Unit 4: Case Management

Version 4.3

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Date	Release	Description
9/22/2015	4.3	• No changes
8/26/2015	4.2	• No changes
1/8/2015	4.01	• Updated financials to reflect 4/1/13 cutover to SFA
		• Removed mention of 'Find Task' feature for muni or
		provider users
		• Added content relating to demographic data change history
		• Added content from unit 10 dealing with managing Child's
		Insurance as this is now also handled by child's Service
6/4/2012	1.6	Coordinator
6/4/2012	1.6	• Updated Unit Overview topic to state that the
		MUNI_ProgramUserAdmin user role can conduct the same
10/24/2011	1.5	NYEIS Case Management actions as the child's EIO/D.
6/27/2011	1.3	 Updated Attachments subtopic. Added Tasks (Open Task Summary) subtopic to the
0/2//2011	1.4	Integrated Case topic.
		Added Case Lifecycle Status subtopic
		Added Status History subtopic
3/31/2011	1.3	• Updated Child Home page screen shots. Child Information
		cluster renamed "Child Name."
		• Added Important Information to Attachments and Record
		Communication sections. Both features are currently
		disabled until an Anti-Virus scanning application is added
		to NYEIS.
		• Updated the Alternate Names section.
		Added Editing Child Homepage section.
1/31/2011	1.2	• Edited Address Validation screen shots and guidance to
		reflect new required search fields: City, State and Zip.
11/22/2010	1 1	Added Health Assessments section.
11/22/2010	1.1	Working with Integrated Case Homepage section – Deleted reference to Supremed (Deptert 45 Dev Cleak
		Deleted reference to Suspend/Restart 45-Day Clock
11/2/2010		functionality. Added new Integrated Case screen shot.
11/2/2010		• Creating MS Word Communications section – added Internet Explorer browser settings.
		 Added Child Home Page section including screen shot of
		left navigation bar.
		• Added Addresses section.
		Added Cases section.
		Added Financials section.
		 Added Notes from the Child Home Page section.
		• Added Phone Numbers section.
		• Tasks section – updated explanation about user-created

		 tasks. Added At-Risk Follow Up section Added Audit Logs section. Added Referrals section.
10/1/2010	1.0	October 2010 NYEIS launch.

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Case Management

Unit Overview

Cases are used to manage the delivery of services to a Child in NYEIS. Cases should be thought of as folders where information for a Child is stored. Examples of Cases/*Folders* are a child's IFSPs and Service Authorizations. This Unit focuses primarily on the case management functions associated with the child's homepage and integrated case homepage. Case management of other NYEIS "cases" (IFSPs, etc.) is covered in other User Manual Units (Unit 9: Provider Management, Unit 6: IFSP and Service Authorization, etc.).

An Integrated Case is a central location for the Child's Case to be managed. An Integrated Case is created for a Child when an EIO/D is assigned.

It will be helpful to remember that Case Management in NYEIS refers to managing the Cases/*Folders* as described above. It *does not* refer to the responsibilities of a Service Coordinator in the EIP. Although many of the Case Management functions will be available to Service Coordinators, many are available to other NYEIS Users with assigned access rights.

Case management functions performed in NYEIS are normally carried out by the child's assigned EIO/D or Service Coordinator. However, any municipal user assigned the MUNI_ProgramUserAdmin user role has the ability to perform the same case management functions as the child's EIO/D.

INTEGRATED CASE HOME PAGE

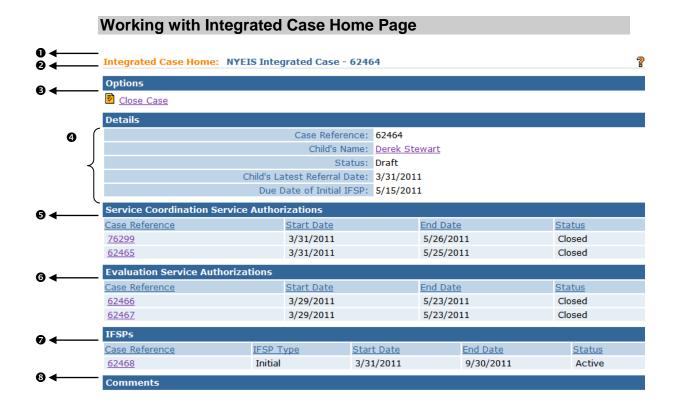


Integrated Case Home Page Navigation Bar

- Navigation section displays all the different areas that can be reviewed, added or updated for a Child's Integrated Case.
- **Recent Items** section displays the name of recently visited Children, Providers, Vendors, etc., as a link.

Important Information

The Navigation Bar is different depending on the page displayed and the User. Some links will not be available to all Users.



• Case Tab Bar – displays multiple tabs when more than one Case is open. Tabs are always linked to a Child. Examples of tabs include Integrated Case, Individualized Family Service Plan (IFSP) and Service Authorizations (SA).



- Header Bar displays page name and Reference Number (unique identifier for the Case). The reference number always stays with the Case.
- Options section –

```
Close CaseSelect link to go to Close Case page.See Unit10: Municipal Administration, Closing a Case for<br/>important additional information and process for<br/>closing a case.
```

④ Details section – displays details about the Case.

- Child's Name clicking the child's name will navigate the User to the Child Home page.
- **Status** is either Draft (i.e., Open) or Closed. The Integrated Case Status field displays the current status. Click the Status History link in the Navigation menu to view the Status History.
- Child's Latest Referral Date displays the child's current New Referral date or Re-Referral date. Does not display Additional Referral dates.
 See Unit 2: Referral and Intake for additional information regarding types of Referrals.
- Service Coordination Service Authorizations section displays the initial service coordination Service Authorization that can be viewed and changed by clicking Case Reference link.
- Evaluation Service Authorizations section displays a list of Evaluations and associated Service Authorizations that can be viewed by clicking Case Reference link. See Unit 5: Evaluation for complete information.
- IFSPs section displays list of Individual Family Service Plans (IFSP) that can be viewed and changed by clicking Case Reference link. Service Authorizations for each IFSP are accessible from the IFSP Service Authorizations List section on the IFSP Home Page. See Unit 6: IFSP & Service Authorization for complete information.
- **3** Comments section displays comments about the Case.

ATTACHMENTS

The attachment link is available from the Integrated Case Navigation Bar and is used to attach documents that provide additional information regarding the Child in NYEIS.

Any file type may be attached depending on the Users software installed on their Personal Computer. Sample file types are (but not limited to): Word, Excel, PDF and JPG.

See Unit 1: Getting Started, *Attachments* for further information and instructions.

CASE PARTICIPANTS

A Case Participant is any person who has interaction with the Child's Case through NYEIS. Case Participants do not have to be NYEIS Users. For example, a physician will be a Case Participant when a communication with them is documented in NYEIS and a Provider will be a Case Participant when a Service Authorization is issued to them through NYEIS. It is also important to note that some NYEIS Users that are Case Participants will not have access rights to perform all functions in NYEIS.

See Unit 10: Municipal Administration for information on registering specific types of Case Participants.

Viewing Case Participants

Users can View Case Participants associated with the Child's Case.

- 1. Display the Child's Integrated Case Home Page. Displaying Integrated Case Home Page for further information.
- 2. Click **Case Participants** from the Navigation Bar. **Case Participants** page displays.

😋 NYEIS Integrat	NYEIS Integrated Case - 14597				
Case Participants:	NYEIS Integrated Case - 14597				2
Action	Name	Туре	Start Date	End Date	Status
View Edit	Midway Bankers	Correspondent	1/27/2009		Active
View Edit	Fatima Smithwick	Correspondent	1/27/2009		Active
View Edit	Midway Medicines	Correspondent	1/27/2009		Active
View Edit	Jim Tarey	Correspondent	1/27/2009		Active
View Edit	<u>Womens, Infants, and Children</u> <u>Program</u>	Correspondent	1/22/2009		Active
View Edit	Jim Tarey	Primary Client	12/16/2008		Active

3. Click **View** link under **Action** column for Case Participant to display. **View Participant Role** page displays.

View Participant Role: NYEIS Integrated Case - 14597				
	Edit	Close		
Details				
Name:	Womens, Infants, and Children Program	Туре:	Correspondent	
Start Date:	1/22/2009	End Date:		
Status:	Active			
Comments				
	Edit	Close		

4. Review information. Click **Close** button when finished. **Case Participants** page displays.

Exception Currently not available to all NYEIS User roles.

Editing Case Participants

Case Participants are view only. Comments can only be added or changed when using the edit function. The edit function is used to add or change a comment that is specific to the Case Participant record for a specific Child.

- 1. Display the Child's Integrated Case Home Page. Displaying Integrated Case Home Page for further information.
- 2. Click **Case Participants** from the Navigation Bar. **Case Participants** page displays.

🛐 NYEIS Integrate	ed Case - 14597				
Case Participants:	NYEIS Integrated Case - 14597				?
Action	Name	Туре	Start Date	End Date	Status
View Edit	Midway Bankers	Correspondent	1/27/2009		Active
View Edit	Fatima Smithwick	Correspondent	1/27/2009		Active
View Edit	Midway Medicines	Correspondent	1/27/2009		Active
View Edit	Jim Tarey	Correspondent	1/27/2009		Active
<u>View</u> <u>Edit</u>	Womens, Infants, and Children Program	Correspondent	1/22/2009		Active
View Edit	Jim Tarey	Primary Client	12/16/2008		Active

3. Click Edit link under Action column for Case Participant to display. Modify Participant Role page displays.

Modify Participant Role: NYEIS Inte	grated Case - 14597		?
	Save	Cancel	
Details			
Name:	Womens, Infants, and Children Program	Туре:	Correspondent
Start Date:	1/22/2009	End Date:	
Status:	Active		
Comments			
			*
			~
	Save	Cancel	

- 4. Add or change **Comments**.
- 5. Click **Save** button. Participant comments are saved. **Case Participants** page displays.

Note:

• Click **Edit** button from the **View Participant Role** as an alternative for editing Comments.

COMMUNICATIONS

Communications is an area in NYEIS to record Communications between Case Participants. Communications may be paper, telephone or Word Templates (available only to Municipal Users).

Communications are not meant to be recorded session notes for Providers or Service Coordinators. The Communication feature is a way for NYEIS Users to document and enhance the exchange of information.

For example, a Service Coordinator can use the Communication feature to document communications with the Evaluator regarding scheduled evaluation dates. The EIO/D can work with the feature to document contacting the CPSE chairperson regarding the transition conference, or a fiscal User to document contacting third party insurance regarding covered EI services.

Important Information - Sensitive Information/Information Extraneous to Early Intervention

It is important to remember that NYEIS information is subject to all Early Intervention Program (EIP) confidentiality requirements. Users *must* recognize that there may be sensitive or extraneous information communicated or in documents in children's early intervention records that does not directly relate to the EIP. Early Intervention Officials and Early Intervention Providers are responsible for being aware of and adhering to other EIP confidentiality requirements that may apply to and restrict the information that should be included in children's early intervention records.

When disclosing or re-disclosing any information, including Communication information in NYEIS, the Early Intervention Official or Early Intervention Provider *must* review the information and determine whether disclosure is necessary for the provision of early intervention services to the Child and/or family by the receiving party. For example, a physician's report or social services report may not be necessary or appropriate to share with other early intervention Providers, and in these circumstances, would not be appropriate to record as Communication in NYEIS.

Record Communication

Exception Currently not available to all NYEIS User roles.

This feature is used to record any type of Communications related to a Child's Case (e.g., phone call, letter received).

- 1. Display the Child's Integrated Case Home Page. Displaying Integrated Case Home Page for further information.
- 2. Click **Communications** from the Navigation Bar. **Communications** page displays.

NYEIS Integrated Case - 14597						
Communications:	NYEIS Integrated Case - 14597					
Record Communicat	tion Create MS Word					
Action	Name	Communication Status	Subject	Date	Status	
View Edit	Fatima Smithwick	Draft	sending		Canceled	
View Edit	Midway Medicines	Sent	Test Communication	1/27/2009	Active	
View Edit	Midway Bankers	Sent	Test Word	1/27/2009	Active	
View Edit	Fatima Smithwick	Received	test	1/27/2009	Active	
View Edit	Womens, Infants, and Children Program	Received	Information Regarding Child	1/22/2009	Active	

3. Click **Record Communication** button. **Record Communication** page displays.

Record Communication: NYEIS Inte	grated Case - 14597		?
If the correspondent is a case participant, ple Case Participant:	ase select from below.	v	
If the correspondent is registered on the syst Participant:	em, please select from below. Child	9	7
If the correspondent is not registered on the Correspondent Name:	system, please enter the correspon	dent name below.	
		Next Cancel	

- 4. Define correspondent by selecting one of the following items from the **Record Communication** page:
 - If correspondent is already a Case Participant, click Case Participant drop down. Select Participant (e.g., if a communication has already been documented in NYEIS, some of these may be available to select: Physician, Committee on Preschool Special Education (CPSE) chairperson).
 - If correspondent is registered in the system but has not yet had any interaction with NYEIS that has listed them as a participant (e.g., Referral Source), click **Participant** drop down. *This drop down allows a User to search for a type of participant in NYEIS and remains on Child selection unless changed by the User.* Select Participant Type. Click **Search** S

icon. Search page displays. Type known information in Search Criteria. Click Search button. Search Results display. Click Select link under Action column to select correspondent. Record Communication page displays with correspondent name. Click Clear icon to clear selected name.

There are four **Participant Types** the Municipal user can select:

- Child children that the Municipality is delivering services to.
- Health Care Provider agencies and individual providers registered in NYEIS.
- Referral registered referral sources.
- Vendor SDOH approved Vendors registered in NYEIS.
- If correspondent is not registered in the System, type Correspondent Name. Correspondent is automatically registered as a participant associated with the case. Correspondent does not display in a search. After a communication is created for a new participant, the participant is available in Case Participant drop down.
- 5. Click Next button. Next Record Communication page displays.

cord Communication: NYEIS Int	egrated Case - 14597				
		Save	Cancel		
ommunication Details					
Direction:	Outgoing -		Communication Type:	Letter	
Method:	Hard Copy -		Pro-Forma Type:	0	
Communication Date:	4/9/2009				
Frequency to Re-send					
ommunication Text					
Subject					
Communication Text					
orrespondent Details					
Correspondent Name	Advanced Audiology Services		Correspondent Typ	Anonymous	-
Address		<mark>ର୍</mark> କୃଲ୍ଟ	Fax/Phone Numb	er:	
Email Address		Q, 🖓			

 Enter appropriate information in Communication Details section using Tab key to navigate from field-to-field. Be sure to select accurately from Communication Type drop down.

Important Information

Pro-Forma Type is not a *required* field but may be used by the User to track and identify a type of form used.

- 7. Enter appropriate information in **Communication Text** section. Be sure to type **Subject**.
- 8. Enter appropriate information in **Correspondent Details** section. *If address is not in the System, No Address Available must be selected.*
- 9. Continue to go through and enter appropriate information in the following sections: Protected Information Related Request Details, Protected Information Disclosure Details, Disclosure Purpose (multiple selections can be made), Other Required or Permitted Disclosure Purpose (multiple selections can be made), Associated Files and Comments.

The sections are related to the documentation of communications regarding protected Health Information under the Health Information Portability and Accountability Act (HIPAA) and/or confidentiality restrictions under the Family Educational Rights and Privacy Act (FERPA). If these fields are completed, a Protected Health Information Authorization *must* be captured in NYEIS.

Protected Information Related Request Details section – Select the type of request from the drop down.

Protected Information Disclosure Details section – complete check boxes as appropriate and select **Disclosure Type** from the drop down (enter additional disclosure details as appropriate).

Information may involve the Child's HIV status, family abuse situations, Court orders, subpoenas and other Protected Health Information. **Protected Health Information Restrictions** and **Protected Health Information Authorizations** for additional information.

10. Click **Save** button. The status of the communication logged is automatically updated depending on the type of communication. Incoming logged communications show a **Status** of **Received**, outgoing logged communication show a **Status** of **Sent**. *Errors or additional information required will display at the top of the page if Communication is not completed. Apply changes. You must save again.* **Communications** page displays with Communication item added to list.

Creating MS Word Communication

Exception Currently not available to all NYEIS User roles.

NYEIS has templates that can be used to create letters and notices related to a Child.

- 1. Display the Child's Integrated Case Home Page. Displaying Integrated Case Home Page for further information.
- 2. Click **Communications** from the Navigation Bar. **Communications** page displays.

NYEIS Integra	ated Case - 14597					
Communications:	NYEIS Integrated Case - 14597					?
Record Communic	ation Create MS Word					
Action	Name	Communication Status	Subject	Date	Status	
View Edit	Fatima Smithwick	Draft	sending		Canceled	
View Edit	Midway Medicines	Sent	Test Communication	1/27/2009	Active	
View Edit	Midway Bankers	Sent	Test Word	1/27/2009	Active	
View Edit	Fatima Smithwick	Received	test	1/27/2009	Active	
View Edit	Womens, Infants, and Children Program	Received	Information Regarding Child	1/22/2009	Active	

3. Click **Create MS Word** button. **Create MS Word Communication** page displays.

Create MS Word Communication: N	YEIS Integrated Case - 14597	?
If the correspondent is a case participant, ple	ase select from below.	
Case Participant:	▼	
If the correspondent is registered on the sys	em, please select from below.	
Participant:	Child •	
If the correspondent is not registered on the	system, please enter the correspondent name below.	
Correspondent Name:		

- 4. Define correspondent by selecting one of the following items from the **Create MS Word Communication** page:
 - If correspondent is already a Case Participant, click Case Participant drop down. Select Participant (e.g., Child, Physician, and Committee on Preschool Special Education (CPSE) chairperson).
 - If correspondent is registered in the system but has not yet had any interaction with NYEIS that has listed them as a participant (e.g., Referral Source), click **Participant** drop down. *This drop down allows a User to search for a type of participant in NYEIS and remains on Child selection unless changed by the User.*

There are four **Participant Types** the Municipal user can select:

• Child – children that the Municipality is delivering services to.

- Health Care Provider agencies and individual providers registered in NYEIS.
- Referral registered referral sources.
- Vendor SDOH approved Vendors registered in NYEIS.

Select **Participant Type**. Click **Search** \leq icon. **Search** page displays. Type known information in **Search Criteria**. Click **Search** button. **Search Results** display. Click **Select** link under **Action** column to select correspondent. **Record Communication** page displays with correspondent name. *Click Clear* \equiv *icon to clear selected name*.

- If correspondent is not registered in the System, type Correspondent Name. Correspondent is automatically registered as a participant associated with the case. Correspondent does not display in a search. After a communication is created for a new participant, the participant is available in Case Participant drop down.
- 5. Click **Next** button. The next **Create MS Word Communication** page displays.

Create MS Word Communication: NYEIS Integrated Case - 14597					2
		Save Cancel			
Corres	pondent Details				
	Subject:		Address:		~ ~
	Correspondent Name: Jim Tarey		Correspondent Type:	Anonymous	•
Protect	ted Information Related Request Detail	5			
	RequestType:				•
Protect	ted Information Disclosure Details				
Pro	otected Information Disclosure:	Disclosure Type:			•
	Minimum Necessary mation Certification:	Additional Disclosure Details:			
Disclos	sure Purpose				
	Legitimate Educational Interest of Progra	am Education Official(s)			
	Treatment (Health Care Provision)				
	Payment for Health Care				
	Health Care Operations				
	Primary Client/Personal Representative Authorization (Prior Written Consent)				
	Records Review/Inspection				
	Accounting of Disclosures of Protected I	nformation			
	Other HIPAA- or FERPA-Required or Perm	itted Purpose(s)			

6. Enter appropriate information in the following sections: Correspondent Details (Address is a *required* field. Click Search S icon to locate valid address if correspondent is already registered in the System. If search result displays No Address Available, it *must* be selected in order to log the Communication in NYEIS), Protected Information Related Request Details, Protected Information Disclosure Details, Disclosure Purpose (multiple selections can be made), Other Required or Permitted Disclosure Purpose (multiple selections can be made) and Associated Files.

The sections are related to the documentation of communications regarding protected Health Information under the Health Information Portability and Accountability Act (HIPAA) and/or confidentiality restrictions under the Family Educational Rights and Privacy Act (FERPA). If these fields are completed, a Protected Health Information Authorization *must* be captured in NYEIS.

Protected Information Related Request Details section – Select the type of request from the drop down.

Protected Information Disclosure Details section – complete check boxes as appropriate and select **Disclosure Type** from the drop down (enter additional disclosure details as appropriate).

This information may involve the Child's HIV status, family abuse situations, Court orders, subpoenas and other Protected Health Information. See Protected Health Information Restrictions and Protected Health Information Authorizations for additional information.

- Click Search Search icon in Template Name field under Template section. MS Word Templates page displays.
- 8. Click **Select** link under **Action** column for desired template. Template displays in the **Template Name** field. Many types of templates have been developed and are available for use in NYEIS. Examples include: assignment of initial service coordinator, eligibility/ineligibility notification to parents, scheduling of IFSP meetings and transition letters.
- 9. Click **Save** button. *Errors or additional information required will display at the top of the page if Communication is not completed. Apply changes. You must save again.* Selected template displays.
- 10. Apply changes.
- 11. Close file and Exit Application. Click Yes button to save changes. Communications page displays. The Status of the Communication logged is automatically set to Draft by the system. To update the Status to Sent, click View in the Action column next to the correspondence. Click the [Mark as Sent] link next to the Communications Status field in the Communications Details cluster. Confirmation page displays with the message Are you sure you want to mark this communication as sent? Click Yes button. Communication Status displays as Sent.

Important Information

Always save changed templates that contain Child information into the NYEIS database and not to a local drive. NYEIS is a secure location and database maintains the confidentiality of the Child data.

NYEIS templates can be edited by the Municipality and downloaded to the network or Personal Computer without Child-specific information. Then, data can be entered.

Notes:

- When a template displays, some fields will automatically populate (e.g., Name, Address, Phone Number).
- Selected fields can be edited when using templates.
- Users must have Microsoft Word 2003 or newer in order for the template function to work properly. Users should contact their local IT support staff to ensure that the following Internet Explorer browser settings are configured:
 - a. Popup blocker in the Internet Explorer browser on the user machine should be disabled.
 - b. Add the Cúram server host name including protocol (https://commerce.health.state.ny.us) to the list of trusted sites in the Internet Explorer.
 - c. The following ActiveX scripting options for the "Trusted sites" security zone must be set as follows:
 - ActiveX controls and plugins/Automatic prompting for ActiveX controls: **Enable**
 - ActiveX controls and plugins/Download signed ActiveX controls: **Enable**
 - ActiveX controls and plugins/Run ActiveX controls and plugins: **Enable**
 - ActiveX controls and plugins/Binary and script behaviors: **Enable**
 - ActiveX controls and plugins/Allow previously unused ActiveX controls to run without prompt: **Enable**
 - ActiveX controls and plugins/Script ActiveX controls marked as safe for scripting: **Enable**

Viewing Communications

The information below outlines the general steps for viewing any type of Communication (recording/MS Word). The title of the page reflects the type of Communication being viewed.

- 1. Display the Child's Integrated Case Home Page. See Unit 1: Getting Started, *Displaying Integrated Case Home Page* for further information.
- 2. Click **Communications** from the Navigation Bar. **Communications** page displays.

NYEIS Integrated Case - 14597					
Communications:	NYEIS Integrated Case - 14597				
Record Communica	Create MS Word				
Action	Name	Communication Status	Subject	Date	Status
View Edit	Fatima Smithwick	Draft	sending		Canceled
View Edit	Midway Medicines	Sent	Test Communication	1/27/2009	Active
View Edit	Midway Bankers	Sent	Test Word	1/27/2009	Active
View Edit	Fatima Smithwick	Received	test	1/27/2009	Active
View Edit	Womens, Infants, and Children Program	Received	Information Regarding Child	1/22/2009	Active

3. Click **View** link under **Action** column for Communication to display. **View Communication** page displays.

Delete	Close
ommunication Details	
Subject: MK Test	Communication Status: Draft [Mark As Sent]
Communication Date: 10/7/2009	Status: Active
orrespondent Details	
Correspondent Name: Test Test	Correspondent Type: Client
Address: No address available	
rotected Information Related Request Details	
RequestType:	
rotected Information Disclosure Details	
Protected Information Disclosure: No	
Minimum Necessary Information Certification: No	
Disclosure Type:	
Additional Disclosure Details:	

4. Review information.

Communication Status: Draft [Mark As Sent]
Status: Canceled

If the communication is MS Word communication, the **Communication Status** displays as **Draft** unless the User indicates it has been sent using the **Mark as Sent** feature. [When viewing an MS Word Communication, **Communication Status** displays as **Draft**. Click **Mark as Sent** link from **Communication Status** field. **Confirmation** page displays with the message *Are you sure you want to mark this communication as sent?* Click **Yes** button. **Communication Status** displays as **Sent**.]

5. Click Close button. Communications page displays.

Exception	Editing Communications
Currently	
not available to all NYEIS User roles.	The information below outlines the general steps for editing any type of Communication (recording/MS Word). The title of the page reflects the type of Communication being edited.

- 1. Display the Child's Integrated Case Home Page. Displaying Integrated Case Home Page for further information.
- 2. Click **Communications** from the Navigation Bar. **Communications** page displays.

NYEIS Integr	ated Case - 14597				
Communications	NYEIS Integrated Case - 14597				
Record Communic	cation Create MS Word				
Action	Name	Communication Status	Subject	Date	Status
View Edit	Fatima Smithwick	Draft	sending		Canceled
View Edit	Midway Medicines	Sent	Test Communication	1/27/2009	Active
View Edit	Midway Bankers	Sent	Test Word	1/27/2009	Active
View Edit	Fatima Smithwick	Received	test	1/27/2009	Active
View Edit	Womens, Infants, and Children Program	Received	Information Regarding Child	1/22/2009	Active

3. Click **Edit** link under **Action** column for Communication to display. **Modify Communication** page displays.

Modify Recorded Communication: NYEIS Integrated Case - 14597				
	Sav	e Cancel		
Communication Details				
Direction:	Outgoing 👻	Communication T	ype: Notice	•
Method:	Hard Copy 🔹	Communication [ate: 4/9/2009	
Pro-Forma Type:	0			
Frequency to Re-send:		[-		•
Communication Text		Frequency	to Re-send	
Subject:	Notice			
	This is text text			*
Communication Text:				

- 4. Apply necessary changes.
- 5. Click **Save** button. **Communications** page displays.

Exception Currently not available to all NYEIS User roles.

Deleting Communications

The information below outlines the general steps for deleting an MS Word type of Communication. MS Word Communications can only be deleted when in *Draft* status. A Non-MS Word Communication cannot be deleted.

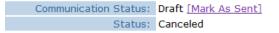
- 1. Display the Child's Integrated Case Home Page. Displaying Integrated Case Home Page for further information.
- 2. Click **Communications** from the Navigation Bar. **Communications** page displays.
- 3. Click **View** link under **Action** column for the Communication to delete. **View Communication** page displays.

View Communication: NYEIS Integ	rated Case - 150100					?
		Delete	Close			
Communication Details						
Subject:	MK Test		Co	mmunication Status:	Draft [Mark As Sent]	
Communication Date:	10/7/2009			Status:	Active	
Correspondent Details						l in the second s
Correspondent Name:	Test Test		(Correspondent Type:	Client	
Address:	No address available					
Protected Information Related Requ	iest Details					
		RequestType:				
Protected Information Disclosure D	etails					
Protected Inf	ormation Disclosure: N	0				
Minimum Necessary Infor	mation Certification: N	0				
	Disclosure Type:					
Additiona	al Disclosure Details:					
Disclosure Purpose						

4. Click **Delete** button. **Delete Communication** page displays the message *Are you sure you want to delete this communication?*

Delete Communication: Information Regarding Child	
Are you sure you want to delete this communication?	
	Yes No

5. Click **Yes** button. **View Communication** page displays. Notice the **Status** field displays **Canceled**.



6. Click **Close** button. **Communications** page displays with **Canceled** in the **Status** column.

Communications: NYI	EIS Integrated Case - 14597				2
Record Communication	Create MS Word				
Action	Name	Communication Status	Subject	Date	Status
View Edit	Fatima Smithwick	Draft	sending		Canceled

Important Information

Only an MS Word Communication with a status set to "Draft" can be deleted. If a MS Word Communication is marked as "Sent", it cannot be deleted. Non-MS Word Communications can NEVER be deleted; they always have a Status of "Received" or "Sent" based on if the record of the communication was incoming or outgoing.

EVENTS

The Calendar Application is used when a User needs to record and share important Events or milestones for a *Child among many NYEIS Users*. Events can be placed on the Child's Integrated Case and will display on the common Child calendar. The Calendar is accessible to Users with assigned access rights.

If a User needs to record their important events or milestones *to track and remember*, the My Calendar function from their personal Home Page is used. Events will be placed on the User's personal calendar.

See Unit 1: Getting Started for further detail on displaying the User calendar.

Calendar Views

- 1. Display the Child's Integrated Case Home Page. Displaying Integrated Case Home Page for further information.
- 2. Click **Events** from the Navigation Bar. **Events** page displays in a **Month** view with current day in a different color.

Events: N	FIS	Integrated Cas	e - 14597										
New Activit	New Activity) New Recurring Activity) View List												
go to today	go to today 🔜 🛛 day 😐 🖉 week 📟 🕅 month 👖 go to date 拱 4/9/2009 🖉												
	April 9, 2009												
Sunday	Sunday Monday Tuesday Wednesday Thursday Friday Saturday												
	29		31	1	2	<u>3</u>	4						
	<u>5</u>	<u>6</u>	Z	<u>8</u>	<u>9</u>	<u>10</u>	11						
	<u>12</u>	<u>13</u>	<u>14</u>	<u>15</u>	<u>16</u>	<u>17</u>	<u>18</u>						

3. Use the Tabs above the Calendar to switch to one of the following views: go to today, day, week, month or go to date.

ſ	go to today 📃	day 😐	week 🖮	month 👖	go to date 📑 4/9/2009	۵	
---	---------------	-------	--------	---------	-----------------------	---	--

Exception
Currently not
available to
all NYEIS
User roles.

Creating a New Activity

Activities can be created by a User to invite other Case Participants. For example, an EIO/D can schedule a conference call to discuss information about a Child's services with an ongoing Service Coordinator and a Service Provider.

- 1. Display the Child's Integrated Case Home Page. Displaying Integrated Case Home Page for further information.
- 2. Click **Events** from the Navigation Bar. **Events** page displays in a **Month** view with the current day in a different color.

New Activity	New Recurring A	ctivity View Li	st			
go to today 📃	day 📃 week	month 1	go to date 😝 4/	9/2009	Ø	
			April 9, 2009			
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
29		31	1	2	<u>3</u>	4
5	<u>6</u>	Z	<u>8</u>	<u>9</u>	<u>10</u>	11
<u>12</u>	<u>13</u>	<u>14</u>	<u>15</u>	<u>16</u>	<u>17</u>	<u>18</u>
<u>19</u>	<u>20</u>	<u>21</u>	<u>22</u>	<u>23</u>	<u>24</u>	<u>25</u>
<u>26</u>	27	<u>28</u>	<u>29</u>	<u>30</u>	1	2

Events: NYEIS Integrated Case - 14597

3. Click New Activity button. Create Activity page displays.

		Save Save & New	Save & Invite Cancel		
etails					
*Subject:			*Priority:	Medium 👻	
Location:		<u> </u>	Ignore all conflicts:		
ĩme					
*Start:	4/9/2009	🔕 00 🔹 : 00 💌	*End:	4/9/2009	🥘 00 👻 : 00
All Day:			*Show As:	Busy -	
Concerning					
Case Participant:		•			
Comments					

4. Enter appropriate information for the following sections using **Tab** key to navigate from field-to-field: **Details**, **Time**, **Concerning** (displays a selection of Case Participants) and **Comments**. *Fields requiring data entry are marked with an asterisk. A field can also be required based on logic that will not have an asterisk. Date fields must be formatted as mm/dd/yyyy format.*

5. Click **Save** button to save Activity and return to **Events** page. Activity displays on specified date.

1	go to today 📃	day 📃 week	month 1	go to date 📑 4	/9/2009	<i>(</i>)							
		April 9, 2009 Sunday Monday Tuosday Wodnocday Thursday Eriday Saturday											
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday						
	29		31	1	2	3	4						
	<u>5</u>	<u>6</u>	Z	<u>8</u>	<u>9</u>	<u>10</u> 09:00 - Child Me	11						

OR

Click Save & New button to save Activity and create an additional Activity.

OR

Click **Save & Invite** button to invite Attendees. *See* **Inviting Attendees** for further information.

Exception	Inviting Attendees
Currently not available to all NYEIS User	Only registered users of NYEIS can be invited to an Activity/Event.
roles.	1. Display the Child's Integrated Case Home Page.

2. Click **Events** from the Navigation Bar. **Events** page displays in a **Month** view with the current day in a different color.

Started, Displaying Integrated Case Home Page for further information.

E	vents: NYEIS	Integrated Case	e - 14597									
(New Activity	New Recurring A	ctivity View Li	st								
1	go to today day week month go to date 34/9/2009											
	April 9, 2009											
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday					
	29		31	1	2	<u>3</u>	<u>4</u>					
	<u>5</u>	<u>6</u>	Z	<u>8</u>	<u>9</u>	<u>10</u>	11					
	<u>12</u>	<u>13</u>	<u>14</u>	<u>15</u>	<u>16</u>	17	<u>18</u>					

Create Activity: NYEIS Integrated Case - 14597 2 Save Save & New Save & Invite Cancel Details *Subject: *Priority: Medium -Ignore all conflicts: Q. 🖓 Location: Tin *End: 4/9/2009 *Start: 4/9/2009 Ø 00 • : 00 • 🥘 00 👻 : 00 👻 All Day: *Show As: Busy • se Participant: • Save Save & New Save & Invite Cancel

3. Click New Activity button. Create Activity page displays.

- 4. Enter appropriate information for the following sections using **Tab** key to navigate from field-to-field: **Details**, **Time**, **Concerning** (displays a selection of Case Participants) and **Comments**. *Fields requiring data entry are marked with an asterisk.* A field can also be required based on logic that will not have an asterisk. Date fields must be formatted as **mm/dd/yyyy** format.
- 5. Click Save & Invite button. Invite Attendee page displays.

Note:

• Only registered users of NYEIS may be invited to an activity or event.

Invite Attendee:				?
Details				
	Attendee:	User		R 12
Attendees				
Attendee			Status	
provider provider			Accepted	
		Save Save	e & New Cancel	

6. Select Attendee type from drop down in Details section.

7. Click Search Sicon for Attendee field. Search page displays.

User Search						ą
Search Criteria						
	User Name:					
	First Name:			Last Name:		
	User Role:	~ ~	ş	Municipality:		~
Display De	eleted Users:			Provider Name:		
		Search	Reset			
Search Results						
Action Name	Position	User Role	Municipality	Prov	<u>/ider</u>	Status

- 8. Type all known information in **Search Criteria** section. *If searching for a Provider, be sure to enter as much detail as possible to narrow down search results. The search results are not limited to the Child's Case that is currently open.*
- 9. Click **Search** button. Records matching display in **Search Results** section. *To search again, click Reset button.*

. Use	r Search						
Search	Criteria						
		User Name:					
		First Name:			Last	Name:	
		User Role:		~ ~~	Munic	ipality:	Albany
	Display Del	eted Users: 🔳			Provider	Name:	
Search	Results (Num	nber of Items: 476		earch Reset Ca	ncel		
ction	-	User Name	Position	User Role	Municipality	Provide	er
Select	John Test	JOtest	EIO/D	MUNI_ProgramUserAdmin	Albany		_
<u>Select</u>	John Test	JOtest	Muni Supervisor	MUNI_ProgramUserAdmin	Albany		
Select	John Test	JOtest	Service Coordinator	MUNI_ProgramUserAdmin	Albany		
Select	MuniAll FiscalALB	MuniAllFiscalALB	Muni Fiscal	MUNI_AllFiscal	Albany		

10. Click **Select** link under **Action** column to select individual. **Invite Attendee** page redisplays with **Attendee** populated. *Click Clear* 🖙 *icon to clear selected name*.



11. Click **Save & New** button to save Attendee and search to invite another Attendee. Repeat **Steps 6** through **10**.

OR

Click **Save** button to save Activity and return to **Events** page. Activity displays on specified date. An invite has been sent to the User's Inbox to accept or reject.

Notes:

- To remove an Attendee from list, click the Event from Calendar view.
 View Activity Details page displays. Click Remove link from Attendees section to remove individual. Remove Attendee page displays with the message Are you sure you want to remove this attendee? Click Yes button. If the Attendee has accepted the invitation, the individual is removed from Attendees section and Event is removed from their events list and calendar. Click Close button.
- If an attendee is removed from an invite the meeting is removed from their personal calendar but no notification is sent to inform them.

Exception Currently not available to all NYEIS User roles.

Creating Recurring Meeting Activity

The Recurring Events function in NYEIS is useful to record Events that occur on the same schedule for a period of time. A good example would be recording the schedule for multiple services a Child receives. If entered on the Child's calendar, other authorized Service Providers, the Service Coordinator and the EIO/D will be able to view the schedule of services (e.g., PT every Tuesday and Thursday from 10:00 A.M. - 10:30 A.M.).

- 1. Display the Child's Integrated Case Home Page. Displaying Integrated Case Home Page for further information.
- 2. Click **Events** from the Navigation Bar. **Events** page displays in a **Month** view with the current day in a different color.

Ever	Events: NYEIS Integrated Case - 14597								
New	New Activity New Recurring Activity View List								
go	go to today 🔄 day 😐 week 📟 month 🚺 go to date 🐺 4/9/2009								
go to today day week month g go to date 4/9/2009									
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday		
	29		31	1	2	3	<u>4</u>		
	<u>5</u>	<u>6</u>	Z	<u>8</u>	<u>9</u>	<u>10</u>	11		
	<u>12</u>	<u>13</u>	<u>14</u>	<u>15</u>	<u>16</u>	<u>17</u>	<u>18</u>		
	<u>19</u>	<u>20</u>	<u>21</u>	<u>22</u>	<u>23</u>	<u>24</u>	<u>25</u>		

3. Click **New Recurring Activity** button. **Create Recurring Activity** page displays.

Create Recurring Activity: NYEIS Integrated Case - 14597												
		Save	Save & New	Save & Invite Cancel								
Details												
*Subject:				*Priority:	Medium 👻							
Location:			~ ~									
Time												
*Start:	4/9/2009		Ø 00 •: 00 •	*End:	4/9/2009	🥘 00 🔹 : 00 👻						
*Show As:	Busy	•		Ignore Conflicts:								
All Day:												
Concerning												
Case Participant:	Jim Tarey		•									
Activity Recurrence												
*Frequency:												
Recurrence Duration												
Number of Occurrences:	0			To Date:		<i>(</i>)						
Comments												
						*						
						~						
		Save	Save & New	Save & Invite Cancel		Save Save & New Save & Invite Cancel						

4. Enter appropriate information for the following sections using **Tab** key to navigate from field-to-field: **Details**, **Time** and **Concerning** (displays a selection of Case Participants). *Fields requiring data entry are marked with an asterisk. A field can also be required based on logic that will not have an asterisk. Date fields must be formatted as mm/dd/yyyy format.*

5. To select a frequency pattern, click **Frequency Pattern** button from **Frequency** field. **Select a Frequency Pattern** window displays.

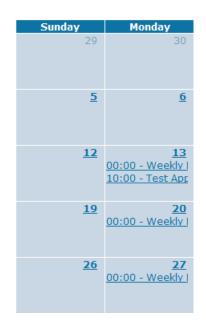
ttps://bealbbld.bea	lbany.com:9044/Curam/en_US/frequency-editor.jsp 🔹 😒 Certificat
) Daily	 Every 1 day(s) Every Weekday
) Weekly	Recur every 1 week(s) on: Monday Tuesday Friday Saturday Saturday Sunday
Monthly	 Day 1 of every 1 month(s) the first • Day • of every 1 month(s)
) Bi-monthly	 day(s) 1 and 1 of every month the first • and second • Monday • of every month
) Yearly	 Every January • 1 the first • Day • of every January •
	OK Cancel

6. Select details for the recurring Activity. Click **OK**. **Create Recurring Activity** page displays with **Frequency** field populated.

Activity Recurrence							
*Frequency:	Recur every 1 week(s) on Monday.	<u>10</u> R					

- 7. Specify the **Number of Occurrences** for the Event or define a **To Date** in **Recurrence Duration** section.
- 8. Type **Comments** (Optional).

9. Click **Save** button to save Activity and return to **Events** page. Activity displays on specified date.



OR

Click Save & New button to save Activity and create an additional Activity.

OR

Click **Save & Invite** button to invite Attendees. *See* **Inviting Attendees** for further information.

Responding to an Invite

1. Display User Home Page. *Click Home from Menu Bar.* My Calendar section displays Invites.

My Calendar				
Start Date	Subject			
4/7/2009 15:00	Follow-up Meeting			
4/9/2009 00:00	Weekly P/T			
4/9/2009 09:00	Vendor Meeting			
4/10/2009 09:00	Child Meeting			
4/10/2009 10:00	Status meeting			
4/13/2009 00:00	Weekly P/T			
4/13/2009 10:00	Test Appt			

2. Click **Subject** link for invite to display. **View Activities Detail** page displays.

View Activity Details: Invite Test							
	Accept	ect Close					
Details							
Subject:	Invite Test	Priority:	Medium				
Location:		Status:	Active				
Time							
Start:	4/9/2009 00:00	End:	4/9/2009 00:00				
Show As:	Busy	All Day:	No				
Concerning							
Client:		Case Reference:					
Attendees							
Action	Attendee	Status					
Remove	provider provider	Accepted					
Remove	John USER	Provisional					
Comments							
(Accept) (Reject) (Close)							

3. Click Accept button to accept meeting. Accept Invitation page displays with the message *Are you sure you want to accept this invitation?* Click Yes button. View Activities Detail page displays. Status under the Attendees section is changed to Accepted.

OR

Click **Reject** button to reject meeting. **Reject Invitation** page displays with the message *Are you sure you want to reject this invitation?* Click **Yes** button. **My Calendar** page displays with invite removed.

Editing Activities

- 1. Display the Child's Integrated Case Home Page. Displaying Integrated Case Home Page for further information.
- 2. Click **Events** from the Navigation Bar. **Events** page displays in a **Month** view with the current day in a different color.
- 3. Locate Activity to edit. Click link. View Activity Details page displays.

View Activity Details: Test				
		Edit Invite	Delete Close	
Details				
Subject:	Test		Priorit	y: Medium
Location:			Statu	s: Active
Time				
Start:	4/23/2009 01:00		En	d: 4/23/2009 02:00
Show As:	Busy		All Da	y: No
Concerning				
Client:			Case Reference	e:
Attendees				
Action	<u>Attendee</u>		Status	
Remove	provider provider		Accepted	
Comments				
		Edit Invite	Delete Close	

4. Click Edit button. Modify Activity page displays.

Modify Activit	y. Test		Save Save & Ir	wite) Cancel		
Details						
	*Subject: Te	est		*Priority:	Medium 🖌	
	Location:		୍କ କ୍ଟ	Ignore all conflicts:		
Time						
	*Start: 4/	23/2009	Ø 01 V: 00 V	*End:	4/23/2009	Ø 02 : 00
	All Day:	l		*Show As:	Busy 💙	
Concerning						
	Client:	Employer		~		
	Case Reference:					e , 4
Comments						
						2
						5
			Save Save & Ir	wite Cancel		

- 5. Apply necessary changes.
- 6. Click **Save** button. Changes are saved. **Events** page displays.

OR

Click Save & Invite button to invite additional Attendees to Activity.

Notes:

- The user that creates an event on a child's calendar also has that event populated on their own personal calendar.
- Any change made to an Event is automatically updated by NYEIS and displayed on the Users calendar for an Activity that has been accepted. *Users will not be notified by NYEIS that a change has been made.*
- Any User that has access rights to a Child's Case may edit the Child's Calendar. A User may not edit a Calendar Event on another User's Calendar.

Deleting Activities

- 1. Display the Child's Integrated Case Home Page. Displaying Integrated Case Home Page for further information.
- 2. Click **Events** from the Navigation Bar. **Events** page displays in a **Month** view with the current day in a different color.
- 3. Locate Activity to delete. Click link. View Activity Details page displays.

View Activity Details: Test				
		Edit Invite	Delete Close	
Details				
Subject:	Test		P	riority: Medium
Location:	I		S	tatus: Active
Time				
Start:	4/23/2009 01:00			End: 4/23/2009 02:00
Show As:	Busy		А	ll Day: No
Concerning				
Client:			Case Refe	rence:
Attendees				
Action	<u>Attendee</u>		Status	
Remove	provider provider		Accept	ed
Comments				
		E dit Invite	Delete Close	

4. Click **Delete** button. **Delete Activity** page displays with message *Are you sure you want to delete this activity?*

Delete Activity: Test

Are you sure you want to delete this activity?

(Yes) No

5. Click Yes button. Events page displays and Activity is removed.

Important Information

Be sure to check your Calendar on a regular basis in case there have been deleted Activities. Deleted activities are automatically removed from a User's Calendar without system notification.

Note:

• Users having access rights to a Child's Case may delete an Event on the Child's Calendar, even if they did not create the Calendar Event. Users may not delete a Calendar Event on another User's calendar even if they have been invited to the Event.

NOTES

Notes are used to provide additional information regarding the Case. Notes are viewed by Users that have assigned access rights to the Case.



Notes are not meant to be an area for Users to record their Case/Progress Notes.

A Note is stored and later viewable in the location where it was created (e.g., Child Home page, Integrated Case, IFSP, Service Authorization). A Note created in an IFSP Case cannot be viewed from the Child's Integrated Case or the Child Homepage.

Important Information - Sensitive Information/Information Extraneous to Early Intervention

It is important to recognize when adding Notes to a Child's case that there may be sensitive or extraneous information communicated or known about the Child that does not directly relate to the Early Intervention Program. Early Intervention Officials and Early Intervention Providers are responsible for being aware of and adhering to other confidentiality requirements that may apply to information included in children's early intervention records. When disclosing or re-disclosing any information, including entering Notes in NYEIS, the Early Intervention Official or Early Intervention Provider *must* consider whether disclosure is necessary for the provision of early intervention services to the Child and/or family by the receiving party. For example, certain types of protected health information or family circumstances may not be necessary or appropriate to share with other Early Intervention Providers, and in these circumstances, would not be appropriate to record Notes in NYEIS.

A Note cannot be edited after it is created. If a change needs to be made to an original Note, the new Note text is added at the end. Notes are viewed by everyone that has access rights to the Case.

Exception Currently not available to all NYEIS User roles.

- **Creating Notes**
- 1. Display the Child's Integrated Case Home Page. Display the Child's Integrated Case Home Page for further information.
- 2. Click Notes from the Navigation Bar. Notes page displays.

🔄 NYEIS Integra	ated Case - 14597			
Notes: NYEIS Inte	egrated Case - 14597			?
New				
Action	Entered By	Creation Date	Text	Status
View Edit	provider provider	1/22/2009	Notes may not be replaced with new text but may be amended.	Active
View Edit	provider provider	3/9/2009	added more text.	Active
View Edit	provider provider	1/27/2009	Note 2	Active

3. Click New button. Create Note page displays.

Create Note: NYEIS Integrated Case - 14	1597
Note Text	
*Text:	
	Save Save & New Cancel

- 4. Type Text in Note Text section.
- 5. Click Save button to save Note and return to Notes page with new Note listed.

OR

Click **Save & New** button to save Note and create a new Note.

Viewing Notes

- 1. Display the Child's Integrated Case Home Page. See Unit 1: Getting Started, *Displaying Integrated Case Home Page* for further information.
- 2. Click **Notes** from the Navigation Bar. **Notes** page displays.

NYEIS Integr	ated Case - 14597			
Notes: NYEIS Int	egrated Case - 14597			
New				
Action	Entered By	Creation Date	Text	Status
View Edit	provider provider	1/22/2009	Notes may not be replaced with new text but may be amended.	Active
View Edit	provider provider	3/9/2009	added more text.	Active
View Edit	provider provider	1/27/2009	Note 2	Active

3. Click **View** link under **Action** column for Note to display. **View Note** page displays.

View Note: NYEIS Integrated Case - 14597	
	Edit Delete Close
Details	
Entered By: provider provider	Status: Active
Creation Date: 4/10/2009	
Notes History	
On: 04-10-2009 08:51:47 Created By: provider provider Created as a result of: User note This is a note section	Edit Delete Close

- 4. Review information.
- 5. Click Close button. Notes page displays.

Exception	Editing Notes
Currently not	The text for Notes cannot be edited. New text is appended (added to the bottom) and original text is set to the History Note section.
User roles.	

- 1. Display the Child's Integrated Case Home Page. Displaying Integrated Case Home Page for further information.
- 2. Click Notes from the Navigation Bar. Notes page displays.

嶺 NYEIS Integr	rated Case - 14597			
Notes: NYEIS Int	regrated Case - 14597			
Action	Entered By	Creation Date	Text	Status
View Edit	provider provider	1/22/2009	Notes may not be replaced with new text but may be amended.	Active
View Edit	provider provider	3/9/2009	added more text.	Active
View Edit	provider provider	1/27/2009	Note 2	Active

3. Click **Edit** link under **Action** column for Note to change. **Modify Note** page displays with original Note listed under **Note History** section.

Modify Note: NYEIS Integrated Case - 14597			?
	Save Cancel		
Details			
Entered By: provider provider		Creation Date: 4/10/2009	
Note Text			
*Text:			A 7
Note History			
On: 04-10-2009 08:51:59 Created By: provider provider Created as a result of: User note Test #2	Save Cancel		

- 4. Apply necessary changes to **Details** section. Type new **Text** in **Note Text** section.
- 5. Click **Save** button. Note is saved. **Notes** page displays.
- 6. Click **View** link under **Action** column to display the updated note.



Deleting Notes

Exception Currently not available to all NYEIS User roles. When a Note is deleted, the entire Note with its history is removed from the Live System. Notes will be stored in the NYEIS database and can be retrieved by the State Administrators. Only certain Users with access rights may delete Notes.

- 1. Display the Child's Integrated Case Home Page. See Unit 1: Getting Started, *Displaying Integrated Case Home Page* for further information.
- 2. Click Notes from the Navigation Bar. Notes page displays.

NYEIS Integrated Case - 14597							
Notes: NYEIS Inte	egrated Case - 14597			2			
New							
Action	Entered By	Creation Date	Text	Status			
View Edit	provider provider	1/22/2009	Notes may not be replaced with new text but may be amended.	Active			
View Edit	provider provider	3/9/2009	added more text.	Active			
View Edit	provider provider	1/27/2009	Note 2	Active			

3. Click **View** link under **Action** column for Note to delete. **View Note** page displays.

view Note: NYEIS Integrated Case - 14597					
	E dit Del	ete Close			
Details					
Entered By: provider provider			Status: Active		
Creation Date: 4/10/2009					
Notes History					
On: 04-10-2009 08:51:47 Created By: provider provider Created as a result of: User note This is a note section					
	Edit Del	ete Close			

4. Click **Delete** button. **Delete Note** page displays with the message *Are you sure you want to delete this note?*

Delete Note: NYEIS Integrated Case - 14597	
Are you sure you want to delete this note?	
	Yes No

5. Click Yes button. Notes page displays with Note deleted.

TASKS (OPEN TASKS SUMMARY)

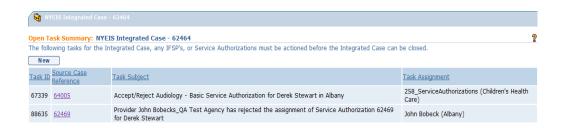
The Open Task Summary page displays a list of the tasks that are open and would need to be actioned before the Integrated Case can be Transferred or Closed.

The page also lists all User-Created tasks that are associated with the Child's case. It includes Tasks created by a User on the Child's Home page, Integrated Case Home page, IFSP Home page, and Service Authorization Home page. All User-Created tasks must also be closed. Keep in mind that a User-Created Task can be manually closed by the person who is assigned the Task. \square See Unit 1: Getting Started, Closing a Task for further information.

Second, it offers a way for the User to create a Task. Note that when a <u>User</u> creates a task, the record of that task will only be found in the location where the task was generated (in this case, the Child's Integrated Case). **Getting Started**, *Creating a Task* for further information on Tasks.

Viewing Open Tasks

- 1. Display Integrated Case Home Page. Refer to Unit 1: Getting Started, *Displaying Integrated Case Home Page* for further information.
- 2. Click **Tasks** on the Navigation menu of the Integrated Case Home page. **Open Task Summary** page displays.



The page list all of the currently open Tasks associated with the Integrated Case that must be actioned before the system will allow the Integrated Case to be Transferred or Closed.

Important Information

The Open Tasks Summary page does not display all open Tasks associated with the Child's case. It only displays Open Tasks that are required to be actioned before the IC is Transferred or Closed. It also displays any User-Created Tasks that were created. Four columns display information about the Task:

Task ID – the system-created unique Task identifier.

Source Case Reference – the case/folder that the Task is associated with. Examples are Integrated Case, IFSP, or Service Authorization. Click the link to determine what type of case the Task is related to.

Task Subject – a description of the specific task.

Task Assignment – specifies the location of the Task, and the Municipality or Provider who currently 'owns' the Task.



In the first Task example listed above (67339), the location is '258_ServiceAuthorizations' work queue of agency 'Children's Health Care'. The number preceding the Work Queue name (e.g., '258') refers to the agency's State ID number.

Task Assignment	
John Bobeck (Albany)	

In the second Task example listed above (88635), the location is User John Bobeck's Assigned To or Reserved By inbox. The User is associated with the 'Albany' agency. In this case, the agency is Albany municipality. If John worked for a provider agency such as Children's Health Care, it would display as 'John Bobeck (Children's Health Care)'. If John was an Individual Provider it would display 'John Bobeck (Bobeck, John)'.

Creating a Task

Exception Currently not available to all NYEIS User roles.

- 1. Display Integrated Case Home Page. Refer to Unit 1: Getting Started, *Displaying Integrated Case Home Page* for further information.
- 2. Click **Tasks** from the Navigation menu. **Open Tasks Summary** page displays.

NYEIS Integr	rated Case - 67593				
The following task	Open Task Summary: NYEIS Integrated Case - 67593 ?				
closed.					
<u>Task ID</u>	Source Case Reference	Task Subject	Task Assignment		

3. Click New button. Create User Task page displays. Quality Refer to Unit 1: Getting Started, *Creating a Task* for instructions.

	ASSIGN EVALUATOR FOR MDE
navigation	
• Home	See Unit 5: Evaluation for detail.
• Attachments	CHILD'S COMPLETED EVALUATIONS
• Case Participants	
• Communications	See Unit 5: Evaluation for detail.
• Events	ELIGIBILITY
• Notes	
• Assign Evaluator For	See Unit 5: Evaluation for detail.
MDE	IFSPs
 Child's Completed Evaluations 	
• Eligibility	See Unit 6: IFSP & Service Authorizations
O IFSP's	for detail.
• Tasks	TRANSFERS
• Transfers	
• Transitions	See Unit 7: Transfers & Transitions for detail.
• Mediations	detan.
• Impartial Hearings	TRANSITIONS
• User Roles	
• Status History	See Unit 7: Transfers & Transitions for detail.
• Municipality of Fiscal	
Responsibility	MEDIATIONS
• Protected Health	See Unit 14: Due Process for detail.
Information Restrictions	
Protected Health	IMPARTIAL HEARINGS
Information	
Authorizations	See Unit 14: Due Process for detail.
• Health Assessments	Features selected above are
• Case Lifecycle Status	not available to all Users.

Exception Currently not available to all NYEIS User roles.

USER ROLES

User Roles allow authorized users to view information on the history and current EIO/D and Service Coordinator. The User Roles feature is also used to change the Supervisor of a Child's Case who is the Child's Early Intervention Official Designee (EIO/D). This function will *not* change any other User's role in NYEIS.



If a change in EIO/D *must* occur, the change *must* be completed in NYEIS because tasks are dependent on this assignment. If an EIO/D is changed and there are outstanding tasks, each task *must* be manually forwarded to the new EIO/D.

Important Information

For the initial assignment of the EIO/D, be sure to always use the system generated 'Assign EIO/D' task to manage that assignment, not the 'New EIO/D' button on the User Roles page. Use of the 'New EIO/D' button is fine for subsequent changes to the initial EIO/D assignment.

See Unit 10: Municipal Administration for further information.

STATUS HISTORY

The Status History page provides an historical view of when the Integrated Case was opened, and when it was closed. An Integrated Case may be opened and closed several times during the child's participation in the Early Intervention program.

See Unit 10: Municipal Administration, Closing a Case and Re-opening a Closed Case for more information regarding these two processes.

- 1. Display the Child's Integrated Case Home Page. See Unit 1: Getting Started, *Displaying Integrated Case Home Page* for further information.
- 2. Click Status History from the Navigation Bar. Status History page displays.

NYEIS Integrated Case - 46080				
Status History: NYEIS Integrated Case - 460	80			2
Status	From	To	Closure Reason	
Draft	6/3/2011			
Closed	6/3/2011	6/3/2011	EI Evaluation found Child not eligible	
Draft	12/21/2010	6/3/2011		

<u>Note</u>:

• An Integrated Case with a **Status** of **Draft** is Open and indicates that the child's case is 'In Progress'.

Exception Currently not available to all NYEIS User roles.

MUNICIPALITY OF FISCAL RESPONSIBILITY

This feature is used to assign financial responsibility for a Child in foster care, a homeless Child or a Child in a residential facility licensed or operated by a State Agency to the correct Municipality.

A Municipality is assigned based on the Child's address when a Child is entered into the System. The Municipality assigned takes on financial responsibility for the Child. For a Child in foster care, residential care or a homeless child, the Municipality of financial responsibility *is* the Municipality in which the Child or the Child's family lived, *at the time* the Child was placed in foster care, residential care or the family became homeless. This Municipality may be different than the Municipality of the Child's *current* address.

See Unit 10: Municipal Administration for further information on this topic.

PROTECTED HEALTH INFORMATION RESTRICTIONS

Exception Currently not available to all NYEIS User roles.

If there is an active restriction, there will be a notice section on the Child Homepage indicating that an information disclosure restriction applies.

Child Homepage: Marjorie Thomas - 143					
	Edit Register Sibling				
Notice					
Information Disclosure Restrictions Ap	ply				
hild Information					
(Britishing)	Marjorie	Middle Name:			
Last Name:	Thomas	Suffix:			
Contact					
Address:	5774 Western Rd Albany (Albany) New York 10001	Phone Number:	518 090-8887		
Child Information					
Child's Referral Date:	9/20/2010	Child's Case Status:			
Date of Birth:	4/8/2010	Gender:	Female		
Calculated Age of Child:	0 Years, 5 Months	Birth Last Name:			
Ethnic Origin:	Not Hispanic or Latino	Child's Dominant Language:			
Child's Living Arrangement:		Municipality of Residence:	Albany		
Child's School District:		Caregiver's Name (If other than parent):			

Important Information

Once a protected Health Information Restriction is placed on a Child Case, it cannot be deleted. A deletion changes the status to cancelled; however, the record of the restriction is still available to be viewed.

Exception Currently not available to all NYEIS User roles.

Recording a Protected Health Information Restriction

- 1. Display the Child's Integrated Case Home Page. Displaying Integrated Case Home Page for further information.
- 2. Click **Protected Health Information Restrictions** from the Navigation Bar. **Restrictions on Protected Health Information Disclosures** page displays.

-	ed Case - 2827 tected Health Information Disclosures: NYEI	S Integrated Case - 2827		2
Record				
Action	Case Reference Number	Restriction Date	Restriction Status	

3. Click **Record** button. **Record Restriction on Protected Health Information Disclosures** page displays with the following sections: **Protected Health Information Restriction Details**, **Associated Files** and **Comments**.

ecord Restriction on Protected Health Information Disclosures				
	Save	Cancel		
Protected Health Information Restri	ction Details			
*Informa	tion Restricted from Disclosure Details:			
	*Restriction Date:	10/13/2009	<i>(</i>)	
Associated Files				
File Location:			Document Location:	
File Reference:			Document Reference:	
Comments				
				<u>^</u>
				~
	Save	Cancel		

4. Enter appropriate information using **Tab** key to navigate from field-to-field. *Fields requiring data entry are marked with an asterisk. A field can also be required based on logic that will not have an asterisk. Date fields must be formatted as mm/dd/yyyy format.*

Information Restricted from Disclosure Details field *must* be completed with a short description or title of the information that is restricted (e.g., HIV Status, Autism Diagnosis, Psychological Evaluation Results).

Associated Files may be described and attached.

5. Click **Save** button. **Restrictions on Protected Health Information Disclosures** page displays.

Viewing a Protected Health Information Restriction

- 1. Display the Child's Integrated Case Home Page. Displaying Integrated Case Home Page for further information.
- 2. Click **Protected Health Information Restrictions** from the Navigation Bar. **Restrictions on Protected Health Information Disclosures** page displays.

😋 NYEIS Integrate	ed Case - 2827			
Restrictions on Protected Health Information Disclosures: NYEIS Integrated Case - 2827				
Record				
Action	Case Reference Number	Restriction Date	Restriction Status	
View Edit	2827	10/14/2009	Active	

3. Click View link under Action column for Restriction. View Restriction on Protected Health Information Disclosures page displays.

iew Restriction on Protected Health Information Disclosures					
Delete	Delete Close				
Protected Health Information Restriction Details					
Information Restricted from Disclosure Details:	HIV Status				
Restriction Date:	10/14/2009				
Associated Files					
File Location:	Document Location:				
File Reference:	Document Reference:				
Comments					
Delete Close					

- 4. Review information.
- 5. Click Close button. Restrictions on Protected Health Information Disclosures page displays.

Editing a Protected Health Information Restriction

Exception Currently not available to all NYEIS User roles.

- 1. Display the Child's Integrated Case Home Page. Display the Child's Integrated Case Home Page for further information.
- 2. Click **Protected Health Information Restrictions** from the Navigation Bar. **Restrictions on Protected Health Information Disclosures** page displays.

NYEIS Integrated	Case - 2827			
Restrictions on Prote	cted Health Information Disclosures: NYE	S Integrated Case - 2827		?
Record				
Action	Case Reference Number	Restriction Date	Restriction Status	
View Edit	2827	10/14/2009	Active	

3. Click Edit link under Action column for Restriction. Modify Restriction on Protected Health Information Disclosures page displays.

Note:

• Only users with appropriate access rights may edit Protected Health Information Restrictions.

Modify Restriction on Protected Health Information Disclosures ?					
Protected Health Information Restric	Protected Health Information Restriction Details				
*Informat	ion Restricted from Disclosure Details:	HIV Status			
	*Restriction Date:	10/14/2009			
Associated Files					
File Location:		Document Loca	ition:		
File Reference:		Document Refere	ence:		
Comments					
			<		
	Save	Cancel			

- 4. Apply necessary changes.
- 5. Click **Close** button. **Restrictions on Protected Health Information Disclosures** page displays.

Deleting a Protected Health Information Restriction

- 1. Display the Child's Integrated Case Home Page. Displaying Integrated Case Home Page for further information.
- 2. Click **Protected Health Information Restrictions** from the Navigation Bar. **Restrictions on Protected Health Information Disclosures** page displays.

NYEIS Integrated Case - 2827					
Restrictions on Protected Health Information Disclosures: NYEIS Integrated Case - 2827					
Record					
Action	Case Reference Number	Restriction Date	Restriction Status		
View Edit	2827	10/14/2009	Active		

3. Click **View** link under **Action** column for Restriction. **View Restriction on Protected Health Information Disclosures** page displays.

iew Restriction on Protected Health Information Disclosures				
Delete	Close			
Protected Health Information Restriction Details				
Information Restricted from Disclosure Details:	HIV Status			
Restriction Date:	10/14/2009			
Associated Files				
File Location:	Document Location:			
File Reference:	Document Reference:			
Comments				
Delete	Close			

4. Click **Delete** button. **Remove Restriction on Protected Health Information Disclosures** page displays with the message *Are you sure you want to remove this Restriction?*

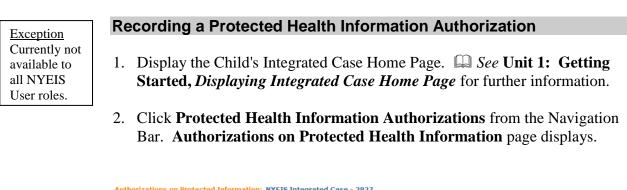
Remove Restriction on Protected Health Information Disclosures				
Are you sure you want to remove this Restriction?				
	Yes No			

Note:

- Only users with appropriate access rights may delete a Protected Health Information Restriction.
- 5. Click **Yes** button. **View Restrictions on Protected Health Information Disclosures** page displays.
- 6. Click Close button. Restrictions on Protected Health Information Disclosures page displays. Restriction Status is set to Canceled.

PROTECTED HEALTH INFORMATION AUTHORIZATIONS

If there is an information disclosure on a Child's Case and there has been permission obtained to release information contained in the restriction, this authorization *must* be captured here.



3. Click **Record** button. Select Authorizing Participant page displays.

Select Authorizing Participant NYEIS	6 Integrated Case - 2827		gu
If the authorizing participant is a case particip Case Participant:			
If the authorizing participant is registered on t	the system, please select from belo	ow.	
Participant:	Child		₹ ₽
If the authorizing participant is not registered	on the system, please enter the au	uthorizing participant name below.	
Participant Name:			
		Next Cancel	

Important Information

The parent/legal guardian must be the authorizing Participant. If the parent is already a Case Participant they will be listed in the **Case Participant** drop down. If the parent is not listed, they will need to be entered in the **Participant Name** field.

- 4. Select from one of the following:
 - If Authorizing Participant (parent/legal guardian) is already a Case Participant, click Case Participant drop down. Select Participant (e.g., Child, Physician, and Committee on Preschool Special Education (CPSE) chairperson).

Attention Not all code table values are applicable (e.g., Health Care Provider = EI Provider, Organization Contact and Representative).

- If Authorizing Participant (parent/legal guardian) is registered in the system but has not yet had any interaction with NYEIS that has listed them as a participant (e.g., Referral Source), click Participant drop down. *This drop down allows a User to search for a type of participant in NYEIS and remains on Child selection unless changed by the User*. Select Participant Type. Click Search & icon. Search page displays. Type known information in Search Criteria. Click Search button. Search Results display. Click Select link under Action column to select correspondent. Select Authorizing Participant page displays with correspondent name. *Click Clear* Results *icon to clear selected name*.
- If Authorizing Participant (parent/legal guardian) is not registered in the System, type Authorizing Participant Name. Authorizing Participant is automatically registered as a person in the System. Authorizing Participant is only associated with Case. Authorizing Participant does not display in a search. After a communication is created for a new participant, the participant is available in Case Participant drop down.
- Click Next button. Record Protected Information Authorization page displays with the following sections: Authorization Details, Person/Entity Authorized to Receive/Use Protected Information, Associated Files and Comments.

Record Protected Information Authorization NYEIS Integrated Case - 2827							
Save Save & New Cancel							
Authorization Details							
*Authorization Type:	Health Information	~	*Authorization Description:				
*Authorization Purpose:			*Authorization Date:	10/13/2009	٥		
Authorization Expiration Date:	10/13/2009	٥					
Person/Entity Authorized to Receive	e/Use Protected Infor	mation					
	Name:	Tiffany Martin-	<u>15</u>				
Address:					≈, 🛱		
	E-Mail Address:					≈ , 🖙	
	Phone Number:					≤, ⊊	
Associated Files							
File Location:			File Reference:				
Document Location:			Document Reference:				
Comments							
						~	
Save Save & New Cancel							

- 6. Enter appropriate information using **Tab** key to navigate from field-to-field. *Fields requiring data entry are marked with an asterisk. A field can also be required based on logic that will not have an asterisk. Date fields must be formatted as mm/dd/yyyy format.*
- 7. Click Save & New button to add additional Authorizations.

OR

Click Save button. Authorizations on Protected Information page displays.

Viewing a Protected Health Information Authorization

Exception Currently not available to all NYEIS User roles.

- 1. Display the Child's Integrated Case Home Page. Displaying Integrated Case Home Page for further information.
- 2. Click **Protected Health Information Authorizations** from the Navigation Bar. **Authorizations on Protected Health Information** page displays.

Authorizations on Protected Information: NYEIS Integrated Case - 2827					
Record					
Action	Case Reference	Authorization Date	Status		
View Edit Revoke	2827	10/13/2009	Active		

3. Click View link under Action column for Authorization. View Protected Information Authorization page displays.

View Protected Information Authoriz	/iew Protected Information Authorization NYEIS Integrated Case - 2827				
		E dit D ele	ete Close		
Authorization Details					
Authorization Type:	Health Information		Authorization Description: HIV		
Authorization Purpose:	Treatments		Authorization Date: 10/13/2009		
Authorization Expiration Date:	10/13/2009				
Person/Entity Authorized to Receiv	e/Use Protected Infor	mation			
	Name:	Tiffany Martin-1	<u>15</u>		
	Address:				
	E-Mail Address:				
	Phone Number:				
Associated Files					
File Location:			File Reference:		
Document Location:			Document Reference:		
Comments					
E dit Delete Close					

- 4. Review information.
- 5. Click **Close** button. **Authorizations on Protected Health Information** page displays.

Exception Currently not available to all NYEIS User roles.

Editing a Protected Health Information Authorization

- 1. Display the Child's Integrated Case Home Page. See Unit 1: Getting Started, *Displaying Integrated Case Home Page* for further information.
- 2. Click **Protected Health Information Authorizations** from the Navigation Bar. **Authorizations on Protected Health Information** page displays.

Authorizations on Protected Information: NYEIS Integrated Case - 2827					
Record					
Action	Case Reference	Authorization Date	Status		
<u>View Edit Revoke</u> 2827 10/13/2009 Active					

3. Click Edit link under Action column for Authorization. Modify Protected Information Authorization page displays.

Note:

• Only users with appropriate access rights may edit a Protected Health Information Authorization.

Modify Protected Information Authorization NYEIS Integrated Case - 2827							?
		Save	Cancel)			
Authorization Details							
*Authorization Type:	Health Information	~		*Authorization Description:	HIV		
*Authorization Purpose:	Treatments			*Authorization Date:	10/13/2009	<i>(</i>)	
Authorization Expiration Date:	10/13/2009	<i>(</i>)					
Person/Entity Authorized to Receive	e/Use Protected Infor	mation					
	Participant:	Tiffany Martin-	15				
	Address:						_ 🔍 🖙
	E-Mail:						R, 🖓
	Phone Number:						₽, ₽
Associated Files							
File Location:				File Reference:			
Document Location:				Document Reference:			
Comments							
							< >
		Save	Cancel	1			

- 4. Apply necessary changes.
- 5. Click **Close** button. **Authorizations on Protected Health Information** page displays.

Revoking a Protected Health Information Authorization

- 1. Display the Child's Integrated Case Home Page. Displaying Integrated Case Home Page for further information.
- 2. Click **Protected Health Information Authorizations** from the Navigation Bar. **Authorizations on Protected Health Information** page displays.

Authorizations on Protected Information: NYEIS Integrated Case - 2827					
Record					
Action	Case Reference	Authorization Date	Status		
View Edit Revoke	2827	10/13/2009	Active		

3. Click **Revoke** link under **Action** column for Authorization. **Revoke Protected Information Authorization** page displays with the message *Are you sure you want to revoke this Authorization?*

Revoke Protected Information Authorization NYEIS Integrated Case - 2827

Are you sure you want to revoke this Authorization?

Yes No

Notes:

- Only users with appropriate access rights may revoke a Protected Health Information Authorization.
- Click Yes button. Authorizations on Protected Health Information page displays. Status is set to Canceled.

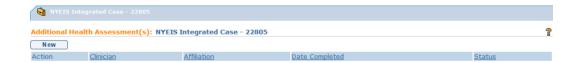
HEALTH ASSESSMENTS

Health Assessments pages are **NOT** associated with a Child's Multidisciplinary Evaluation. Information on the required Health Assessment (which is part of the MDE) *must* be entered into NYEIS in the **External Evaluation** section of the MDE, documented in the **Comments** section of the **Physical Domain** field in the **Developmental Assessment** section of the MDE <u>or</u> in the scanned copy of the completed MDE report that should be attached to the MDE in NYEIS.

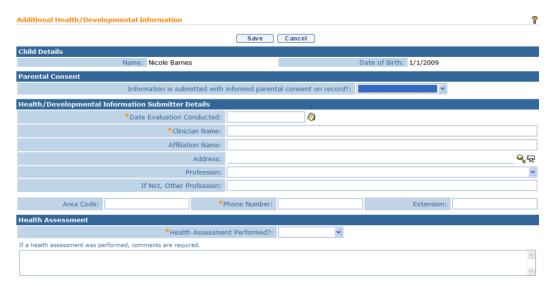
Health Assessment pages can be completed by authorized Users to document any additional Health Assessments completed for the Child any time after eligibility has been established. In addition, documentation of ongoing assessments of a child's developmental status performed by a provider can be documented using the Health Assessment pages. Any diagnostic information (ICD codes) captured on the Health Assessment pages will ultimately be available to view on the child's Home Page as well to select upon invoicing for services delivered.

Creating Health Assessments

- 1. Display the Child's Integrated Case Home Page. Displaying Integrated Case Home Page for further information.
- 2. Click **Health Assessments** from the Navigation Bar. Additional Health Assessment(s) page displays.



3. Click New button. Additional Health/Developmental Information page displays with the following sections: Child Details, Parental Consent, Health/Developmental Information Submitter Details, Health Assessment, Developmental Assessment, Evaluation Diagnosis Results and General Comments.



4. Navigate from field-to-field using **Tab** key to fill in information. Required fields are marked with an asterisk. Date fields must be formatted as **mm/dd/yyyy** format.

If there has been a diagnosis established while completing an additional health assessment, it may be entered using the **EI Eligible ICD Codes** (codes that make a Child eligible for the Early Intervention Program) or by entering an **Other Eligible Diagnosis Code.** If other ICD code is recorded, a justification is not required.

Any diagnostic information (ICD codes) captured on the Health Assessment pages will ultimately be available to view on the child's Home Page as well to select upon invoicing for services delivered.

5. Click **Save** button. Additional Health Assessment(s) page displays.

Viewing Health Assessments

- 1. Display the Child's Integrated Case Home Page. See Unit 1: Getting Started, *Displaying Integrated Case Home Page* for further information.
- 2. Click **Health Assessments** from the Navigation Bar. **Additional Health Assessment(s)** page displays.

NYEIS Integrated Case - 22805						
Additional Health Assessment(s): NYEIS Integrated Case - 22805						
New						
Action	Clinician	Affiliation	Date Completed	Status		
View Edit	Mark Peterson		10/10/2009	Active		

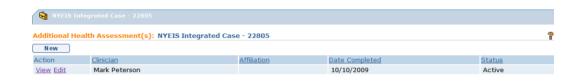
3. Click **View** link under **Action** column for specific Assessment. **Additional Health/Developmental Information** page displays.

Additional Health/Developmental Information	Additional Health/Developmental Information					
	E dit D e	lete Close				
Child Details						
Name: Nicole Barnes			Date of Birth:	1/1/2009		
Parental Consent						
Information is submitted with	informed paren	tal consent on record?:				
Health/Developmental Information Submitter Details						
Date Evaluation Conducted:	10/10/2009					
Clinician Name:	Mark Peterson					
Affiliation Name:						
Address:						
Profession:						
If Not, Other Profession:						
Area Code:	Phone Number:	555-555-1212		Extension:		
Health Assessment						
Health Assessme	ent Performed?:	Yes				
If a health assessment was performed, comments are required. Performed.						
Developmental Assessment						
Developmental Assessme	ent Performed?:	No				
If a developmental assessment was performed, comments are required		-				

- 4. Review Assessment.
- 5. Click Close button. Additional Health Assessment(s) page displays.

Editing Health Assessments

- 1. Display the Child's Integrated Case Home Page. See Unit 1: Getting Started, *Displaying Integrated Case Home Page* for further information.
- 2. Click **Health Assessments** from the Navigation Bar. **Additional Health Assessment(s)** page displays.



3. Click Edit link under Action column for specific Assessment. Additional Health/Developmental Information page displays.

dditional Health/Developmental Information					
	Save Cancel				
Child Details					
Name: Nicole Barnes	Date of Birth: 1/1/2009				
Parental Consent					
Information is submitted with	informed parental consent on record?:				
Health/Developmental Information Submitter Details					
*Date Evaluation Conducted:	10/10/2009				
*Clinician Name:	Mark Peterson				
Affiliation Name:					
Address:	କ୍ଷ କ				
Profession:					
If Not, Other Profession:					
Area Code:	Phone Number: 555-555-1212 Extension:				
Health Assessment					
*Health Assessme	nt Performed?: Yes				
If a health assessment was performed, comments are required.					
Performed.	A				

- 4. Apply necessary changes.
- 5. Click Save button. Additional Health Assessment(s) page displays.

Deleting Health Assessments

- 1. Display the Child's Integrated Case Home Page. See Unit 1: Getting Started, *Displaying Integrated Case Home Page* for further information.
- 2. Click **Health Assessments** from the Navigation Bar. **Additional Health Assessment(s)** page displays.

NYEIS Integrated Case - 22805								
Additional He	Additional Health Assessment(s): NYEIS Integrated Case - 22805							
New								
Action	Clinician	Affiliation	Date Completed	Status				
View Edit	Mark Peterson		10/10/2009	Active				

3. Click **View** link under **Action** column for specific Assessment. **Additional Health/Developmental Information** page displays.

Additional Health/Develop	mental Information						?	
Edit Delete Close								
Child Details								
	Name: Nicole Barnes				Date of Birth:	1/1/2009		
Parental Consent								
	Information is submi	itted with i	informed parent	al consent on record?:				
Health/Developmental Inf	formation Submitter De	etails						
	Date Evaluation Co	nducted:	10/10/2009					
	Clinicia	an Name:	Mark Peterson					
		on Name:						
		Address:						
	Pr If Not, Other Pr	ofession:						
	II NOL, Other Pr							
Area Code:		P	hone Number:	555-555-1212		Extension:		
Health Assessment								
	Health	Assessmer	nt Performed?:	Yes				
If a health assessment was perfo	ormed, comments are require	ed.						
Performed.								
Developmental Assessme	nt							
	Developmental	Assessmer	nt Performed?:	No				
If a developmental assessment w								

4. Click **Delete** button. **Cancel Additional Health/Developmental Information** page displays with the message *Are you sure you want to cancel this Additional Health/Developmental Information?*

Cancel Additional Health/Developmental Information	?
Are you sure you want to cancel this Additional Health/Developmental Information?	
Yes No	

5. Click **Yes** button. **Additional Health Assessment(s)** page displays. **Status** for Assessment is set to **Canceled**.

Additional Health Assessment(s): NYEIS Integrated Case - 22805								
New	New							
Action	Action Clinician Affiliation Date Completed Status							
View Edit	Mark Peterson	ABC Company	10/10/2009	Canceled				

CASE LIFECYCLE STATUS

The Case Lifecycle Status provides a convenient summary of Case 'events' that have occurred during the life of the child's Integrated Case. Events that are tracked in the Lifecycle Status include:

Event	Status Achieved When
EIO/D Assigned	Assign EIO/D Task is completed
Service Coordinator Assigned	Accept/Reject Service Coordination Task
	is Accepted by Agency
MDE Agency Assigned	MDE Assignment is Accepted by the
	Agency
MDE Agency Rejection	MDE Assignment is Rejected by the
	assigned Agency
MDE Submitted	MDE Evaluation Agency submits the
	MDE
MDE Rejected	EIO/D has Rejected the submitted MDE
MDE Approved	EIO/D has Approved the submitted MDE
Interim IFSP	Interim IFSP is Approved by the EIO/D
IFSP Initial Submitted	IFSP is Submitted to the EIO/D for
	approval
IFSP Initial Approved	IFSP is approved by the EIO/D
IFSP 6 Month Review Submitted	IFSP is Submitted to the EIO/D for
	approval
IFSP 6 Month Review Approved	IFSP is approved by the EIO/D
IFSP 12 Month Review	IFSP is Submitted to the EIO/D for
Submitted	approval
IFSP 12 Month Review	IFSP is approved by the EIO/D
Approved	
IFSP 18 Month Review	IFSP is Submitted to the EIO/D for
Submitted	approval
IFSP 18 Month Review	IFSP is approved by the EIO/D
Approved	
IFSP 24 Month Review	IFSP is Submitted to the EIO/D for
Submitted	approval
IFSP 24 Month Review	IFSP is approved by the EIO/D
Approved	
IFSP 30 Month Review	IFSP is Submitted to the EIO/D for
Submitted	approval
IFSP 30 Month Review	IFSP is approved by the EIO/D
Approved	
IFSP 36 Month review	IFSP is Submitted to the EIO/D for
Submitted	approval
IFSP 36 Month Review	IFSP is approved by the EIO/D

Approved	
Transfer to other municipality	Transfer record is created by the
	Transferring county
Transfer from other municipality	Transfer is accepted by the Receiving
	county

Whereas the Status displayed on the My Cases page displays the most recent Case Lifecycle event, this page displays a history of all events that have occurred on the child's case.

- 1. Display the Child's Integrated Case Home Page. Displaying Integrated Case Home Page for further information.
- 2. Click **Case Lifecycle Status** from the Navigation Bar. **Case Lifecycle Status** page displays with the most recent event listed at the top.

Status	Effective Date	Municipality
Initial IFSP Approved	6/23/2011 16:33	Albany
Initial IFSP Submitted	6/23/2011 16:33	Albany
MDE Approved	6/23/2011 16:28	Albany
MDE Submitted	6/23/2011 16:26	Albany
MDE Agency Assigned	6/23/2011 16:17	Albany
Service Coordinator Assigned	6/23/2011 16:16	Albany
EIO/D Assigned	6/23/2011 16:08	Albany

Notes:

- The Status page does not display when the Integrated Case was opened or closed. To view that history, select Status History in the Navigation Bar.
 See Status History.
- The Case Lifecycle Status events may not occur in the same sequence for every case. For example, a child may have an Interim IFSP approved on a date prior to the MDE Accepted. In that scenario, the Interim IFSP event will be listed before the MDE Approved event.
- Some Case Lifecycle Status events may appear multiple times. For example, the Service Coordinator Assigned event will be listed when the Initial Service Coordinator is assigned, and again when the Ongoing Service Coordinator is assigned.
- When an Integrated Case is Transferred, the Receiving County can view the Integrated Case event history achieved in the Transferring County.

CHILD HOME PAGE

Child Home Page Navigation Bar

navigation

- 🖲 Home
- Addresses
- Alternative IDs
- Alternative Names
- Cases
- Communication Exceptions
- Financials
- Notes
- O Phone Numbers
- Relationships
- Tasks
- At-Risk Follow-Up
- Audit Log
- Referrals
- Demographic Data Change History
- Insurance Coverage
- Surveys

At-Risk Follow Up

See Unit 3: At-Risk Children for detail.

Referrals

- See Unit 2: Referral & Intake for detail.
- **Insurance Coverage**
- See Unit 10: Municipal Administration for detail.

Child Home Page

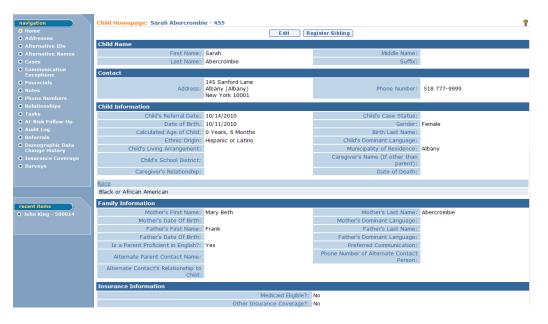
The Home page displays the child's personal information, such as Contacts, Demographics, Family Information, Insurance, Eligibility, Diagnosis, and other useful information relevant to maintaining the child's record.

The ability to change Child information on the Child Home Page is limited to certain User roles in NYEIS. Users not authorized to edit Child information, need to submit a data change request.

Editing Child Homepage

Exception Currently not available to all NYEIS User roles.

1. Display Child Home Page. See Unit 1: Getting Started, *Displaying Child Home Page* for further information.



2. Click Edit button. Modify Child page displays.

	Save	Cancel	
nild's Information			
Child's Referral Date:	10/14/2010	*Child First Name:	Sarah
Child Middle Name:		*Child Last Name:	Abercrombie
Suffix:		Birth Last Name (If Different):	
*Gender:	Female	✓ *Date of Birth:	10/11/2010
Child's Dominant Language:		 Child's Date of Death: 	Ø
Calculated Age of Child:	0	*Ethnicity:	Hispanic or Latino
*Race:	American Indian or Alaskan Native Asian Black or African American Native Hawaiian or Other Pacific Islander White	Caregiver's Name (If other than parent):	
Child's Living Arrangement:		✓ Caregiver's Relationship:	
Child's School District:		▼	
mily Information			
Mother's First Name:	Mary Beth	Mother's Last Name:	Abercrombie
Mother's Date Of Birth:		Mother's Dominant Language:	
Father's First Name:	Frank	Father's Last Name:	
Father's Date Of Birth:		Father's Dominant Language:	
Is a Parent Proficient in English?:	Yes 👻	Preferred Communication:	
Alternate Parent Contact Name:		Phone Number of Alternate Contact Person:	
Alternate Contact's Relationship to Child:			
mary Care Physician PCP Name:	Declined to Give Insurance Information:	PCP Phone:	
ild's Place of Birth		-	
Birth Hospital (if born in New York):		Location of Birth (if born outside of	
		New York):	
State of Birth (if not born in New			
York):		Birth County:	
York): Country of Birth:			
York):		Birth County:	
York): Country of Birth: Hospitalization Status At Time of		Birth County: Birth Weight:	
York): Country of Birth: Hospitalization Status At Time of Referral: f Not Hospitalized, Discharge Date: Risk Information		Birth County: Birth Weight: If Hospitalized, Facility Name:	
York): Country of Birth: Hospitalization Status At Time of Referral: f Not Hospitalized, Discharge Date: Risk Information Is Child At Risk?:	No	Birth County: Birth Weight:	
York): Country of Birth: Hospitalization Status At Time of Referral: f Not Hospitalized, Discharge Date: Risk Information Is Child At Risk?: Closure Date:	No	Birth County: Birth Weight: If Hospitalized, Facility Name:	
York): Country of Birth: Hospitalization Status At Time of Referral: f Not Hospitalized, Discharge Date: Risk Information Is Child At Risk?:	No	Birth County: Birth Weight: If Hospitalized, Facility Name:	
York): Country of Birth: Hospitalization Status At Time of Referral: f Not Hospitalized, Discharge Date: Risk Information Is Child At Risk?: Closure Date: mmunication Exception	No	Birth County: Birth Weight: If Hospitalized, Facility Name:	
York): Country of Birth: Hospitalization Status At Time of Referral: f Not Hospitalized, Discharge Date: Risk Information Is Child At Risk?: Closure Date: mmunication Exception ommunication Exceptions Present::	No	Birth County: Birth Weight: If Hospitalized, Facility Name:	
York): Country of Birth: Hospitalization Status At Time of Referral: f Not Hospitalized, Discharge Date: Risk Information Is Child At Risk?: Closure Date: mmunication Exception ommunication Exceptions Present:: ild Outcomes		Birth County: Birth Weight: If Hospitalized, Facility Name: If Closed, Closure Reason::	
York): Country of Birth: Hospitalization Status At Time of Referral: f Not Hospitalized, Discharge Date: Risk Information Is Child At Risk?: Closure Date: mmunication Exception ommunication Exceptions Present:: ild Outcomes Cohort Sample Year:		Birth County: Birth Weight: If Hospitalized, Facility Name: If Closed, Closure Reason:: Child Eligible for EI?:	
York): Country of Birth: Hospitalization Status At Time of Referral: f Not Hospitalized, Discharge Date: Risk Information Is Child At Risk?: Closure Date: mmunication Exception ommunication Exceptions Present:: ild Outcomes Cohort Sample Year: Entry Form Completed?:		Birth County: Birth Weight: If Hospitalized, Facility Name: If Closed, Closure Reason:: Child Eligible for EI?:	
York): Country of Birth: Hospitalization Status At Time of Referral: f Not Hospitalized, Discharge Date: Risk Information Is Child At Risk?: Closure Date: mmunication Exception ommunication Exceptions Present:: ild Outcomes Cohort Sample Year: Entry Form Completed?:	No Is Child in Foster Care?:	Birth County: Birth Weight: If Hospitalized, Facility Name: If Closed, Closure Reason:: Child Eligible for EI?: Exit Form Completed?:	
York): Country of Birth: Hospitalization Status At Time of Referral: f Not Hospitalized, Discharge Date: Risk Information Is Child At Risk?: Closure Date: mmunication Exception ommunication Exception Ommunication Exceptions Present: ild Outcomes Cohort Sample Year: Entry Form Completed?: ster Care	No Is Child in Foster Care?:	Birth County: Birth Weight: If Hospitalized, Facility Name: If Closed, Closure Reason:: Child Eligible for EI?: Exit Form Completed?:	
York): Country of Birth: Hospitalization Status At Time of Referral: f Not Hospitalized, Discharge Date: Risk Information Is Child At Risk?: Closure Date: mmunication Exceptions Present: idd Outcomes Cohort Sample Year: Entry Form Completed?: ster Care Foster Care Agency Name: Foster Care Agency Address:	No Is Child in Foster Care?:	Birth County: Birth Weight: If Hospitalized, Facility Name: If Closed, Closure Reason:: Child Eligible for EI?: Exit Form Completed?: Foster Care Worker Name:	
York): Country of Birth: Hospitalization Status At Time of Referral: f Not Hospitalized, Discharge Date: Risk Information Is Child At Risk?: Closure Date: mmunication Exception ommunication Exception Ommunication Exceptions Present: ild Outcomes Cohort Sample Year: Entry Form Completed?: ster Care	No Is Child in Foster Care?:	Birth County: Birth Weight: If Hospitalized, Facility Name: If Closed, Closure Reason:: Child Eligible for EI?: Exit Form Completed?: Foster Care Worker Name:	

3. Apply necessary changes or new information to Child's Information, Family Information, Insurance Information, Primary Care Physician, Child's Place of Birth, Child Outcomes, Foster Care, and/or Comments sections.

Important Information

- If the child is in foster care, the Foster Care cluster **must** be completed to provide accurate contact information. Information on the foster family should also be recorded in the **Child's Living Arrangement**, **Caregiver Relationship** and **Caregiver's Name (if Other than Parent** fields.
- The child's municipality of fiscal responsibility may need to be changed. *See* Unit 10: Municipal Administration, *Municipality of Fiscal Responsibility* for further information.
- Regarding editing the child homepage to include information on a surrogate parent:
 - a) There is currently no specific field in NYEIS to indicate that a surrogate parent has been assigned and the name of the surrogate.
 - b) This information should be detailed in the comments section of the child's homepage.
 - c) If parental rights have been terminated, the child's homepage may need to be edited in the "Family Information" cluster for mother and/or father information, as this information is pulled into the service authorizations.
 - d) The surrogate parents' information should be entered in place of the parents' information, and the information regarding the parents (whose rights have been terminated) should be deleted.
 - e) Information should also be captured in the comments section indicating that the individual is the surrogate parent that has been appointed by the municipality and that parental rights have been terminated.
- Information in the Child Outcomes cluster should be completed when the child is included in a cohort sample year.
- 4. Click Save button. Child Home page displays.

EXCEPTION Currently not available to all NYEIS User roles.

ADDRESSES

Creating Addresses

1. Display Child Home Page. Displaying See Unit 1: Getting Started, Displaying Child Home Page for further information.

	Edit Reg	jister Sibling	2
Addresses Child Name			
O Alternative lbs		Middle Name:	
Alternative Names First Name: Sarah Cases Last Name: Abercrombi		Suffix:	
O Communication	e	Sunix:	
Exceptions Contact			
Financials 145 Sanfor Address: Albany (Alb		Phone Number:	E18 777-0000
New York 1		Phone Number:	518 ///-9999
O Phone Numbers			
O Relationships Child Information			
Tasks Child's Referral Date: 10/14/2010 Date: 10/14/2010		Child's Case Status:	
At-Risk Follow-Up Date of Birth: 10/11/2010 Audit Log Calculated App of Skilds Diverse 6		Gender:	Female
Calculated Age of Child: 0 Years, 6		Birth Last Name:	
Ethnic Origin: Hispanic or	Latino	Child's Dominant Language:	
Change History Child's Living Arrangement:		Municipality of Residence:	Albany
Insurance Coverage Child's School District:		Caregiver's Name (If other than parent):	
Surveys Caregiver's Relationship:		Date of Death:	
Race			
Black or African American			
recent items			
O John King - 500014 Mother's First Name: Mary Beth		Mother's Last Name:	Abercrombie
Mother's Date Of Birth:		Mother's Dominant Language:	
Father's First Name: Frank		Father's Last Name:	
Father's Date Of Birth:		Father's Dominant Language:	
Is a Parent Proficient in English?: Yes		Preferred Communication:	
Alternate Parent Contact Name:		Phone Number of Alternate Contact Person:	
Alternate Contact's Relationship to Child:			
Insurance Information			
	Medicaid Eligible?: N	No	
()ther Insurance Coverage?: N	No	

2. Click Addresses from the Navigation Bar. Addresses page displays.

Addresses: Sarah Abercrombie - 455									
New									
Action Primary	Type	Address	City	From	<u>To</u>				
View Edit Yes	Registered	765 Terrace Ln	Albany	10/14/2010					

3. Click New button. Create Addresses page displays.

Create Addres	s: Sarah	Abercrombie - 455						?
			Save	Save &	New Cancel			
Details								
		Physical			Prim	nary: 🔲 To:	 <i>(</i>)	
Address								
	Address:			R				
Comments								
								~
								~
			Save	Save &	New Cancel			

4. Enter appropriate information for the following sections using **Tab** key to navigate from section to section: Details, Address and Comments. Select the type of address being recorded from the **Type** field drop-down menu.

The **From:** date field auto populated with today's date; it can be changed. *Date fields must be formatted as mm/dd/yyyy format*. Click the **Primary** checkbox to indicate that the address is the primary mailing address.

Important Information

- Only one address can be designated as Primary.
- A Primary address is required in order for the system to include an address in a Communication Template. *See Communications, Creating MS Word Communication* for more information.
- Click Search Sicon in Address section to confirm address information for the Primary Address and Mailing Address fields. A Primary Address must be entered in the address section. Address Validation page displays.

Address Validation and Address with USPS				
		Submit	Cancel	
	Address Line 1:		Address Line 2:	
	*City:		*State:	
	*County:	•	*Zip:	
	Census Tract:			
Submit Cancel				
Action	Formatted Address Value			

Use the **Tab** key to move from field-to-field to fill in information. *City, State, County and Zip are required fields. Address 1 is the street number and name; Address 2 is the apartment number, suite #, etc. Census Tract field will not be used at this time.* Click **Submit** button. *Validation of address takes place immediately upon submission.* The lower section of the page provides a list of available addresses. The first address listed in the results is the address that was manually entered. Select this address if the other addresses do not match from validation process. Click **Select** link under **Action** column. Address displays.

Important Information

- Regarding addresses and children in Foster Care:
 - a) If parental rights are still in place and the child was in foster care upon referral to the EIP:
 - b) An additional address for the biological parents should be added from the Address link off the child's homepage navigation bar.
 - c) The type of address should be "physical" (the parents' physical address) and the user should not select "primary" (as the primary

address would be the address of the child's residence foster care address).

- d) Information should be entered into the comments section when creating the additional address to indicate that this is the biological parents' address.
- e) Information that the biological parents' address has been entered as an additional address should be included in the comments section of the child's homepage.
- If a child is placed in foster care after being referred to the EIP:
 - a) The current address information should be edited to change the type of address to "referral address" indicating that this was the address at the time of referral.
 - b) A new address should then be created with a type of "physical" (physical address of the child). The primary check box must be selected.
 - c) The foster care cluster on the child's homepage must be completed.
- 6. Click **Save** button to save Address and return to **Addresses** page with new address listed.

Or

Click Save & New button to save Address and create a new Address.

Notes:

- Child data cannot be edited through the IFSP Amendment process.
- The ability to change Child information on the Child Home Page is limited to certain User roles in NYEIS. Users not authorized to edit Child information need to submit a data change request. Description *See Data Change Request from the Child Homepage (Provider View)* for further information.

Viewing Addresses

- 1. Display Child Home Page. Displaying *Child Home Page* for further information.
- 2. Click Addresses from the Navigation Bar. Addresses page displays.

New				
Action <u>Primary Type A</u>	Address	City	From	To
View Edit Yes Registered 7	765 Terrace Ln	Albany	10/14/2010	

3. Click **View** link under **Action** column for the Alternative Name to display. **View Alternative Name** page displays.

View Address: Sarah Abercrombie - 455								
E dit Close								
Details								
Type:	Registered	Census Tract:						
From:	10/14/2010	To:						
Address:	765 Terrace Ln Albany (Albany) New York 10001	Primary:	Yes					
Comments								
Edit Close								

- 4. Review information.
- 5. Click Close button. Addresses page displays.

Exception Currently not available to all NYEIS User roles.

Editing Addresses

- 1. Display Child Home Page. Displaying Child Home Page for further information.
- 2. Click Addresses from the Navigation Bar. Addresses page displays.

Addresses: Sarah Abercrombie - 455							
New							
Action	Primary	Туре	Address	City	From	To	
<u>View</u> <u>Edit</u>	No	Record Location	145 Sanford Lane	Albany	11/17/2010		
View Edit	Yes	Registered	765 Terrace Ln	Albany	10/14/2010		

3. Click **Edit** link under **Action** column of Address to change. **Modify Address** page displays.

Modify Address: Sarah Abercrombi	e - 455			?
	Sa	ve Cancel		
Details				
Type:	Record Location 🛛 👻		Primary:	
From:	11/17/2010 🧳		To:	0
Address				
Address:	145 Sanford Lane Albany (Albany) New York 10001	<i>स्र 2</i>		
Comments				
Alternate living location.				~
	Sa	we Cancel		

- 4. Apply necessary changes to **Details, Address** or **Comments** sections.
- 5. Click Save button. Addresses page displays.

Deleting Addresses

Exception Currently not available to all NYEIS User roles.

- 1. Display Child Home Page. Displaying Child Home Page for further information.
- 2. Click Addresses from the Navigation Bar. Addresses page displays.

New							
Action	Primary	Type	Address	City	From	<u>To</u>	
View Edit	Yes	Physical	145 Sanford Lane	Albany	11/10/2010		
View Edit	No	Registered	765 Terrace Ln	Albany	10/14/2010		

3. Click **Edit** button. **Modify Address** page displays. Enter a date in the **To** field. The date should represent the last known day that the address was valid. *Date fields must be formatted as mm/dd/yyyy format.*

Modify Address: Sarah Abercrombio	e - 455			2
	Sa	ave Cancel		
Details				
Туре:	Record Location 😽		Primary:	
From:	11/17/2010 🧶		То:	<i>(</i>)
Address				
Address:	145 Sanford Lane Albany (Albany) New York 10001	e		
Comments				
Alternate living location.				~
				~
	Sa	ave Cancel		

4. Click **Save** button. **Addresses** page displays with the **To** date field displaying the recorded end date for the address.

Addresses: Sarah	Abercrombie - 45	5				a 1
New						
Action	Primary Primary	Type	Address	City	From	To
View Edit	Yes	Physical	145 Sanford Lane	Albany	11/10/2010	11/17/2010
<u>View</u> <u>Edit</u>	No	Registered	765 Terrace Ln	Albany	10/14/2010	

Notes:

• After end dating a Primary address, you must designate another address as Primary. There must be at least one Primary address.

- The ability to change Child information on the Child Home Page is limited to certain User roles in NYEIS. Users not authorized to edit Child information need to submit a data change request. *Data Change Request from the Child Homepage (Provider View)* for further information.
- Child data cannot be edited through the IFSP Amendment process.

ALTERNATIVE IDS

See Unit 10: Municipal Administration, *Alternate ID's from the Child Home Page* for further information.

ALTERNATIVE NAMES

Alternate Names record lists the child's registered name as well as all other alternative names or aliases for the child. The Alternative Name Type "Registered" is assigned to the name recorded for the child in the Referral and cannot be deleted. However, certain municipal roles are able to end date the child's current "Registered" name and afterward a new "Registered" name can be recorded. \square *See Editing Alternative Names*.

Creating Alternative Names

Exception Currently not available to all NYEIS User roles.

1. Display Child Home Page. Displaying *Child Home Page* for further information.

navigation • Home • Addresses	Child Homepage: Sarah Abercrombi		gister Sibling	2
Addresses Alternative IDs	Child Name			
Alternative Ibs Alternative Names	Eirst Name:	Sarab	Middle Name:	
Cases		Abercrombie	Suffix:	
Communication Exceptions	Contact	Abercromble	Julix	
Financials		145 Sanford Lane		
Notes	Address:	Albany (Albany)	Phone Number:	518 777-9999
• Phone Numbers		New York 10001		
 Relationships 	Child Information			
• Tasks	Child's Referral Date:	10/14/2010	Child's Case Status:	
At-Risk Follow-Up	Date of Birth:	10/11/2010	Gender:	Female
Audit Log	Calculated Age of Child:	0 Years, 6 Months	Birth Last Name:	
• Referrals	Ethnic Origin:	Hispanic or Latino	Child's Dominant Language:	
 Demographic Data Change History 	Child's Living Arrangement:		Municipality of Residence:	Albany
• Insurance Coverage	Child's School District:		Caregiver's Name (If other than	
• Surveys			parent):	
	Caregiver's Relationship:		Date of Death:	
	Race			
	Black or African American			
recent items	Family Information			
O John King - 500014	Mother's First Name:	Mary Beth	Mother's Last Name:	Abercrombie
	Mother's Date Of Birth:		Mother's Dominant Language:	
	Father's First Name:	Frank	Father's Last Name:	
	Father's Date Of Birth:		Father's Dominant Language:	
	Is a Parent Proficient in English?:	Yes	Preferred Communication:	
	Alternate Parent Contact Name:		Phone Number of Alternate Contact	
			Person:	
	Alternate Contact's Relationship to Child:			
	Insurance Information			
		Medicaid Eligible?:	No	
		Other Insurance Coverage?:	No	

2. Click **Alternative Names** from the Navigation Bar. **Alternative Names** page displays.

Alternative Names: Jim Tarey - 30000087							
New							
Action	First Name	Middle Name	Last Name	Type	Status	From	To
View Edit	Jim	Edward	Tarey	Registered	Active		
View Edit	Jim	E	Jimbo	Stage Name	Active	3/9/2009	3/9/2009

3. Click New button. Create Alternative Name page displays.

Create Alternative Name: Jim Tarey - 30000087 ?								
	Save Save 8	k New Cancel						
Details								
*Туре:	Registered 👻	Title:		•				
*First Name:		Middle Name:						
*Last Name:		Suffix:	•					
Initials:		*From:	4/20/2009	<i>(</i>)				
To:	4/20/2009							
Comments								
				*				
				-				
	Save Save 8	k New) Cancel						

4. Enter appropriate information for the following sections using **Tab** key to navigate from field-to-field: **Details** and **Comments**. *Fields requiring data entry are marked with an asterisk. A field can also be required based*

on logic that will not have an asterisk. Date fields must be formatted as *mm/dd/yyyy* format.

5. Click **Save** button to save Alternative Name and return to **Alternative Names** page with new name listed.

OR

Click **Save & New** button to save Alternative Name and create a new Alternative Name.

Notes:

- The ability to change Child information on the Child Home Page is limited to certain User roles in NYEIS. Users not authorized to edit Child information need to submit a data change request. Development See Data Change Request from the Child Homepage (Provider View) for further information.
- Child data cannot be edited through the IFSP Amendment process.

Exception Currently not available to all NYEIS User roles.

Viewing Alternative Names

- 1. Display Child Home Page. Display See Unit 1: Getting Started, Displaying Child Home Page for further information.
- 2. Click **Alternative Names** from the Navigation Bar. **Alternative Names** page displays.

Alternative Names	: Jim Tarey - 3000(0087					?
New							
Action	First Name	Middle Name	Last Name	Туре	Status	From	To
View Edit	Jim	Edward	Tarey	Registered	Active		
View Edit	Jim	E	Jimbo	Stage Name	Active	3/9/2009	3/9/2009

3. Click **View** link under **Action** column for the Alternative Name to display. **View Alternative Name** page displays.

View Alternative Name: Jim Tarey - 30000087						
	E dit D ele	ete Close				
Details						
Туре:	Stage Name	Title:	Mr.			
First Name:	Jim	Middle Name:	E			
Last Name:	Jimbo	Suffix:				
Initials:	JEJ	Status:	Active			
From:	3/9/2009	To:	3/9/2009			
Comments						
	Edit Dele	ete Close				

- 4. Review information.
- 5. Click Close button. Alternative Names page displays.

Exception	Editing Alternative Names
Currently not available to all NYEIS User roles.	 Important Information An Alternative Name classified with the type of "Registered" cannot be changed to a different <i>type</i> (e.g., alias). End dating the current "Registered" name and creating a new "Registered" name will change the name on all of the Child's cases (i.e., Integrated Case, IFSP and Service Authorization). Only certain municipal roles have the ability to end date the current "Registered" name and create a new one.

- 1. Display Child Home Page. Displaying *Child Home Page* for further information.
- 2. Click **Alternative Names** from the Navigation Bar. **Alternative Names** page displays.

Alternative Names: Jim Tarey - 30000087							
New							
Action	First Name	Middle Name	Last Name	Type	Status	From	To
View Edit	Jim	Edward	Tarey	Registered	Active		
View Edit	Jim	E	Jimbo	Stage Name	Active	3/9/2009	3/9/2009

3. Click **Edit** link under **Action** column for Alternative Name to change. **Modify Alternative Name** page displays.

Modify Alternative Name: Jim Tarey	<i>ı</i> - 30000087			?
	Save	Cancel		
Details				
*Туре:	Registered 🔻	Title:	▼	
*First Name:	Jim	Middle Name:	Edward	
*Last Name:	Tarey	Suffix:	•	
Initials:	JET	*From:	() () ()	
To:	()			
Comments				
				*
				~
	Save	Cancel		

- 4. Apply necessary changes to **Details** section.
 - a. A date must be recorded in the "From Date" field. This field records the effective date of the new Alternative Name record.
- 5. Click Save button. Alternative Names page displays.

Note:

• If you want to keep a history of Alternative Names, simply record a date in the **To:** field. Then create a new Alternative Name record with the desired change to the name.

Exception Currently not available to all NYEIS User roles.

Deleting Alternative Names

An Alternative Name record is actually not deleted but rather the status is changed to "Canceled". This is done to preserve a visible history of Alternative Names recorded for the child. The Alternative Name with a Type of "Registered" cannot be deleted (i.e., Canceled).

- 1. Display Child Home Page. Displaying *Child Home Page* for further information.
- 2. Click **Alternative Names** from the Navigation Bar. **Alternative Names** page displays.

Alternative Name	Alternative Names: Jim Tarey - 30000087								
New									
Action	First Name	Middle Name	Last Name	Туре	Status	From	To		
View Edit	Jim	Edward	Tarey	Registered	Active				
View Edit	Jim	E	Jimbo	Stage Name	Active	3/9/2009	3/9/2009		

3. Click **View** link under **Action** column for the Alternative Name to display. **View Alternative Name** page displays.

View Alternative Name: Jim Tarey -	- 30000087		?				
	E dit Dele	ete Close					
Details							
Type:	Stage Name	Title:	Mr.				
First Name:	Jim	Middle Name:	E				
Last Name:	Jimbo	Suffix:					
Initials:	JEJ	Status:	Active				
From:	3/9/2009	To:	3/9/2009				
Comments							
Edit Delete Close							

4. Click **Delete** button. **Delete Alternative Name** page displays with the message *Are you sure you want to delete this alternative name?*

Delete Alternative Name: Jim Tarey - 30000087	
Are you sure you want to delete this alternative name?	
	Yes No

5. Click **Yes** button. **Alternative Names** page displays with **Status** changed to **Canceled**.

Alternative Names:	Alternative Names: Jim Tarey - 30000087							
New								
Action	First Name	Middle Name	Last Name	Type	<u>Status</u>	From	To	
View Edit	Jim	E	Jimbo	Stage Name	Canceled	3/9/2009	3/9/2009	
View Edit	James		Tarrey	Alias	Active	4/20/2009	4/20/2009	
View Edit	Jim	Edward	Tarey	Registered	Active	4/20/2009		

CASES

1. Display Child Home Page. Displaying *Child Home Page* for further information.

navigation	Child Homepage: Jim Tarey - 30000	087							
• Home	Edit Register Sibling								
• Addresses	Natica								
• Alternative IDs		Notice							
 Alternative Names 	Information Disclosure Restrictions App	ly							
• Cases	Child Name								
 Communication Exceptions 	First Name:	Jim	Middle Name:	Edward					
• Communications	Last Name:	Tarey	Suffix:						
• Financials	Contact								
• Notes	Contact								
• Phone Numbers	1 d deserve	1 Main Street	Disease March and						
• Relationships	Address:	Albany (Albany) New York 12208	Phone Number:	555 555 5555					
• Tasks		New York 12200							
• At-Risk Follow-Up	Child Information								
• Audit Log	Child's Referral Date:	12/16/2008	Child's Case Status:						
• Referrals	Date of Birth:	1/12/2008	Gender:	Male					
Demographic Data	Calculated Age of Child:	1 Years 3 Months	Birth Last Name:						
Change History	Ethnic Origin:	Not Hispanic or Latino	Child's Dominant Language:						
• Insurance Coverage	Child's Living Arrangement:		Municipality of Residence:	Albany					
• Surveys			Caregiver's Name (If other than						
	Child's School District:	ALBANY CITY SD	caregiver's Name (if other than						

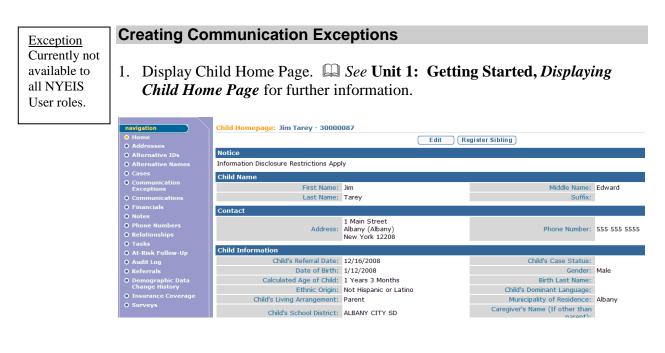
2. Click **Cases** from the Navigation Bar. **Cases** page displays.

Cases: Dean Torres - 203							
Case Reference	Type	<u>Owner</u>	Start Date	Status			
6659	NYEIS Integrated Case	To Be Assigned	10/21/2010	Draft			
<u>6661</u>	Individualized Family Service Plan (IFSP)	To Be Assigned	10/21/2010	Active			

3. Select **Case Reference** number next to NYEIS Integrated Case will in the **Type** column will display the child's **Integrated Case Home** Page. See **Unit 1: Getting Started** for further information.

COMMUNICATION EXCEPTIONS FROM THE CHILD HOME PAGE

Communication Exceptions are used to note when a particular form of communication cannot be used, e.g. phone for a deaf parent.



2. Click **Communication Exceptions** from the Navigation Bar. **Communication Exceptions** page displays.

Communication Exceptions: Jim Tarey - 30000087						
Action	Method	Reason	From	To	Status	
View Edit	Hard Copy	Sight Disability	3/9/2009		Active	
View Edit	Phone	Hearing Disability	1/22/2009		Active	

3. Click New button. Create Communication Exception page displays.

			Save Save &	k New Cancel			
)etails							
	*Method:	Hard Copy 🚽			*Reason:	Not Required by Client	•
	*From:	4/20/2009	Ø		To:		<i>(</i>)
comments							

- 4. Enter appropriate information for the following sections using **Tab** key to navigate from field-to-field: **Details** and **Comments**. *Fields requiring data entry are marked with an asterisk. A field can also be required based on logic that will not have an asterisk. Date fields must be formatted as mm/dd/yyyy format.*
- 5. Click **Save** button to save Communication Exception and return to **Communication Exceptions** page with new exception listed.

OR

Click **Save & New** button to save Communication Exception and create a new Communication Exception.

Notes:

- If there is a Communication Exception, the exception is noted on the **Child Homepage**. Scroll to the **Communication Exception** section. **Yes** displays.
- The ability to change Child information on the Child Home Page is limited to certain User roles in NYEIS. Users not authorized to edit Child information need to submit a data change request. Description *See Data Change Request from the Child Homepage (Provider View)* for further information.
- Child data cannot be edited through the IFSP Amendment process.

Viewing Communication Exceptions

- 1. Display Child Home Page. Displaying *Child Home Page* for further information.
- 2. Click **Communication Exceptions** from the Navigation Bar. **Communication Exceptions** page displays.

Communication Exceptions: Jim Tarey - 30000087						
New						
Action	Method	Reason	From	To	Status	
View Edit	Hard Copy	Sight Disability	3/9/2009		Active	
View Edit	Phone	Hearing Disability	1/22/2009		Active	

3. Click **View** link under **Action** column for the Communication Exception to display. **View Communication Exception** page displays.

View Communication Exception: Jim Tarey - 30000087					
		E dit Dele	ete Close		
Details					
Method:	Data Transfer			Reason:	Not Required by Client
From:	4/20/2009			To:	
Status:	Active				
Comments					
		E dit Dele	ete Close		

- 4. Review information.
- 5. Click Close button. Communication Exceptions page displays.

[Exception	Ec	liting Communication Exceptions
	Currently not available to all NYEIS User roles.	1.	Display Child Home Page. Display See Unit 1: Getting Started, <i>Displaying</i> Child Home Page for further information.
		2.	Click Communication Exceptions from the Navigation Bar.
			Communication Exceptions page displays.

		0000007			9
New New	Exceptions: Jim Tare	y - 30000087			¥
Action	Method	Reason	From	To	Status
View Edit	Hard Copy	Sight Disability	3/9/2009		Active
View Edit	Phone	Hearing Disability	1/22/2009		Active

3. Click **Edit** link under **Action** column for Communication Exception to change. **Modify Communication Exception** page displays.

Modify Communication Exception:	Jim Tarey - 30000087				?
		Save	Cancel		
Details					
*Method:	Data Transfer 🔻		*Reason:	Not Required by Client	•
*From:	4/20/2009	$\langle 0 \rangle$	То:		
Comments					
					*
					~
		(Save)	Cancel		

- 4. Apply necessary changes to **Details** and **Comments** sections.
- 5. Click **Save** button. Communication Exception is saved. **Communication Exception** page displays.

Exception	Deleting Communication Exceptions
Currently not available to	1. Display Child Home Page. Displaying
all NYEIS User roles.	Child Home Page for further information.

2. Click **Communication Exceptions** from the Navigation Bar. **Communication Exceptions** page displays.

Communication Exceptions: Jim Tarey - 30000087 2						
New						
Action	Method	Reason	From	To	Status	
View Edit	Hard Copy	Sight Disability	3/9/2009		Active	
View Edit	Phone	Hearing Disability	1/22/2009		Active	

3. Click **View** link under **Action** column for the Communication Exception to display. **View Communication Exception** page displays.

View Communication Exception: Ji	m Tarey - 300000)87			?
		E dit Dele	ete Close		
Details					
Method:	Data Transfer			Reason:	Not Required by Client
From:	4/20/2009			To:	
Status:	Active				
Comments					
		E dit Dele	ete Close		

4. Click **Delete** button. **Delete Communication Exception** page displays with the message *Are you sure you want to delete this communication exception*?

Delete Communication Exception: Jim Tarey - 30000087	
Are you sure you want to delete this communication exception?	Yes No

5. Click **Yes** button. **Communication Exceptions** page displays with **Status** changed to **Canceled**.

Communication Exceptions: Jim Tarey - 30000087 ?						
New						
Action	Method	Reason	From	To	Status	
View Edit	Data Transfer	No Fixed Abode	4/20/2009		Canceled	
View Edit	Fax	Not Required by Client	4/20/2009		Active	

FINANCIALS

Important Information:

While NYEIS continues to be the initial point of entry for newly submitted claims of all types (General Service, Service Coordination, Transportation, Respite, ATD) any General Service and/or Service Coordination claiming submitted on or after 4/1/2013 is managed by a State Fiscal Agent for Provider payment and insurance billing. As it pertains to General Service or Service Coordination billing, the financial information available in NYEIS and explained below pertains to and is consistent with only those claims submitted to NYEIS up to 3/31/2013.

Vendor-based claims such as Transportation, Respite and ATD services continue to be managed entirely through NYEIS, and the information below is applicable regardless of when the claim was submitted.

For questions relating further claims processing managed to the State Fiscal Agent, please visit https://www.eibilling.com/

Exception Currently not available to all NYEIS User roles.

1.

Financials allows a User to view a summary of invoices and payments for the child.

- Display Child Home Page. Displaying Child Home Page for further information.
- 2. Click **Financials** from the Navigation Bar. **Financial** page displays.

	ccount Summary
396.00	Total Amount Invoiced & Approved:
396.00	Total Payments to Provider:
396.00	Total Service Payments to Provider:
0.00	Total Respite Payments to Provider:
0.00	Total Transportation Payments to Provider:
0.00	Total AT Device Payments to Provider:
0.00	Total Payment Received from Insurance :
0.00	Total Payment Received from Medicaid:
0.00	Total Payment Received from DOH:
396.00	Municipality Contribution:

Adding and Modifying Financial information

Refer to Unit 12: Municipal Financials, *Financial Claiming* for further information.

NOTES FROM THE CHILD HOME PAGE

Exception Currently not available to all NYEIS User roles.

1. Display Child Home Page. A Refer to Unit 1: Getting Started, *Displaying Child Home Page* for further information.

navigation	Child Homepage: Jim Tarey - 30000	087		
Home Addresses		E dit R	egister Sibling	
• Alternative IDs	Notice			
• Alternative Names	Information Disclosure Restrictions App	ly		
• Cases	Child Name			
 Communication Exceptions 	First Name:	Jim	Middle Name:	Edward
• Communications	Last Name:	Tarey	Suffix:	
• Financials	Contact			
• Notes		1 Main Street		
• Phone Numbers	Address:	Albany (Albany)	Phone Number:	555 555 5555
Relationships Tasks		New York 12208		I

2. Click Notes from the Navigation Bar. Notes page displays.

Notes: Dean Torres - 203					
New					
Action	Entered By	Date	Text	Status	
<u>View</u> <u>Edit</u>	<u>shawna</u> <u>thornton</u>	10/26/2010	Notes for the child that are viewable to providers and MUNI staff are here.	Active	

Refer to Integrated Case Homepage Notes for further information.

PHONE NUMBERS

Exception Currently not available to all NYEIS User roles.

Creating Phone Numbers

1. Display Child Home Page. A Refer to Unit 1: Getting Started, *Displaying Child Home Page* for further information.

navigation • Home • Addresses	Child Homepage: Sarah Abercrombi		egister Sibling	?
Addresses Addresses Alternative IDs	Child Name			
Alternative IDs Alternative Names	First Name:	Carab	Middle Name:	
• Cases	Last Name:		Suffix:	
Communication Exceptions	Contact	Abercromble	Junix	
• Financials		145 Sanford Lane		
Notes	Address:	Albany (Albany)	Phone Number:	518 777-9999
Phone Numbers		New York 10001		
Relationships	Child Information			
• Tasks	Child's Referral Date:	10/14/2010	Child's Case Status:	
At-Risk Follow-Up	Date of Birth:		Gender:	Female
Audit Log	Calculated Age of Child:		Birth Last Name:	
Referrals		Hispanic or Latino	Child's Dominant Language:	
 Demographic Data Change History 	Child's Living Arrangement:		Municipality of Residence:	Albany
• Insurance Coverage	Child's School District:		Caregiver's Name (If other than	,
• Surveys			parent):	
	Caregiver's Relationship:		Date of Death:	
	Race			
	Black or African American			
recent items	Family Information			
O John King - 500014	Mother's First Name:	Mary Beth	Mother's Last Name:	Abercrombie
C Joint King Socort	Mother's Date Of Birth:		Mother's Dominant Language:	
	Father's First Name:	Frank	Father's Last Name:	
	Father's Date Of Birth:		Father's Dominant Language:	
	Is a Parent Proficient in English?:	Yes	Preferred Communication:	
	Alternate Parent Contact Name:		Phone Number of Alternate Contact Person:	
	Alternate Contact's Relationship to Child:			
	Insurance Information			
		Medicaid Eligible?:	No	
		Other Insurance Coverage?:	No	

2. Click **Phone Numbers** from the Navigation Bar. **Phone Numbers** page displays.

Phone Numbers:	Barnaby Jor	nes - 449					2
New							
Action	Primary 1	<u>Eype</u> <u>Area</u>	Code Phone Number	Extension	From	To Stat	us
<u>View</u> <u>Edit</u>	Yes	Home 518	333-9999		10/1/2010	Act	ive

3. Click New button. Create Phone Number page displays.

Create Phone M	Number: I	Barnaby Jones - 449				?
				Save Save 8	k New Cancel	
Details						
	*Туре:	Main 😽			Primary:	
	*From:	11/2/2010	<i>(</i>)		To:	<i>(</i>)
	*Phone:				Extension:	
Comments						
						~
						W
				Save Save 8	k New Cancel	

4. Enter appropriate information for the following sections using **Tab** key to navigate from field-to-field: **Details** and **Comments**. *Fields requiring data entry are marked with an asterisk. A field can also be required based on logic that will not have an asterisk. Date fields must be formatted as mm/dd/yyyy format.*

5. Click **Save** button to save Phone Number and return to **Phone Numbers** page with new phone number listed.

Or

Click **Save & New** button to save Phone Number and create a new Phone Number.

Notes:

- Click the **Primary** check box to make the phone number the primary contact number.
- The ability to change Child information on the Child Home Page is limited to certain User roles in NYEIS. Users not authorized to edit Child information need to submit a data change request. Descriptional Refer to Data Change Request from the Child Homepage (Provider View) for further information.
- Child data cannot be edited through the IFSP Amendment process.

Viewing Phone Numbers

1. Display Child Home Page. Refer to Unit 1: Getting Started, *Displaying Child Home Page* for further information.

navigation O Home O Addresses	Child Homepage: Sarah Abercrombi		igister Sibling	ి
Alternative IDs	Child Name			
Alternative Names	First Name:	Sarah	Middle Name:	
O Cases	Last Name:		Suffix:	
 Communication Exceptions 	Contact			
• Financials		145 Sanford Lane Albany (Albany)	Phone Number:	F18 777-0000
Notes Phone Numbers		New York 10001	Phone Humber.	510 /// 5555
• Relationships	Child Information			
• Tasks	Child's Referral Date:	10/14/2010	Child's Case Status:	
At-Risk Follow-Up	Date of Birth:	10/11/2010	Gender:	Female
Audit Log	Calculated Age of Child:	0 Years, 6 Months	Birth Last Name:	
Referrals	Ethnic Origin:	Hispanic or Latino	Child's Dominant Language:	
 Demographic Data Change History 	Child's Living Arrangement:		Municipality of Residence:	Albany
• Insurance Coverage	Child's School District:		Caregiver's Name (If other than parent):	
• Surveys	Caregiver's Relationship:		Date of Death:	
	Race			-
	Black or African American			
recent items	Family Information			
O John King - 500014	Mother's First Name:	Mary Beth	Mother's Last Name:	Abercrombie
	Mother's Date Of Birth:		Mother's Dominant Language:	
	Father's First Name:	Frank	Father's Last Name:	
·	Father's Date Of Birth:		Father's Dominant Language:	
	Is a Parent Proficient in English?:	Yes	Preferred Communication:	
	Alternate Parent Contact Name:		Phone Number of Alternate Contact Person:	
	Alternate Contact's Relationship to Child:			
	Insurance Information			
		Medicaid Eligible?:		
		Other Insurance Coverage?:	No	

2. Click **Phone Numbers** from the Navigation Bar. **Phone Numbers** page displays.

Phone Numbers: Bar	naby Jo	nes - 449						?
New								
Action	Primary	Type	<u>Area Code</u>	Phone Number	Extension	From	To	<u>Status</u>
<u>View</u> Edit	Yes	Home	518	333-9999		10/1/2010		Active

3. Click **View** link under **Action** column for the Phone Number to display. **View Phone Number** page displays.

View Phone Number: Ba	arnaby Jones - 449		2
	E dit De	elete Close	
Details			
Type:	Home	Primary:	Yes
From:	10/1/2010	To:	
Phone:	518 333-9999	Extension:	
Status:	Active		
Comments			
	E dit De	elete Close	

- 4. Review information.
- 5. Click Close button. Phone Numbers page displays.

Editing Phone Numbers

Exception Currently not available to all NYEIS User roles.

1. Display Child Home Page. Refer to Unit 1: Getting Started, Displaying Child Home Page for further information.

navigation	Child Homepage: Sarah Abercrombi	ie - 455		2
		Edit	gister Sibling	
• Addresses	Child Name		<u> </u>	
 Alternative IDs 				
• Alternative Names	First Name:		Middle Name:	
• Cases	Last Name:	Abercrombie	Suffix:	
 Communication Exceptions 	Contact			
• Financials		145 Sanford Lane		
Notes	Address:	Albany (Albany) New York 10001	Phone Number:	518 777-9999
Phone Numbers		New York 10001		
 Relationships 	Child Information			
• Tasks	Child's Referral Date:	10/14/2010	Child's Case Status:	
At-Risk Follow-Up	Date of Birth:	10/11/2010	Gender:	Female
• Audit Log	Calculated Age of Child:	0 Years, 6 Months	Birth Last Name:	
• Referrals	Ethnic Origin:	Hispanic or Latino	Child's Dominant Language:	
 Demographic Data Change History 	Child's Living Arrangement:		Municipality of Residence:	Albany
• Insurance Coverage	Child's School District:		Caregiver's Name (If other than parent):	
• Surveys	Caregiver's Relationship:		Date of Death:	
	Race			
	Black or African American			
recent items	Family Information			
O John King - 500014	Mother's First Name:	Mary Beth	Mother's Last Name:	Abercrombie
	Mother's Date Of Birth:		Mother's Dominant Language:	
	Father's First Name:	Frank	Father's Last Name:	
	Father's Date Of Birth:		Father's Dominant Language:	
	Is a Parent Proficient in English?:	Yes	Preferred Communication:	
	Alternate Parent Contact Name:		Phone Number of Alternate Contact Person:	
	Alternate Contact's Relationship to Child:			
	Insurance Information			
		Medicaid Eligible?:		
		Other Insurance Coverage?:	No	

2. Click **Phone Numbers** from the Navigation Bar. **Phone Numbers** page displays.

Phone Numbers: Ba	rnaby Jo	ones - 449						?
New								
Action	Primary	Туре	Area Code	Phone Number	Extension	From	To	<u>Status</u>
View Edit	Yes	Home	518	333-9999		10/1/2010		Active

3. Click Edit link under Action column for Phone Numbers to change. Modify Phone Number page displays.

Modify Phone Number	: Barn	naby Jones - 449							2
				Save	Cancel				
Details									
Тур	e: Hor	me 🖌				Primary:	V		
From	n: 10/	1/2010	<i>(</i>)			To:		<i>(</i>)	
Phon	e: 518	333-9999				Extension:			
Comments									
									~
				Save	Cancel				

- 4. Apply necessary changes to **Details** and **Comments** sections.
- 5. Click Save button. Phone number is saved. Phone Numbers page displays.

Deleting Phone Numbers

1. Display Child Home Page. Quarter Refer to Unit 1: Getting Started, *Displaying Child Home Page* for further information.

navigation O Home O Addresses	Child Homepage: Sarah Abercrombi		gister Sibling	2
Addresses Alternative IDs	Child Name			
Alternative IDs Alternative Names	First Name:	Sarah	Middle Name:	
Cases	Last Name:		Suffix:	
Communication Exceptions	Contact	Abercromble	Junix	
O Financials O Notes O Phone Numbers	Address:	145 Sanford Lane Albany (Albany) New York 10001	Phone Number:	518 777-9999
• Relationships	Child Information			
O Tasks	Child's Referral Date:	10/14/2010	Child's Case Status:	
At-Risk Follow-Up	Date of Birth:		Gender:	Female
Audit Log	Calculated Age of Child:	0 Years, 6 Months	Birth Last Name:	
• Referrals	Ethnic Origin:	Hispanic or Latino	Child's Dominant Language:	
 Demographic Data Change History 	Child's Living Arrangement:	-	Municipality of Residence:	Albany
• Insurance Coverage	Child's School District:		Caregiver's Name (If other than parent):	
• Surveys	Caregiver's Relationship:		Date of Death:	
	Race			
	Black or African American			
recent items	Family Information			
O John King - 500014	Mother's First Name:	Mary Beth	Mother's Last Name:	Abercrombie
	Mother's Date Of Birth:		Mother's Dominant Language:	
	Father's First Name:	Frank	Father's Last Name:	
	Father's Date Of Birth:		Father's Dominant Language:	
	Is a Parent Proficient in English?:	Yes	Preferred Communication:	
	Alternate Parent Contact Name:		Phone Number of Alternate Contact Person:	
	Alternate Contact's Relationship to Child:			
	Insurance Information			
		Medicaid Eligible?:	No	
		Other Insurance Coverage?:	No	

Exception Currently not available to all NYEIS User roles. 2. Click **Phone Numbers** from the Navigation Bar. **Phone numbers** page displays.

Phone Numbers: Ba	rnaby Jo	nes - 449						2
New								
Action	Primary	Туре	<u>Area Code</u>	Phone Number	Extension	From	To	<u>Status</u>
View Edit	Yes	Home	518	333-9999		10/1/2010		Active

3. Click **View** link under **Action** column for the Phone Number to display. **View Phone numbers** page displays.

View Phone Number: Barnaby Jones - 449					
		E dit Del	ete Close		
Details					
Type:	Home		Primary:	Yes	
From:	10/1/2010		To:		
Phone:	518 333-9999		Extension:		
Status:	Active				
Comments					
	(E dit D el	ete Close		

4. Click **Delete** button. **Delete Phone Number** page displays with the message *Are you sure you want to delete this phone number?*

Delete Phone Number: Barnaby Jones - 449	
Are you sure you want to delete this phone number?	
	Yes No

Click **Yes** button. **Phone numbers** page displays with **Status** changed to **Canceled**.

Phone Numbers: Ba	arnaby Jo	ines - 449						?
New								
Action	Primary	Туре	<u>Area Code</u>	Phone Number	Extension	From	To	<u>Status</u>
View Edit	No	Home	518	333-9999		10/1/2010		Canceled

RELATIONSHIPS

Relationships allows a User to document sibling (only) relationships. The User searches and selects the related child and NYEIS automatically creates the relationship Type to Sibling.

Creating Relationships 1. Display Child Home Page. Refer to Unit 1: Getting Started, Displaying Child Home Page for further information. User roles. Child Homepage: Sarah Abercrombie - 455 ? Edit Register Sibling Child Na First Name: Sarah Middle Nam Last Name: Abercrombie Contact 145 Sanford Lane Albany (Albany) New York 10001 Addres Phone Number: 518 777-9999 Child Information Child's Referral Date: 10/14/2010 Child's Case Status: Date of Birth: 10/11/2010 nder: Female Calculated Age of Child: 0 Years, 6 Months Birth Last Name Ethnic Origin: Hispanic or Latino Child's Dominant Language: Child's Living Arrangement: Municipality of Residence: Albany Caregiver's Name (If other than parent): Child's School District: Caregiver's Relationship: Date of Death: Race Black or African American Family Information Mother's First Name: Mary Beth Mother's Date Of Birth: Mother's Last Name: Abercrombie Mother's Dominant Language: Father's First Name: Frank Father's Last Name: Father's Date Of Birth: Is a Parent Proficient in English?: Yes Father's Dominant Languag Preferred Communicatio Phone Number of Alternate Contact Alternate Parent Contact Name: Alternate Contact's Relationship to Child: Insurance Information

2. Click **Relationships** from the Navigation Bar. **Relationships** page displays.

Medicaid Eligible?: No Other Insurance Coverage?: No

Relationships: Jim Tarey - 30000087						
New						
Action	Related Person	Туре	From	To	Status	
View Edit	Millie Millie	Sibling	1/1/2009		Active	

3. Click New button. Create Relationship page displays.

reate Relationship: Tiffany Martin-15 - 110							
	Save Save & M	New Cancel					
Details							
*Related Person:	କ୍ଟ ନ୍ଟ	*From:	l 🖉				
То:	<i>(</i>)	End Reason:	~				
Comments							
			V				
Save Save & New Cancel							

Exception Currently not available to all NYEIS

- 4. Enter appropriate information for the following sections using **Tab** key to navigate from field-to-field: **Details** and **Comments**. *Fields requiring data entry are marked with an asterisk. A field can also be required based on logic that will not have an asterisk. Date fields must be formatted as mm/dd/yyyy format.*
- 5. Click **Save** button to save Relationship and return to **Relationships** page with new relationship listed.

OR

Click Save & New button to save Relationship and create a new relationship.

Viewing Relationships

- 1. Display Child Home Page. Q *Refer to* Unit 1: Getting Started, *Displaying Child Home Page* for further information.
- 2. Click Relationships from the Navigation Bar. Relationships page displays.

Relationships: Jim Tarey - 30000087						
New						
Action	Related Person	Туре	From	To	Status	
View Edit	Millie Millie	Sibling	1/1/2009		Active	

3. Click **View** link under **Action** column for the Relationship to display. **View Relationship** page displays.

navigation	View Relationship: Billy Bu	ttons - 353 Edit Del	ete	2
	Details			
recent items	Related Person:	<u>Ned Martin</u> 1/1/2010	Туре: То:	Sibling
• Ned Martin - 336 • Charles Awesomest -	End Reason:		Status:	Active
339	Comments			
 Charles Awesome - 339 Billy Buttons - 353 		E dit Del	ete Close	

- 4. Review information.
- 5. Click Close button. Relationships page displays.

Exception Currently not available to all NYEIS User roles.

Editing Relationships

Deleting Relationships

- 1. Display Child Home Page. Refer to Unit 1: Getting Started, Displaying Child Home Page for further information.
- 2. Click **Relationships** from the Navigation Bar. **Relationships** page displays.

Relationships: Jim Ta	Relationships: Jim Tarey - 30000087						
New	New						
Action	Related Person	Туре	From	To	Status		
View Edit	Millie Millie	Sibling	1/1/2009		Active		

3. Click Edit link under Action column for Relationship to change. Modify Relationship page displays.

at Early Warmenter Stat		• Home	O Inbox O My Ca	ilendar O My Cases O	Search O About	O Log Out
navigation	Create Relationship: Billy I	Buttons - 353	e) (Save & New) Cancel		2
	Details					
	*Related Person:	Ned Martin	<mark>କ୍</mark> କୃଲ୍ଟ	*From:	1/1/2010	<i>(</i>)
O Ned Martin - 336	To:		<i>(</i>)	End Reason:		*
 Charles Awesomest - 339 	Comments					
• Charles Awesome - 339						
Billy Buttons - 353						
						//
		Sav	e Save & New	Cancel		

- 4. Apply necessary changes to **Relationship Details** and **Comments** sections.
- 5. Click **Save** button. Relationship is saved. **Relationships** page displays.

Currently not available to all NYEIS User roles.	_	 Display Child Home Page. Refer to Unit 1: Getting Started, Displaying Child Home Page for further information. 						
	2. Click Relationships from the Navigation Bar. Relationships page displays.							
	Relationships: Jim Tarey - 30000087							
	Action <u>View</u> <u>Edit</u>	<u>Related Person</u> <u>Millie Millie</u>	<u>Type</u> Sibling	From 1/1/2009	<u>To</u>	<u>Status</u> Active		

3. Click View link under Action column for the Relationship to display. View Relationship page displays.

Exception

A Ford Manual a Stra	O Home O Inbox O My Calendar O My Cases O Search O About O Log Out
navigation	View Relationship: Billy Buttons - 353 Edit Delete Close
recent items O Ned Martin - 336	Related Person: Ned Martin Type: Sibling From: 1/1/2010 To: To: <t< td=""></t<>
 Charles Awesomest - 339 Charles Awesome - 339 Billy Buttons - 353 	Comments E dit Delete Close

4. Click **Delete** button. **Delete Relationship** page displays with the message *Are you sure you want to delete this relationship*?

Delete Relationship: Jim Tarey - 30000087	
Are you sure you want to delete this relationship?	
	Yes No

5. Click **Yes** button. **Relationships** page displays with **Status** changed to **Canceled**.

Relationships: Joseph Boxer - 424					
New					
Action	Related Person	Туре	<u>From</u>	To	<u>Status</u>
<u>View</u> <u>Edit</u>	<u>Tanya Keeper</u>	Sibling	5/21/2010		Canceled

TASKS

Tasks provides an alternate way for the user to create a Task. When a user creates a task, the record of that task will only be found in the location where the task was generated (e.g. Child Home page, IFSP, Service Authorization). For example, the record of a task created from the Child Home page will not be viewable from the child's IFSP.

If the user assigns the task to themselves by checking the 'Reserve to me' option, the task will appear in the user's **Reserved Tasks** inbox. It is also displayed on the user's Home page in the **My Tasks** cluster. If the user assigns the task to another user, it will be displayed in their **Assigned Tasks** inbox.

Refer to Unit 1: Getting Started for further information on Tasks.

Adding Tasks

Exception Currently not available to all NYEIS User roles.

- 1. Display Child Home Page. Displaying *Child Home Page* for further information.
- 2. Click **Tasks** from the Navigation Bar. **Tasks** page displays.

NYEIS Integr	rated Case - 52740 🤇 🕅 Initial - 59392		
Tasks: Initial - 5	9392		?
New			

3. Click New button. Create User Task page displays the sections Task Details, Assignment Details and Comments.

Create User Task: Tiffany Ma	artin-06 - 0106		?
	Save	& New Cancel	
Task Details			
*Subject:		Deadline:	🍏 •: •
Priority:	Medium 👻		
Assignment Details			
Reserve To Me:			
Assign To:	User	•	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
Comments			
			*
			~
	Save	& New Cancel	

In the **Task Details** section, a User can create a **Deadline** which displays as a **Due Date** in the workspace of the User that the task was assigned. **Priority** can be selected but does not show up in the workspace of the User the task was assigned. However, **Priority** will be viewable when the User assigned to the Task views the Task.

4. Fill in information as necessary. *Fields requiring data entry are marked with an asterisk. A field can also be required based on logic that will not have an asterisk. Date fields must be formatted as mm/dd/yyyy format.*

Important Information

A Task is assigned to User on the System. Click **Reserve to Me** from the **Assignment Details** section to assign a Task to yourself. [Otherwise, select the appropriate assignee type from the **Assign To** field prior to initiating the search. The **Search** page varies depending on option selected in the **Assign To** field. Only registered users in NYEIS may be assigned a task.]

5. Click **Search** \Re icon. A search page or a list of choices displays.

If a search page displays, enter **Search Criteria**. Click **Search** button. **Search Results** display. Click **Select** link under **Action** column. **Assign To** field is populated.

If a list of options display, click **Select** link under **Action** column to select appropriate data. **Assign To** field is populated. **Create User Task** page displays with selected data displayed.

6. Click **Save** button to save current Task and return to the **Tasks** page.

OR

Click **Save & New** button to continue adding Tasks.

Viewing Tasks

- 1. Display Child Home Page. Q Refer to Unit 1: Getting Started, Displaying Child Home Page for further information.
- 2. Click **Tasks** from the Navigation Bar. **Tasks** page displays.

8	NYEIS Integrated Case	- 52740 🏑 🙀 Initial - 59392			
Task	s: Initial - 59392				?
N	ew				
	<u>Task ID</u>	Subject	Priority .	<u>Status</u>	Deadline
•	26373	Task to be completed	Medium	Open	
•	<u>26374</u>	Task #2	Medium	Open	

3. Click Task ID link from Tasks page. Task Home page displays.

Task Home: ManualReser Manage				
Add Comment	<mark>₩</mark> <u>Reserve</u> ✔ <u>Un-Reserve</u>	i <u>Forward</u> E <u>Defer</u>	睂 <u>Restart</u>	
Subject MK Task				

OR

Open Tasks also display under My Tasks section of My Workspace page.

Notes:

• To sort the data displayed on pages, click the underlined column heading. Click once to view the data in ascending order and click again to view the data in descending order.

- When viewing the **Task Home** page, a User may navigate to view the **Child Homepage** by selecting the **Participant Home Page** in the **Supporting Information** section.
- **Recent items** on the Navigation Bar displays the most recent items visited.

AT-RISK FOLLOW UP

Refer to Unit 3: At-Risk Children for information on this topic.

AUDIT LOG

Audit Logs allow a User to see who has interacted with the Child's case. It includes the User Name, the Time the record was accessed, and the Child Name. There is no editable information in the Audit Log.

- 1. Display Child Home Page. A Refer to Unit 1: Getting Started, Displaying Child Home Page for further information.
- 2. Click Audit Log from the Navigation Bar. Audit Log page displays.

Access List				
<u>User Name</u>	Time Accessed	Child Name		
Shawna Thornton	10/29/2010 13:00	Smith Jane		
Art Art	6/15/2010 16:51	Smith Jane		
Art Art	6/15/2010 16:48	Smith Jane		
Art Art	4/20/2010 12:15	Smith Jane		

REFERRALS

The Referral menu item provides links to the Child Referral entry and can also be used to create a Re-Referral. *Refer to* **Unit 2: Referral & Intake, Creating a Re-Referral** for information on this topic.

DEMOGRAPHIC DATA CHANGE REQUEST FROM THE CHILD HOME PAGE (PROVIDER VIEW)

This feature is available from the Navigation bar on the provider view of the Child Home Page. The ability to change Child information on the Child Home Page is limited to certain User roles in NYEIS. Users not authorized to edit Child information need to submit a Data Change Request.

A history of prior changes to the child can be accessed via the **Demographic Data Change History** link, seen on the navigation bar of the child's home page. This history is view-only; it cannot be modified.

Creating a Data Change Request

Provider Name Request Date

Action

 Display the Child Home Page. Click Data Change Requests from the Navigation Bar. View List of Provider Requests To Change Child Data page displays.
 Alternative Names
 Cases
 Phone Numbers
 Data Change Requests

Request Status

Status Date

2. Click **New** button. **Create Request to Change Child Data** page displays with the following sections: **Request Details** and **Child Details**. Information is read only.

Create Request To Change Child Dat	a				
		Save	Cancel		
Request Details					
Provider Name:	All Families First			State ID:	28416
NPI:	1234551				
Child Details					
Child's First Name:	Tiffany			Child's Last Name:	Martin-170
Request Details - Please be specific					
		Save	Cancel		

- 3. Type in the **Request Details Please be specific** field in the **Child Details** section. Users *must* be as specific as possible and enter the name of the field to be changed along with the changes required (e.g., Please change Primary Care Physician information to Dr. Clayton 123 Main Street Albany NY 12205 (518) 555-1212).
- 4. Click **Save** button. **View List of Provider Requests To Change Child Data** page displays.

Important Information

Submitting the Data Change Request initiates workflow that creates a Task in the Municipality's **ChildChangeRequest Work Queue**. NYEIS Users assigned to the **ChildChangeRequest Work Queue** will check the request and make any necessary changes to the **Child Home Page**. The User who submitted the change request can view the Child Home Page to see the changes that have been applied.

Municipality Accepting Data Change Request

Users that are assigned to the **ChildChangeRequest Work Queue** can process change request tasks.

1. Click Inbox from the Navigation Bar. My Workspace page displays.

A Carly Manual Instance		O Home O Inbox	• My Calendar • My Cases • Search
navigation O Inbox O Reserved Tasks O Assigned Tasks O Deferred Tasks O Work Queues	My Workspace: Shortcuts Reserve Next Task Reserve Next Work Oueue Task Reserve Next Work Oueue Task Create Task Create Task		Q View Tasks Before Deadline
• Notifications	My Tasks Status		
recent items	Open 5		

2. Click **Work Queues** from the Navigation Bar. **My Work Queues** page displays.

Action	Name	Subscription Date
View Reserve Next Task	Albany_AtRiskFollowUp	10/15/2009 15:47
View Reserve Next Task	Albany_ChildChangeRequest	10/15/2009 15:47
View Reserve Next Task	Albany_ContractExpire	10/15/2009 15:47
View Reserve Next Task	Albany_EIOD	10/15/2009 15:47
View Reserve Next Task	Albany_FailedHearing	10/15/2009 15:47
View Reserve Next Task	Albany_FiscalManager	10/15/2009 15:47
View Reserve Next Task	Albany_FiscalStaff	10/15/2009 15:47
View Reserve Next Task	Albany_LateInvoiceWaivers	10/15/2009 15:47
View Reserve Next Task	Albany_MonitorInvoiceAging	10/15/2009 15:47
View Reserve Next Task	Albany_NewAtRisk	10/15/2009 15:47
View Reserve Next Task	Albany_NewCase	10/15/2009 15:47
View Reserve Next Task	Albany_ProviderFlag	10/15/2009 15:47
View Reserve Next Task	Albany_ProviderRestriction	10/15/2009 15:47
View Reserve Next Task	Albany_Referral	10/15/2009 15:47
View Reserve Next Task	Albany_ReviewVoucher	10/15/2009 15:47

3. Click **View** link from **Action** column next to the **ChildChangeRequest** work queue. **Work Queue Tasks** page displays.

Work Queue Ta	asks: Schenectady_C	ChildChangeRequest			?
Action	<u>Task ID</u>	Subject	<u>Priority</u>	<u>Status</u>	<u>Deadline</u>
Reserve	<u>11320</u>	Child Data Change Request Submitted for Jennifer Hudson		Open	

- 4. Click **Reserve** link from **Action** column for the Child's change request. **Reserve Task** page displays.
- 5. Type **Comments** (Optional).
- 6. Click **Reserve** button to reserve task and return to **Work Queue Tasks** page.

OR

Click **Reserve&View** button to display **Task Home** page.

7. Click Manage Child Data Change Request link from the Primary Action section. Manage Provider Request to Change Child Data page displays.

Manage Provider Request to Change	e Child Data: Jennifer Hudson - 2739		
	Save	Cancel	
Request Details			
Provider Name:	Schenectady Early Caregivers	State ID:	3328
NPI:	58488	Request Status:	Request Accepted 💙
Child Details			
	Child's Name:	Jennifer Hudson	
Request Details - Please be specific The Child's mother has an alternate ce	ll phone number of 518-999-0011.		
	Save	Cancel	

8. Choose **Request Accepted**, **Request Refused** or **Request Canceled** from **Request Status** drop down. Providers will not receive electronic notification; however, they will immediately see any changes made. *The Child change needs to be manually completed regardless of the status selected*.

- 9. Click Save button. User's Home Page displays.
- 10. If the request has been accepted, make the change to the Child's Home Page. Make changes

INSURANCE COVERAGE FROM THE CHILD HOME PAGE

Although authorized municipal users continue to have the ability to access and add/edit a child's commercial insurance information, it is the responsibility of the Service Coordinator to review with the family the insurance requirements in New York State Public Health and Insurance Law and collect and document insurance information in NYEIS. Service Coordinators must also update insurance information, as needed, but no less than every six months with review of the IFSP.

Creating Child Commercial Insurance Coverage

Important Information

While this feature is more commonly managed by the child's Service Coordinator, these same functions can also be performed by select Municipal Staff. The following information below can also be found in *Unit 10 – Municipal Administration*.

If the Child's plan is Medicaid Managed Care, this information still must be captured in NYEIS by adding the Managed Care as Commercial Insurance Coverage and selecting **Yes** in the field **Plan Medicaid Managed Care?** However, the User must first enter the Child's Medicaid information either by processing the CIN Results Task or by manually entering this information.

- 1. Search for the Child using the NYEIS search functionality. Desce Unit 1: Getting Started, *Searching* for search instructions and tips.
- 2. Click **Reference Number** link in the Search Results for appropriate Child. **Child Homepage** displays.

navigation	Child Homepage: Lila Rouse - 132			
		Edit R	egister Sibling	
Addresses	Child Name			
Alternative IDs		19-		
Alternative Names	First Name:		Middle Name:	
• Cases	Last Name:	Rouse	Suffix:	
 Communication Exceptions 	Contact			
• Financials		123 Main St		
Notes	Address:	Albany (Albany)	Phone Number:	518 333 4456
Phone Numbers		New York 12206		
Relationships	Child Information			
Tasks	Child's Referral Date:	2/14/2012	Child's Case Status:	
At-Risk Follow-Up	Date of Birth:	8/15/2010	Gender:	Female
Audit Log	Calculated Age of Child:	1 Years, 8 Months	Birth Last Name:	
Referrals	Ethnic Origin:	Not Hispanic or Latino	Child's Dominant Language:	
Change History	Child's Living Arrangement:		Municipality of Residence:	Albany
Insurance Coverage	Child's School District:		Caregiver's Name (If other than parent):	
• Surveys	Caregiver's Relationship:		Date of Death:	

3. Click **Insurance Coverage** from the Navigation Bar. **Commercial Insurance Coverage** page displays.

		New Commercial Coverage	New Medicaid Coverage Chec	K Medicaid Eligibility	
Coverage List					
Actions	Insurance Company	Policy Number	Effective From Date	Effective To Date	3rd Party Sequence
View Edit Prior Auth	Empire BCBS	483753894	1/1/2011	12/31/2011	1
Code 35 Information					
Municipality	Muni. of Fiscal Responsibility		Medicaid CIN	Placement Date	Removal Date
Subrogation Letter					
Actions Date Generat	ed	Document Name			
View 2/28/2012		SubrogationLetter Albany	v 02-28-2012.pdf		

Click New Commercial Coverage button. Search Insurance Provider page displays. Enter search criteria for desired Insurance Company and click Search button. See Unit 1: Getting Started, Searching for search instructions and tips.

🕏 Search Insu	ırance Provider Lila R	ouse - 132		?				
Search Criteria								
	NAIC Number:							
Insu	arance Provider Name:		Insurance Provider Registered Name:					
	City:		Address Line 1:					
Inclu	de Inactive Records?:							
Search Reset Cancel								
Search Results	;							
Action	NAIC Numbe	r Insurance P	rovider Name	Phone Number				

Click the **Select** link in the **Action** column of the Insurance Company to be added.

5. Create Commercial Insurance Coverage page displays. The following sections display: Commercial Insurance Details, Policy Holder Details, Policy Holder Address, Employer Details, Comments and Prior Authorization Notes. Fields requiring data entry are marked with an asterisk. A field can also be required based on logic that will not have an asterisk.

6. Navigate from field-to-field in **Create Commercial Insurance Coverage** page using **Tab** key to enter information. *Date fields must be formatted as mm/dd/yyyy format*.

Create Commercial Insurance Coverage: Lila Rouse - 132								
Save Save & New Cancel								
Commercial Insurance Details								
	Insurance Company Name:	BCBS						
	*Insurance Company Address:							
	Insurance Plan Name:	BCBS						
	*Insurance Sequence Number:							
	*Is Plan Regulated by NYS Law?:	~						
If not regulated by NYS Law o	r self funded, does parent give consent to bill?:	~						
	*Is Plan Child Health Plus?:	×						
	*Is Plan Medicaid Managed Care?:	~						
	Subrogation Notice Date Sent:	Ø						
	Create Subrogation Notice?:							
Policy Holder Details								
Policy Holder Name:		*Policy Number for Billing:						
Group Number:		Policyholder Relationship to Child:	×					
Child's ID Number:		Primary Care Provider Name:						
*Effective From Date:	Ø	Effective To Date:	Ø					
Policy Holder Date of Birth:	Ø	Policy Holder Gender:	×					
Policy Holder Phone Number :								

Commercial Insurance Details section:

- To select an Insurance Company Address, click Search & icon.
 Address List page displays all addresses associated with the company.
 Click Select link under Action column next to the correct address.
 Insurance Company address displays.
- Insurance Sequence Number is captured to direct NYEIS in which order claiming is to occur. For example, if a Child has two Commercial Insurance policies, one policy *must* be claimed to (primary or 1) before the other (secondary or 2). Commercial Insurance *must* always be claimed to first. When editing Third Party Insurance, it is important to remember to change the sequence as needed to ensure appropriate claiming.
- Plan Regulated by New York State field –select Yes if the Insurance Plan is regulated by NYS Law. If No is selected, Claims will not be sent unless the Parental Consent to Bill field is Yes.
- If the plan is not regulated by NYS law, and the parent has given consent to bill (they have been advised that payments for services could be applied towards annual and lifetime caps), select Yes in the If not regulated by NYS Law or self-funded, does parent give consent to bill? field. Parental consent only applies if Plan is not regulated by NYS.
- Is Plan Child Health Plus? and Is Plan Medicaid Managed Care? fields are required and defaulted to No.

Policy Holder Details section:

- ⇒ Policy Number for Billing, Group Number, Relationship to Policy Holder, and Effective Date From *must* always be entered.
- If Relationship to Policy Holder is not "Self", then the Policyholder's Name, Child's ID Number, Policy Holder Date of Birth, Policy Holder Gender, and Policy Holder Address *must* be entered.

Policy Holder Address section:

• Address *must* be entered when the If Relationship to Policy Holder field is not "Self".

Employer Details section:

If the insurance policy is through an employer, Employer Name,
 Employer Phone Number and Employer Address *must* be entered.

Comments section:

• Additional details can be captured on a Child's insurance coverage.

Prior Authorization Notes section:

- Notes on any known information regarding Prior Authorization (if it's needed, when it was requested, if it was approved or denied) can be entered. Prior Authorization Details are also captured for Child's Insurance Coverage in the Prior Authorization/Referral pages.
- 7. Click Search \leq icon to enter Policy Holder Address and Employer Address. Address Validation page displays.

Address	Validation			2						
Validate an entered address with USPS										
		Submit	Cancel							
	Address Line 1:		Address Line 2:							
	*City:		*State:	×						
	*County:	×	*Zip:							
	Census Tract:									
Submit Cancel										
Action	Formatted Addre	<u>ss Value</u>								

Use the **Tab** key to navigate from field-to-field to fill in information. *City*, *State*, *County* and *Zip* are required fields. *Census Tract* field will not be used at this time. Click **Submit** button. Validation of address takes place

immediately upon submission. The lower section of the page provides a list of available addresses. The first address listed in the results is the address that was manually entered. Select this address if the other addresses do not match from validation process. Click **Select** link under **Action** column. Address displays.

8. Click Save button. View Commercial Insurance Coverage page displays.



OR

Click Save & New button to add additional coverage.

Creating Child Medicaid Coverage

- 1. Search for the Child using the NYEIS search functionality. See Unit 1: Getting Started, *Searching* for search instructions and tips.
- 2. Click **Reference Number** link in the Search Results for appropriate Child. **Child Homepage** displays.

navigation	Child Homepage: Kevin Bondman -	500020		
• Home		Edit	egister Sibling	
• Addresses	Child Information			
• Alternative IDs				
Alternative Names	First Name:		Middle Name:	
• Cases	Last Name:	Bondman	Suffix:	
 Communication Exceptions 	Contact			
• Financials		ewr ert		
• Notes	Address:	Albany (Albany)	Phone Number:	518 333-0000
• Phone Numbers		New York 10001		
• Relationships	Child Information			
• Tasks	Child's Referral Date:	12/6/2010	Child's Case Status:	
• At-Risk Follow-Up	Date of Birth:	12/1/2010	Gender:	Male
• Audit Log	Calculated Age of Child:		Birth Last Name:	
• Referrals		Not Hispanic or Latino	Child's Dominant Language:	
Comographic Data Change History	Child's Living Arrangement:		Municipality of Residence:	Albany
• Insurance Coverage	Child's School District:		Caregiver's Name (If other than	
• Surveys			parent):	
	Caregiver's Relationship:		Date of Death:	
	Race			
	American Indian or Alaskan Native			
recent items	Family Information			
O Kevin Bondman -	Mother's First Name:	ااند	Mother's Last Name:	
500020	Mother's Date Of Birth:		Mother's Dominant Language:	

3. Click **Insurance Coverage** from the Navigation Bar. **Commercial Insurance Coverage** page displays.

Commercial Insurance Coverage: Kevin Bondman - 500020 (New Commercial Coverage) (New Medicaid Coverage) (Check Medicaid Eligibility)						
Coverage List						
Actions	Insurance Company	Policy Number	Effective From Date	Effective To Date	3rd Party Sequence	
View Edit Prior Auth	Aetna Health	59494943	10/1/2010		1	
Code 35 Information						
Municipality	Muni. of Fiscal Responsibility		Medicaid CIN	Placement Date	Removal Date	

4. Click **New Medicaid Coverage** button. **Create Medicaid Coverage** page displays with the following sections: **Medicaid Coverage Details** and **Comments**.

oes the Child Have Other	
Insurance?:	
Medicaid Type:	
Spend Down Date: 🧶	

- 5. Enter all known information. Medicaid CIN and Effective From Date and *must* be entered.
- 6. Click Save button. View Medicaid Coverage page displays.

OR

Click Save & New button to add additional coverage.

7. Click Close button. Commercial Insurance Coverage page displays.

Important Information

If a Child has Medicaid Managed Care, the Medicaid information needs to be recorded first as outlined in this section. Next, the Managed Care information MUST still be entered as Commercial Insurance Coverage.

Checking Medicaid Eligibility – (Currently inactive)

NYEIS automatically submits a request to Office of Temporary and Disability Assistance (OTDA) when an EIO/D is assigned. For children with Medicaid coverage, a CIN request is sent automatically every 6 months. For children with no Medicaid coverage, a CIN request is sent automatically every month. Users are informed of system-initiated CIN search results via a Task that is created in the **<Municipality>_MedicaidCIN** work queue.

A user can also initiate a check for Medicaid CIN information at any time. Search results are communicated via a Task that is created in the user's **Assigned Tasks** inbox. See *Viewing/Selecting Medicaid Eligibility Request Results* for more information about viewing the search results when the search is user initiated and system initiated.

Check Medicaid Eligibility button generates an electronic request to the NYS Office of Temporary and Disability Assistance (OTDA) to check if the Child has or had Medicaid Coverage. If the Child has or had Medicaid, the request in return provides the Child's Medicaid CIN and effective from/to dates to the initiator of the request.

- 1. Search for the Child using the NYEIS search functionality. See Unit 1: Getting Started, *Searching* for search instructions and tips.
- 2. Click **Reference Number** link in the Search Results for appropriate Child. **Child Homepage** displays.

navigation	Child Homepage: Kevin Bondman -	500020		
• Home		Edit	egister Sibling	
Addresses			•	
Alternative IDs	Child Information	-		-
 Alternative Names 	First Name:		Middle Name:	
• Cases	Last Name:	Bondman	Suffix:	
 Communication Exceptions 	Contact			
 Financials 		ewr ert		
Notes	Address:	Albany (Albany)	Phone Number:	518 333-0000
• Phone Numbers		New York 10001		
• Relationships	Child Information			
O Tasks	Child's Referral Date:	12/6/2010	Child's Case Status:	
At-Risk Follow-Up	Date of Birth:		Gender:	Male
Audit Log	Calculated Age of Child:	0 Years, 0 Months	Birth Last Name:	
• Referrals		Not Hispanic or Latino	Child's Dominant Language:	
Change History	Child's Living Arrangement:		Municipality of Residence:	Alhany
Insurance Coverage			Caregiver's Name (If other than	
• Insurance coverage	Child's School District:		parent):	
U Surveys	Caregiver's Relationship:		Date of Death:	
	Race			
	American Indian or Alaskan Native			
recent items	Family Information			
O Kevin Bondman -	Mother's First Name:	Jill	Mother's Last Name:	
500020	Mother's Date Of Birth:		Mother's Dominant Language:	

3. Click **Insurance Coverage** from the Navigation Bar. **Commercial Insurance Coverage** page displays.

Commercial Insurance Coverage: Kevin Bondman - 500020 New Commercial Coverage) (New Medicaid Coverage) (Check Medicaid Eligibility)						
Coverage List						
Actions	Insurance Company	Policy Number	Effective From Date	Effective To Date	3rd Party Sequence	
View Edit Prior Auth	Aetna Health	59494943	10/1/2010		1	
Code 35 Information						
Municipality	Muni. of Fiscal Responsibility		Medicaid CIN	Placement Date	Removal Date	

4. Click **Check Medicaid Eligibility** button. **Submit Medicaid CIN Request** page displays with the message *Are you sure you want to submit a Medicaid CIN Request*?

- 5. Click **Yes** button. The System creates a request for Medicaid Eligibility to OTDA. **Commercial Insurance Coverage** page displays. The request is sent electronically. The response will not be immediate; OTDA will check if the Child requested has a CIN. If the Child does have a CIN, a response record will be returned. The User that initiated the request will receive a task to validate the eligibility response for the Child.
- 6. Click **Home** from the Menu Bar. User Home Page displays.

Important Information

This feature has been temporarily disabled and is not currently operational

Viewing/Selecting Medicaid Eligibility Request Results

The system automatically searches the Office of Temporary and Disability Assistance (OTDA) Welfare Management System database when the child's Integrated Case is opened. If Medicaid Coverage is found, a task is created to the Municipality's MedicaidCIN work queue that directs the user (such as the EIO/D) to view and select the Medicaid Coverage results, and add it to the Child's Insurance Coverage.

The Medicaid Coverage results will contain the Child's name and Date of Birth. This is to help the user validate that this is the correct Medicaid CIN for the Child. The user will review the results and select if any Medicaid Coverage should be added.

- 1. Log in to NYEIS. User Home Page displays.
- 2. When the Medicaid CIN requests is system initiated, click **Inbox** on the Navigation Bar. Click the **Work Queues** button. The **My Work Queues** page displays. Select the **View** link next to the <Municipality>_Medicaid CIN work queue.

OR

When the Medicaid CIN requests is user initiated, click **Inbox** on the Navigation Bar. Click the **Assigned Tasks Inbox** button.

Navigate to the task *The CIN results have been received for* <child name>.
 Select the **Reserve** link under the **Action** column. Click the **Reserve &** View button to reserve the task. The **Task Home** page displays.

Task Home: ReviewCINResu	lts - 2112		?
Manage			
Add Comment	Manager Reserve	K Forward	🖹 <u>Restart</u>
a ^X <u>Close</u>	🖍 <u>Un-Reserve</u>	🖹 <u>Defer</u>	
Subject			
The CIN results have been rec	eived for Damarion Dickson		
Details			
Task ID:	2112	Status:	Open
Priority:		Deadline:	
Reserved By:		Last Assigned:	12/10/2009 11:20
Time Worked:	00:00 [Change]		
Primary Action		Supporting Information	
Review OTDA CIN Results			

4. Click **Review OTDA CIN Results** link under the **Primary Action** Column. **Medicaid Eligibility Results List** page displays. Results of the request are listed in the **Results** section.

		O Home O Inbox	• My Calendar	O ^{My Cases} O	Search O About O Log Out
Medicaid Eligibility Re	esults List				
Child Details					
		Name:	Jack Smith		
		Date Of Birth:	7/27/2007		
		Medicaid CIN:	EC999U		
Coverage List					
Insurance Company	Policy Number	Effective From I	Date Effe	<u>ctive To Date</u>	3rd Party Sequence
Medicaid		8/5/2009			95
Results					
First Name	First Name	Date of Birth	Medicaid CIN	<u>Eligible F</u>	rom Eligible To
Smith	Jack	7/27/2007	EC999U	12/1/20	09 2/28/2010
	(Register Comp	lete Registrati	on	

5. The user should sort by the **Medicaid CIN** column in the **Results** cluster first as there may be more than one Child returned in the results depending on the search criteria that was entered. Because there may be more than one Medicaid eligibility period, the User should select the checkbox next to each eligibility period <u>that does not already exist</u> for the Child in NYEIS. Click the **Register** button to add the coverage to the Coverage List.

Medicaid Eligibility Result	ts List				7
Child Details					
		Name:	Jack Smith		
		Date Of Birth:	7/27/2007		
		Medicaid CIN:	EC999U		
Coverage List					
Insurance Company	Policy Number	Effective From Date	Effective	To Date 3	Brd Party Sequence
Medicaid		12/1/2009	2/28/20	10	95
Medicaid		8/5/2009			95
Results					
First Name	First Name	Date of Birth	Medicaid CIN	Eligible From	<u>Eligible To</u>
		(Register) (Com	lete Registration		

6. Click the **Complete Registration** button to end the task. **Complete OTDA Results Review** page displays. Click **Yes** button to close the task or click the **No** button to continue with the task.



Important Information

Existing CIN results tasks can be used to add/update Medicaid policy information; however, for new Medicaid CIN results, this feature has been temporarily disabled and is not currently operational.

If, when attempting to add CIN results for a child, you receive a message that the CIN is already in use, that means another child registered in NYEIS has been assigned the CIN you are trying to add. Please call the NYEIS Help Desk for assistance in identifying and resolving the conflict.

Viewing Child Insurance Coverage

- 1. Search for the Child using the NYEIS search functionality. See Unit 1: Getting Started, *Searching* for search instructions and tips.
- 2. Click **Reference Number** link in the Search Results for appropriate Child. **Child Homepage** displays.

navigation • Home	Child Homepage: Kevin Bondman		agister Sibling	
• Addresses		Eun	grater subing	
• Alternative IDs	Child Information			
• Alternative Names	First Name:	Kevin	Middle Name:	
O Cases	Last Name:	Bondman	Suffix:	
 Communication Exceptions 	Contact			
• Financials		ewr ert		
• Notes	Address:	Albany (Albany) New York 10001	Phone Number:	518 333-0000
• Phone Numbers		New fork 10001		
• Relationships	Child Information			
• Tasks	Child's Referral Date:	12/6/2010	Child's Case Status:	
• At-Risk Follow-Up	Date of Birth:	12/1/2010	Gender:	Male
• Audit Log	Calculated Age of Child:	0 Years, 0 Months	Birth Last Name:	
• Referrals	Ethnic Origin:	Not Hispanic or Latino	Child's Dominant Language:	
O Demographic Data change History	Child's Living Arrangement:		Municipality of Residence:	Albany
• Insurance Coverage	Child's School District:		Caregiver's Name (If other than parent):	
	Caregiver's Relationship:		Date of Death:	
	Race			
	American Indian or Alaskan Native			
recent items	Family Information			
O Kevin Bondman -	Mother's First Name:	Jill	Mother's Last Name:	
500020	Mother's Date Of Birth:		Mother's Dominant Language:	

3. Click **Insurance Coverage** from the Navigation Bar. **Commercial Insurance Coverage** page displays.

Commercial Insurance Coverage: Kevin Bondman - 500020 New Commercial Coverage New Medicaid Coverage Check Medicaid Eligibility						
Coverage List						
Actions	Insurance Company	Policy Number	Effective From Date	Effective To Date	3rd Party Sequence	
View Edit Prior Auth	Aetna Health	59494943	10/1/2010		1	
Code 35 Informatior	1					
Municipality	Muni. of Fiscal Responsibility		Medicaid CIN	Placement Date	<u>Removal Date</u>	

- Click View link under Action column for specific Insurance. If a Commercial Insurance is selected, the View Commercial Insurance Coverage page displays. If Medicaid Coverage is selected, View Medicaid Coverage page displays.
- 5. Click **Close** button when finished viewing information. **Commercial Insurance Coverage** page displays.
- 6. Click Home from the Navigation Bar. Child Homepage displays.

Editing Child Insurance Coverage

- 1. Search for the Child using the NYEIS search functionality. See Unit 1: Getting Started, *Searching* for search instructions and tips.
- 2. Click **Reference Number** link in the Search Results for appropriate Child. **Child Homepage** displays.

navigation	Child Homepage: Kevin Bondman -	500020		
		Edit	egister Sibling	
Addresses				
Alternative IDs	Child Information	-		
Alternative Names	First Name:		Middle Name:	
• Cases	Last Name:	Bondman	Suffix:	
 Communication Exceptions 	Contact			
Financials		ewr ert		
Notes	Address:	Albany (Albany) New York 10001	Phone Number:	518 333-0000
Phone Numbers		New FOR 10001		
Relationships	Child Information			
● Tasks	Child's Referral Date:	12/6/2010	Child's Case Status:	
At-Risk Follow-Up	Date of Birth:	12/1/2010	Gender:	Male
Audit Log	Calculated Age of Child:		Birth Last Name:	
Referrals		Not Hispanic or Latino	Child's Dominant Language:	
Demographic Data Change History	Child's Living Arrangement:		Municipality of Residence:	Albany
• Insurance Coverage	Child's School District:		Caregiver's Name (If other than parent):	,
0.000000	Caregiver's Relationship:		Date of Death:	
	Race			
	American Indian or Alaskan Native			
recent items	Family Information			
D Kevin Bondman -	Mother's First Name:	Jill	Mother's Last Name:	
500020	Mother's Date Of Birth:		Mother's Dominant Language:	

3. Click **Insurance Coverage** from the Navigation Bar. **Commercial Insurance Coverage** page displays.

Commercial Insurance Coverage: Kevin Bondman - 500020 New Commercial Coverage) New Medicaid Coverage) Check Medicaid Eligibility								
Coverage List								
Actions	Insurance Company	Policy Number	Effective From Date	Effective To Date	3rd Party Sequence			
View Edit Prior Auth	Aetna Health	59494943	10/1/2010		1			
Code 35 Information	Code 35 Information							
<u>Municipality</u>	Muni. of Fiscal Responsibility		Medicaid CIN	<u>Placement Date</u>	<u>Removal Date</u>			

4. Click Edit link under Action column for specific Insurance to edit.

If Commercial Insurance coverage is selected, the **Modify Child Commercial Insurance Coverage** page displays. Apply necessary changes. Click **Save** button. **Commercial Insurance Coverage** page displays.

OR

If Medicaid Coverage is selected, the **Modify Medicaid Coverage** page displays. Apply necessary changes. Click **Save** button. **Commercial Insurance Coverage** page displays.

5. Click Home from the Navigation Bar. Child Homepage displays.

Important Information

If claiming to the insurance provider has occurred, it is suggested that the existing insurance record be end dated, and the changes made in a new insurance record for the child.

Deleting Child Insurance Coverage

- 1. Search for the Child using the NYEIS search functionality. See Unit 1: Getting Started, *Searching* for search instructions and tips.
- 2. Click **Reference Number** link in the Search Results for appropriate Child. **Child Homepage** displays.

• Home	Child Homepage: Kevin Bondman -			
Addresses		Edit Re	egister Sibling	
Alternative IDs	Child Information			
Alternative Names	First Name:	Kevin	Middle Name:	
• Cases	Last Name:	Bondman	Suffix:	
 Communication Exceptions 	Contact			
Financials		ewr ert		
Notes	Address:	Albany (Albany) New York 10001	Phone Number:	518 333-0000
Phone Numbers		New York 10001		
Relationships	Child Information			
● Tasks	Child's Referral Date:	12/6/2010	Child's Case Status:	
At-Risk Follow-Up	Date of Birth:	12/1/2010	Gender:	Male
Audit Log	Calculated Age of Child:	0 Years, 0 Months	Birth Last Name:	
• Referrals	Ethnic Origin:	Not Hispanic or Latino	Child's Dominant Language:	
 Demographic Data enange History 	Child's Living Arrangement:		Municipality of Residence:	Albany
Insurance Coverage	Child's School District:		Caregiver's Name (If other than parent):	
0 Summer	Caregiver's Relationship:		Date of Death:	
	Race			
	American Indian or Alaskan Native			
recent items	Family Information			
O Kevin Bondman -	Mother's First Name:	llic	Mother's Last Name:	
	Mother's Date Of Birth:		Mother's Dominant Language:	

3. Click **Insurance Coverage** from the Navigation Bar. **Commercial Insurance Coverage** page displays.

Commercial Insuran	ce Coverage: Kevin Bondm New Commercia		Medicaid Coverage) Che	ck Medicaid Eligibility		1
Coverage List						
Actions	Insurance Company	Policy Number	Effective From Date	Effective To Date	3rd Party Sequence	
View Edit Prior Auth	Aetna Health	59494943	10/1/2010		1	
Code 35 Information						
<u>Municipality</u>	Muni. of Fiscal Responsibility		Medicaid CIN	Placement Date	Removal Date	

4. Click **View** link under **Action** column for specific Insurance. If a Commercial Insurance is selected, the **View Commercial Insurance**

Coverage page displays. If Medicaid Coverage is selected, **View Medicaid Coverage** page displays.

- Click Delete button. Delete Medicaid/Commercial Insurance Policy page displays the message Are you sure you want to delete this policy and all related information (prior authorizations, service not covered, PCDP Referrals)? Click Yes button. Commercial Insurance Coverage page displays.
- 6. Click Home from the Navigation Bar. Child Homepage displays.

Important Information

If claiming to the insurance provider has occurred, it is suggested that the existing insurance record be end dated, and the changes made in a new insurance record for the child.

Creating Services Not Covered

Some EI services will not be covered at all by certain insurance companies or only a specific number of visits will be covered before the maximum benefit coverage has been reached. In these cases, a User can create a Service Not Covered in NYEIS. These services will not be claimed for payment to the insurance company.

Commercial Insurance Coverage

1. Click **View** link under **Action** column for Commercial Insurance Coverage. **View Commercial Insurance Coverage** page displays.

navigation Observation	View Commercial Insurance Covera	ge: Kevin Bondman - 500020 Edit Del	ete Close		
O Services Not Covered	commercial Insurance Details				
Authorizationsy Kererral	Insurance Company Name:	Aetna Health	Insurance Sequence Number:	1	
	Insurance Company Address:	500 Broadway Albany (Albany) New York 12200	Insurance Type:	Commercial	
	Insurance Plan Name:	Aetna Health	Claim Filing:	Commercial Insurance	
recent items	Plan Regulated by New York State:	Yes	Subrogation Notice Date Sent:	12/15/2010	
• Kevin Bondman -	Is Plan Child Health Plus?:	No	Is Plan Medicaid Managed Care?:	No	
500020	Parental Consent To Bill:				
	Policy Holder Details				
	Policy Holder Name:	June Bondman	Policy Holder ID Number:		

2. Click Services Not Covered from the Navigation Bar. Insurance Services Not Covered page displays.

Insurance Services Not Covered Kevin Bondman - 500020					2	
Aetna Health - 30	00001					
New						
Action	Service Type	Method	<u>QP</u>	From Date	<u>To Date</u>	

3. Click New button. Create Insurance Service Not Covered page displays. *Fields requiring data entry are marked with an asterisk. A field can also be* required based on logic that will not have an asterisk. Date fields must be formatted as mm/dd/yyyy format. Start Date is required.

Create Insurance Service Not	Covered Kevin Bondman - 500020 ?
	Save Save & New Cancel
Service Details	
Service Type:	▼
Method:	•
QP:	
Reason Not Covered:	
*Start Date:	
End Date:	
	Save Save & New Cancel

- 4. Enter data as appropriate
- 5. Click Save button. Insurance Services Not Covered page displays.
- 6. Click Save & New button to add additional Services Not Covered.

Important Information

Services Not Covered is corrected by entering the same date in the Effective From and To Date fields.

The services of Service Coordination, Special Instruction, Respite and Transportation do not need to be entered into NYEIS as "Services Not Covered".

Viewing Services Not Covered

Commercial Insurance Coverage

1. Click **View** link under **Action** column for Commercial Insurance Coverage. **View Commercial Insurance Coverage** page displays.

navigation	View Commercial Insurance Coverag	ge: Kevin Bondman - 500020		
Services Not Coverage		E dit Dele	Close	
Prior	commercial Insurance Details			
Authorizations, Referral	Insurance Company Name:	Aetna Health	Insurance Sequence Number:	1
	Insurance Company Address:	500 Broadway Albany (Albany) New York 12200	Insurance Type:	Commercial
	Insurance Plan Name:	Aetna Health	Claim Filing:	Commercial Insurance
recent items	Plan Regulated by New York State:	Yes	Subrogation Notice Date Sent:	12/15/2010
• Kevin Bondman -	Is Plan Child Health Plus?:	No	Is Plan Medicaid Managed Care?:	No
500020	Parental Consent To Bill:			
	Policy Holder Details			
	Policy Holder Name:	June Bondman	Policy Holder ID Number:	59494943
	o			L

2. Click Services Not Covered from the Navigation Bar. Insurance Services Not Covered page displays.

Insurance Services Not Covered Kevin Bondman - 500020					
Aetna Health - 3	00001				
New					
Action	Service Type	Method	<u>QP</u>	From Date	To Date
View	Family Counseling			10/1/2010	

3. Click View link under Action column. View Insurance Service Not Covered page displays.

			Edit	Close			
ervice Details							
	Service Type:	Family Counseling			Method:		
	QP:				Reason Not Covered:	Not a Covered Service	
	Start Date:	10/1/2010			End Date:		

4. Click Close button. Insurance Services Not Covered page displays.

Editing Services Not Covered

Commercial Insurance Coverage

1. Click **View** link under **Action** column for Commercial Insurance Coverage. **View Commercial Insurance Coverage** page displays.

navigation	View Commercial Insurance Covera	ge: Kevin Bondman - 500020		
• Services Not Coverage		E dit Del	ete Close	
Prior	commercial Insurance Details			
Authorizations / Kererral	Insurance Company Name:	Aetna Health	Insurance Sequence Number:	1
	Insurance Company Address:	500 Broadway Albany (Albany) New York 12200	Insurance Type:	Commercial
	Insurance Plan Name:	Aetna Health	Claim Filing:	Commercial Insurance
recent items	Plan Regulated by New York State:	Yes	Subrogation Notice Date Sent:	12/15/2010
• Kevin Bondman -	Is Plan Child Health Plus?:	No	Is Plan Medicaid Managed Care?:	No
	Parental Consent To Bill:			
	Policy Holder Details			
	Policy Holder Name:	June Bondman	Policy Holder ID Number:	

2. Click Services Not Covered from the Navigation Bar. Insurance Services Not Covered page displays.

Insurance Services Not Covered Kevin Bondman - 500020					
Aetna Health - 3	00001				
New					
Action	Service Type	Method	<u>OP</u>	From Date	To Date
View	Family Counseling			10/1/2010	

3. Click View link under Action column. View Insurance Service Not Covered page displays.

			Edit	Close		
ervice Details						
	Service Type:	Family Counseling			Method:	
	QP:				Reason Not Covered:	Not a Covered Service
	Start Date:	10/1/2010			End Date:	

4. Click **Edit** button. **Modify Insurance Service Not Covered** page displays. *Fields requiring data entry are marked with an asterisk. A field can also be required based on logic that will not have an asterisk.*

Modify Insurance Service Not	Covered Kevin Bondman - 500020
Service Details	
Service Type:	Family Counseling
Method:	•
QP:	•
Reason Not Covered:	Not a Covered Service 💌
*Start Date:	10/1/2010
End Date:	
	Save

- 5. Apply necessary changes.
- 6. Click Save button. View Insurance Service Not Covered page displays.
- 7. Click Close button. Insurance Services Not Covered page displays.

Creating Prior Authorization/Referrals

The Municipality should enter any information into NYEIS regarding known requirements to ensure coverage of the service (e.g., an insurance company requires prior authorization, and/or a script for a service type or a Referral before agreeing to cover). When this information is entered as required by the insurance company to ensure coverage, in order for NYEIS to begin billing for the service, the required Prior Authorization/Referral and/or Script must be documented as received in NYEIS.

<u>Commercial Insurance Coverage – Prior Authorizations/Referral</u> <u>Required</u>

- 1. Search for the Child using the NYEIS search functionality. See Unit 1: Getting Started, *Searching* for search instructions and tips.
- 2. Click **Reference Number** link in the Search Results for appropriate Child. **Child Homepage** displays.

navigation	Child Homepage: Kevin Bondman -	500020		
		Edit	gister Sibling	
• Addresses			<u>,,,</u>)	
Alternative IDs	Child Information			
Alternative Names	First Name:	Kevin	Middle Name:	
• Cases	Last Name:	Bondman	Suffix:	
 Communication Exceptions 	Contact			
• Financials		ewr ert		
Notes	Address:	Albany (Albany)	Phone Number:	518 333-0000
• Phone Numbers		New York 10001		
Relationships	Child Information			
O Tasks	Child's Referral Date:	12/6/2010	Child's Case Status:	
• At-Risk Follow-Up	Date of Birth:		Gender:	Male
Audit Log	Calculated Age of Child:		Birth Last Name:	
• Referrals		Not Hispanic or Latino	Child's Dominant Language:	
Demographic Data	Child's Living Arrangement:	Not hispanic of Latino	Municipality of Residence:	Albany
cnange History	Child's Living Arrangement.		Caregiver's Name (If other than	Albarry
• Insurance Coverage	Child's School District:		caregiver's Name (11 other than parent):	
	Caregiver's Relationship:		Date of Death:	
	Race			
	American Indian or Alaskan Native			
recent items	Family Information			
D Kevin Bondman -	Mother's First Name:	Jill	Mother's Last Name:	
500020	Mother's Date Of Birth:		Mother's Dominant Language:	

3. Click **Insurance Coverage** from the Navigation Bar. **Commercial Insurance Coverage** page displays.

Commercial Insuran	<mark>ce Coverage:</mark> Kevin Bondm New Commerci		v Medicaid Coverage) (Che	ck Medicaid Eligibility		9
Coverage List						
Actions	Insurance Company	Policy Number	Effective From Date	Effective To Date	<u> 3rd Party Sequence</u>	
View Edit Prior Auth	Aetna Health	59494943	10/1/2010		1	
Code 35 Information	า					
<u>Municipality</u>	Muni. of Fiscal Responsibility		Medicaid CIN	<u>Placement Date</u>	<u>Removal Date</u>	

4. Click **View** link under **Action** column for Commercial Insurance Coverage. **View Commercial Insurance Coverage** page displays.

	navigation	View Commercial Insurance Covera	ge: Kevin Bondma	n - 500020		
	 Insurance Coverage Services Not Covered 			E dit Dele	ete Close	
-	O Prior	Commercial Insurance Details				
C	Authorizations/Referral	Insurance Company Name:	Aetna Health		Insurance Sequence Number:	1
		Insurance Company Address:	500 Broadway Albany (Albany) New York 12200		Insurance Type:	Commercial
		Insurance Plan Name:	Aetna Health		Claim Filing:	Commercial Insurance
	recent items	Plan Regulated by New York State:	Yes		Subrogation Notice Date Sent:	12/15/2010
	• Kevin Bondman -	Is Plan Child Health Plus?:	No		Is Plan Medicaid Managed Care?:	No
		Parental Consent To Bill:				
		Policy Holder Details				
		Policy Holder Name:	June Bondman		Policy Holder ID Number:	

5. Click **Prior Authorizations/Referral** from the Navigation Bar. **Prior Authorizations/Referrals** page displays.

Aotob Hobli	h - 300001				
	.n - 300001				
New					
Service De	etails				
Action	Service T	ype <u>Method</u>	QP Prior Authorization Required	PCP Referral Required	Script Required
New Prior	Authorization Creat	e 278 Request			
Prior Auth	orizations				
Action	PA Number	SA Number	Insurance Company Name	Status PA S	ervice Type
New Prima	ry Care Physician Ref	erral			
Primary C	are Physician Referra	als			
Action	PCP Referral Num	bor		SA Number	

6. Click **New** button. **Create PA / PCP Referral / Script Required** page displays.

Create PA / PCP Referral / Script Re	quired Kevin Bondman		?
Service Details			
Service Type:	✓	Method:	×
QP:	~	Prior Authorization Required:	
Primary Care Physician Referral Required:		Script Required:	
	Save Save 8	New Cancel	

- 7. Enter data as appropriate.
- 8. Click Save button. Prior Authorizations/Referrals page displays.

OR

Click **Save & New** button to enter additional PA / PCP Referral / Script Required.

Commercial Insurance Coverage – Create Prior Authorization

If the need for a Prior Authorization for a service has been entered into NYEIS and a Service Authorization is created that requires a request for Prior Authorization from Commercial Insurance, the EIO/D receives notification through a task to request Prior Authorization for the Child and may forward this task to the service coordinator to document the prior authorization as received.

Important Information

The Prior Authorization workflow task, called Prior Authorization, is directed to the EIO/D. *See* Appendix H for further information about the workflow.

- 1. Search for the Child using the NYEIS search functionality. See Unit 1: Getting Started, *Searching* for search instructions and tips.
- 2. Click **Reference Number** link in the Search Results for appropriate Child. **Child Homepage** displays.

navigation	Child Homepage: Kevin Bondman -	500020		
		Edit Re	gister Sibling	
• Addresses	Child Information			
Alternative IDs	First Name:	Kerrie	Middle Name:	
• Alternative Names				
• Cases	Last Name:	Bondman	Suffix:	
 Communication Exceptions 	Contact			
 Financials 		ewr ert		
• Notes	Address:	Albany (Albany)	Phone Number:	518 333-0000
• Phone Numbers		New York 10001		
 Relationships 	Child Information			
• Tasks	Child's Referral Date:	12/6/2010	Child's Case Status:	
 At-Risk Follow-Up 	Date of Birth:	12/1/2010	Gender:	Male
Audit Log	Calculated Age of Child:		Birth Last Name:	
• Referrals		Not Hispanic or Latino	Child's Dominant Language:	
 Demographic Data change History 	Child's Living Arrangement:		Municipality of Residence:	Albany
• Insurance Coverage	Child's School District:		Caregiver's Name (If other than	
U sources	1		parent):	
	Caregiver's Relationship:		Date of Death:	
	Race			
	American Indian or Alaskan Native			
recent items	Family Information			
O Kevin Bondman -	Mother's First Name:	lill	Mother's Last Name:	
500020	Mother's Date Of Birth:		Mother's Dominant Language:	

3. Click **Insurance Coverage** from the Navigation Bar. **Commercial Insurance Coverage** page displays.

	New Commercia	al Coverage New	Medicaid Coverage Che	ck Medicaid Eligibility	
Coverage List					
Actions	Insurance Company	Policy Number	Effective From Date	Effective To Date	3rd Party Sequence
View Edit Prior Auth	Aetna Health	59494943	10/1/2010		1
Code 35 Informatior	ı				
Municipality	Muni. of Fiscal Responsibility		Medicaid CIN	Placement Date	Removal Date

4. Click **View** link under **Action** column for Commercial Insurance Coverage. **View Commercial Insurance Coverage** page displays.

 Insurance Coverage Services Not Covered 		E dit E	elete Close	
• Prior	Commercial Insurance Details			
Authorizations/Referral	Insurance Company Name:	Aetna Health	Insurance Sequence Number:	1
	Insurance Company Address:	500 Broadway Albany (Albany) New York 12200	Insurance Type:	Commercial
	Insurance Plan Name:	Aetna Health	Claim Filing:	Commercial Insurance
recent items	Plan Regulated by New York State:	Yes	Subrogation Notice Date Sent:	12/15/2010
• Kevin Bondman -	Is Plan Child Health Plus?:	No	Is Plan Medicaid Managed Care?:	No
	Parental Consent To Bill:			

5. Click **Prior Authorizations/Referral** from the Navigation Bar. **Prior Authorizations/Referrals** page displays.

Aetna Health - 3I		Kevin Bondman - 3					
New							
Service Details							
Action	<u>Service</u> Type	Method		<u>QP</u>	Prior Authorization Required	PCP Referral Required	<u>Script</u> <u>Required</u>
<u>View</u> Edit	ATD	Basic Group Dev less)	elopmental with 1:1 Aide (59 min or		Yes	Yes	Yes
New Prior Autho	rization Create	278 Request					
Prior Authoriza	tions						
Action <u>F</u>	PA Number	SA Number	Insurance Company Name		<u>Status</u>	PA Service Type	<u>e</u>
New Primary Ca	re Physician Refer	ral					
Primary Care Pl	hysician Referral	s					
Action P	PCP Referral Numbe	ər			SA Number		

6. Click **New Prior Authorization** button. **Create Prior Authorization** page displays. *Fields requiring data entry are marked with an asterisk. A field can also be required based on logic that will not have an asterisk. Date fields must be formatted as mm/dd/yyyy format.*

	Save Save &	New Cancel	
Authorization Number:		Status:	
*Start Date:	<i>(</i>)	*Service Authorization Number:	
norization Certification Type:	~	*End Date:	()
r of Authorized Visits: 0		Related Prior Authorization Number:	
Service Type:		~	
Delay Reason:			~
Denial Reason:		~	

Prior Authorization Number *must* be entered after the request has been made and the Authorization Number is issued. A Municipality may not have this information while initially entering data in this page.

To select a **Service Authorization Number**, click **Search** \leq icon. **Select Service Authorization Number** page displays. Click **Select** link under **Action** column for correct Service Authorization

Prior Authorization Certification Type field indicates if the Prior Authorization request is **Initial**, **Renewal** or **Revised**.

Related Prior Authorization Number field captures any previously issued Authorization Number that may be useful when requesting additional authorization. **Number of Authorized Visits** field should be used to capture the total number of visits authorized by Commercial Insurance, not the total number of authorized visits on the Service Authorization.

Important Information

- If a prior authorization is submitted and denied, the service should be recorded as a "service not covered". Q See Services Not Covered for further information.
- User subscribed to the Muni_FiscalManager work queue will receive a Notification when the number of Authorized Visits minus the number of claimed visits reaches 3.

Delay Reason field captures the reason there was a delay in processing by Commercial Insurance.

Denial Reason field captures the denial if the Prior Authorization request is denied.

Important Information

If a Prior Authorization is required and submitted for and then denied, the service should then be entered under 'Services Not Covered".

Click Save button. Prior Authorizations/Referrals page displays.

OR

Click Save & New button to enter additional Prior Authorizations.

Commercial Insurance Coverage – Create 278 Request

Important Information

This feature has been temporarily disabled and is not currently operational.

<u>Commercial Insurance Coverage – New Primary Care Physician</u> <u>Referral</u>

Once a service has been agreed to as appropriate for a child/family and the resulting Service Authorization is issued, the Municipality should enter any information into NYEIS regarding specific requirements to ensure coverage of services (e.g., an insurance company requires prior authorization or a Referral before they will agree to cover a service).

If the need for a New Primary Care Physician Referral for a service has been entered into NYEIS and a Service Authorization is created that requires a request for a Primary Care Physician Referral, the child's Service Coordinator receives notification through a Task to request PCP Referral for the Child.

Important Information

The Primary Care Physician Referral workflow task, called PCP Referral, is directed to the child's Service Coordinator. *See* **Appendix H** for further information about the workflow.

- 1. Search for the Child using the NYEIS search functionality. See Unit 1: Getting Started, *Searching* for search instructions and tips.
- 2. Click **Reference Number** link in the Search Results for appropriate Child. **Child Homepage** displays.

navigation	Child Homepage: Kevin Bondman -	500020		
• Home • Addresses			egister Sibling	
Alternative IDs	Child Information			
• Alternative Names	First Name:	Kevin	Middle Name:	
• Cases	Last Name:	Bondman	Suffix:	
 Communication Exceptions 	Contact			
• Financials		ewr ert		
• Notes	Address:	Albany (Albany) New York 10001	Phone Number:	518 333-0000
• Phone Numbers		New York 10001		
 Relationships 	Child Information			
• Tasks	Child's Referral Date:	12/6/2010	Child's Case Status:	
• At-Risk Follow-Up	Date of Birth:	12/1/2010	Gender:	Male
• Audit Log	Calculated Age of Child:	0 Years, 0 Months	Birth Last Name:	
• Referrals	Ethnic Origin:	Not Hispanic or Latino	Child's Dominant Language:	
Demographic Data change History	Child's Living Arrangement:		Municipality of Residence:	Albany
O Insurance Coverage	Child's School District:		Caregiver's Name (If other than parent):	
0 34	Caregiver's Relationship:		Date of Death:	
	Race			
	American Indian or Alaskan Native			
recent items	Family Information			
O Kevin Bondman -	Mother's First Name:	llic	Mother's Last Name:	
500020	Mother's Date Of Birth:		Mother's Dominant Language:	

3. Click **Insurance Coverage** from the Navigation Bar. **Commercial Insurance Coverage** page displays.

Coverage List					
Actions	Insurance Company	Policy Number	Effective From Date	Effective To Date	3rd Party Sequence
View Edit Prior Auth	Community Blue	101018	1/1/2009	12/31/2009	1
View Edit Prior Auth	Medicaid		1/1/2009	12/31/2009	95

4. Click **View** link under **Action** column for Commercial Insurance Coverage. **View Commercial Insurance Coverage** page displays.

		Edit Del	ete Close	
Commercial Insurance Details				
Insurance Company Name:	Aetna Health		Insurance Sequence Number:	1
Insurance Company Address:	500 Broadway Albany (Albany) New York 12200		Insurance Type:	Commercial
Insurance Plan Name:	Aetna Health		Claim Filing:	Commercial Insurance
Plan Regulated by New York State:	Yes		Subrogation Notice Date Sent:	12/15/2010
Is Plan Child Health Plus?:	No		Is Plan Medicaid Managed Care?:	No
Parental Consent To Bill:				
Policy Holder Details				
Policy Holder Name:	June Bondman		Policy Holder ID Number:	59494943
	Insurance Company Name: Insurance Company Address: Insurance Plan Name: Plan Regulated by New York State: Is Plan Child Health Plus?; Parental Consent To Bill: Policy Holder Details	Insurance Company Name: Aetna Health SOB Broadway Insurance Company Address: Albany (Albany) New York 12200 Insurance Plan Name: Aetna Health Plan Regulated by New York State: Is Plan Child Health Plus?: No Parental Consent Policy Policy Holder Details Policy Holder Name: June Bondman	Insurance Company Name: Aetna Health SOD Broadway Insurance Company Address: Albany (Albany) New York 12200 Insurance Plan Name: Aetna Health Plan Regulated by New York State: Yes Is Plan Child Health Plus?: No Parental Consent To Bill: Policy Holder Details Policy Holder Name: June Bondman	Insurance Company Name: Aetna Health Insurance Sequence Number: S00 Broadway S00 Broadway Insurance Type: Insurance Company Address: Albany (Albany) Insurance Type: New York 12200 Insurance Type: New York 12200 Plan Regulated by New York State: Yes Subrogation Notice Date Sent: Is Plan Child Health Plus?: No Is Plan Medicaid Managed Care?: Parental Consent To Bill: Policy Holder Name: June Bondman

5. Click **Prior Authorizations/Referral** from the Navigation Bar. **Prior Authorizations/Referrals** page displays.

Prior Author	izations/Referrals:	Fatima Smithw	ick - 3000	00010						2
BCBS - 30004	ŧ									
New										
Service Det	ails									
Action	Service T	уре	Method	<u>QP</u>	Prior Authorization Required	P	CP Referral F	Required	Script Required	
View Edit	Assistive	Technology		Audiologist	Yes	P	No		No	
New Prior Au	uthorization Creat	e 278 Request								
Prior Author	rizations									
Action	PA Number	SA Number	Ins	urance Company	<u>y Name</u>		Status	PA Service	Туре	
View Edit	1018	41472	Em	pire Blue Cross	Blue Shield					
View Edit	1083	274	Em	pire Blue Cross	Blue Shield					
View Edit	101018	1025	Em	pire Blue Cross	Blue Shield					
New Primary	Care Physician Ref	erral								
Primary Car	e Physician Referra	als								
Action	PCP Referral Num	<u>ber</u>				SA N	umber			
Delete	23					1025	5			

6. Click **New Primary Care Physician Referral** button. **Create Primary Care Physician Referral** page displays. **SA Number** and **PCP Referral Number** are *required* fields. **PCP Referral Number** may be the referring physicians NPI number.

Create Primary Care Physician Refer	ral Fatima Smithwick - 30000010		2
Details			
*SA Number:	<u>S</u> ,	*PCP Referral Number:	
	Save	Cancel	

- 7. To select an SA Number, click Search S icon. Select Service Authorization Number page displays. Click Select link under Action column for correct Service Authorization Number. Create Primary Care Physician Referral page displays.
- 8. Click Save button. Prior Authorizations/Referrals page displays.

Viewing Prior Authorization / Referrals

Commercial Insurance Coverage – View Service Details

- 1. Search for the Child using the NYEIS search functionality. See Unit 1: Getting Started, *Searching* for search instructions and tips.
- 2. Click **Reference Number** link in the Search Results for appropriate Child. **Child Homepage** displays.

naviga • Hon		Child Homepage: Kevin Bondman -		gister Sibling	
• Add				gister staling	
• Alte		Child Information			
• Alte		First Name:	Kevin	Middle Name:	
• Cas		Last Name:	Bondman	Suffix:	
	nmunication eptions	Contact			
• Fina			ewr ert		
• Not		Address:	Albany (Albany) New York 10001	Phone Number:	518 333-0000
• Pho			New York 10001		
• Rela		Child Information			
• Tas		Child's Referral Date:	12/6/2010	Child's Case Status:	
		Date of Birth:	12/1/2010	Gender:	Male
• Aud		Calculated Age of Child:	0 Years, 0 Months	Birth Last Name:	
• Ref		Ethnic Origin:	Not Hispanic or Latino	Child's Dominant Language:	
	nographic Data Inge History	Child's Living Arrangement:		Municipality of Residence:	Albany
• Insi	urance Coverage	Child's School District:		Caregiver's Name (If other than parent):	
• • • •		Caregiver's Relationship:		Date of Death:	
		Race			
		American Indian or Alaskan Native			
recent	titems	Family Information			
	in Bondman -	Mother's First Name:	Jill	Mother's Last Name:	
500		Mother's Date Of Birth:		Mother's Dominant Language:	

3. Click **Insurance Coverage** from the Navigation Bar. **Commercial Insurance Coverage** page displays.

Coverage List					
Actions	Insurance Company	Policy Number	Effective From Date	Effective To Date	3rd Party Sequence
View Edit Prior Auth	Community Blue	101018	1/1/2009	12/31/2009	1
View Edit Prior Auth	Medicaid		1/1/2009	12/31/2009	95

4. Click **View** link under **Action** column for Commercial Insurance Coverage. **View Commercial Insurance Coverage** page displays.

navigation • Insurance Coverage • Services Not Covered	View Commercial Insurance Covera		iete Close	
Prior Authorizations/Referral	Commercial Insurance Details Insurance Company Name:	Aetna Health	Insurance Sequence Number:	1
	Insurance Company Address:	500 Broadway	Insurance Type:	
	Insurance Plan Name:	Aetna Health	Claim Filing:	Commercial Insurance
recent items	Plan Regulated by New York State:	Yes	Subrogation Notice Date Sent:	12/15/2010
O Kevin Bondman -	Is Plan Child Health Plus?:	No	Is Plan Medicaid Managed Care?:	No
500020	Parental Consent To Bill:	l i i i i i i i i i i i i i i i i i i i		
	Policy Holder Details			
	Policy Holder Name:	June Bondman	Policy Holder ID Number:	

5. Click **Prior Authorizations/Referral** from the Navigation Bar. **Prior Authorizations/Referrals** page displays.

BCBS - 30004	ŧ							
New								
Service Det	ails							
Action	Service 1	<u>ype</u>	Method	<u>QP</u>	Prior Authorization Required	PCP Referral	Required	Script Required
View Edit	Assistive	Technology		Audiologist	Yes	No		No
New Prior A	uthorization Creat	e 278 Request						
Prior Autho	rizations							
Action	PA Number	SA Number	Ins	urance Compar	ny Name	Status	PA Servic	е Туре
View Edit	1018	41472	En	pire Blue Cross	Blue Shield			
<u>View</u> <u>Edit</u>	1083	274	En	pire Blue Cross	Blue Shield			
<u>View</u> <u>Edit</u>	101018	1025	En	pire Blue Cross	Blue Shield			
New Primary	Care Physician Ref	erral						
Primary Ca	e Physician Referr	als						
Action	PCP Referral Num	iber				SA Number		
Delete	23					1025		

6. Click View link under Action column for Service Details. View PA / PCP Referral / Script Required page displays.



- 7. Click Close button. Prior Authorizations/Referrals page displays.
- 8. Click Home from the Menu Bar. User Home Page displays.

Commercial Insurance Coverage – View Prior Authorization

- 1. Search for the Child using the NYEIS search functionality. See Unit 1: Getting Started, *Searching* for search instructions and tips.
- 2. Click **Reference Number** link in the Search Results for appropriate Child. **Child Homepage** displays.

3. Click **Insurance Coverage** from the Navigation Bar. **Commercial Insurance Coverage** page displays.

Commercial Insuran	ce Coverage: Tiffany Martin	-08 - 0108				?
Coverage List						
Actions	Insurance Company	Policy Number	Effective From Date	Effective To Date	3rd Party Sequence	
View Edit Prior Auth	Community Blue	101018	1/1/2009	12/31/2009	1	
View Edit Prior Auth	Medicaid		1/1/2009	12/31/2009	95	
	New Commercia	al Coverage New N	ledicaid Coverage Check N	ledicaid Eligibility		

4. Click **View** link under **Action** column for Commercial Insurance Coverage. **View Commercial Insurance Coverage** page displays.

navigation • Insurance Coverage	View Commercial Insurance Covera	ge: Kevin Bondman	 ete Close	
O Prior	Commercial Insurance Details			
Authorizations/Referra	Insurance Company Name:	Aetna Health	Insurance Sequence Number:	1
		500 Broadway Albany (Albany) New York 12200	Insurance Type:	Commercial
	Insurance Plan Name:	Aetna Health	Claim Filing:	Commercial Insurance
recent items	Plan Regulated by New York State:	Yes	Subrogation Notice Date Sent:	12/15/2010
O Kevin Bondman -	Is Plan Child Health Plus?:	No	Is Plan Medicaid Managed Care?:	No
	Parental Consent To Bill:			
	Policy Holder Details			
	Policy Holder Name:	June Bondman	Policy Holder ID Number:	59494943

5. Click **Prior Authorizations/Referral** from the Navigation Bar. **Prior Authorizations/Referrals** page displays.

BCBS - 3000	4								
	7								
New									
Service Det	ails								
Action	Service	Туре М	ethod	<u>QP</u>	Prior Authorization Required	P	CP Referral I	Required	Script Required
<u>View</u> <u>Edit</u>	Assistiv	e Technology		Audiologist	Yes	1	No		No
New Prior A	uthorization Crea	ate 278 Request							
Prior Autho	rizations								
Action	PA Number	SA Number	Ins	urance Compan	<u>y Name</u>		<u>Status</u>	PA Service	e Type
View Edit	1018	41472	En	pire Blue Cross	Blue Shield				
View Edit	1083	274	En	pire Blue Cross	Blue Shield				
View Edit	101018	1025	En	pire Blue Cross	Blue Shield				
New Primary	y Care Physician Re	ferral							
Primary Ca	re Physician Refer	rals							
Action	PCP Referral Nu	mber				SA N	umber		
Delete	23					1025			

6. Click View link under Action column for specific Prior Authorizations. View Prior Authorization page displays.

View Prior Authorization: Fatima Sn BCBS - 30004	nithwick - 30000010		
	Close Ed	lit Delete	
Details			
Prior Authorization Number:	1018	Service Authorization Number:	41472
Commercial Insurance Company Name:	Empire Blue Cross Blue Shield	Commercial Insurance Policy Number:	201
Start Date:	1/1/2008	End Date:	6/1/2008
Prior Authorization Certification Type:	Initial	Related Prior Authorization Number:	
Status:		Delay Reason:	
Denial Reason:		Service Type:	
Services Used			
Number of Authorized Visits:	11	Number of Authorized Visits Used:	0
Number of Authorized Visits Remaining :			
	Close Ed	lit Delete	

7. Click Close button. Prior Authorizations/Referrals page displays.

Editing Prior Authorization / Referrals

Commercial Insurance Coverage – Edit Service Details

- 1. Search for the Child using the NYEIS search functionality. See Unit 1: Getting Started, *Searching* for search instructions and tips.
- 2. Click **Reference Number** link in the Search Results for appropriate Child. **Child Homepage** displays.
- 3. Click **Insurance Coverage** from the Navigation Bar. **Commercial Insurance Coverage** page displays.

Coverage List						
Actions	Insurance Company	Policy Number	Effective From Date	Effective To Date	3rd Party Sequence	
View Edit Prior Auth	Community Blue	101018	1/1/2009	12/31/2009	1	
View Edit Prior Auth	Medicaid		1/1/2009	12/31/2009	95	

4. Click **View** link under **Action** column for Commercial Insurance Coverage. **View Commercial Insurance Coverage** page displays.

navigation	View Commercial Insurance Coverag	je: Kevin Bondman - 500020		
Insurance Coverage Privices Not Covered		E dit D ele	te Close	
• Prior	Commercial Insurance Details			
Authorizations/Referral	Insurance Company Name: .	Aetna Health	Insurance Sequence Number:	1
	Insurance Company Address:	500 Broadway Albany (Albany) New York 12200	Insurance Type:	Commercial
	Insurance Plan Name:	Aetna Health	Claim Filing:	Commercial Insurance
recent items	Plan Regulated by New York State:	Yes	Subrogation Notice Date Sent:	12/15/2010
• Kevin Bondman -	Is Plan Child Health Plus?:	No	Is Plan Medicaid Managed Care?:	No
	Parental Consent To Bill:			
	Policy Holder Details			
	Policy Holder Name:	June Bondman	Policy Holder ID Number:	
	Policy Holder Name:	June Bonuman	Policy Holder ID Number:	

5. Click **Prior Authorizations/Referral** from the Navigation Bar. **Prior Authorizations/Referrals** page displays.

BCBS - 3000	4								
New									
Service Det	ails								
Action	Service T	<u>ype</u>	<u>Method</u>	<u>QP</u>	Prior Authorization Required	P	CP Referral F	lequired	Script Required
View Edit	Assistive	Technology		Audiologist	Yes	1	No		No
New Prior A	uthorization Creat	e 278 Request							
Prior Autho	rizations								
Action	PA Number	SA Number	Ins	urance Compan	<u>y Name</u>		<u>Status</u>	PA Service	<u>е Туре</u>
View Edit	1018	41472	Em	pire Blue Cross	Blue Shield				
View Edit	1083	274	Em	pire Blue Cross	Blue Shield				
View Edit	101018	1025	Em	pire Blue Cross	Blue Shield				
New Primar	y Care Physician Refe	erral							
Primary Ca	re Physician Referra	als							
Action	PCP Referral Num	ber				SA N	umber		
Delete	23					1025			

6. Click Edit link under Action column for specific Service Details. Modify PA / PCP Referral / Script Required page displays.

Modify PA / PCP Referral / Script Re	quired		2
Service Details			
Service Type:	Assistive Technology	Method:	
QP:	Audiologist -	Prior Authorization Required:	
Primary Care Physician Referral Required:		Script Required:	
	Save	Cancel	

- 7. Apply necessary changes.
- 8. Click Save button. Prior Authorizations/Referrals page displays.

Commercial Insurance Coverage – Edit Prior Authorization

- 1. Search for the Child using the NYEIS search functionality. See Unit 1: Getting Started, *Searching* for search instructions and tips.
- 2. Click **Reference Number** link in the Search Results for appropriate Child. **Child Homepage** displays.
- 3. Click **Insurance Coverage** from the Navigation Bar. **Commercial Insurance Coverage** page displays.

Coverage List						
Actions	Insurance Company	Policy Number	Effective From Date	Effective To Date	3rd Party Sequence	
View Edit Prior Auth	Community Blue	101018	1/1/2009	12/31/2009	1	
View Edit Prior Auth	Medicaid		1/1/2009	12/31/2009	95	

4. Click **View** link under **Action** column for Commercial Insurance Coverage. **View Commercial Insurance Coverage** page displays.

navigation	View Commercial Insurance Covera	ge: Kevin Bondman - 500020		
 Insurance Coverage Services Not Covered 		E dit D	elete Close	
Prior	Commercial Insurance Details			
Authorizations/Referral	Insurance Company Name:	Aetna Health	Insurance Sequence Number:	1
	Insurance Company Address:	500 Broadway Albany (Albany) New York 12200	Insurance Type:	Commercial
	Insurance Plan Name:	Aetna Health	Claim Filing:	Commercial Insurance
recent items	Plan Regulated by New York State:	Yes	Subrogation Notice Date Sent:	12/15/2010
• Kevin Bondman -	Is Plan Child Health Plus?:	No	Is Plan Medicaid Managed Care?:	No
	Parental Consent To Bill:			
	Policy Holder Details			
	Policy Holder Name:	June Bondman	Policy Holder ID Number:	

5. Click **Prior Authorizations/Referral** from the Navigation Bar. **Prior Authorizations/Referrals** page displays.

	izations/Referrals	Fatima Smithw	ick - 300	00010					
BCBS - 30004	1								
New									
Service Det	ails								
Action	Service	Туре	Method	<u>QP</u>	Prior Authorization Required	PCP	Referral R	equired	Script Required
View Edit	Assistiv	e Technology		Audiologist	Yes	No			No
New Prior A	uthorization Crea	te 278 Request							
Prior Author	rizations								
Action	PA Number	SA Number	Ins	urance Compan	<u>y Name</u>	S	tatus	PA Servic	<u>е Туре</u>
View Edit	1018	41472	Em	pire Blue Cross	Blue Shield				
View Edit	1083	274	Em	pire Blue Cross	Blue Shield				
View Edit	101018	1025	Em	pire Blue Cross	Blue Shield				
New Primary	/ Care Physician Re	ferral							
Primary Ca	e Physician Refer	rals							
Action	PCP Referral Nur	<u>nber</u>				SA Num	iber		
Delete	23					1025			

6. Click Edit link under Action column for specific Prior Authorizations. Modify Prior Authorization page displays.

		Save	Cancel			
etails						1
Prior Authorization Number:			Status:			
*Start Date:	10/12/2009	<i>(</i>)	*Service Authorization Number:	170300		q 4
*Prior Authorization Certification Type:	Initial		*End Date:	10/21/2009	<i>(</i>)	
Number of Authorized Visits:	0		Related Prior Authorization Number:			
Prior Authorization Service Type:	Surgical					
Delay Reason:				•		
Denial Reason:			•			

- 7. Apply necessary changes.
- 8. Click Save button. Prior Authorizations/Referrals page displays.

Important Information

If claiming to the insurer has occurred, and the Prior Authorization information has changed, it is recommended that the existing prior Authorization record be end-dated and new Prior Authorization information is added.

Deleting Prior Authorization / Referrals

Commercial Insurance Coverage – Delete Service Details Required

- 1. Search for the Child using the NYEIS search functionality. See Unit 1: Getting Started, *Searching* for search instructions and tips.
- 2. Click **Reference Number** link in the Search Results for appropriate Child. **Child Homepage** displays.
- 3. Click **Insurance Coverage** from the Navigation Bar. **Commercial Insurance Coverage** page displays.

Coverage List					
Actions	Insurance Company	Policy Number	Effective From Date	Effective To Date	3rd Party Sequence
View Edit Prior Auth	Community Blue	101018	1/1/2009	12/31/2009	1
View Edit Prior Auth	Medicaid		1/1/2009	12/31/2009	95

4. Click **View** link under **Action** column for Commercial Insurance Coverage. **View Commercial Insurance Coverage** page displays.

navigation • Insurance Coverage	View Commercial Insurance Covera		lete Close	
• Prior	Commercial Insurance Details			
Authorizations/Reference	Insurance Company Name:	Aetna Health	Insurance Sequence Number:	1
	Insurance Company Address:	500 Broadway Albany (Albany) New York 12200	Insurance Type:	Commercial
	Insurance Plan Name:	Aetna Health	Claim Filing:	Commercial Insurance
recent items	Plan Regulated by New York State:	Yes	Subrogation Notice Date Sent:	12/15/2010
O Kevin Bondman -	Is Plan Child Health Plus?:	No	Is Plan Medicaid Managed Care?:	No
	Parental Consent To Bill:			
	Policy Holder Details			
	Policy Holder Name:	June Bondman	Policy Holder ID Number:	59494943
			A REAL PLACE AND A REAL PLACE	

5. Click **Prior Authorizations/Referral** from the Navigation Bar. **Prior Authorizations/Referrals** page displays.

3CBS - 3000	4								
	-								
New									
Service Det	ails								
Action	Service	Туре	Method	<u>QP</u>	Prior Authorization Required	P	CP Referral I	Required	Script Required
View Edit	Assistiv	re Technology		Audiologist	Yes	1	No		No
New Prior A	uthorization Crea	ate 278 Request							
Prior Autho	rizations								
Action	PA Number	SA Number	Ins	urance Compan	<u>y Name</u>		Status	PA Service	<u>е Туре</u>
View Edit	1018	41472	Em	pire Blue Cross	Blue Shield				
<u>View</u> Edit	1083	274	Em	pire Blue Cross	Blue Shield				
<u>View</u> Edit	101018	1025	Em	pire Blue Cross	Blue Shield				
New Primar	y Care Physician Re	ferral							
Primary Ca	re Physician Refer	rals							
Action	PCP Referral Nu	<u>mber</u>				SA N	umber		
Delete	23					1025	5		

6. Click View link under Action column for specific Service Details. View PA / PCP Referral / Script Required page displays.

View PA / PCP Referral / Script Required Fatima Smithwick - 3000001 BCBS - 30004	D	2
Service Details		
Service Type: Assistive Technology	Method:	
QP: Audiologist	Prior Authorization Required:	Yes
Primary Care Physician Referral Required: No	Script Required:	No
Edit)elete Close	

7. Click **Delete** button. **Confirm Delete that PA / PCP Referral / Script is Required** page displays with the message *Are you sure you want to delete this indicator that either a PA, PCP Referral or Prescription is required for this Child's Insurance Coverage*?



8. Click Yes button. Prior Authorizations/Referrals page displays.

Commercial Insurance Coverage – Delete Prior Authorization

- 1. Log in to NYEIS. User Home Page displays.
- 2. Click Child link in Search section. Child Search page displays.
- 3. Type all known information in **Search Criteria** section. Click **Search** button. Records matching display in **Search Results** section. *To search again, click Reset button*.

- 4. Click **Reference Number** link for appropriate Child. **Child Homepage** displays.
- 5. Click **Insurance Coverage** from the Navigation Bar. **Commercial Insurance Coverage** page displays.

Coverage List					
Actions	Insurance Company	Policy Number	Effective From Date	Effective To Date	3rd Party Sequence
View Edit Prior Auth	Community Blue	101018	1/1/2009	12/31/2009	1
View Edit Prior Auth	Medicaid		1/1/2009	12/31/2009	95

6. Click **View** link under **Action** column for Commercial Insurance Coverage. **View Commercial Insurance Coverage** page displays.

navigation	View Commercial Insurance Covera	ge: Kevin Bondman - 500020		
 Insurance Coverage Parvices Not Covered 		Edit Dele	ete Close	
• Prior	Commercial Insurance Details			
Authorizations/Referral	Insurance Company Name:	Aetna Health	Insurance Sequence Number:	1
		500 Broadway Albany (Albany) New York 12200	Insurance Type:	Commercial
	Insurance Plan Name:	Aetna Health	Claim Filing:	Commercial Insurance
recent items	Plan Regulated by New York State:	Yes	Subrogation Notice Date Sent:	12/15/2010
	Is Plan Child Health Plus?:	No	Is Plan Medicaid Managed Care?:	No
	Parental Consent To Bill:			
	Policy Holder Details			
	Policy Holder Name:	June Bondman	Policy Holder ID Number:	59494943

7. Click **Prior Authorizations/Referral** from the Navigation Bar. **Prior Authorizations/Referrals** page displays.

Prior Author	izations/Referra	als: Fatima Smithw	ick - 300	00010					
BCBS - 30004	1								
New									
Service Det	ails								
Action	Servic	<u>е Туре</u>	Method	<u>QP</u>	Prior Authorization Required	P	CP Referral R	equired	Script Required
View Edit	Assist	tive Technology		Audiologist	Yes	ſ	No		No
New Prior Au	uthorization Cr	eate 278 Request							
Prior Author	rizations								
Action	PA Number	SA Number	Ins	urance Compan	<u>y Name</u>		<u>Status</u>	PA Service	е Туре
<u>View</u> Edit	1018	41472	En	pire Blue Cross	Blue Shield				
<u>View</u> Edit	1083	274	En	pire Blue Cross	Blue Shield				
<u>View</u> Edit	101018	1025	En	pire Blue Cross	Blue Shield				
New Primary Care Physician Referral									
Primary Car	e Physician Ref	errals							
Action	PCP Referral N	lumber				SA N	<u>umber</u>		
Delete	23					1025	5		

8. Click View link under Action column for specific Prior Authorizations. View Prior Authorization page displays.

View Prior Authorization: Fatima Smithwick - 30000010 BCBS - 30004							
Close Edit Delete							
Details							
Prior Authorization Number:	1018	Service Authorization Number:	41472				
Commercial Insurance Company Name:	Empire Blue Cross Blue Shield	Commercial Insurance Policy Number:	201				
Start Date:	1/1/2008	End Date:	6/1/2008				
Prior Authorization Certification Type:	Initial	Related Prior Authorization Number:					
Status:		Delay Reason:					
Denial Reason:		Service Type:					
Services Used							
Number of Authorized Visits:	11	Number of Authorized Visits Used:	0				
Number of Authorized Visits Remaining :							
	Close Ed	it Delete					

9. Click **Delete** button. **Delete Prior Authorization** page displays with the message *Are you sure you want to delete this prior authorization*?

Delete Prior Authorization: Fatima Smithwick - 30000010
Are you sure you want to delete this prior authorization?
Yes No

10. Click Yes button. Prior Authorizations/Referrals page displays.

Important Information
If claiming to the insurer has occurred, and the Prior Authorization
information has changed, it is recommended that the existing prior
Authorization record be end-dated and new Prior Authorization information is
added.

<u>Commercial Insurance Coverage – Delete Primary Care Physician</u> <u>Referral</u>

- 1. Log in to NYEIS. User Home Page displays.
- 2. Click Child link in Search section. Child Search page displays.
- 3. Type all known information in **Search Criteria** section. Click **Search** button. Records matching display in **Search Results** section. *To search again, click Reset button*.
- 4. Click **Reference Number** link for appropriate Child. **Child Homepage** displays.
- 5. Click **Insurance Coverage** from the Navigation Bar. **Commercial Insurance Coverage** page displays.

						_
Coverage List						
Actions	Insurance Company	Policy Number	Effective From Date	Effective To Date	3rd Party Sequence	
View Edit Prior Auth	Community Blue	101018	1/1/2009	12/31/2009	1	
View Edit Prior Auth	Medicaid		1/1/2009	12/31/2009	95	

6. Click **View** link under **Action** column for Commercial Insurance Coverage. **View Commercial Insurance Coverage** page displays.

navigation	View Commercial Insurance Coverag	je: Kevin Bondman - 500020		
 Insurance Coverage Services Not Covered 		E dit Dele	ete Close	
o Prior	Commercial Insurance Details			
Authorizations/Referral	Insurance Company Name: .	Aetna Health	Insurance Sequence Number:	1
	Insurance Company Address:	500 Broadway Albany (Albany) New York 12200	Insurance Type:	Commercial
	Insurance Plan Name:	Aetna Health	Claim Filing:	Commercial Insurance
recent items	Plan Regulated by New York State:	Yes	Subrogation Notice Date Sent:	12/15/2010
O Kevin Bondman -	Is Plan Child Health Plus?:	No	Is Plan Medicaid Managed Care?:	No
500020	Parental Consent To Bill:			
	Policy Holder Details			
	Policy Holder Name:	June Bondman	Policy Holder ID Number:	

7. Click **Prior Authorizations/Referral** from the Navigation Bar. **Prior Authorizations/Referrals** page displays.

		ls: Fatima Smithv	ЛСК - 300	00010					
BCBS - 30004	4								
New									
Service Det	ails								
Action	Service	<u>e Type</u>	Method	<u>QP</u>	Prior Authorization Required	P	CP Referral	Required	Script Required
View Edit	Assisti	ve Technology		Audiologist	Yes	P	No		No
New Prior A	New Prior Authorization) Create 278 Request								
Prior Autho	rizations								
Action	PA Number	SA Number	Ins	urance Compan	iy Name		Status	PA Service	Туре
View Edit	1018	41472	En	npire Blue Cross	Blue Shield				
View Edit	1083	274	En	npire Blue Cross	Blue Shield				
View Edit	101018	1025	En	npire Blue Cross	Blue Shield				
New Primary	/ Care Physician R	eferral							
Primary Ca	re Physician Refe	rrals							
Action	PCP Referral N	<u>umber</u>				SA N	<u>umber</u>		
Delete	23					1025	5		

8. Click **Delete** link under **Action** column for specific **Primary Care Physician Referrals**. **Delete PCP Referral** page displays with the message *Are you sure you want to delete this Primary Care Physician Referral*?

Delete PCP Referral	
Do you want to delete this Primary Care Physician Referral?	
	Yes No

9. Click Yes button. Prior Authorizations/Referrals page displays.

Note:

• **Primary Care Physician Referrals** *cannot* be edited. They can *only* be deleted once created.

Generating Subrogation Letters

Important Information This feature is no longer active in NYEIS

Viewing and Printing Subrogation Letters

Important Information This feature is no longer active in NYEIS

SURVEYS

Exception Currently not available to all NYEIS User roles. This feature can be used to complete certain State Surveys in NYEIS. Surveys are associated with each Child's Integrated Case. Instead of paper surveys, NYEIS Users may respond to a State Survey for all or a sample of children using NYEIS. Surveys are posted to NYEIS by the State Administrator. When the feature is being used to conduct a survey or collect needed data, a link from the Child's Integrated Case will take the User to a page with the survey or list of surveys. If the feature is not in use, no surveys will be posted on the page.

Important Information

This feature is currently not being used for Child and Family outcomes.

Taking Surveys

1. Display Child Home Page. A Refer to Unit 1: Getting Started, *Displaying Child Home Page* for further information.

navigation	Child Homepage: Tiffany Martin-153	3 - 129				
	Edit Register Sibling					
Addresses						
Alternative IDs	Child Information					
Alternative Names	First Name:	Tiffany	Middle Name:			
• Cases	Last Name:	Martin-153	Suffix:			
Communication Exceptions	Contact					
) Financials		900 Main St				
0 Notes	Address:		Phone Number:	518 555-1212		
Phone Numbers		New York				
Relationships	Child Information					
) Tasks	Child's Referral Date:	5/12/2009	Child's Case Status:			
	Date of Birth:		Gender:	Female		
	Calculated Age of Child:		Birth Last Name:	- cilidic		
		Not Hispanic or Latino	Child's Dominant Language:			
) Demographic Data Change History	Child's Living Arrangement:		Municipality of Residence:	Albany		
	Child's School District:		Caregiver's Name (If other than			
	Caragiyor's Relationship	Grandfather or Grandmother	parent): Date of Death:			

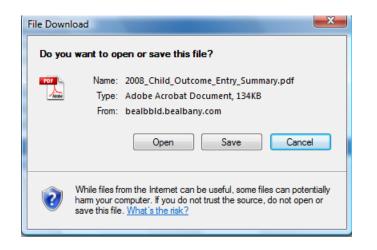
2. Click **Surveys** from the Navigation Bar. **Surveys** page displays.

Surveys:]	im Tarey - 30000087		
Complete	d Surveys		
Action	Survey Name	Date Completed	
Available	Surveys		
Action	Name	Start Date	End Date
View	Lou's EI Entry Survey	1/19/2009	1/19/2009
View	Child's Outcome Entry Survey	1/15/2009	1/15/2009
<u>/iew</u>	2008 Child Outcome Entry Summary	1/16/2009	1/16/2009
View	Outcome Entry Summary Form	1/20/2009	12/31/2009
View	Outome Exit Summary Form	1/20/2009	12/31/2009
<u>/iew</u>	quote survey		2/9/2009
View	EI Outcome Entry Survey	1/19/2009	1/19/2009

3. Click View link under Action column for Survey to complete from Available Surveys section. View Survey Definition page displays.



4. Click **Current Survey** link from **Survey Details** section. **File Download** dialog box displays.



5. Click **Open** button. Survey opens in Adobe Reader or Adobe Acrobat.

	Please fill out the following form. You cannot save data typed into this form. Please print your completed form if you would like a copy for your records.
8	
Ð	New York State Department of Health - Early Intervention Program Child Outcomes ENTRY Summary Form
1	Please Write Legibly
	The ENTRY CHILD OUTCOMES SUMMARY FORM IS COMPLETED FOR CHILDREN IN OUTCOME COHORTS WHO ARE ELICIBLE FOR THE EIP. The form should be completed at the IFSP team meeting to develop the <u>INITIAL</u> IFSP. Thank you for helping us to meet this Federal reporting requirement!
	1. Date Completed: 2. Child's Name:
	3. Child's Date of Birth: 4. Child's Sex: M F 5. County/Borough/Residence:
	 IFSP Team Members: Check all members who participated and completed this form. If individual forms are being completed by each participant, please check only the box for the participant completing <u>this</u> form:
	Parent(s) Evaluator(s) EIO/D Service Coordinator Service Provider(s) Other:
	 Please rate the child's <u>STATUS</u> in each of the three functional areas, by selecting the number which <u>BEST</u> DESCRIBES THE <u>CHILD'S CURRENT BEHAVIORS AND SKILLS</u>:
	7A. To what extent does this child show POSITIVE SOCIAL EMOTIONAL SKILLS (INCLUDING RELATIONSHIPS) APPROPRIATE FOR HIS OR HER AGE and ACROSS A VARIETY OF SETTINGS AND STIUATIONS?
🦈 Ø	7B. To what extent does this child ACQUIRE AND USE KNOWLEDGE AND SKILLS APPROPRIATE FOR HIS OR HER AGE and ACROSS A VARIETY OF SETTINGS AND

6. Complete Survey by filling in responses.

Important Information

Surveys can only be completed once. Surveys can not be deleted or edited once a Survey is submitted.

After completing, *do not* select **File**, **Save As** to save on local drive. Surveys *must* be saved to the NYEIS database both for the State to use the results and to ensure confidentiality of the Child data within a secure location.

- 7. Click **Submit** button. *Submit successful* message displays.
- 8. Close message dialog box. Close Adobe Reader or Adobe Acrobat. Survey displays under Completed Surveys section on Surveys page.