client

Overview Screen

Information on the Overview screen is populated from CARE data screens. The information is view only.

1. *Click* the Overview link. The Overview screen will be displayed:

You will see:
- The DDA Primary Case Manager's contact information
- The client's current DDA eligibility data
- Plan/Program Tab -Last assessment, last ISP and next ISP info and Employment and Community Access Support Levels
- ISP Comments – ISP comments related to employment or day services
- Waiver history
- Voluntary Placement Program "VPP" status
- PCSP Employment tab – information about what is in the current PSCP employment calculator

Turn to the next page for information about the PCSP Calculator tab.

Client

Overview Screen

Information on the Overview screen is populated from CARE data screens. The information is view only.

- *Click* the Overview link. The Overview screen will be displayed. Click on the PCSP Employment Tab to view Employment Calculator information:

You will see:
- Assessment created date
- Tentative start date for services
- Self-employment information
- Employment service type
- Support level (acuity)
- Employment status
- Service level information
- Supported employment base hours, additional hours and a subtotal of maximum monthly hours
- ETR hours information: approved hours and begin and end dates
- Short term hours (prior approval) information: approved short term hours and begin and end dates
- Total maximum monthly hours

Turn to the next page for information about the Client Contact screen.

Client

Client Contact

Information on the Client Contact screen is populated from CARE data screens. The information is view only.

1. *Click* the Client Contact link. The Client Contact screen will be displayed:

Client Contact

Residence Address

Residence Type:	Residence Name:
Parents Home	XXXXX

Address Line 1:	Address Line 2:
XXXXXXXX	

City:	State:	Zip Code:	County:	Start Date:
Olympia	WA	98506	Thurston	07/08/1993

Directions and Special Instructions:

Mailing Address:

Address Line 1:	Address Line 2:
XXXXXXXX	

City:	State:	Zip Code:	County:
Olympia	WA	98506	Thurston

Other:

E-mail:	XXXXX@gmail.com

Phone	Ext	Type
XXX-XXXX		

The **"Directions and Special Instructions"** text box not only contains information about finding the client's residence, but also may contain safety instructions for someone visiting the client. For example, the client may have a dangerous dog.

Turn to the next page for information about the Residence History screen.

Client

Residence History

Information on the Residence History screen is populated from CARE data screens. The information is view only.

- *Click* the Residence History link. The Residence History screen will be displayed:

Residence History					
Residence Type	**Name**	**City**	**County**	**Start Date**	**End Date**
Parents Home	XXXXX	Olympia	Thurston	07/08/1993	

The Residence History screen will list residence history. The Client Contact screen lists the client's *current* residence.

Note: Remember you can click the browser's "Back" button anytime you wish to return to previous screens.

Likewise you can click the browser's forward arrow if you want to return to where you were before you selected back.
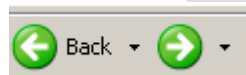
Turn to the next page for information on the Collateral Contact screen.

Client

Collateral Contact

Information on the Collateral Contact screen is populated from CARE data screens. The information is view only.

1. *Click* the Collateral Contact link. The Collateral Contact screen will be displayed:

Collateral Contact			
First Name	**Last Name**	**Organization**	**Role**
XXXXX	Smith		Durable Pow er of Atty/Healthcare
	Smith		Durable Pow er of Atty/Financ
	Smith		Emergency Contact
	Smith		Informal caregiver
	Smith		Representative/Protective Payee
	Smith		P1 Client Letters

This screen lists those who live with the client, and all the collateral contacts with any of the following roles: Emergency Contact, Guardian, Personal Necessary Supplemental Accommodation "NSA", and Representative/Protective Payee.

To see more details about a collateral contact:
2. *Click* the collateral contact's first or last name. A dialogue box is displayed:

Collateral Contact		
Last Name: smith	**First Name:** XXXXX	**Organization Name:**
Relation to Client: Parent	☐ Lives with Client	**Description:**
Street Address:	**City:**	**State:** **Zip:**
Mailing Address:	**City:**	**State:** **Zip:**
E-mail:	**Primary Language:**	

Phone	Ext	Type	Contact Roles
			Guardian
			Informal caregiver
			Informal Decision Maker

3. *Click* Close when you are finished.

Turn to the next page for information on the County Service Referral screen.

Client

County Service Referral

The County Service Referral is a **history of referral requests**. This screen is populated by the DDA Case Manager in CARE. The information is view only.

1. *Click* the County Service Referral link. The County Service Referral List screen will be displayed:

County Service Referral			
Request Date	**Service Type**	**Processing Status**	**County Response**
06/29/2011	Individual Employment	Withdraw n	
06/29/2011	Individual Employment	Finalized	Approved

2. *Click* on the <u>service type</u> and you will be returned to the Referral Request detail screen, which will be view only.

Referral Request

Request Date:
08/05/2016

Client Name:	**Residence County:**	**Service County:**
XXXXX	Thurston	Thurston

Service Type:	**Provider:**	**Tentative Start Date:**
Individual Employment	MORNINGSIDE/THURSTON	07/11/2016

RAC:
3602 – Basic Plus Waiver

Resident County Response

County: **Response:**
Thurston

Comments:

Service County Response

County: **Response:***
Thurston

Service Type: **Provider:**   **Planned Start Date:**
Individual Employment

Unit Type: **Max Units / Month:**   **Max Rate / Unit:**
Hour $

Comments:

Turn to the next page to view the County Service Authorization screen.

Client

County Service Authorization

The County Service Authorization List is a history of the authorizations and within each authorization there is a history of the RACs and funding sources (prior to the introduction of RACs) for that authorization. This screen is populated by the DDA Case Manager in CARE. The information is view only.

1. *Click* the County Service Auth link. The Service Authorization screen will be displayed:

Service Authorization

Auth ID	Service Type	Provider Name	From Date	To Date	Status
XXXXX	Community Access	Yakima Specialties, Inc.	03/01/2017	02/28/2018	Open
XXXXX	Individual Employment	Entrust Community Services	01/01/2011	05/31/2011	Closed
XXXXX	Individual Employment	PROVIDENT SERVICES	12/05/2007	12/31/2010	Closed

2. *Click* the Authorization number "Auth ID" to view the Service Authorization detail screen.

County Service Authorization | Planned Rate

Client Service Auth

Service Type:
Community Access

Provider Name: **Provider Number:**
Yakima Specialties, Inc.   P082815

Address:
1819 West J Street

City: **State:**   **Zip:**
Yakima   WA   98902

Authorization Period

From Date: **To Date:**
03/01/2017   02/28/2018

RACs

RAC	Start	End
3603 - Core Waiver	04/01/2015	02/28/2018

Funding

Source	Start	End

Status

Open

Print   Cancel

3. *Click* the Print button. A PDF document will be displayed. Close when you are finished viewing the document.

Turn to the next page to view the Planned Rate screen.

Client

County Service Authorization – Planned Rate
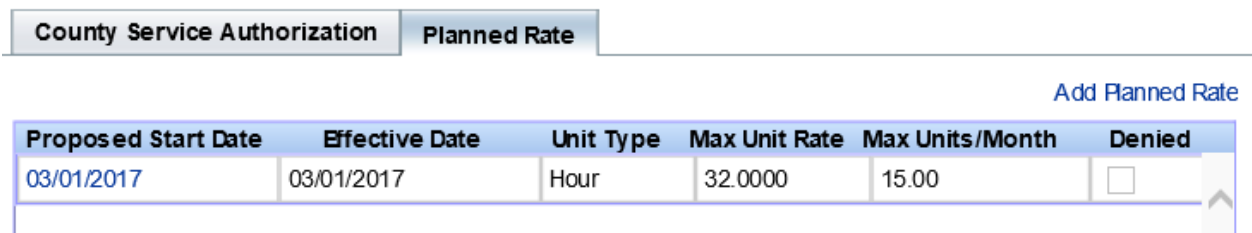
The Planned Rate tab will be a used as a communication tool to relay information about a client's service hours (Maximum Units/Month) to DDA case management.

1. On the County Service Authorization screen you will see a "Planned Rate" tab:

2. *Click* on the "Planned Rate" tab and you will see the following screen:

Proposed Start Date	Effective Date	Unit Type	Max Unit Rate	Max Units/Month	Denied
03/01/2017	03/01/2017	Hour	32.0000	15.00	☐

Turn to the next page to view continued information on the Planned Rate screen.

Client

County Service Authorization – Planned Rate continued

3. To update the "Planned Rate" information for changes occurring, *click* on the "Add Planned Rate":

County Service Authorization	Planned Rate					

Add Planned Rate

Proposed Start Date	Effective Date	Unit Type	Max Unit Rate	Max Units/Month	Denied
03/01/2017	03/01/2017	Hour	32.0000	15.00	☐

4. The following dialog box will appear:

Planned Rate Dialog

Proposed Start Date:*   Effective Date:

☐ Denied

Unit Type:*   Max Units/Month:*   Max Rate/Unit:*

Hour

Save   Cancel

5. *Enter:*
   a. The date services will start in the "Proposed Start Date" box
   b. The maximum units/month
   c. The maximum rate/unit
   d. *Click* on SAVE and the information will populate:

Add Planned Rate

Proposed Start Date	Effective Date	Unit Type	Max Unit Rate	Max Units/Month	Denied
01/01/2017	01/01/2017	Hour	70.0000	20.00	☐

Note: Case Mangers will receive a tickler to notify them that the Planned Rate information has changed.

Turn to the next page to view the Employment Support screen.

Client

Employment Support

The Employment Support screen is populated with information from the CARE Employment Support Level Assessment, Employment Support screen. It includes the assessment date, the client's current and historical employment goals and requested paid work hours per week:

Employment Support

Assessment Date	Employment Goal	Requested Hours
07/02/2020	Wants administration or office support type job	40
07/24/2019	Wants administration or office support type job	40
08/17/2018		40

To see more detail, click the assessment date you are interested in reviewing. The detail screen is divided into two sections. The top part of the screen includes employment support information:

Employment Support

Are you interested in working, or are you currently working?
Yes

Assessment Date:
07/02/2020

Top Employment Goal:
Wants administration or office support type job

Client Requested Work Hours per Week:
40

Current Status:
Working

Phase of Employment:
Working/achieved goal/job retention

Employment Provider Participation:
Attended assessment interview

Strengths

Cooperative
Likes being around others
Wants to help/do a good job
Likes routine

Additional Supports Needed

Transportation
Communication tools
Technical Assistance

Comments:

Johnny works as an administrative assistant for Happy Dental Company and reports he loves his job. He enjoys working with patients and is skilled at customer service, filing and cleaning.

Turn to the next page to continue with the Employment Support screen.

Client

Employment Support

The employment support screen includes the following information about the client:
- Are they working or interested in working
- Assessment date
- Top employment goal
- Requested paid weekly work hours
- Current employment status
- Phase of employment
- Employment provider participation in the assessment
- Strengths
- Additional supports needed
- Comments

The bottom part of the screen includes information on when the client is informed of Community Inclusion eligibility after 9 months of employment participation. Please note this screen is completed only one time and is only visible in AWA once a client is determined eligible for Community Inclusion and the CRM completes this screen:

The Community Inclusion screen includes the following client information:
- Are they in a paid job
- Do they want to continue in employment services
- Did they request additional support
- Comments
- Date the CRM provided the Community Inclusion fact sheet and informed client they are eligible for Community Inclusion

Turn to the next page to view the Employment Outcome screen.

Client

Employment Outcome

The Employment Outcome screen is divided into two sections. The top section contains Division of Vocational Rehabilitation "DVR" information. The information is populated directly from DVR. The bottom half of the screen contains information about a client's employer, job, and benefits. This information will be provided by the County.

There are two ways that Employment Outcome information can be entered. The first is one record at a time and the second we will explore later under "Data transfer".

1. To add Employment Outcome information on a client *click* on "Add Employment"
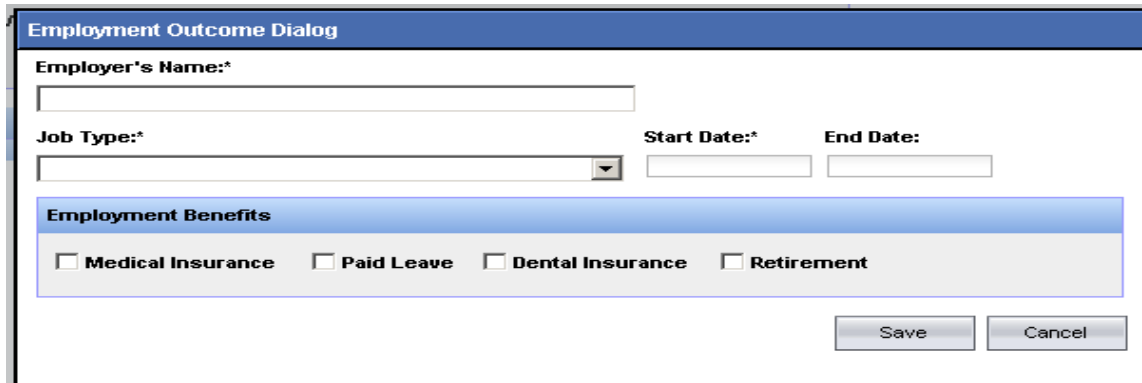
Turn to the next page to continue with the Employment Outcomes screen.

Client

Employment Outcome – continued

2. The following dialog box will appear.

3. Enter Employer's name
4. Choose the appropriate job type from the drop down selection.
5. Enter the job "Start Date".
6. Enter any benefits the client receives by *clicking* on the appropriate box.
7. "Save" the record
8. To change or update the information click on the Employer Name.

9. The dialog box will appear with the information previously saved. You can edit or add new information anytime.
10. "Save" the record, the changes are instantly recorded.

You have finished viewing the Client information screens.

Turn to the next page for an overview of the billing.

Billing

Overview

This section is for entering and reviewing billing information. It is used to include the County indirect costs such as Administration "10" series, Training "30" series, Information & Education "40" series, and the Other "90" series as well as review unbilled direct client billings prior to posting.

Current Activities/Indirect Monthly Costs

This screen is used to enter Indirect Monthly Costs. The County will bill DDA for categories that are **indirectly related to client** but are included in contract.

The **Add** button will display the "Other Monthly costs" details screen so you can enter administrative costs.
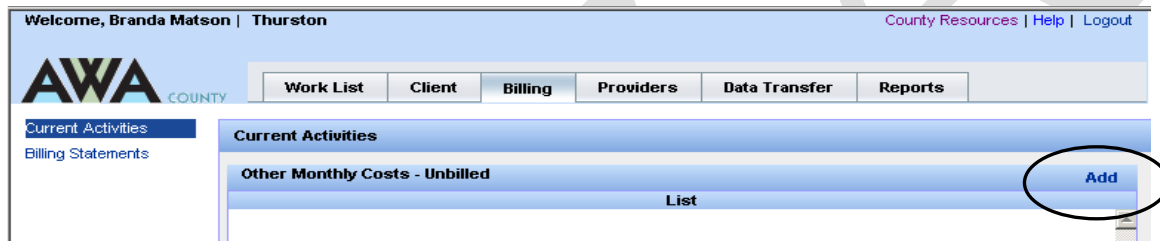
1. *Click* the Add link (upper right corner) and the Add Cost Billing dialogue box will be displayed
2. *Type* the Service Month (example 201705).
3. *Enter* the Amounts under the appropriate BARS Codes.
4. When you are finished, *click* Save. You will be returned to the Current Activity screen.
5. *View* the Unbilled Statements again. Close when you are finished.

Guidelines for Other Monthly Costs:
- Service Month cannot be in the future.
- Other Monthly Costs that were reported in error (or not previously reported) can be entered here for a prior service month that has already been billed to DDA.
- Multiple Service Months (of other monthly costs) may be included in the current Billing Month.

Turn to the next page to continue an overview of Indirect Monthly Costs.

Indirect Monthly Costs - Edit/Delete

Current Other Monthly Costs billing month data that has not been "posted" may be viewed and edited on this screen.

1. *Click* the Current Activities link. The Current Billing Activities screen is displayed:

Add Cost Billing Dialog

Service Year/Month:*

BARS	Description	Amount		BARS	Description	Amount
11	COUNTY ADMIN.			92	ADMIN INFASTRUCTURE	
12	PASRR ADMIN.			93	AGENCY START-UP	
31	STAFF TRAIN.			94	PARTNERSHIP	
32	BOARD TRAIN.			95		
41	INFO/ED. ACT.					

Save   Cancel

The **View Unbilled Statements** button will display the County Billing Summary in PDF file format (as a report).

2. *Click* the View Unbilled Statements button. Close when you are finished.

Each service month displayed on this screen can be edited or deleted until it is "posted".

Edit:
1. *Click* the Edit link for a service month.
2. *Enter* a change and *click* Save.
   Note: Corrections to indirect monthly costs
3. You can view your edits on this screen, or you can click the "View Unbilled Statements" button again to view your edits on the PDF report.
   Note: To delete an amount, enter a zero. For example if you enter an amount of $100 in error, it will be saved. To remove it, re-enter the amount as $0 and it will be over-laid and saved.

Delete:
1. *Click* the Delete link for a service month.
2. *Click* "Yes" when asked if you are sure.

Your billing month will be deleted. We will talk about the Post function later – since it is the last step in the process.

Turn to the next page for an overview on Billing Statements.

Billing

Billing Statements- Unbilled

The Billing Statements screen is divided into three sections, the (1) Billing Summary at the top, the (2) Billing Summary By Provider in the middle, and the (3) Billing Detail on the bottom. **Another way to check for errors is to view "Unbilled" statements**.

1. *Click* the Billing Statements link. The Billing Statements screen will be displayed:

Billing Summary:
1. *Pull down* the Billing Month menu and *choose* Unbilled.

2. *Generate* a PDF. *Close* when you are finished.

Billing Detail:
1. *Pull down* the Billing Month menu and *choose* Unbilled.
2. *Pull down* the Service Type menu and *choose* the Service Type. *Generate* a PDF.
3. *Close* when you are finished.

Turn to the next page for information about posting the billing.

Billing

Current Activities - Post

Billing can be "Posted" only once each calendar month. The "month" is based on the web server clock (not your computer clock). The Billing Month data may include multiple Service Months. Once the billing has been "Posted" the County Billing Summary will not be available from this screen. It will be available from the Billing Statements screen.

Before posting, you should review the Unbilled Statement to assure you have entered all the data you need submitted at this time.

Current Activities

Other Monthly Costs - Unbilled   Add

List

Service Month: 01/2021   Edit Dele

BARS	Description	Amount	BARS	Description	Amount
11	COUNTY ADMIN.		92	ADMIN INFASTRUCTURE	
12	PASRR ADMIN.		93	AGENCY START-UP	
13	JOB FOUNDATION ADMIN.		94	PARTNERSHIP	
14	JOB FOUNDATION ADMIN. OSPI		95	JOB FOUNDATION REPORT	
31	STAFF TRAIN.	$14,940.00	96	JOB FOUNDATION REPORT OSPI	
32	BOARD TRAIN.		97	JOB FOUNDATION INFO/ED	
41	INFO/ED. ACT.				

Service Month: 03/2021   Edit Dele

BARS	Description	Amount	BARS	Description	Amount
11	COUNTY ADMIN.	$5,539.00	92	ADMIN INFASTRUCTURE	
12	PASRR ADMIN.		93	AGENCY START-UP	
13	JOB FOUNDATION ADMIN.		94	PARTNERSHIP	
14	JOB FOUNDATION ADMIN. OSPI		95	JOB FOUNDATION REPORT	
31	STAFF TRAIN.		96	JOB FOUNDATION REPORT OSPI	
32	BOARD TRAIN.		97	JOB FOUNDATION INFO/ED	
41	INFO/ED. ACT.				

View Unbilled Statements   Post Activities

Note: When the "Post Activities" button (on the Current Activities screen) is clicked the posting happens behind the scenes, and may take a few minutes.

You will see a message that says "**Posting successful**".

Data Transfer

Overview

The County has two data transfer processes: One for **Employment Outcome** information and the other for **Billing**.

Employment Outcome

During each month the County extracts data from DDA on clients authorized for services in their County. The Employment extract **(Output)** contains clients authorized for service in their County during the time period specified in the authorization range (**Start Year/Month and End Year/Month**). The extract information will contain any previous information provided by the County until an employment job end date is provided.
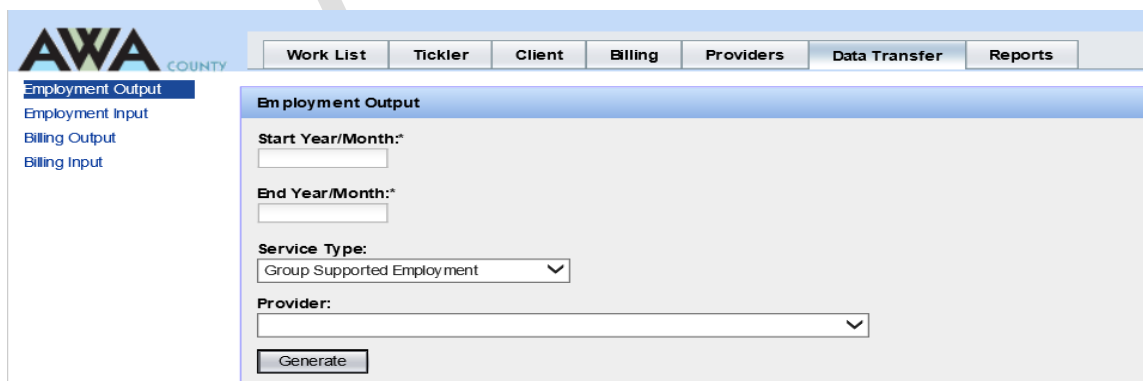
After the County receives client employment data from their providers, the data is validated and uploaded (**Input**) in AWA**.** The County may upload employment outcome data as often as wanted; however, this should occur on a regular basis to assure statewide information is up to date. Corrections can be made individually thru the Client Employment Outcomes dialog box or by uploading corrected information.

Billing

During the last week of the service month, or early the next month, the County extracts data on clients authorized for service in their County. The Billing extract **(Output)** contains each service authorized for each client for the month and year entered.

After the County incorporates service data from their providers, the data is validated and uploaded **(Input)** in AWA. Uploaded billing information can be reviewed prior to posting (see previous section – Current Activities – Post). **Posting in AWA can only occur once a month.**

Click the Data Transfer tab. The Data Transfer tab has several links located in the left column. The Output screen will be displayed:

Turn to the next page to begin with Employment Output.

Data Transfer

Employment Output

The Employment Output file is to collect information on the client's Employer, the job type, start date, benefits received, and the job end date. To generate an Employment Output file enter the Start and End dates that represents the time range of the CSA / clients to be included.
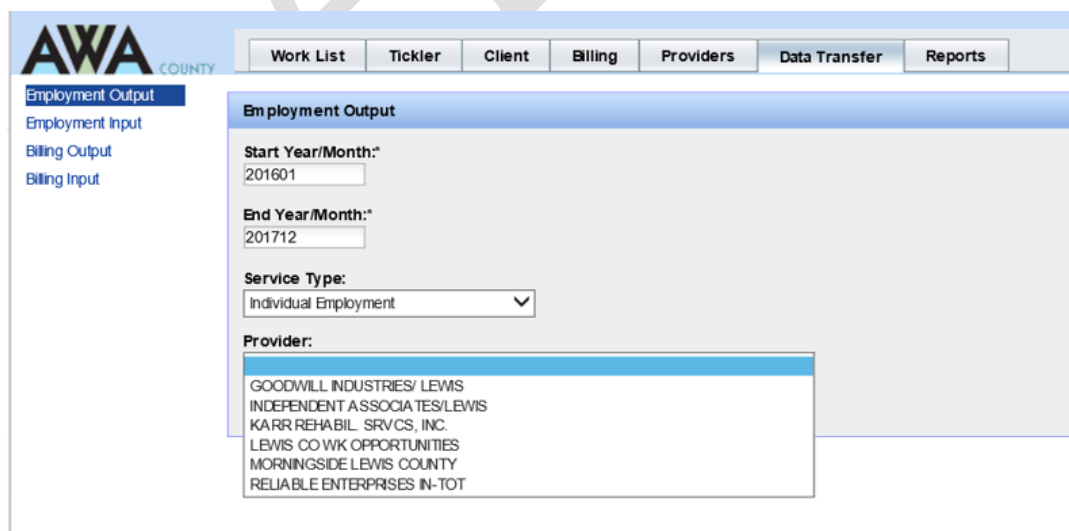
1. *Type* a Start Year/Month (example 201601) or click on the service month /year in the calendar.
2. *Type* an End Year/Month (example 201712) or click on the service month /year in the calendar.
3. Enter the **Service Type** that you want an output file for. If you do not specify the Service Type you will receive all Service Types.

4. Enter the Provider that you want an output file for. If you do not specify the Provider you will receive all Providers for the chosen service type.

Continue with Employment Output on the next page.
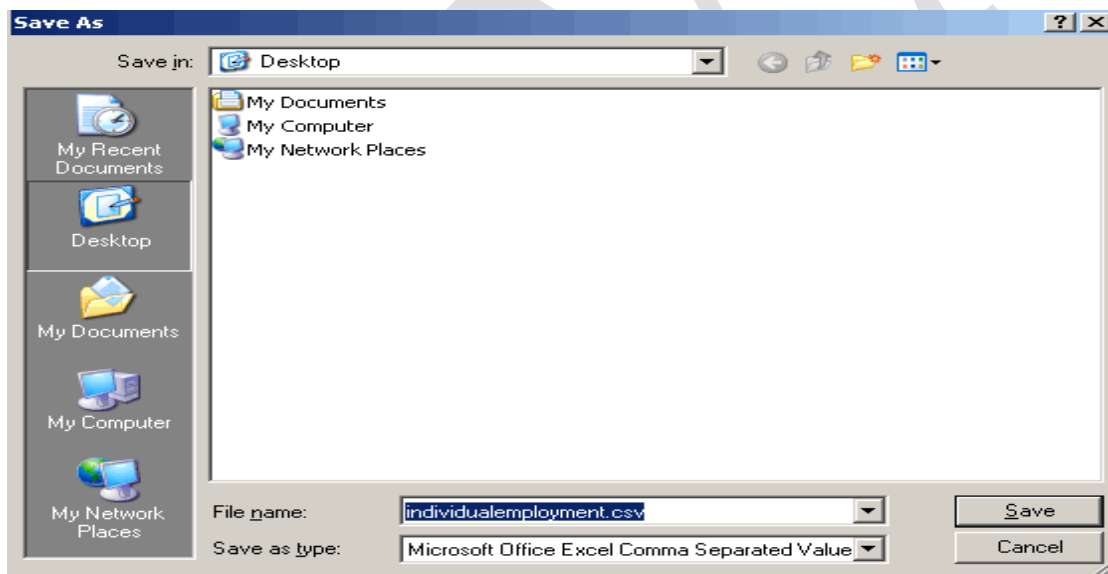
5. *Click* on Generate. You will see a dialogue box asking if you want to open, or save the file.

6. *Click* Save. The "Save As" dialogue box will be displayed:

7. *Select* a location – example - the **DESKTOP** for training purposes.

8. *Name* the file – example name the file **2016.2017CIIEJMS**
   (Clients In IE Jobs Morningside).

   NOTE: The file will be saved as a .csv or "comma separated value" type file.

9. *Click* Save.

10. *Send* the file to appropriate provider to input the information.

Turn page to continue Employment Output and for an overview of Employment Input.
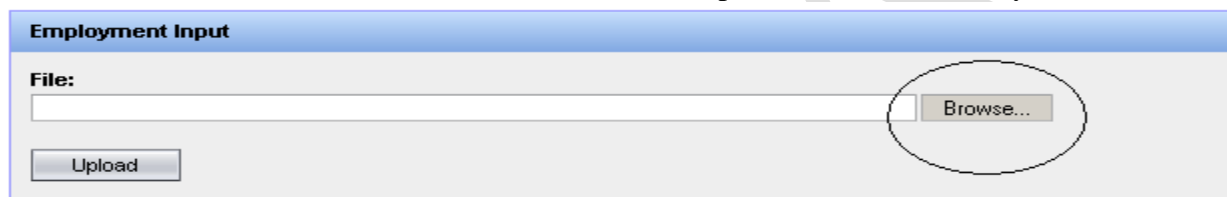
Note: It is important that your providers understand the data format to use as well as the appropriate "Job Type" 4 digit code. This information it located Employment Data Records Layouts description located in the back section of this workbook.

Data Transfer

Employment Input

Once you have received the completed Employment Output file from your provider you are now ready to Input the data file.

1. Click on the Browse button and retrieve the completed file from where you saved it.
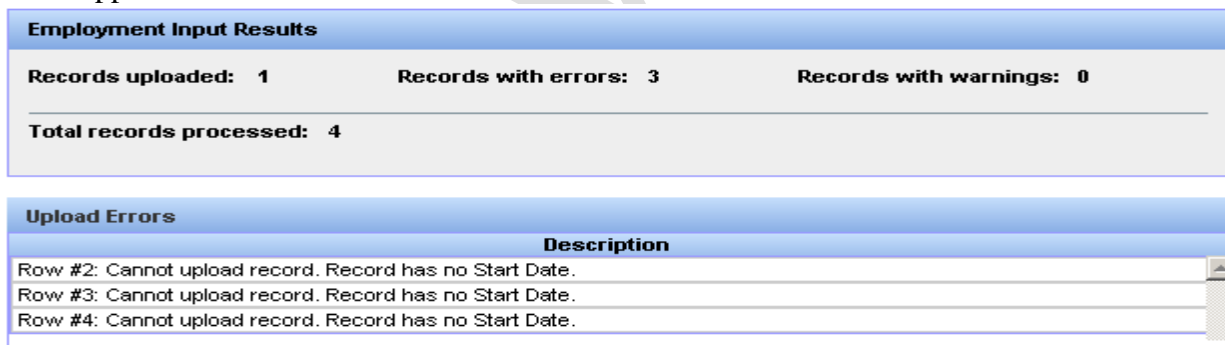
Employment Input

File:

[   ] (Browse...)

[Upload]

2. Once you have located the file (where you saved it) select it. The file name should appear in the File Box.

3. Click the Upload button and Employment Input Results similar to the display below will appear.

Employment Input Results

Records uploaded: 1   Records with errors: 3   Records with warnings: 0

Total records processed: 4

Upload Errors

Description
Row #2: Cannot upload record. Record has no Start Date.
Row #3: Cannot upload record. Record has no Start Date.
Row #4: Cannot upload record. Record has no Start Date.

NOTE: The data is validated during Input and any errors that list are system detected errors

4. You can click on your Excel file to look at the rows that contain the errors. In the case of no Start Date for several records this may not be an error just that the client isn't working yet.

Turn to the next page to see Employment input errors process.

Employment Input Errors

Refer to the **Employment Validation Rules** in the Appendix of this workbook. Also, remember you can click the Help link for additional information at any time.

1. **Open the Excel file.**

2. *Go to* the Desktop or wherever the file was saved and *Double-click* the file name.

3. *Correct* the errors.

   Save your changes:
4. *Choose* File and *Save As….*

   Upload with corrections:
5. Use the steps you already know to upload the Employment Input file again.

   Note: The Upload process will update the original file with the corrected rows. So, the last upload you do will always be the one that will be used for final Posting of the billing.

Turn to the next page to see Billing Output.
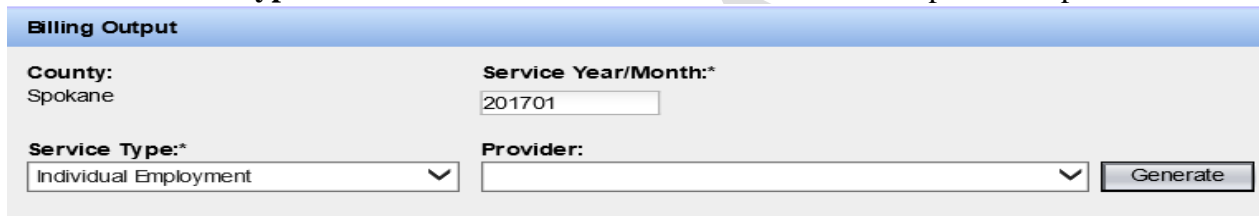
Data Transfer

Billing Output

Generate a Billing Output file.

1. *Type* a Service Month (example 201701) or click on the Service Month/Year in the calendar.
2. *Pull down* the Service Type menu and *choose* the service type.

   Each **Service Type** has its own set of data elements and must be output as a separate file.

NOTE: If a **Provider** is entered, the County will receive a file containing all DDA clients authorized for the selected service in that County for the month and year *for that Provider only*. **Selecting a provider is not required.**

3. *Click* the Generate button. You will see a dialogue box asking if you want to open, or save the file.
4. *Click* Save. The "Save As" dialogue box will be displayed:
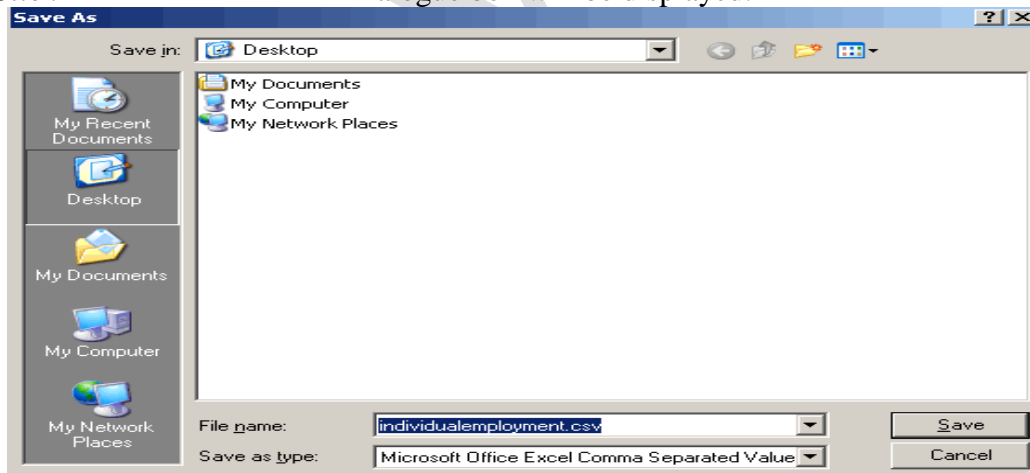
5. *Select* a location – example - **DESKTOP**.
6. *Name* the file – example name for the file: **201701 IE Spokane.**
   NOTE: The file will be saved as a .csv or "comma separated value" type file.
7. *Click* Save.
8. *Send* the file to appropriate provider to input the information.

Turn to the next page to practice with Billing Input.

Billing Input

The County may submit (upload) data files multiple times before "posting" the bill.

1. *Click* the Input link. The Input screen will be displayed:

2. *Pull down* the Service Type menu and *select* Individual Employment. Each Service Type has its own set of data elements and must be Input as a separate file.

3. *Click* the Browse button to locate the appropriate File. The "Choose a File" dialogue box will be displayed:
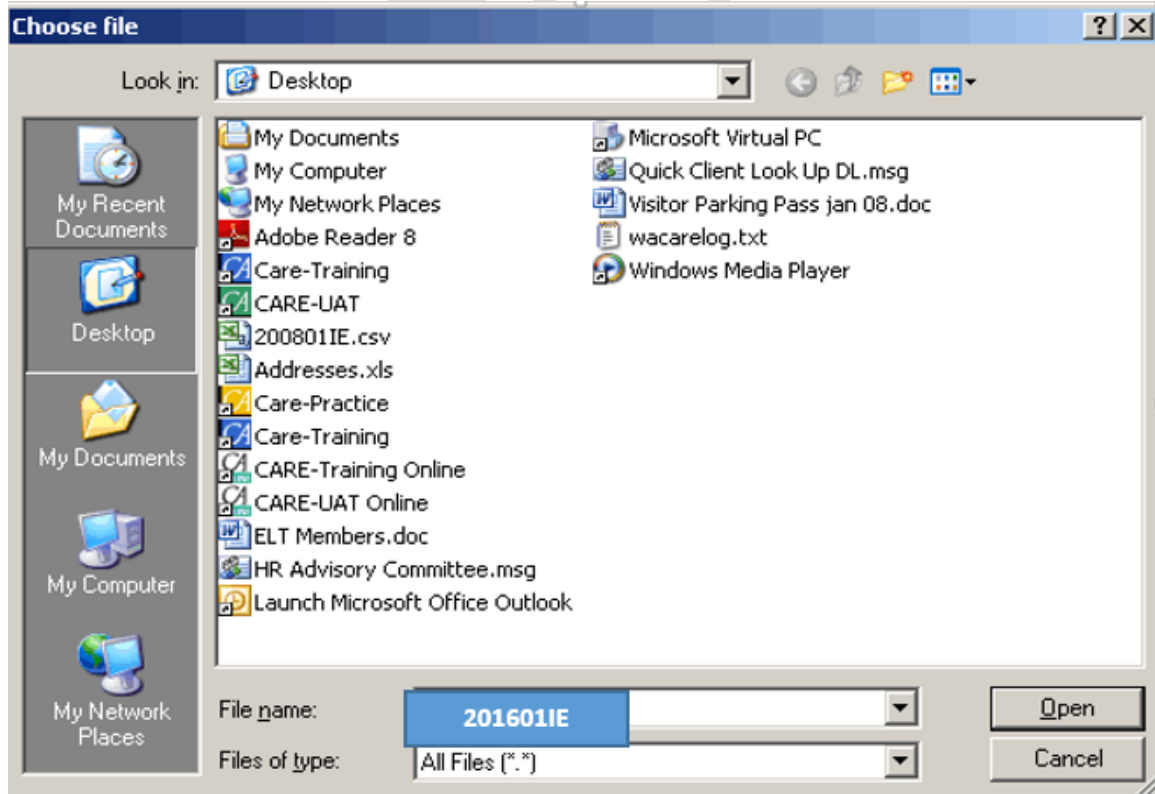
Turn to the next page to continue with Billing Input.

Billing Input continued

4. *Select* your **201601IE** file from the **Desktop**, and *click* Open.

   Note about Files: If you organize your files with clear titles and dates, you can easily locate the correct file.

5. *Click* the Upload button. The data will be uploaded to the system and the Billing Input Results will show the number or records uploaded and the total records processed. If errors exist, an errors list will display with a description.

Example of an errors list:

Upload Errors	
Description	
Row #1: The column 'Unit Type' is required.	❌
Row #2: The column 'Unit Type' is required.	❌
Row #3: The column 'Unit Type' is required.	❌
Row #4: The column 'Unit Type' is required.	❌
Row #5: The column 'Unit Type' is required.	❌
Row #6: The column 'Unit Type' is required.	❌
Row #7: The column 'Unit Type' is required.	❌
Row #8: The column 'Unit Type' is required.	❌

You can click on your Excel file to look at the rows that contain the errors.

NOTE: The data is validated during Input and any errors that list are system detected errors. For example, Unit Type must have an entry; # of Units and Unit Rate must have a valid number. You will be able to download/output the records with errors to a file to make corrections.

Refer to the **County Billing table** in the Appendix of this workbook. Also, remember you can click the Help link for additional information at any time.

Turn to the next page to correct the errors.

Billing errors

If you see an error:

1. *Click* the "Download Errors" button. You will see a dialogue box asking if you want to open, or save the file.

2. *Click* Save. The "Save As" dialogue box will be displayed.

3. *Select* a location – in class choose DESKTOP.

4. *Name* the file – in class name the file (example - **201601IE_errors).**
   NOTE: The file will be saved as a .csv or "comma separated value" type file.

5. *Click* Save.

Open the Excel file:

6. *Go to* the Desktop.

7. *Double-click* the **201601IE_errors**.

8. *Correct* the errors.

Save your changes:

9. *Choose* File and *Save As…*.

10. *Choose* Desktop; name the file **201601IE_corrected** and *minimize* the file.

Upload with corrections:

11. Use the steps you already know to Upload the Input file again.

    Note: The Upload process will update the original file with the corrected rows. So, the last upload you do will always be the one that will be used for posting the billing.

Turn to the next page to view the Billing correction process.

Billing Correction Record

Once you have posted a billing, it becomes a permanent record and cannot be changed.

You can, however, create a correction record with the next Input (use the corrected file for the same service month) so it will be added to the next Billing Statement. The next Billing Statement will display that corrected record. (The information is found in the Billing Detail report.) **Note: For indirect services you will need to add or subtract the corrected amount. For direct services the corrections are an overlay so you would replace the original record with corrected data.**

Direct Service Example:

Billing #1:

Service Month	Service	Provider	Unit	Rate	Total
7/2017	IE	GetJobs	2	1.00	2.00

You discover that Chris' rate should be $150.00 not $1.00. $150 must be entered in the rate category to correct this error.

Billing #2 – Correction Record:

Service Month	Service	Provider	Unit	Rate	Total
*7/2007	IE	GetJobs	2	150.00	300.00

Indirect Service Example:
Billing #1:– 92 "Admin Infrastructure" was billed in error:

BARS	Description	Amount		BARS	Description	Amount
11	COUNTY ADMIN.	$4,783.17		92	ADMIN INFASTRUCTURE	$983.92
12	PASRR ADMIN.	$44.80		93	AGENCY START-UP	
31	STAFF TRAIN.			94	PARTNERSHIP	
32	BOARD TRAIN.			95		
41	INFO/ED. ACT.	$2,782.98				

Billing #2:– Correction Record – prior amount for 92 "Admin Infrastructure" needs to be subtracted to correct this error:

BARS	Description	Amount		BARS	Description	Amount
11	COUNTY ADMIN.			92	ADMIN INFASTRUCTURE	-983.92
12	PASRR ADMIN.			93	AGENCY START-UP	
31	STAFF TRAIN.			94	PARTNERSHIP	
32	BOARD TRAIN.			95		
41	INFO/ED. ACT.					

<u>You have completed the Billing screens!</u>
Please turn to the next page for information on the Providers screen.

Providers

The Provider screens are used to maintain Provider information in all Counties.

1. *Click* the Providers tab. The Provider Search screen will be displayed:

2. *Enter* your search criteria into one (or more) of the fields, and *click* Search.

   Note: The search rule is – Name, **OR** Provider # **OR** TIN (Tax ID number) **AND** Service type **AND** County.

3. A list matching your search request will be returned.

4. *Click* on a Provider's name to see details:

Turn to the next page to continue an overview of the Provider screen.

Providers

Edit

Only staff in the County of Contract can update the Provider data.   Data will be view only for all other Counties. **County staff may update the Address, Telephone, FAX, and E-Mail.** Any other Provider information must be entered into the CARE by DDA Regional Operations Managers.

> **Update a Provider's information:**
1. You should be viewing a Provider's screen.

2. *Click* in one of the fields to edit. You can click, or use the [Tab] key to jump to the next field.

3. *Click* Save when you are finished.

Formal Evaluation Dates

A history of formal evaluation (on-site monitoring review) dates for Providers are recorded on this screen.

1. View a Provider's screen.

2. *Click* on a Service Type in the Service table. The Formal Evaluation Date Dialogue box will be displayed:

Service			
Service Type		Start Date	End Date
Individual Employment		01/01/1900	
Person to Person		01/01/1900	06/30/2015
Group Supported Employment		06/01/2010	06/30/2015
Community Access		01/01/2013	12/31/2020

Formal Evaluation Date Dialog

Service Type: Start Date: End Date:
Individual Employment   04/01/2016

February						
S	M	T	W	T	F	S
29	30	31	1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	1	2	3	4
5	6	7	8	9	10	11

County

2016 **2017** 2018

Date (mm/dd/yyyy)

[+]

Save   Cancel

Turn to the next page to continue an overview of the Provider screen.

3. *Click* the [+] to add a row to the Formal Evaluation Date table.

4. *Type* a date into the field – use the mm/dd/yyyy format or select date from calendar.

5. *Click* Save.

Turn to the next page for information on Reports.

Reports

Overview

Several reports are available under the Reports tab. Reports are related to a billing month, not a service month.

Report Name	Description	Audience
County Billing Summary	Summary of County Billing by Account broken out by Funding source.	Counties, DDA Regional Operations Manager
County Billing Summary by Provider	County Billing Summary, cover sheet for the A-19. County Monthly DDA Services Report Provider, Program, Service	Counties, DDA Regional Operations Manager
County Billing Detail	County Billing Detail per program type	Counties, Regional Operations Manager
County – Transition Graduates by Fund Year	Transition Fund Year DDA Clients (w/ filters…graduation year and county day programs)	Counties, DDA HQ, DDA Regions, Decision Support
County – Employment Programs Cost Benefit Analysis	Cost Benefit Analysis for County Employment Programs	Counties, DDA Regions, DDA HQ

1. *Click* the Reports tab. The Reports screen will be displayed. Select Billing Statements, Transition Fund Year, or Cost Benefit Analysis:

Billing Statements

Billing Statements	**Billing Statements**
Transition Fund Year	
Cost Benefit Analysis	

Billing Summary

Billing Month:*
04/2021

Generate PDF
Generate XLS

Billing Summary by Provider

Billing Month:*
04/2021

Provider:

Generate PDF
Generate XLS

Billing Detail

Billing Month:*   Service Type:*
04/2021   Adult Day Care

Generate PDF

Provider:

Generate XLS

Turn to the next page to continue the overview on Reports.

Cost Benefit Analysis

Billing Statements	**Cost Benefit Analysis Report**
Transition Fund Year	Start Year/Month:*
Cost Benefit Analysis	[ ]
	End Year/Month:*
	[ ]
	Service Type:*
	Individual Employment ⌄
	[Generate PDF] [Generate XLS]

Transition Fund Year

Billing Statements	**Transition Fund Year**
Transition Fund Year	Transition Fund Year:*
Cost Benefit Analysis	[ ]
	[Generate PDF] [Generate XLS]

Turn to the next page to continue the overview on Reports and for information on logging out.

Reports

Preview

These reports are the "canned" reports that the AWA will generate.

Try the different reports.

Billing Statements:

1. Select from one of the following reports:
   - Billing Summary by month
   - Billing Summary by Provider by month
   - Billing Detail by month
2. Choose a provider and service type (if applicable) and generate the report
3. Close when you are finished

Transition Fund Year report:

1. Click the Transition Fund Year link.
2. Choose a year and a fund source, and generate the report.
3. Close when you are finished.

Cost Benefit Analysis Report:

1. Click the Cost Benefit Analysis link.
2. Choose a service type.
3. Enter the start and end dates, for example: 201701 to 201801.
4. Generate the report; close when you are finished.

Logout

1. *Click* the Logout link (upper right corner).

2. You will be returned to the AWA opening screen.

Congratulations!!! You have completed the ADSA Web Access – County training!

Turn to the next page to find the AWA Appendix.

Appendix

County Billing Data Elements

Field Name as required on input, in order of input columns	ADC	CI	GSE	IE	ITA	CDS
Authorization Number	X	X	X	X	X	X
Service Year Month	X	X	X	X	X	X
Service Code	X	X	X	X	X	X
Provider Name	X	X	X	X	X	X
Provider Number	X	X	X	X	X	X
Client Last Name	X	X	X	X	X	X
Client First Name	X	X	X	X	X	X
Client MI	X	X	X	X	X	X
ADSAClient Id	X	X	X	X	X	X
Fund Source	X	X	X	X	X	X
Service From Date	X	X	X	X	X	X
Service To Date	X	X	X	X	X	X
Service CountyID	X	X	X	X	X	X
Provider County ID	X	X	X	X	X	X
Unit Type	X	X	X	X	X	X
Number Of Units	X	X	X	X	X	
Unit Rate	X	X	X	X	X	
Natural Number Of Units						X
Natural Unit Rate						X
Other Number Of Units						X
Other Unit Rate						X

Field Name as required on input, in order of input columns	ADC	CI	GSE	IE	ITA	CDS
Additional Expense						X
Site Hours			X			
Client Hours Paid			X	X	X	
Client Pathway Hours Volunteer			X	X	X	
Client Pathway Hours Other			X	X	X	
Gross Wages			X	X	X	
Projected End Date						X
Age In Months						X
Provider Staff Hours	X	X	X	X	X	
Job Prep			X	X	X	
Job Development			X	X	X	
Job Coaching			X	X	X	
Record Keeping			X	X	X	
Client Hours Volunteer		X				
Client Hours Other		X				
Personal Agent Hours					X	
Personal Agent Cost					X	
Input Error	X	X	X	X	X	X
RAC	X	X	X	X	X	X

County Billing Records Layout

Adult Day Care

Column Name	Column Datatype	Column Comment
Authorization Number	Char(7)	
Service Year Month	Char(6)	6 characters YYYYMM
Service Code	Varchar(5)	5 characters value ADC
Provider Name	Varchar(60)	1 to 60 characters
Provider Number	Char(7)	
Client Last Name	Varchar(30)	1 to 30 characters
Client First Name	Varchar(30)	1 to 30 characters
Client MI	Char	1 character
ADSAClient ID	Char(6)	
Fund Source	VarChar(5)	1 to 5 characters
Service From Date		A date YYYY/MM/DD
Service To Date		A date YYYY/MM/DD
Residence County ID		A number 1 to 39
Provider County ID		A number 1 to 39
Unit Type	Char	1 character value (D)
Number of Units	Numeric(8,2)	A number 999999.99
Unit Rate	Numeric(8,2)	A number 999999.99
Provider Staff Hours	Numeric(8,2)	A number 999999.99
Input Error	Varchar(100)	Blank (used by application)
RAC (Required for Service Year > 12/2015)		1 to 80 characters

County Billing Records Layout

Child Development Services

Column Name	Column Datatype	Column Comment
Authorization Number	Char(7)	
Service Year Month	Char(6)	6 characters YYYYMM
Service Code	Varchar(5)	5 characters value CDS
Provider Name	Varchar(60)	1 to 60 characters
Provider Number	Char(7)	
Client Last Name	Varchar(30)	1 to 30 characters
Client First Name	Varchar(30)	1 to 30 characters
Client MI	Char	1 character
ADSA Client ID	Char(6)	
Fund Source	VarChar(5)	1 to 5 characters
Service From Date		A date YYYY/MM/DD
Service To Date		A date YYYY/MM/DD
Residence County ID		A number 1 to 39
Provider County ID		A number 1 to 39
Unit Type	Char	1 character value (M)
Natural Number of Units	Numeric(8,2)	A number 999999.99
Natural Unit Rate	Numeric(8,2)	A number 999999.99
Other Number of Units	Numeric(8,2)	A number 999999.99
Other Unit Rate	Numeric(8,2)	A number 999999.99
Additional Expense	Numeric(8,2)	A number 999999.99
Projected End Date		A date YYYY/MM/DD
Age In Months	Smallint	A number 1 to 36
Input Error	Varchar(100)	Blank (used by application)
RAC (Required for Service Year > 12/2015)		1 to 80 characters

County Billing
Records Layout

Community Inclusion

Column Name	Column Datatype	Column Comment
Authorization Number	Char(7)	
Service Year Month	Char(6)	6 characters YYYYMM
Service Code	Varchar(5)	5 characters value CI
Provider Name	Varchar(60)	1 to 60 characters
Provider Number	Char(7)	
Client Last Name	Varchar(30)	1 to 30 characters
Client First Name	Varchar(30)	1 to 30 characters
Client MI	Char	1 character
ADSAClient ID	Char(6)	
Fund Source	VarChar(5)	1 to 5 characters
Service From Date		A date YYYY/MM/DD
Service To Date		A date YYYY/MM/DD
Service County ID		A number 1 to 39
Provider County ID		A number 1 to 39
Unit Type	Char	1 character value (H)
Number of Units	Numeric(8,2)	A number 999999.99
Unit Rate	Numeric(8,2)	A number 999999.99
Provider Staff Hours	Numeric(8,2)	A number 999999.99
Client Hours Volunteer	Numeric(8,2)	A number 999999.99
Client Hours Other	Numeric(8,2)	A number 999999.99
Input Error	Varchar(100)	Blank (used by application)
RAC (Required for Service Year > 12/2015)		1 to 80 characters

County Billing
Records Layout

Group Supported
Employment

Column Name	Column Datatype	Column Comment
Authorization Number	Char(7)	
Service Year Month	Char(6)	6 characters YYYYMM
Service Code	Varchar(5)	5 characters value GSE
Provider Name	Varchar(60)	1 to 60 characters
Provider Number	Char(7)	
Client Last Name	Varchar(30)	1 to 30 characters
Client First Name	Varchar(30)	1 to 30 characters
Client MI	Char	1 character
ADSAClient ID	Char(6)	
Fund Source	VarChar(5)	1 to 5 characters
Service From Date		A date YYYY/MM/DD
Service To Date		A date YYYY/MM/DD
Residence County ID		A number 1 to 39
Provider County ID		A number 1 to 39
Unit Type	Char	1 character value (H)
Number of Units	Numeric(8,2)	A number 999999.99
Unit Rate	Numeric(8,2)	A number 999999.99
Site Hours	Numeric(8,2)	A number 999999.99
Client Hours Paid	Numeric(8,2)	A number 999999.99
Client Pathway Hours Volunteer	Numeric(8,2)	A number 999999.99
Client Pathway Hours Other	Numeric(8,2)	A number 999999.99
Gross Wages	Numeric(8,2)	A number 999999.99
Provider Staff Hours	Numeric(8,2)	A number 999999.99
Job Prep	Numeric(3,2)	A number 999.99
Job Development	Numeric(3,2)	A number 999.99
Job Coaching	Numeric(3,2)	A number 999.99
Record Keeping	Numeric(3,2)	A number 999.99
Input Error	Varchar(100)	Blank (used by application)
RAC (Required for Service Year > 12/2015)		1 to 80 characters

County Billing
Records Layout

Individual
Employment

Column Name	Column Datatype	Column Comment
Authorization Number	Char(7)	
Service Year Month	Char(6)	6 characters YYYYMM
Service Code	Varchar(5)	5 characters value IE
Provider Name	Varchar(60)	1 to 60 characters
Provider Number	Char(7)	
Client Last Name	Varchar(30)	1 to 30 characters
Client First Name	Varchar(30)	1 to 30 characters
Client MI	Char	1 character
ADSAClient ID	Char(6)	
Fund Source	VarChar(5)	1 to 5 characters
Service From Date		A date YYYY/MM/DD
Service To Date		A date YYYY/MM/DD
Residence County ID		A number 1 to 39
Provider County ID		A number 1 to 39
Unit Type	Char	1 character value (H)
Number of Units	Numeric(8,2)	A number 999999.99
Unit Rate	Numeric(8,2)	A number 999999.99
Client Hours Paid	Numeric(8,2)	A number 999999.99
Client Pathway Hours Volunteer	Numeric(8,2)	A number 999999.99
Client Pathway Hours Other	Numeric(8,2)	A number 999999.99
Gross Wages	Numeric(8,2)	A number 999999.99
Provider Staff Hours	Numeric(8,2)	A number 999999.99
Job Prep	Numeric(3,2)	A number 999.99
Job Development	Numeric(3,2)	A number 999.99
Job Coaching	Numeric(3,2)	A number 999.99
Record Keeping	Numeric(3,2)	A number 999.99
Input Error	Varchar(100)	Blank (used by application)
RAC (Required for Service Year > 12/2015)		1 to 80 characters

County Billing Records Layout

Individual Technical Assistance

Column Name	Column Datatype	Column Comment
Authorization Number	Char(7)	
Service Year Month	Char(6)	6 characters YYYYMM
Service Code	Varchar(5)	5 characters value ITA
Provider Name	Varchar(60)	1 to 60 characters
Provider Number	Char(7)	
Client Last Name	Varchar(30)	1 to 30 characters
Client First Name	Varchar(30)	1 to 30 characters
Client MI	Char	1 character
ADSAClient ID	Char(6)	
Fund Source	VarChar(5)	1 to 5 characters
Service From Date		A date YYYY/MM/DD
Service To Date		A date YYYY/MM/DD
Residence County ID		A number 1 to 39
Provider County ID		A number 1 to 39
Unit Type	Char	1 character value (H)
Number of Units	Numeric(8,2)	A number 999999.99
Unit Rate	Numeric(8,2)	A number 999999.99
Client Hours Paid	Numeric(8,2)	A number 999999.99
Client Pathway Hours Volunteer	Numeric(8,2)	A number 999999.99
Client Pathway Hours Other	Numeric(8,2)	A number 999999.99
Gross Wages	Numeric(8,2)	A number 999999.99
Provider Staff Hours	Numeric(8,2)	A number 999999.99
Job Prep	Numeric(3,2)	A number 999.99
Job Development	Numeric(3,2)	A number 999.99
Job Coaching	Numeric(3,2)	A number 999.99
Record Keeping	Numeric(3,2)	A number 999.99
Personal Agent Hours	Numeric(8,2)	A number 999999.99
Personal Agent Cost	Numeric(8,2)	A number 999999.99
Input Error Code	Varchar(100)	Blank (used by application)
RAC (Required for Service Year > 12/2015)		1 to 80 characters

Employment Outcomes Data Records Layouts

Employment Outcome

Name	Values
Client County	Logged on County – *pre-filled*
Provider Name	From Open Authorization– *pre-filled*
Client ADSA ID	From Open Authorization– *pre-filled*
Client Last Name	From Client Demographics– *pre-filled*
Client First Name	From Client Demographics– *pre-filled*
Employer Name	Text – 64 characters possible
Job Type	Code – 4 digits (see list below)
Start Date	Date MM/DD/YYYY
End Date	Date MM/DD/YYYY
Medical Insurance	Blank, Y or N
Dental Insurance	Blank, Y or N
Paid Leave	Blank, Y or N
Retirement	Blank, Y or N
Last Employment Outcome Update Date	From Last Employment Outcome Update Date on the CMIS database

Job Type Code list:

Code	Description
JT01	Clerical
JT02	Labor
JT03	Management
JT04	Professional
JT05	Service
JT08	Administrative Support Occupations
JT09	Animal Husbandry, Agriculture and Related Occupations
JT10	Education Occupations
JT11	Food Services Occupations
JT12	Lodging, Building and Related Occupations
JT13	Machine Trade Occupations
JT14	Manufacturing, Construction and Related Occupations
JT15	Medical/Health Care Occupations
JT16	Personal Service Occupations
JT17	Physical Sciences and Laboratory Technology Occupations
JT18	Professional and Support Specialists
JT19	Social Service Occupations
JT20	Wholesale/Retail Trade Occupations
JT21	Other Occupations

County Billing Instructions Detail for Data Files

* = Required for payment

		Adult Day Care (ADC)
*	A.	Authorization Number – Enter the Authorization Number from the CSA DDA authorized the service. *Pre-filled in Output.*
*	B.	Service Year Month – 6 characters. The year and month (**YYYYMM**) for which services are being reported. *Pre-filled in Output.*
*	C.	Service Code – 1 to 5 characters – ADC. *Pre-filled in Output.*
	D.	Provider Name – 1 to 60 characters. Enter your agency's name. *Pre-filled in Output.*
*	E.	County Provider Number – Enter the Provider Number, which has been assigned to your agency by CARE. *Pre-filled in Output.*
*	F.	Client Last Name – 1 to 30 characters. Client authorized for ADC services by the case manager on the County Services Authorization (**CSA**). *Pre-filled in Output.*
*	G.	Client First Name – 1 to 30 characters. *Pre-filled in Output.*
	H.	Client Middle Initial – 1 character. *Pre-filled in Output.*
*	I.	ADSA Client ID – The ADSA Client ID from the CSA. *Pre-filled in Output.*
*	J.	Fund Source – 1 to 5 characters. Enter the Funding Source code from the CSA. *Pre-filled in Output.*
	K.	Service From Date – The date (YYYY/MM/DD) from the CSA DDA authorized the service. *Pre-filled in Output.*
	L.	Service To Date - The date (YYYY/MM/DD) from the CSA DDA authorized the service. *Pre-filled in Output.*
	M.	County ID - Residence - The number (1-39) of the county in which the client resides. See Appendix A. *Pre-filled in Output.*
*	N.	County ID - Provider - The number (1-39) of the county in which your agency provided this service. See Appendix A. *Pre-filled in Output.*
*	O.	Units Type Code – 1 character. The unit of service defined in the County Program Agreement**: D** for day. The unit describes how your County is billing for the service and should be consistent with your fee/rate schedule

*	P.	Number of Units - Enter total number of service units received by the client. The "Units Number" should be consistent with the "Units Type Code" of daily and must be a whole number only.
*	Q.	Units Rate – Enter the rate paid for each service as authorized by the county. This should be consistent with your fee/rate schedule and must be divisible by four.
	R.	Provider Staff Hours Number - Enter the total hours of direct service the agency provided the client during the month.
	S.	Input Error Code – Used by the application. If blank, enter zero.
*	T.	RAC – 1 to 80 characters. Enter the Recipient Aid Category (RAC) from the CSA. *Pre-filled in Output*

* = Required for payment

**Child Development Services (CDS)**		
*	A.	Authorization Number – Enter the Referral Number from the CSA DDA authorized the service. *Pre-filled in Output.*
*	B.	Service Year Month – 6 characters. The year and month (**YYYYMM**) for which services are being reported. *Pre-filled in Output.*
*	C.	Service Code – 1 to 5 characters – CDS. *Pre-filled in Output.*
	D.	Provider Name – 1 to 60 characters. Enter your agency's name. *Pre-filled in Output.*
*	E.	County Provider Number – Enter the Provider Number, which has been assigned to your agency by CARE. *Pre-filled in Output.*
*	F.	Client Last Name – 1 to 30 characters. Client authorized for CDS by the case manager on the County Services Authorization (**CSA**). *Pre-filled in Output.*
*	G.	Client First Name – 1 to 30 characters. *Pre-filled in Output.*
	H.	Client Middle Initial – 1 character. *Pre-filled in Output.*
*	I.	ADSA Client ID – The ADSA Client ID from the CSA. *Pre-filled in Output.*
*	J.	Fund Source – 1 to 5 characters. Enter the Funding Source code from the CSA. *Pre-filled in Output.*

	K.	Service From Date – The date (YYYY/MM/DD) from the CSA DDA authorized the service. *Pre-filled in Output.*
	L.	Service To Date - The date (YYYY/MM/DD) from the CSA DDA authorized the service. *Pre-filled in Output.*
	M.	County ID - Residence - The number (1-39) of the county in which the client resides. See Appendix A. *Pre-filled in Output.*
*	N.	County ID - Provider - The number (1-39) of the county in which your agency provided this service. See Appendix A. *Pre-filled in Output.*
*	O.	Units Type Code – 1 character. The unit of service defined in the County Program Agreement: **M** for month. The unit describes how your County is billing for the service and should be consistent with your fee/rate schedule.
*	P.	Natural Number of Units – Enter the total number of direct service units received by the client and family in Natural Environment (as defined by IDEA – Part C) during the reporting month. If the client and family received direct service together, count only once. However, if the child and family receive direct services separately, include total units for each. The type of unit should be consistent with your county contract. Cannot be blank. Must contain a number or zero. Natural Units + Other Units must equal 1 or 0.
*	Q.	Natural Units Rate – Enter the rate paid for each Natural Based direct service unit per individual. Cannot be left blank. This should be consistent with your fee/rate schedule.
*	R.	Other Number of Units – Enter the total number of service units received by the client and family that occurred in other than a "Natural Environment". If the client and family received service together, count only once. If the child and family receive service separately, include total units for each. The type of unit should be consistent with the county contract. Cannot be left blank. Other Units + Natural Units must equal 1 or 0.
*	S.	Other Units Rate – Enter the rate paid for all other county funded service units. Cannot be left blank. This should be consistent with your fee/rate schedule.
*	T.	Additional or Misc Expense – Enter the amount of any Additional or Misc. expense for this client for this service month. Enter zero if none. Cannot be left blank. Use this category is to capture tangible material items purchased for children 0-3.
	U.	Projected End Date – The date (MM/DD/YYYY) services from your agency is projected to end for this client. Pre-filled in Output.
	V.	Age in Months – The client's age in months. Pre-filled in Output.

	W.	Input Error Code – Used by the application. If blank, enter zero.
*	X.	RAC – 1 to 80 characters. Enter the Recipient Aid Category (RAC) from the CSA. Pre-filled in Output.

Note:
1) **When posting CDS client services the professional services charges should appear under direct services in the Natural or Other category.**

2) **Additional or Misc Expense is not for direct client services. The intention of the Additional or Misc Expense category is to capture tangible material items purchased for children 0-3.**

* = Required for payment

		Community Inclusion
*	A.	Authorization Number – Enter the Referral Number from the CSA DDA authorized the service. *Pre-filled in Output.*
*	B.	Service Year Month – 6 characters. The year and month (**YYYYMM**) for which services are being reported. *Pre-filled in Output.*
*	C.	Service Code – 1 to 5 characters – CI. *Pre-filled in Output.*
	D.	Provider Name – 1 to 60 characters. Enter your agency's name. *Pre-filled in Output.*
*	E.	County Provider Number – Enter the Provider Number, which has been assigned to your agency by CARE. *Pre-filled in Output.*
*	F.	Client Last Name – 1 to 30 characters. Client authorized for CI services by the case manager on the County Services Authorization (**CSA**). *Pre-filled in Output.*
*	G.	Client First Name – 1 to 30 characters. *Pre-filled in Output.*
	H.	Client Middle Initial – 1 character. *Pre-filled in Output.*
*	I.	ADSA Client ID – The ADSA Client ID from the CSA. *Pre-filled in Output.*
*	J.	Fund Source – 1 to 5 characters. Enter the Funding Source code from the CSA. *Pre-filled in Output.*
	K.	Service From Date – The date (YYYY/MM/DD) from the CSA DDA authorized the service. *Pre-filled in Output.*

	L.	Service To Date - The date (YYYY/MM/DD) from the CSA DDA authorized the service. *Pre-filled in Output.*
	M.	County ID - Residence - The number (1-39) of the county in which the client resides. See Appendix A. *Pre-filled in Output.*
*	N.	County ID - Provider - The number (1-39) of the county in which your agency provided this service. See Appendix A. *Pre-filled in Output.*
*	O.	Units Type Code – 1 character. The unit of service defined in the County Program Agreement**: H** for hour. The unit describes how your County is billing for the service and should be consistent with your fee/rate schedule.
*	P.	Number of Units – Enter total number of service units received by the client. The "Number of Units" should be consistent with the "Units Type Code" of hourly. Whole numbers and quarter hours are acceptable, all else unacceptable.
*	Q.	Unit Rate – Enter the rate paid for each service as authorized by the county. This should be consistent with your fee/rate schedule and must be divisible by four.
*	R.	Provider Staff Hours Number - Enter the total hours of direct service the agency provided the client during the month.
	S.	Number of Client Hours Volunteer - Enter the total number of hours the client spent in Volunteer activity during the service month. Do not include hours reported below under "Client Hours Other" item T.
	T.	Number of Client Hours Other - Enter the total number of hours the client spent in Other activities during the service month. Do not include hours reported under "Client Hours Volunteer" item S.
	U.	Input Error Code – Used by the application. If blank, enter zero.
*	V.	RAC – 1 to 80 characters. Enter the Recipient Aid Category (RAC) from the CSA. Pre-filled in Output

Note:

Provider Staff Hours Number - **If staff is supporting two clients at one time – divide the paid staff hours among the clients being supported. Example: a staff member provides four paid hours of support to two clients at the same time – report two paid staff hour for each of the two clients for the reporting period. If staff has two clients and one needs one-to-one support and the others needs check-ins, then more time would be reported to the client requiring the one-to-one.** *Note all services are meant to be provided on an individual basis.*

* = Required for payment

		Group Supported Employment (GSE)
*	A.	<u>Authorization Number</u> – Enter the Referral Number from the CSA DDA authorized the service. *Pre-filled in Output.*
*	B.	<u>Service Year Month</u> – 6 characters. The year and month (**YYYYMM**) for which services are being reported. *Pre-filled in Output.*
*	C.	<u>Service Code</u> – 1 to 5 characters – GSE. *Pre-filled in Output.*
	D.	<u>Provider Name</u> – 1 to 60 characters. Enter your agency's name. *Pre-filled in Output.*
*	E.	<u>County Provider Number</u> – Enter the Provider Number, which has been assigned to your agency by CARE. *Pre-filled in Output.*
*	F.	<u>Client Last Name</u> – 1 to 30 characters. Client authorized for GSE services by the case manager on the County Services Authorization (**CSA**). *Pre-filled in Output.*
*	G.	<u>Client First Name</u> – 1 to 30 characters. *Pre-filled in Output.*
	H.	<u>Client Middle Initial</u> – 1 character. *Pre-filled in Output.*
*	I.	<u>ADSA Client ID</u> – The ADSA Client ID from the CSA. *Pre-filled in Output.*
*	J.	<u>Fund Source</u> – 1 to 5 characters. Enter the Funding Source code from the CSA. *Pre-filled in Output.*
	K.	<u>Service From Date</u> – The date (YYYY/MM/DD) from the CSA DDA authorized the service. *Pre-filled in Output.*
	L.	<u>Service To Date</u> - The date (YYYY/MM/DD) from the CSA DDA authorized the service. *Pre-filled in Output.*
	M.	<u>County ID - Residence</u> - The number (1-39) of the county in which the client resides. See Appendix A. *Pre-filled in Output.*
*	N.	<u>County ID - Provider</u> - The number (1-39) of the county in which your agency provided this service. See Appendix A. *Pre-filled in Output.*
*	O.	<u>Units Type Code</u> – 1 character. The unit of service defined in the County Program Agreement**: H** for hour. The unit describes how your County is billing for the service and should be consistent with your fee/rate schedule.

*	P.	Number of Units – Enter total number of service units received by the client. The "Number of Units" should be consistent with the "Units Type Code". Whole number and quarter hours are acceptable, all else unacceptable.
*	Q.	Unit Rate – Enter the rate paid for each service as authorized by the county. This should be consistent with your fee/rate schedule and must be divisible by four.
*	R	Site Hours - Enter the total number of hours the client participated in GSE during the report month. Do not include lunch time.
	S.	Number of Client Hours Paid - Enter the total number of hours the client spent in paid community employment (including paid hours for vacation, sick or holiday) during the service month. This information needs to be accurately obtained.
	T.	Number of Client Pathway Hours Volunteer - Enter the total number of hours the client spent in Volunteer activity during the service month in non-segregated community activities designed to build skills and broaden awareness of job opportunities. Do not include hours reported under "Site Hours" item R or in "Other" hours item U.
	U.	Number of Client Pathway Hours Other - Enter the total number of hours the client spent in Other activities during the service month in non-segregated community activities designed to build skills and broaden awareness of job opportunities. Do not include lunchtime. Do not include hours reported under "Site Hours" item R or in "Volunteer" hours item T or "Provider Staff Hours Number" item W.
	V.	Gross Wages – Enter the total earnings of the client during the reporting month. This should include all wages, any paid holiday or sick leave. This information needs to be reported in a consistent manner – multiply the clients' hourly wage rate by the number of scheduled work hours for the period of time you are reporting on. When you learn of corrections please report them thru CMIS.
*	W.	Provider Staff Hours Number - Enter the total DDA paid hours of direct service the agency's staff provided the client outside of group time or crew time during the month.
	X.	Phase 1 Provider Staff Hours - Intake / Discovery / Resources / **Job Prep** / Exploration – (**A subset of the "Provider Staff Hours Number" total**) Enter the number of phase 1 staff hours the agency provided the client during the month.
	Y.	Phase 2 Provider Staff Hours - Marketing / **Job Development** – *(A subset of the "Provider Staff Hours Number" total)* Enter the number of phase 2

		staff hours the agency provided the client during the month.
	Z.	Phase 3 Provider Staff Hours - **Job Coaching** / Job Support / Retention / Follow Along – *(A subset of the "Provider Staff Hours Number" total)* Enter the number of phase 3 staff hours the agency provided the client during the month.
	AA.	Phase 4 Provider Staff Hours - **Record Keeping**– (**A subset of the "Provider Staff Hours Number" total)** Enter the number of phase 4 staff hours the agency provided the client during the month.
	AB.	Input Error Code – Used by the application. If blank, enter zero.
*	AC.	RAC – 1 to 80 characters. Enter the Recipient Aid Category (RAC) from the CSA. Pre-filled in Output

* = Required for payment

		Individual Supported Employment (IE)
*	A.	Authorization Number – Enter the Referral Number from the CSA DDA authorized the service. *Pre-filled in Output.*
*	B.	Service Year Month – 6 characters. The year and month (**YYYYMM**) for which services are being reported. *Pre-filled in Output.*
*	C.	Service Code – 1 to 5 characters – IE. *Pre-filled in Output.*
	D.	Provider Name – 1 to 60 characters. Enter your agency's name*. Pre-filled in Output.*
*	E.	County Provider Number – Enter the Provider Number, which has been assigned to your agency by CARE. *Pre-filled in Output.*
*	F.	Client Last Name – 1 to 30 characters. Client authorized for IE services by the case manager on the County Services Authorization (**CSA**). *Pre-filled in Output.*
*	G.	Client First Name – 1 to 30 characters. *Pre-filled in Output.*
	H.	Client Middle Initial – 1 character. *Pre-filled in Output.*
*	I.	ADSA Client ID – The ADSA Client ID from the CSA. *Pre-filled in Output.*
*	J.	Fund Source – 1 to 5 characters. Enter the Funding Source code from the CSA. *Pre-filled in Output.*
	K.	Service From Date – The date (YYYY/MM/DD) from the CSA DDA

		authorized the service. *Pre-filled in Output.*
	L.	Service To Date - The date (YYYY/MM/DD) from the CSA DDA authorized the service. *Pre-filled in Output.*
	M.	County ID - Residence - The number (1-39) of the county in which the client resides. See Appendix A. *Pre-filled in Output.*
*	N.	County ID - Provider - The number (1-39) of the county in which your agency provided this service. See Appendix A. *Pre-filled in Output.*
*	O.	Units Type Code – 1 character. The unit of service defined in the County Program Agreement**: H** for hour. The unit describes how your County is billing for the service and should be consistent with your fee/rate schedule.
*	P.	Number of Units – Enter total number of service units received by the client. The "Number of Units" should be consistent with the "Units Type Code" of hourly. Whole number and quarter hours are acceptable, all else unacceptable.
*	Q.	Unit Rate – Enter the rate paid for each service as authorized by the county. This should be consistent with your fee/rate schedule and must be divisible by four.
	R.	Number of Client Hours Paid - Enter the total number of hours the client spent in paid community employment (including paid hours for vacation, sick or holiday) during the service month. This information needs to be accurately obtained.
	S.	Number of Client Pathway Hours Volunteer - Enter the total number of hours the client spent in Volunteer activity during the service month in non-segregated community activities designed to build skills and broaden awareness of job opportunities. Do not include hours reported under "Client Hours Paid" item R or in "Other" hours item T.
	T.	Number of Client Pathway Hours Other - Enter the total number of hours the client spent in Other activities during the service month in non-segregated community activities designed to build skills and broaden awareness of job opportunities. Do not include lunchtime. Do not include hours reported under "Client Hours Paid" item T or in "Other" hours item R.
	U.	Gross Wages – Enter the total earnings of the client during the reporting month. This should include all wages, any paid holiday or sick leave. This information needs to be reported in a consistent manner – multiply the clients' hourly wage rate by the number of scheduled work hours for the period of time you are reporting on. When you learn of corrections please report them thru CMIS. For clients who are self-employed report the gross earnings and the hours worked.

	V.	Provider Staff Hours Number - Enter the total hours of direct service the agency provided the client during the month.
*	W.	Phase 1 Provider Staff Hours - Intake / Discovery / Resources / **Job Prep** / Exploration – (**A subset of the "Provider Staff Hours Number" total**) Enter the number of phase 1 staff hours the agency provided the client during the month.
	X	Phase 2 Provider Staff Hours - Marketing / **Job Development** – (**A subset of the "Provider Staff Hours Number" total**) Enter the number of phase 2 staff hours the agency provided the client during the month.
	Y	Phase 3 Provider Staff Hours - **Job Coaching** / Job Support / Retention / Follow Along – (**A subset of the "Provider Staff Hours Number" total**) Enter the number of phase 3 staff hours the agency provided the client during the month
	Z	Phase 4 Provider Staff Hours - **Record Keeping** (**A subset of the "Provider Staff Hours Number" total**) Enter the number of phase 4 staff hours the agency provided the client during the month.
	AA.	Input Error Code – Used by the application. If blank, enter zero.
*	AB.	RAC – 1 to 80 characters. Enter the Recipient Aid Category (RAC) from the CSA. *Pre-filled in Output*

*Required for payment

		Individualized Technical Assistance (ITA)
*	A.	Authorization Number – Enter the Referral Number from the CSA DDA authorized the service. *Pre-filled in Output.*
*	B.	Service Year Month – 6 characters. The year and month (YYYYMM) for which services are being reported. *Pre-filled in Output.*
*	C.	Service Code – 1 to 5 characters – ITA. *Pre-filled in Output.*
	D.	Provider Name – 1 to 60 characters. Enter your agency's name. *Pre-filled in Output.*
*	E.	County Provider Number – Enter the Provider Number, which has been assigned to your agency by CARE. *Pre-filled in Output.*
*	F.	Client Last Name – 1 to 30 characters. Client authorized for ITA services by the case manager on the County Services Authorization (**CSA**). *Pre-filled in Output.*

*	G.	<u>Client First Name</u> – 1 to 30 characters*. Pre-filled in Output.*
	H.	<u>Client Middle Initial</u> – 1 character. *Pre-filled in Output.*
*	I.	<u>ADSA Client ID</u> – The ADSA Client ID from the CSA. *Pre-filled in Output.*
*	J.	<u>Fund Source</u> – 1 to 5 characters. Enter the Fund Source from the CSA. *Pre-filled in Output.*
	K.	<u>Service From Date</u> – The date (MM/DD/YYYY) from the CSA DDA authorized the service. *Pre-filled in Output.*
	L.	<u>Service To Date</u> - The date (MM/DD/YYYY) from the CSA DDA authorized the service. *Pre-filled in Output.*
	M.	<u>County ID - Residence</u> - The number (1-39) of the county in which the client resides. See Appendix A. *Pre-filled in Output.*
*	N.	<u>County ID - Provider</u> - The number (1-39) of the county in which your agency provided this service. See Appendix A. *Pre-filled in Output.*
*	O.	<u>Units Type Code</u> – 1 character. The unit of service defined in the County Program Agreement: **H** for hour. The unit describes how your County is billing for the service and should be consistent with your fee/rate schedule.
*	P.	<u>Number of Units</u> – Enter total number of service units received by the client. The "Number of Units" should be consistent with the "Units Type Code" of hourly. <u>Whole number and quarter hours are acceptable, all else unacceptable.</u>
*	Q.	<u>Unit Rate</u> – Enter the rate paid for each service as authorized by the county. This should be consistent with your fee/rate schedule <u>and must be divisible by four</u>.
	R.	<u>Number of Client Hours Paid</u> - Enter the total number of hours the client spent in paid community employment (including paid hours for vacation, sick or holiday) during the service month. This information needs to be accurately obtained.
	S.	<u>Number of Client Pathway Hours Volunteer</u> - Enter the total number of hours the client spent in Volunteer activity during the service month in non-segregated community activities designed to build skills and broaden awareness of job opportunities. Do not include hours reported under "Client Hours Paid" item R or in "Other" hours item T.
	T.	<u>Number of Client Pathway Hours Other</u> - Enter the total number of hours the client spent in Other activities during the service month in non-segregated community activities designed to build skills and broaden awareness of job opportunities without staff. Do not include lunchtime. Do

		not include hours reported under "Client Hours Paid" item R or in "Volunteer" hours item S or "Provider Staff Hours Number" item V.
	U.	Gross Wages – Enter the total earnings of the client from community employment during the reporting month. This should include all wages, any paid holiday or sick leave. This information needs to be reported in a consistent manner – multiply the clients' hourly wage rate by the number of scheduled work hours for the period of time you are reporting on. When you learn of corrections please report them thru CMIS. For clients who are self-employed report the gross earnings and the hours worked.
*	V.	Provider Staff Hours Number - Enter the total DDA paid hours of direct service the agency's staff provided the client during the month.
	W.	Phase 1 Provider Staff Hours - Intake / Discovery / Resources /**Job Prep** / Exploration – *(A subset of the "Provider Staff Hours Number" total)* Enter the number of phase 1 staff hours the agency provided the client during the month.
	X.	Phase 2 Provider Staff Hours - Marketing / **Job Development** – *(A subset of the "Provider Staff Hours Number" total)* Enter the number of phase 2 staff hours the agency provided the client during the month.

	Y.	Phase 3 Provider Staff Hours - **Job Coaching** / Job Support / Retention / Follow Along – *(A subset of the "Provider Staff Hours Number" total)* Enter the number of phase 3 staff hours the agency provided the client during the month
	Z.	Phase 4 Provider Staff Hours - **Record Keeping**– *(A subset of the "Provider Staff Hours Number" total)* Enter the number of phase 4 staff hours the agency provided the client during the month.
	AA.	Personal Agent Hours – Enter the hours spent with a Personal Agent.
	AB.	Personal Agent Cost – Enter the cost of the Personal Agent for this client for this month.
	AC.	Input Error Code – Used by the application. If blank, enter zero.
	AD	RAC – 1 to 80 characters. Enter the Recipient Aid Category (RAC) from the CSA. *Pre-filled in Output*

County Billing Data Validation Rules

	INPUT DATA VALIDATIONS THAT CAN RESULT IN ERROR:
1.	Required Field validation: Authorization Number Service Year Month Service Code Provider Name Provider Number Client Last Name Client First Name ADSA Client ID Fund Source Provider County IDUnit Type Number of Units (Natural and Other for CDS – can be zero for CDS) Units Rate (Natural and Other for CDS) Additional or Misc Expense (CDS only) RAC – required for all services after 12/2015

2.	Valid Values check
	    Authorization Number
	    Service Year Month – Must be a valid year month in 'YYYYMM' format.
	    Service Code
	    County Provider Number
	    Provider County
	    ADSA Client Id

3.	Authorization verification A valid authorization should exist matching the: • Specified Client (ADSA ID), • Provider (County Provider Number), • County Of Contract (County ID - Provider), and • Service period for the specified Service Year/Month
4.	Provider Verification A valid provider record should exist matching the: • Provider (County Provider Number), • County of Contract (County ID - Provider), and • Service period for the specified Service Year/Month
5.	If (Units Number * Units Rate Number) is zero then Units Number should be zero.
6.	If Provider Staff hours is zero then Phase 1 thru 4 should be zero. If Provider Staff hours is greater than zero then correlating Phases should equal to Staff hours total.

Employment Data Validation Rules

	INPUT DATA VALIDATIONS THAT CAN RESULT IN ERROR:

1.	Required Field validation.
	    ADSA Client ID
	    Employer Name
	    Start Date

2.	Records without a Start Date will not be saved
3.	Records without an Employer Name will not be saved
4.	Records with unrecognizable Job Type code will not be saved

Billable Activities:

Staff Hours Phase I

Intake
- Meeting with individual, family and/or other support persons
- Provide system overview including services and funding
- Complete initial paperwork including intake assessment
- Collect individuals history/information/ records from other sources

Discovery
- Identify what are job interests
- Conduct an assessment - skills inventory
- Spot potential obstacles and probable remedies
- Consider current job market compared to individuals desired job(s)
- Develop plan including:
  - Goals
  - Methods
  - Strategies

Resources
- Benefit analysis
- Secure funding commitments from:
  - Division of Vocational Rehabilitation (DVR)
  - Social Security Work Incentive
  - Mental Health (MH)

Job Prep / Exploration
- Travel training
- Interview skills
- Grooming / hygiene / professional appearance
- Teach self-advocacy
- Assistance obtaining required job items – i.e. food handlers' permit, First Aid card etc.
- Sample various work sites – tours
- Job shadow – trial work experience
- Volunteer
- Adaptive technology planning
- Develop portfolio / resume
- Apprise of job clubs

Staff Hours Phase II

Marketing / Job Development
- Conduct labor market analysis
- Network
- Target / Research Employer
- Develop relationship with employer
- Educate employer – benefits to employee individual, clarify roles, outline expectation, etc.
- Evaluate employment site, provide proposal to employer and secure commitment.
- Complete job/task analysis
- Identify natural supports
- Identify potential obstacles
- Negotiate job start
- Assist with interview process
- Job replacement / change
- Customize job / job carving
- Match the employment opportunity to the interest, strengths, and skills of the individual.

Staff Hours Phase III

Job Coaching / Job Support
- Assessment – development supports to maintain independence – i.e. jigs, checklist etc.
- Coordinate with: transportation and individuals home site schedule
- New hire orientation / testing
- Provide intensive onsite instruction / education
  - To the individual
  - To the co-workers
  - To the supervisor
- Develop natural supports
- Continuous evaluation – modifying job-site, task, and supports an necessary
- Advocating / problem solving / crisis management
- Identify stabilization
- Develop fade schedule
- Continuous communication- families, and the employer
- Coordinate referrals to community resources and case management
- Develop follow-up support plan

Retention / Follow Along
- Advancement
- Periodic on-site visits
- Communication upkeep and relationship expansion/continuation
- Quality assurance - monitoring
- Problem recognition / resolution
- Job modifications – new job tasks – re-training
- Business monitoring change – staff/co-worker re-training etc.
- Advocating – advancement opportunity, increased benefits, and/or more hours
- Update employment plans

Staff Hours Phase IV

Record Keeping
- Contact notes/logs
- Periodic progress reports
- Incident reports
- Satisfaction surveys
- Maintain files/records
- Report wage/hour info

County Procedure Codes / BARS Codes Crosswalk 2021

P1 Procedure/Service Code	Description	BARS Code
SA003	Adult Day Care	69
SA157	Child Development Services	61
SA262	Community Inclusion	67
SA344	Individual Technical Assistance	65
SA835	Individual Employment	64
SA836	Group Supported Employment	62
SA920	Administration; County E&D	11
SA921	Training; County E&D	30
SA922	Staff Training; County E&D	31
SA923	Info and Education; County E&D	41
SA924	Infrastructure; County E&D	92
SA925	Start-up; County E&D	93
SA926	Partnership; County E&D	94
SA927	PASSR Administration	12
SA928	Child Development - Goods	61
SA930	Job Foundation Admin	13
SA931	Job Foundation Admin OSPI	14
SA932	Job Foundation Report	95
SA933	Job Foundation Report OSPI	96
SA934	Job Foundation Info/Ed	97

NOTES