

What new DD Agency & DD Foster Care Providers Need to Know to get Set up in eXPRS

(updated 2/23/2018)

As an Agency Provider organization or Foster Care provider, new to using the Express Payment and Reporting System (eXPRS), there are a number of things you will need to know & do to get started. Much of the information and forms you will need can be found on the HELP menu for eXPRS. You can access that information by clicking the exprs-HELP Menu or use this web address: http://apps.state.or.us/exprs-Docs/

This document will hopefully outline the basic functions you will need to know to get started & ready to use eXPRS effectively.

BECOME A CREDENTIALED AGENCY or FOSTER CARE PROVIDER:

You will need to get established, credentialed (*licensed*, certified, endorsed, etc) and then enrolled with an SPD/Medicaid Provider ID number assigned for the specific type of provider you are & for the service(s) you will be delivering. This process will likely include the following steps:

- 1. Work with the ODDS Office of Licensing to complete the applicable licensure/certification/endorsement process for the type of provider you are, as needed.
- 2. Complete and submit the applicable DHS Provider Enrollment Agreement for your provider type to the ODDS Contracts & Provider Enrollment Unit.

These 2 steps are required to establish you as a credentialed provider, create your corresponding provider record(s) with assigned SPD/Medicaid provider ID number. You cannot provide services/receive payment until these steps are completed & a SPD/Medicaid provider ID number is assigned for your Agency or Foster Care Home(s).

SET UP AN EXPRS PAYEE ACCOUNT:

Complete the DHS payee/direct deposit paperwork to get established to receive payments from DHS.

- DHS Provider Direct Deposit Form eXPRS Providers
- Provider Direct Deposit Instructions and Information

SET UP YOUR eXPRS USERS WITH ACCESS TO THE SYSTEM:

You will need to complete the applicable Provider User Enrollment form(s) for those with your Agency/Organization or DD Foster Care home who will need access to eXPRS to do applicable work, such as submitting billings/claims and reviewing reports.

These user enrollment form documents are available on the <u>eXPRS HELP Menu</u> under *Provider Information* for your type of provider by using this link: http://apps.state.or.us/exprsDocs/

LOGIN TO eXPRS:

Once the user forms have been completed, submitted and user login access has been assigned from the User Enrollment Team, you will need to login to eXPRS for the first time.

How to Access and Login to eXPRS for the First Time User

REVIEW YOUR CLIENT SERVICE PRIOR AUTHORIZATIONS (SPAs):

It is likely that a majority of your services will be authorized via eXPRS Plan of Care. Once the client service prior authorizations (SPAs) are created and submitted for your Agency or FC home(s), you will need to review those to be sure they are accurate. The SPAs will list the client, the service, unit type & frequency, rate and date range for the service authorized. An SPA must be in "accepted" status (meaning it's active) before you can submit billings for payment.

Providers can view their SPAs in several ways in eXPRS:

- By a direct search for the SPA(s)
- View the SPA(s) via the billing entry pages

You will want to review your SPAs carefully to ensure that all the clients you are delivering service to are listed, and that the authorization(s)/information for them

is accurate. If you find a discrepancy in the information, contact the applicable client's assigned CDDP Service Coordinator or Brokerage Personal Agent.

CREATE AND SUBMIT BILLINGS FOR PAYMENT:

Now that your service authorizations are in place, you can begin delivering services. After services are provided, you must submit billing entries (called Service Delivered (SD) billing entries) or claims in eXPRS to receive payment. SD billing entries/claims can be submitted as frequently as you would like, but cannot be for future dates/times. Billing entries/claims that are in "accepted" status will be aggregated by eXPRS into claims for payment for Agency & FC Providers every business day.

There are many documents on the <u>eXPRS HELP Menu</u> under *Agency Providers* or *Foster Care Providers* to assist you in this work.

REVIEW YOUR BILLINGS/CLAIMS FOR ACCURACY AND COMPLETION:

Once you have submitted billings or claims for payment for the services you've provided, you will need to periodically review those billings/claims to ensure that there is no follow up action needed on your part, and that you have received your maximum payment expected.

There are many documents on the <u>eXPRS HELP Menu</u> under *Agency Providers* or *Foster Care Providers* to assist you in this work.

REVIEW YOUR PAYMENT INFORMATION AND REPORTS:

There are also several reports available on the eXPRS HELP Menu to assist you in tracking your billings, claims & payment information. There are strict timelines around submitting claims for payment, so prompt review of your billings, claims and payment information will assist in getting problems addressed and corrected within those timelines.

RESOURCES and ASSISTANCE:

If you need assistance in using eXPRS or the system is having difficulties, do not worry. You are welcome to use the information under <u>Contact Us</u> for assistance. When you contact us, please provide as much information as possible, such as

your name, contact information, work you are attempting to do in eXPRS, any errors received as well as the client(s) involved. This will assist us in problem solving the situation so we can provide support to you as quickly as possible.

