

# RELEASE NOTES (8.10) – 8.27.2021

Texas Health and Human Service Commission (HHSC) Clinical Management for Behavioral Health Services (CMBHS) Release Information Date 08/27/2021		
Page or Function	Description of Change and/or User Instructions	Business Entity/User Type Impacted
Service Approver Screen SVC037	<p>In CMBHS, the Service Approver Screen SVC037 has added functionality. This page can be reached by navigating through the <b>System Management</b> and <b>Service Approvers</b> tabs.</p> <p>Service Approver Screen SVC037 is Read-Only page for non-HHSC Users. An HHSC user must be assigned the role of HHSC Approver Maintenance to read/ write on this page.</p> <p>Several new features, columns and rows have been added to screen SVC037 and include two new main sections:</p> <ol style="list-style-type: none"> <li>1. Filter By</li> <li>2. Service Approver</li> </ol> <p>On this page, between the main section 1 and 2, there is a checkbox labelled <b>Display Expired Records</b> that can be selected. Its function is to display inactive and expired service approver records where the <b>End Date</b> is before the current system date, along with active records.</p> <p>The <b>Filter By</b> section controls which records are displayed in the <b>Service Approver</b> section. There are three new dropdown filter selections and include:</p> <ol style="list-style-type: none"> <li>1. Approver</li> <li>2. Service Provider</li> <li>3. Service Provider Location</li> </ol> <p>Each filter option has a drop-down menu where the user can select the individual options available. The <b>Approver</b> drop-down will show a list of Providers in alphabetical order. The <b>Service Provider</b> drop down will display a list of providers in alphabetical order. Once an Approver and a Service Provider are selected in the dropdowns, the <b>Service Provider Location</b> drop down can be used to filter for a specific</p>	<p>Office of Decision Support, Training &amp; Technical Assistance</p> <p>Read/Write: HHSC Approver Maintenance</p> <p>Read Only: 1. Billing specialist, 2. BMO Authorizer role, 3. Security Admin, 4. Authorization requester, 5. Authorization approver, 6. Business Manager and 7. MH Approver.</p>

	<p>provider location if there are multiple. By default, the <b>All</b> option is checked in the drop-down filters.</p> <p>In the <b>Service Approver</b> section there are several new columns which include the following:</p> <ol style="list-style-type: none"> <li>1. Service Provider</li> <li>2. Service Provider Location</li> <li>3. Approver</li> <li>4. Approver Location</li> <li>5. Approver Level</li> <li>6. Effective Date</li> <li>7. End Date</li> <li>8. Feature Type</li> <li>9. Funding Source Type</li> <li>10. Action</li> </ol> <p>There is a new functionality and a hyperlink in the <b>Action</b> column named <b>View</b>. Selecting <b>View</b> opens a Service Approver SVC038 screen discussed in the next sub-section.</p> <p>At the top right corner on this screen the two tabs that can be selected are <b>New Approver</b> and <b>Close</b>. Selecting the <b>New Approver</b> tab navigates the user to the Service Approver Screen SVC038.</p> <p><b>Online Reference:</b> <a href="#">Click Here</a></p>	
<b>Service Approver Screen SVC038</b>	<p>Service Approver Screen SVC038 is accessed by clicking on the <b>New Approver</b> button at the top right of Service Approver Screen SVC037, or by selecting the new <b>View</b> hyperlink in the <b>Action</b> column.</p> <p>After selecting an approver location from the top <b>Approver</b> dropdown, a section titled <b>Service Providers</b> is displayed. There are three new required selections to be made and include the following:</p> <ol style="list-style-type: none"> <li>1. <b>Approver Level</b> <ul style="list-style-type: none"> <li>• This dropdown menu allows the level of approver in the approval hierarchy is assigned from 1-4. Higher numbers indicate higher level approvers.</li> </ul> </li> <li>2. <b>Feature Type</b> <ul style="list-style-type: none"> <li>• Three selections are available including: 1. Claims, 2. MH (Mental Health), and 3. SAR (Service Authorization Request). One or more selections can be made, by highlighting the item(s)</li> </ul> </li> </ol>	<p>Substance Use Disorder Medication Assisted Therapy (MAT) Service Providers.</p> <p>Read &amp; Write: HHSC Approver Maintenance</p> <p>Read Only:</p>

	<p>and clicking the single or double right arrow. If the double right arrow is clicked, then all the feature types will be moved into the right-hand side box and be selected. If an item is to be unselected, then it can be highlighted in the right box followed by clicking a single left arrow or the double left arrow for all items.</p> <p><b>3. Funding Source</b></p> <ul style="list-style-type: none"> <li>Individual or multiple funding sources can be selected using the single or double right arrows which moves the selected items over from the left to right-hand selection box. The selected funding sources in the right-hand box can be unselected individually or collectively using the single or double left arrow.</li> </ul> <p>Once the remaining required selections are made the blue <b>Add</b> button that can be clicked to add the record to the new summary table below that shows the newly setup provider-approver setup.</p> <p>The new summary table of the saved field selections for the provider-approver selection contains the following columns:</p> <ol style="list-style-type: none"> <li>Service Provider</li> <li>Service Provider Location</li> <li>Effective Date</li> <li>End Date</li> <li>Approver Provider Location</li> <li>Approver Level</li> <li>Feature type</li> <li>Funding Source Type</li> <li>Created By</li> <li>Created Date</li> <li>Last Saved By</li> <li>Last Saved Date</li> </ol>	<ol style="list-style-type: none"> <li>Billing specialist,</li> <li>BMO Authorizer role,</li> <li>Security Admin,</li> <li>Authorization requester,</li> <li>Authorization approver,</li> <li>Business Manager and</li> <li>MH Approver.</li> </ol>
<b>SVC034 Service Authorization Screen (For Authorization Requester and Authorization Approver)</b>	<ul style="list-style-type: none"> <li>In the left-hand side <b>Service Management Menu</b>, the sub-menu named <b>LBHA Service Authorization Request</b> has been renamed <b>Service Authorization Request</b>.</li> <li>In Screen SVC034, the <b>Details</b> section has been modified. The <b>Level of Care Approved</b> has been moved from this section to under the Authorization History section.</li> <li>In the <b>Service Authorization</b> section, the <b>Authorization Status</b> has been updated to display the level at which a Service Authorization Request (SAR) is approved out of the total number of higher approvers who review e.g. Approved n/n or Approved 1/3.</li> </ul>	No change to user roles

	<ul style="list-style-type: none"> <li>There is a new table called <b>Approver Level</b> which dynamically displays the approver level and approver depending on the <b>Service Approvers</b> setup.</li> <li>In the Summary section, the <b>Authorization History</b> section has new updated status messages which show the <b>Authorization Status</b> e.g. Submitted/Approved n/n.</li> <li>The <b>Authorization History</b> section is dynamically updated and has new fields that display who the SAR was <b>Updated by</b> and the <b>Location</b> in each status.</li> <li>Submitted SARs from SVC034 Service Authorization Screen are added to and displayed on the SVC047 Authorization List Screen.</li> </ul> <p><b>Online Reference:</b> <a href="#">Click Here</a></p>	
<b>SVC047 Service Authorization List</b>	<ul style="list-style-type: none"> <li>This screen has been modified for <b>Approver View</b> and <b>SU</b> Program type.</li> <li>The section <b>Select Filter</b> has two new checkboxes: <ul style="list-style-type: none"> <li><b>Display all Fully Approved records</b>, to display the records for Active clients with SAR approved by all levels of Approvers (including approval by the Final/last level Approver, defaulted to unchecked).</li> <li><b>Display all Expired records</b>, to display the records for Active clients if the SAR last updated date is within the <b>Document status</b> selected date range (defaulted to unchecked).</li> </ul> </li> <li><b>Approver Level</b> is a new column that will dynamically display the latest status of the SAR based numerically as a fraction (1/2). The numerator of the fraction denotes the level of approver which it has been approved at, the denominator displays the total number of approvers in the hierarchy. This is dynamically based on the Service Approvers SVC038 screen provider-approver setup. This column has a newly added sort function.</li> <li>The <b>Authorization Status</b> drop down menu in the <b>Select Filter</b> section has been modified to display new SAR status's e.g. <b>Modified Approval</b></li> <li>Under the Select Filter section, there is a new checkbox <b>Display all fully Approved records</b> to display the records for Active clients with SAR approved by all levels of Approvers.</li> <li>Under the <b>Select Filter</b> section, there is a new checkbox <b>Display all Expired records</b> to display the records for Active clients if the SAR last updated date is within the "Document status" selected date range (defaulted to unchecked).</li> <li>SVC047 Screen has two new columns: <ul style="list-style-type: none"> <li><b>Authorization Status</b> which displays the status in text e.g. Approved.</li> <li><b>Approver Level</b> which displays the numeric value of the status e.g. 1/2 if an SAR has been approved at the first level in a hierarchy of 2 levels of approvers</li> </ul> </li> <li>The status <b>Partial Denial</b> has been removed from the <b>Authorization Status</b> drop down menu.</li> </ul>	No change to user roles

	<p><b>Online Reference:</b> <a href="#">Click Here</a></p>	
<b>CCP007 Client Workspace</b>	<ul style="list-style-type: none"> <li>The screen now shows the service authorization request (SAR) status and the Approval Level in the <b>Description Column</b> for all SARs.</li> <li>The <b>Authorization Status</b> on the Service Authorization Screen SVC034 is now displayed in the Client Workspace screen and is dynamically updated.</li> </ul> <p><b>Online Reference:</b> <a href="#">Click Here</a></p>	No change to user roles
<b>ORG010 Location Detail</b>	<ul style="list-style-type: none"> <li>A new flag is displayed at the end of the list, titled <b>Does this location require Approvals? (i.e. Services, Claims etc.)</b>. It is defaulted to not be empty.</li> <li>This is a required flag and the user must either check the <b>Yes</b> or <b>No</b> radio button.</li> </ul> <p><b>Online Reference:</b> <a href="#">Click Here</a></p>	No change to user roles
<b>SEC002 Change Location</b>	<ul style="list-style-type: none"> <li>The Change Location Screen SEC002 will display Provider locations with the new - <b>Does this location require Approvals?</b> - Flag selected to establish a relationship between Provider location and Approver. <ul style="list-style-type: none"> <li>For example, an upper level approver will be able to view the provider locations linked to and under them.</li> </ul> </li> </ul> <p><b>Online Reference:</b> <a href="#">Click Here</a></p>	No change to user roles
<b>CLM068 Search Pending Claims</b>	<ul style="list-style-type: none"> <li>Two new columns are displayed on the screen including: <b>1. Submission Status</b> and <b>2. Submission Level</b> and these columns have a sort functionality. <ul style="list-style-type: none"> <li><b>Submission Status</b> indicates claim status when submitted by a lower level provider or approver</li> <li><b>Submission Level</b> indicates if action has been taken on a claim. For example, if a Level 1 approver submits a claim and there are 3 higher levels of approver, the claim status is 1/3.</li> </ul> </li> <li>Contracts will be displayed for the Multi-Level based on the Vendor ID of the Final Approver as well as Single-level Contracts for the direct service Providers. If both are applicable for an Approver-Provider-Location, then it should display all the Contracts (for Multi-level and Single-level Claim submission)</li> </ul> <p><b>Online Reference:</b> <a href="#">Click here</a></p>	No change to user roles
<b>CLM069 Submitted Claims</b>	<ul style="list-style-type: none"> <li>Two new Claim Status options have been added: <ul style="list-style-type: none"> <li><b>Initial Approval</b> displays when a first level approver approves a claim.</li> </ul> </li> </ul>	No change to user roles

	<ul style="list-style-type: none"> <li>○ <b>Final Approval</b> displays when the highest-level approver approves the claim.</li> </ul> <p><b>Online Reference:</b> <a href="#">Click here</a></p>	
<b>CLI093 Find/Add Client</b>	<ul style="list-style-type: none"> <li>• When an approver logs in, a new function will allow all linked provider locations to be included in the <b>Scope of Search</b> dropdown. <ul style="list-style-type: none"> <li>○ It will show the same linked provider locations displayed on <b>SEC002 Change Location</b> screen.</li> </ul> </li> </ul> <p><b>Online Reference:</b> <a href="#">Click Here</a></p>	No change to user roles
<b>CSI141 Claim Details</b>	<ul style="list-style-type: none"> <li>• Submission Level has been added on the <b>CSI141 Claim Details</b> screen.</li> </ul> <p><b>Online Reference:</b> <a href="#">Click here</a></p>	No change to user roles
<b>CMBHS Billing Reports - Claims Search Report</b>	<ul style="list-style-type: none"> <li>• Two new columns will appear on this report compared to the old Claim Search report: <ul style="list-style-type: none"> <li>○ <b>Claim Status</b></li> <li>○ <b>Submission Level</b></li> </ul> </li> <li>• With the change in roles there will be two views for the report: <ol style="list-style-type: none"> <li>1. <b>Approver Report</b> - When the User logs in the Approver Location, all the associated Sub-contractor-Provider-location's records should display in the Report (as per Service Approver Screen SVC038 relationship setup).</li> <li>2. <b>Provider Report</b> - When the User logs into the Provider-location that is servicing clients directly, the Report should display the records only for that location.</li> </ol> </li> <li>• The columns will have added sort functionality.</li> </ul> <p><b>Online Reference:</b> <a href="#">Click Here</a></p>	There is a new added Approver Report Role
<b>CMBHS Billing Reports - Pending Claim Report</b>	<ul style="list-style-type: none"> <li>• Two new columns will appear on this report compared to the old Pending Claim report: <ul style="list-style-type: none"> <li>○ <b>Claim Status</b></li> <li>○ <b>Submission Level</b></li> </ul> </li> <li>• With the change in roles there will be two views for the report: <ol style="list-style-type: none"> <li>3. <b>Approver Report</b> - When the User logs in the Approver Location, all the associated Sub-contractor-Provider-location's records should display in the Report (as per Service Approver Screen SVC038 relationship setup).</li> </ol> </li> </ul>	There is a new added Approver Report Role

	<p>4. <b>Provider Report</b> - When the User logs into the Provider-location that is servicing clients directly, the Report should display the records only for that location.</p> <ul style="list-style-type: none"> <li>The columns will have added sort functionality.</li> </ul> <p><b>Online Reference:</b> <a href="#">Click Here</a></p>	
<b>DNL080 Downloads</b>	<ul style="list-style-type: none"> <li>Approvers have the ability to download data for their lower level linked provider locations using this screen.</li> <li>The date range has been updated to allow a date range from 1-7 days of data to be downloaded into Excel (formatted) or Excel (Raw) format. <ul style="list-style-type: none"> <li><b>Begin Date</b> (mm/dd/yyyy) is the first day selected for the data download</li> <li><b>End Date</b> (mm/dd/yyyy) is the last day selected for the data download.</li> </ul> </li> <li>The Provider location list per Service Approver setup on Service Approver Screen SVC038 will be displayed.</li> </ul> <p><b>Online Reference:</b> <a href="#">Click Here</a></p>	<b>No change to user roles – Role: Data Downloader</b>
<b>Provider-Location Data Retrieval by Approvers</b>	<ul style="list-style-type: none"> <li>HHSC has added the ability for approvers to retrieve data for all of their subcontracted service-provider locations through third party web services. <ul style="list-style-type: none"> <li>This will include up to 30 days of data when retrieving through a web service.</li> </ul> </li> </ul> <p><b>Online Reference:</b> <a href="#">Click Here</a></p>	<b>Approving providers with sub-contractors</b>
<b>HCBS-AMH New ANSA Screen</b>	<p>The new HCBS ANSA screen and supporting workflows provides a place to document HCBS-AMH ANSA for adult clients receiving services from Home and Community Based Services -Adult Mental Health provider. HCBS-AMH ANSA can be documented for the client if a contracted provider has documented MH Uniform Assessment in the CMBHS. LMHA/LBHA/SH staff with a role of 'HCBS-AMH Referral Specialist' will be responsible for the documentation of HCBS-AMH ANSA. HCBS-AMH ANSA does not need an authorization from HHSC staff.</p> <p>The new screen is accessed through the Client Workspace. Documents in closed complete can be shared between locations without consent documents in place. All HCBS-AMH documents created at the 'Original Referring Entity' will be shared to the selected LMHA, PA and RME providers without consent. And in the future, when the listed providers on the form start providing services to the HCBS-AMH client.</p>	<b>Provider Agency Staff Recovery Management Staff</b>

<b>CIR Form Updates</b>	<p>The Critical Incident Report Form has been improved to include additional critical incidents, improved usability with collapsible and un-collapsible incident sections, and added required data for accuracy. Updates include:</p> <ul style="list-style-type: none"> <li>• Demographic section uses client profile data and no longer requires data entry.</li> <li>• Organization section now requires the Recovery Manager Name and Provider Name for better accuracy.</li> <li>• Critical Incident Details section was updated with collapsible and un-collapsible sections for better usability. The sections with data will automatically show as un-collapsed.</li> <li>• At least 1 primary incident is required and only 1 is allowed.</li> <li>• Critical Incidents are added: <ul style="list-style-type: none"> <li>○ Health or Safety Risk</li> <li>○ Nursing home placement other than for the provision of respite</li> <li>○ DFPS ANE Investigative Report Final</li> </ul> </li> </ul>	<b>HHSC Staff</b> <b>Provider Agency Staff</b> <b>Recovery Management Staff</b>
<p align="center"><b>If you have problems using CMBHS please contact the CMBHS Help Line at 1 866 806-7806 Monday - Friday 8:00 am to 4:30 pm</b></p>		