eQHealth Solutions, LLC

FSP Residential Provider Training

Overview of FSP Continued Stay Review Requirements and Submitting Online Requests Through eQSuite® December 2021



FSP Residential Provider Training

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- Residential Treatment Facility Responsibilities
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eQHealth Solutions Role – Utilization Review

eQHealth Solutions' utilization review enables the Department of Healthcare and Family Services (HFS) to determine if residential treatment services are medically necessary, reasonable and appropriate for the FSP youth based on their clinical needs.

In alignment with Title 89 II. Admin. Code 139, the utilization review assists HFS in determining:

- Whether the services furnished are consistent with the provision of appropriate medical care.
- Whether these services are being delivered in the most clinically appropriate, cost-effective setting.
- The quality of services.
- Whether professionally recognized standards of health care are met.





Clinical Criteria for Determining Medical Necessity

eQHealth uses Change Healthcare's InterQual® criteria in addition to clinical judgement of the nurse or physician to render a decision for prior authorization, inpatient admission, continued stay and reconsideration review requests.

- InterQual®, " is a proprietary set of evidenced-based clinical intelligence to support appropriate care and foster optimal utilization of resources."
 - InterQual® criteria for Residential Treatment outlines a series of symptoms/behaviors that the patient must display in order to meet recognized standards for residential placement.
 - Depending on how many symptoms/behaviors displayed in each category are met by the patient can a determination then be made through InterQual® that residential treatment is medically necessary.

For information on Change Healthcare's criteria, visit their website at <u>www.changehealthcare.com/InterQual</u>





SASS/FSP Coordinator in FSP Residential Treatment

Every youth enrolled in the Family Support Program has an FSP Coordinator. The FSP Coordinator:

- Assist parent/guardian with the FSP application process
- Coordinate FSP community mental health and support services for the youth
- When a youth can no longer function in the community, residential treatment services may become an option, the FSP Coordinator submits with parent/guardian approval a prior authorization request for residential treatment to eQHealth.
- If eQHealth approves the request, the FSP Coordinator has 90 calendar days to find a residential placement. eQHealth's approval letter is to be submitted in the residential admission packet.
- Once a placement has been found the FSP Coordinator is responsible for sending a placement form to eQHealth.

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Residential Treatment Facility Responsibilities

- Once eQHealth has received the placement form from the FSP Coordinator, eQHealth will send the RTF Provider a 60-day initial authorization.
- Ten calendar (10) to three calendar (3) days prior to the end of the initial 60day authorization, the RTF Provider will need to submit a continued stay request to eQHealth Solutions to determine whether the youth continues to require residential treatment.
- Continued stay requests are approved in 30 calendar day segments.
- If eQHealth does not receive the continued stay request and all required documentation at least three (3) business days prior to last approved day, the RTF may incur non-covered days for late submission.
- If no Continued Stay Requests are submitted, eQHealth will inform HFS. Any days a youth remains placed at an RTF without an approved continued stay authorization may be considered non-covered days and nonreimbursable by HFS.





Residential Continued Stay Requests

The RTF must contact the SASS FSP Coordinator for any Transfers

- Should a FSP youth be transferred to another residential facility (with different HFS Provider ID), the RTF Provider must work with the youth's SASS FSP Coordinator regarding the new placement.
- Once a placement has been identified, the current RTF Provider must provide the SASS FSP Coordinator with the new RTF information, including:
 - ✓ RTF name and HFS Provider ID number
 - Contact name, phone and email or fax number
 - Admission date
- The SASS FSP Coordinator will complete the online Transfer form to notify eQHealth once the youth has been admitted to the new facility. Upon approval, eQHealth will provide the new RTF Provider an initial 60-day authorization.
- The RTF must submit a Residential Discharge Form to eQHealth within three (3) calendar days after the youth has been discharged. The form may be sent by secure fax to (800) 418-4039 or by secure email to eQFSPRTF@eqhs.com.
 Please note in the subject line: FSP RTF Discharge. The form can be found on eQHealth's website at https://il.eqhs.com.





CONTINUED STAY UTILIZATION REVIEW PROCESS





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Continued Stay Request Required Documents

- In submitting a continued stay request, the following items are required:
 - Enter in your RTF Provider Number
 - **Treatment Authorization Number -** (Initial TAN provided by eQHS)
 - The Youth's Recipient ID Number
 - Youth's Primary Diagnosis
 - Youth's Medications
 - Progress Summary
 - Attach the IM+CANS or IATP and Family Success Plan
- Regarding the parent/guardian signature required on the IATP/IM+CANS and Family Success Plan, HFS is extending the COVID-19 protocol where a parent/guardian can give a verbal consent as their signature. However, the RTF Provider must document the date and time the consent was given and attest that the information is correct with their signature.





Administrative Review

- eQHealth's Behavioral Health Review Specialist begins the review process with an *administrative review* to ensure that all continued stay review tabs in eQSuite® have been completed and that the required documents have been uploaded.
- If all information has been submitted, the reviewer will proceed with the *clinical review*.
- If the information is *incomplete,* the reviewer will send the RTF Provider an incomplete letter describing the missing information/documents.
- The RTF Provider will have *two (2) business days* to upload or send by secure fax the missing documents.
- If the additional information is not received, the review will be closed, and the RTF Provider will incur non-covered days of service until the additional information is received and eQHealth's review is complete.
- The RTF Provider and parent/guardian will receive a letter informing them the review is closed, which may result in non-covered days that are not reimbursable by HFS.



Clinical Review Process

• The clinical review includes:

- Thorough review of the IATP or IM+CANS, the Family Success Plan and Progress Notes for additional evidence supporting the request for continued residential services
- Comparing the clinical documentation to InterQual® Residential Treatment criteria for continued stay requests
- Documenting the decision to approve continuation of residential treatment services
- Preparing and submitting determination letter to RTF provider, the parent/guardian and the FSP Coordinator.
- If the Behavioral Health Review Specialist cannot approve the continued stay request, the request will be referred to an eQHealth psychiatric physician reviewer.





Second-Level Clinical Review Process

- The eQHealth FSP Coordinator will send the request and all associated documents to an eQHealth Illinois licensed, board-certified Psychiatrist to perform a second-level clinical review.
 - The Physician Reviewer (PR) thoroughly reviews all the documentation. If the PR has questions, they will contact the RTF Provider for a consultation.
 - Using the RTF's submitted documentation and information provided during consultation, the Physician Reviewer will render their determination.
 - An eQHealth Physician Reviewer documents the clinical rationale decision to approve or deny the continuation of residential treatment services.
- The appropriate determination letters will be sent to the RTF Provider, the Parent/Guardian and the FSP Coordinator.
- If the continued stay request is denied, the RTF may request a reconsideration of that denial.





RTF Continued Stay Review Outcomes

Following are the review outcomes for a residential Continued Stay:

Incomplete (Pended)

- Request is incomplete, missing the required documents
- An Incomplete Letter is sent to the RTF Provider.
- RTF must *submit additional information within two (2) business day* to avoid the request being closed, resulting in uncovered days for the RTF Provider.

Approved

 Approval Letter is sent to the RTF Provider, parent/guardian and FSP Coordinator.

Adverse Determination (Denied)

- Denial Letter is sent to the RTF Provider, parent/guardian and FSP Coordinator.
- The RTF may submit a reconsideration request form with supporting information to eQHealth within 2 business days from the date of denial notification.
- The family (parent/legal guardian) may submit an appeal directly to HFS.



Denial - Reconsideration Process

Medical Necessity Denial – RTF Continued Stay

- If the residential continued stay is denied by a Physician Reviewer for medical necessity, the RTF can fax a Reconsideration Request Form to eQHealth with additional clinical information within *two (2) business days* from the date of denial notification.
 - If eQHealth receives the information within the 2-business day timeframe, all prior documentation and any additional information submitted by the RTF will be sent to a second, eQHealth psychiatric Physician Reviewer (PR).
 - If the eQHealth Physician Reviewer has questions, they will attempt to contact the RTF Clinical Director or LPHA for consultation.
 - When calling the RTF, if eQHealth's Physician Reviewer gets a voicemail, they will leave a message with their phone number and give the LPHA three (3) hours to return the call to eQHealth.
 - If no return call is received, the Physician Reviewer will proceed in making their determination.

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Reconsideration Process

Reconsideration Physician Review

 Based on all RTF-provided documentation and any information obtained from the LPHA consultation, the eQHealth Physician Reviewer will render their decision within *one (1) business day*.

Reconsideration Outcomes

- Uphold: The Physician Reviewer can uphold the original denial (this is the final <u>eQHealth</u> determination), or
- Overturned: The Physician Reviewer can approve the reconsideration request and the RTF will be issued 30 days of continued stay.

NOTE: If the denial is upheld on reconsideration, the residential provider may not request further review from eQHealth. However, a **Parent/Guardian may appeal** this denial according to Section 139.600 in Rule 139.





Welcome to eQSuite®!

ONLINE REVIEW FOR RESIDENTIAL CONTINUED STAY FOR THE FAMILY SUPPORT PROGRAM



Minimum eQSuite® Requirements

Sign up for Secure FSP eQSuite® System Access

- Each RTF Facility will need to create an online account with eQHealth to access the online system.
- <u>Download the eQSuite</u>® <u>System Access form from il.eqhs.com website under</u> <u>the Family Support Program menu tab</u>.
 - ✓ Internet Connection
 - eQSuite® requires advanced browsers that support HTML5
 - Google Chrome works best as the Internet browser
 - ✓ Ability to Upload Documents
 - Required documents must be clean, paper copies that are scanned and saved on your computer as a PDF image file.
 - The





Accessing the FSP Web Portal - eQSuite®

<u>Always go to eQHealth's Website homepage at</u> http://il.eqhs.com



1. Click the Family Support Program tab "Log In-Providers Only"

2. Click the eQSuite® button at top of page.

3. The Login screen will appear. Type in your Login Name and Password. Click the Login button to enter the review portal.



eQSuite® – Residential Continued Stays

- Once you log on, the following screen will appear for Residential Continued Stay Requests.
- Click "Create New Review" tab to begin.

≫eq∙Health suite											
Create New Review	Respond to Add'l Info	Online Helpline	Utilities	Reports	Search	Attachments	Letters	Update My Profile	Logoff		
Reports											
Menu											
Errors											





Start tab will appear (will recognize by your log in name and fill in your Provider # and Name)

- Use drop down and select **Cont Stay** for review type
- Enter in the **8- digit Treatment Authorization Number** (TAN) that will be sent to you by eQHealth. This is your initial TAN that will allow you to begin your first review in eQSuite®.
- For each approved continued stay request a new TAN will be generated. *The TAN will be printed on the approval letter for that youth.*
- When you enter in your second request for the same youth in the following month, you will enter in the new TAN. For each subsequent continued stay request for the youth, you will enter the TAN listed on the approval letter.
- Once the TAN is entered, Hit "Retrieve Data" to auto-populate the next section of the Start Tab.

Review Head Provider #: 237	Review Header Information Provider #: 237188150078 Provider Name: CENTER FOR CHILD Admit DX:									
Start										
Review Type a Provider ID;	237188150078 Provider Name: CENTER FOR CHILD									
Type of sed:	Residential Bed									
Review Type:	Not Selected TAN: 18006202									
	Not Selected DATA									
	Cont Stay									





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The rest of the review tabs will appear on the top of page. Please see 3 key steps below to complete the Start tab:

Start DX CODES MEDS SUMMARY Review Type and Settings	1. Enter Member ID (Medicaid RIN)			
Provider ID: 237188150078 Provider Name: CENTER FOR CHILD Total Days Cert: 60 Type of Bed: Residential Bed Total Days Cert: 4/10/2019 4/10/2019 4/10/2019 1000000000000000000000000000000000000	Click Tab or Enter Key to move to the next field.			
Review Type: Cont Stay TAN: 18006202 Member 021887944 Name: KLAYTON DOB: 02/23/2008 Sex: Male ▼ Admit DX: F3110 D Current EPISODE MANIC W/O PSYCH FEATURE NOS Sex: Male ▼	2. Enter Admit Dx using no decimal points.			
Admit Date 2/10/2019 # Days Requested: 30	3. Enter the Admit Date and hit <i>Check Key</i> to continue with review			
CHECK KEY CANCEL				

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Note: "30" days will automatically appear for # Days Requested



eQSuite - Residential Continued Stays

DX CODES Tab - The primary diagnosis entered on the first tab will appear in this grid. ٠ Please enter in any additional diagnoses for this FSP youth by clicking "Add".

St	tart	DX CODES MEDS SUMMARY	🖬 Code Add/Edit Page	1. Click Add
		Search		2. In the pop-up screen
P	ICD Code	Description	Code: F6381 INTERMITTENT EXPLOSIVE DISORDER	type in diagnosis code (no decimals) and date
γ	F3110	BPD CURRENT EPISODE MANIC W/O PSYCH FEATURE NOS	Date Identified: 1/1/19 × Add Close	identified.
	F6381	INTERMITTENT EXPLOSIVE DISORDER		Click Tab or Enter to move to the next field.
C/	ANCEL	SAVE/CLOSE SAVE/CONTINUE		Click Add to add additional diagnoses (Continue process for each additional code)

3. Hit Save/Continue



MEDS Tab - Please enter the current medications for this FSP youth

1. Click Add

2. Fill out the pop-up screen with medication info and hit Add. Continue until each med shows in grid

- **3.** Answer compliance questions
- 4. Hit Save/Continue







SUMMARY Tab – Provide an updated summary of progress and ongoing areas of concern

✓ Summary of youth's demeaner i.e. hostile, not engaged, depressed, oppositional, personal hygiene, anxious, impulsive, etc.



- ✓ Identify any incidents where the youth was on 1:1 supervision, if he/she eloped, had to be restrained, inappropriate sexual behavior, presented a danger to himself or others.
- Changes in medication and reason for change behavior since change of medicine.
- ✓ School performance, interaction with peers, teachers, staff. Relationship with family, status of visits, calls, etc.
- ✓ New concerns or problems

IMPORTANT NOTE: eQHealth cannot accept copy/paste summary from the last continued stay. RTF must show progression/regression of care every 30 days.



• SUMMARY Tab – Provide an updated summary of progress and ongoing areas of concern







eQSuite - Residential Continued Stays

HEALTHCARE AND FAMILY SERVICES DISCLAIMER STATEMENT

Attestation: Reviewing LPHA signature must be uploaded with submissions of Continued Stay request. By checking this box, I understand I must submit this documentation to fully complete the review.

EQHEALTH SOLUTIONS' CERTIFICATION DETERMINATION DOES NOT GUARANTEE MEDICAL ASSISTANCE PAYMENT FOR SERVICES OR THE AMOUNT OF PAYMENT FOR MEDICAL ASSISTANCE SERVICES. ELIGIBILITY FOR AND PAYMENT OF MEDICAL ASSISTANCE SERVICES ARE SUBJECT TO ALL TERMS AND CONDITIONS AND LIMITATIONS OF THE MEDICAL ASSISTANCE PROGRAM.

As an authorized Medical Assistance provider, I certify that I have reviewed the information submitted for prior authorization. I certify that the information provided is true, accurate, and complete to the best of my knowledge. I understand that services requested herein are subject to review and approval through Healthcare and Family Services' Utilization Management and Quality Improvement Organization. I understand that any falsification, omission or concealment of material fact may subject me to civil monetary penalties, fines, or criminal prosecution or may disqualify me as a provider of Medical Assistance services.

By clicking [Submit for Review] you are attesting CO above.

CANCEL

SUBMIT FOR REVIEW

Do you have your required documents ready to upload? Click SUBMIT FOR REVIEW



SAVE/CLOSE



The following screen will appear after you SUBMIT, write down the Review ID number







eQSuite – Residential Continued Stays

- Upload your images screen appears. You will upload your IATP or IM+CANS and Discharge Plan.
- 1. Select File Type
- **2.** Hit Browse button (highlight file to open)
- Click Upload and your file name will appear when it is loaded

Repeat this process to upload other file(s).

PDFs work the best in eQSuite® when uploading documents.





Checking Your Attachments

Cre	ate New	Review	Respond t	o Add'l Info	Retro C	hart Requ	ests Onl	ine Helpline	Utilities	Reports	Search	Attachments	Letters
A	tta <mark>chn</mark>	nents											
Menu	In Proces	55 2											
Erro	ReviewID	Bene ID	First Name	Last Name	Admit Date	TAN	KBaby Name	Account Number	Receipt Date	Record Status	-		
2	32771252		JULIET		02/08/2018				02/08/2019		Open Review	Link Attachment	
	32773134		KLAYTON		02/10/2019	18006202			03/08/2019		Open Review	Link Attachment	Attachment(s)
			8							[Ð 9 -		3
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			Attachmen	t Date		Image Ty	pe		Page Co	unt	View		
			03/08/2019	9		IATP			1		View		
			03/08/2019	9		Family Su	uccess Plan		1		View		
												_ I.	

1. On menu bar, click Attachments tab

2. Look at the"In Process" cases

3. Go to your case and ensure you see Attachment(s) in farright column. You may click on this link to verify attachments were sent

You have completed submission of your continued stay request! Ve

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- When the review is approved, you will see a TAN (treatment authorization number) added to this screen. Write down the TAN.
- If you did not see an attachment that was uploaded, go to "Link Attachments" and add missing document.)



RESPOND TO REQUEST FOR ADDITIONAL INFORMATION

- Your request may be "*pended*" if required documentation is missing and considered incomplete.
- An incomplete letter will be emailed to you, notifying you that required documentation is missing or is incomplete.
- You will have *two (2) business days* to submit the information/documents to eQHealth by logging into eQSuite and clicking the Respond to Addtl Info Tab
 - If you are unable to complete upload online, send by secure fax at 800-418-4039 or by secure email at eQFSPRTF@kepro.com

Once the requested information/documents has been received, eQHealth will resume the review process and make a determination.

- If the information or documents are not received, eQHealth will close the review. Written notification of a review being closed will be sent to the RTF Provider, the parent/guardian, and the FSP Coordinator.
- If the review is closed, the RTF Provider will encounter uncovered days.





Submitting Additional Information

- RESPOND TO ADDITIONAL INFORMATION eQHealth's FSP Review Specialist may "pend" your request if they do not have all required documentation to start the review.
 - The case will appear under the Respond to Addtl Info tab, waiting for your response
- 1. On menu bar click Respond to Addtl Info tab
- 2. Find the case and click Open





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Submitting Additional Information

RESPOND TO ADDITIONAL INFORMATION •

Start DX CODES MEDS SUMMARY Read the top box to see what information is QUESTION: The IM CANS has not been updated. Please upload the most recent IM CANs missing. If box is blank document that has been updated in the past 30 days. still continue to next steps ADDITIONAL INFO: 1. Type in your short

- response
- 2. Click Submit Info

We will upload the most current IM CANS document for your review Please do not click the Submit Info button until you have entered necessary documentation in the response box above.

ADDL INFO







Submitting Additional Information

RESPOND TO ADDITIONAL INFORMATION

- Click Link Attachment on left side
- 2. Choose "Upload"
- Click Browse to find your updated document file.
 Once you select it your file name will appear on screen.
- 4. Click **Upload** to complete the task





FSP Resources and Contacts

eQHealth FSP Helpline

- Please submit all inquiries through the Online Helpline portal in eQSuite®. eQSuite can be accessed 24/7.
- If you need helps with login or password, call (866) 435-8778

Helpline assistance is available Monday through Friday, 8:30 a.m. to 5:00 p.m.

eQHealth EMAIL: eQFSPRTFCS@kepro.com

Website http://il.eqhs.com

- Click <u>Family Support Program tab</u> on top of Website homepage
 - Request for System Access Form (User Administrator Guide, too)
 - Reconsideration Process/Form
 - Residential Placement Forms (includes Discharge Form)

Healthcare and Family (HFS)

<u>Program questions?</u> Contact HFS by phone at 217-557-1000 or email at HFS.FSP@illinos.gov.



