Process for Non-Hospital Providers

- 1. The Provider will contact Access Center to obtain authorization. A provider ID number (PID) will be generated allowing Access Center to complete the authorization process as well as complete any necessary information in FOCUS.
- 2. Adding the PID in FOCUS will prompt an email to go to the necessary staff (via FOCUS email) to inform staff that a new Provider has been added to FOCUS. ** *If a new staff is hired the IT department must be notified to add them to the email list.* Access Center will then direct the agency to the MCCMH website for the tutorial on how to obtain FOCUS Access.
- 3. Once the Provider PID has been created and authorizations are in place, Business Management will provide instruction on the process of how to submit claims through FOCUS. The instructions will include information regarding:
 - a. FOCUS access document
 - b. Provider Profile Application
 - c. W-9
 - d. Provider Disclosure Information Request Form
- 4. FOCUS Access Instructions:
 - a. Complete FOCUS permissions form located on the website;
 - b. Fax form to designated staff in the CSI Division;
 - c. Once granted access to the FOCUS system, follow the on-line tutorial to process with billing;
 - d. Should the Provider need to speak to a person they can be directed to the designated staff in the CSI Division for assistance.
- 5. Provider Profile application instructions:
 - a. Print and completed the Provider Profile Application
 - b. Scan and email the completed Provider Profile Application to the Business Management Division (business.management@mccmh.net)
 - c. E-mail must include agency's current W-9
- 6. Once Business Management Division receives the Provider Profile Application, the following will occur:

Enter the following information in FOCUS under

- Email will be sent to the Quality Department designated staff and request that the staff add a new Vendor in FOCUS. In the email, provide staff with the Provider ID number, agency name, address and phone number.
- Email will be sent to the Quality Department designated staff and request that staff add the CPT code reflected in the authorization (example: 0124), to the Provider (provide the PID number that was originally created by the Access Center) the effective date and the rate.
- 7. After the Vendor is entered into FOCUS, Business Management Division will
 - a. Confirm the address of the Provider (There may be a main location which shows up on the bill however we want the address of the location the consumer was treated at. Need to have the full zip code as well i.e. last 4 digests)
 - b. Confirm the phone and fax numbers

- c. Enter the Federal ID number
- d. Enter the Medicaid Provider ID (this number may not fit if it is an out of state hospital. This number can be found when using the NPI registry)
- e. Enter the Medicare Provider ID Number (https://nppes.cms.hhs.gov/NPPES/NPIRegistryHome.do)
- f. Enter the Medicaid Provider Type (For hospitals: 68 for free standing Psy Hospital/73 Psy unit in a medical hospital. General Acute Care means a general hospital with a psy unit in it. Google the hospital by name to find out what type of hospital it is)
- g. Enter the NPI Number (<u>https://nppes.cms.hhs.gov/NPPES/NPIRegistryHome.do</u> or <u>http://www.npinumberlookup.org/</u>)
- h. If possible, enter the Taxonomy Code
- i. Complete the section titled, Authorization Category (ex: Psy-Hospital)
- j. Complete the section titled Consumers Served
- k. Next to the name of the Provider put (non-panel provider)
- 8. Once the Vendor is in FOCUS, double check all of the information for accuracy.
- 9. Provide the W-9 to designated staff in the Finance and Budget Division.
- 10. The GL Vendor ID is an IFIS ID utilized by Macomb County in order to pay a new vendor. An email will go to the designated staff in the CSI Division with the GL Vendor ID and that staff will put the information in FOCUS.