

Business Process Wizard (BPW) – Step Remark Guide

Step Remark Definition

Step remarks are messages that display on the Business Process Wizard screen in the step remark column when information in the specified step is missing or incomplete. Step remarks can display immediately after closing a step or after other steps are completed that require additional information on previous steps.

Enrollment

Enroll Provider - Individual						
Business Process Wizard - Provider Enrollment (Individual). Click on the Step # under the Step Column.						
Step	Required	Start Date	End Date	Status	Step Remark	
Step 1: Basic Information	Required	06/06/2016	06/06/2016	Complete		
Step 2: Add Locations	Required			Incomplete		
Step 3: Add Associations	Required			Incomplete		

Modification

View/Update Provider Data - Atypical Individual						
Business Process Wizard - Provider Data Modification (Atypical Individual). In order to finalize submission of your requested changes, you must complete the Step - Submit Modification Request for Review. Any modifications not submitted for review within 60 days will be purged from the system. An operations staff member will review your requested changes within 3 business days.						
<input type="checkbox"/> Step	Required	Last Modification Date	Last Review Date	Status	Modification Status	Step Remark
<input type="checkbox"/> Step 1: Basic Information	Required	06/06/2016		Complete	Updated Pending Submission	
<input type="checkbox"/> Step 2: Locations	Required	06/06/2016		Complete	Updated Pending Submission	

BPW Step Remark Resolution Guide

BPW Step	Step Remark	Resolution
Basic Information	<ul style="list-style-type: none"> No Step remarks are applicable to this BPW step. 	
Locations	<ul style="list-style-type: none"> Please add Required Location Phone Number Fee For Service or MCO Network Provider must be selected for each location. Inpatient and Pharmacy dropdowns must be selected for each location. Please add Location. Please add applicable Addresses. 	<ul style="list-style-type: none"> Add Required Field Phone Number and any other required fields for each location. (converted provider) Select at least one of the checkboxes for Fee for Service or MCO Network Provider on the Location details screen for each location. (converted provider) Inpatient or Pharmacy dropdown are not selected but they are required in the Locations. Review and add missing data. Location step has been started but not completed. At least one location is required for a provider. <i>(If the end date of the record is in the past the system will display this remark for the user to add a current record)</i> On each location select the Location code hyperlink and review the address grid at the bottom of the screen. The address button for the grid will be disabled if all required addresses for a location have been added.
Specializations	<ul style="list-style-type: none"> Please add Required Specialization 	<ul style="list-style-type: none"> Add specialization information (Provider Type, Specialty/Subspecialty and Taxonomy) for each location. <i>(If the end date of the record is in the past the system will display this remark for the user to add a current record)</i>

<p>Ownership Details</p>	<ul style="list-style-type: none"> • Please enter missing data for required fields. • At least one Managing Employee/Agent is required. • Please add the provider as the individual owner along with the provider’s SSN in the Owners List. • Ownership relationship is required when multiple individual owners have been entered. 	<ul style="list-style-type: none"> • An Individual Owner/Managing Employee has missing DOB. Update each owner and add missing required fields. (converted provider) • Add at least one Managing Employee or Agent for the provider in the 2nd grid on the list page. <i>(If the end date of the record is in the past the system will display this remark for the user to add a current record)</i> • Providers with enrollment types of Individual or Atypical Individual that enroll with FEIN in the Basic information step must add an Owner record with the Owner’s SSN. <i>(If the end date of the record is in the past the system will display this remark for the user to add a current record)</i> • Add the relationship between all individual owners
<p>Licenses and Certifications</p>	<ul style="list-style-type: none"> • Please add Required License/Certification 	<ul style="list-style-type: none"> • Add the License/Certification information that is applicable to the specializations entered. Refer to the Required Credentials button to determine what information is required for your specialization/taxonomy. The license must cover the start date of the associated specialization. <i>(If the end date of the record is in the past the system will display this remark for the user to add a current record)</i>
<p>Training and Education</p>	<ul style="list-style-type: none"> • Please add Required Training and Education 	<ul style="list-style-type: none"> • Add any training and education information that is applicable to the specializations entered. Refer to the Required Credentials button to determine what information is required for your specialization/taxonomy.

Identifiers	<ul style="list-style-type: none"> Please add Required Identifier. 	<ul style="list-style-type: none"> Add any required identifiers that are applicable to the specializations entered. Refer to the Required Credentials button to determine what information is required for your specialization/taxonomy.
Federal Tax Details	<ul style="list-style-type: none"> Please fill out the W-9 Form. 	<ul style="list-style-type: none"> Step has been started but not completed. Return to the step and click on the W-9 Form hyperlink to add the required information.
EDI Submission Method	<ul style="list-style-type: none"> Please add Required EDI Submission Method Information. 	<ul style="list-style-type: none"> Select the EDI Submission method(s) and transactions.
Trading Partner Details	<ul style="list-style-type: none"> Please add Required Trading Partner Details. 	<ul style="list-style-type: none"> At least one Trading Partner Number is required for each transaction that was selected with UHIN as the EDI Submission method. Click on the Add button to add or modify all trading partner IDs.
EDI Submitter Details	<ul style="list-style-type: none"> Please add Required EDI Submitter Information Please add EDI Submitter(s) for all EDI Transactions selected in EDI Submission Method step. Please add Required AAA EDI Submitter Information 	<ul style="list-style-type: none"> Add an EDI Submitter for each transaction selected for Billing Agent submission method on the EDI Submission Method step. Review the transactions on the EDI Submission Method step and ensure that there is an EDI Submitter for each transaction The voluntary reassignment checkbox has been selected on the HCBS Waiver step for Aging Waiver program. Add the AAA EDI Submitter or uncheck the voluntary reassignment checkbox on the HCBS Waiver BPW step.
EDI Contact Information	<ul style="list-style-type: none"> Please add Required EDI Contact Information. Please add EDI Contact for each EDI Submission Method selected. 	<ul style="list-style-type: none"> At least one EDI Contact is required for each EDI Submission Method that has been selected. Review the EDI Submission step and add any missing contacts.
Billing Provider Details	<ul style="list-style-type: none"> No Step Remarks are applicable to this BPW Step 	
Servicing	<ul style="list-style-type: none"> Please add Required Servicing Provider 	<ul style="list-style-type: none"> Add at least one Servicing Provider with all required

Provider Details	Information.	information.
MCO Network Providers	<ul style="list-style-type: none"> Please add Required Network Provider Information. 	<ul style="list-style-type: none"> Add at least one MCO Network provider with all required information.
Remittance Details	<ul style="list-style-type: none"> Please add Required Remittance Details Information. 	<ul style="list-style-type: none"> Step has been started but not completed. Return to the step and add remittance details.
Payment Details	<ul style="list-style-type: none"> Please add Required Payment Details Information. 	<ul style="list-style-type: none"> Step has been started but not completed. Return to the step and add payment details.
HCBS Waivers and EPAS	<ul style="list-style-type: none"> Please add Required HCBS Waivers and EPAS Information. 	<ul style="list-style-type: none"> Add waiver services for all waiver programs that have been selected on the specialization step.
Enrollment Checklist	<ul style="list-style-type: none"> Please complete Required Enrollment checklist. 	<ul style="list-style-type: none"> Answer all questions on the checklist. The questions are dynamic and additional questions may display as you complete this screen.
View/Upload Attachments	<ul style="list-style-type: none"> Please upload all the required documents or confirm that you will mail or fax in all the required documents. Please confirm you have read the instructions Please attach the User Security Agreement document. 	<ul style="list-style-type: none"> Upload all of the documents that are required for your enrollment or modification. Refer to the Required Credentials button for information on what documents are required for your enrollment type and specializations. If you do not have the ability to electronically upload these documents you can mail or fax these to Utah Medicaid. Select the checkbox for Fax or Mailing. If faxing use the fax coversheet to ensure the documents are processed correctly. Mark the checkbox that you have read the instructions and complete the electronic signature and select Submit button on the page. A signed Provider User Security Agreement is required for the user that is submitting the enrollment of conversion validation modification. Complete this security agreement with appropriate signatures and upload on the Attachment list.

Submit	<ul style="list-style-type: none">• Enrollment Application has not been Submitted.	<ul style="list-style-type: none">• Complete the Enrollment submission step to send the application to Utah Medicaid to review. You can continue to make changes until submission is complete. Applications that are not submitted within 60 days of application start are purged from the system.
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