

Home Based Support Services

Eligibility and Invoicing Processes

Version 1.0
24 October, 2008

Intended audience

RECIPIENT	ROLE
Funders	Responsible for the funding and provision of health services to their resident populations I.e. District Health Boards and the Ministry of Health
NASC Organisations	Provide needs assessment and service coordination services to Clients requiring health and disability services.
Service Providers	Contracted to provide health and disability related services

Revision control

VER	DATE	DESCRIPTION
0.1	28 August 2008	Draft
0.2	17 September 2008	Review Version (Solutions Delivery)
0.3	7 October 2008	Review Version (Sector Services)
0.4	23 October 2008	Review Version (Solutions Delivery)
0.5	23 October 2008	Final Review Version (Solutions Delivery)
1.0	24 October 2008	Document Published

Table of Contents

1	Introduction	4
2	NASC Organisation Process Overview	5
3	NASC Organisation Rejections	7
3.1	Overview	7
3.2	Common rejection reasons	8
3.3	Actions resulting from Provider rejections	8
4	Provider Process Overview	9
5	Provider Rejections	11
5.1	Overview	11
5.2	The Leading Causes of Provider Invoice Claim Rejection	12
6	Appendix A – Acronyms and Definitions	13
7	Appendix B – Home Based Support Process Flow	14
8	Appendix C – Contact Details	15

1 Introduction

The intention of this document is to provide information that will allow for the successful payment of Home Based Support invoices.

'Home-based Support Services' refers here to the following services for DHB and MOH funded clients:

- Household Management,
- Personal Care,
- Personal Care - Sleep Over, and
- Home Support - Rural Travel Allowance.

This document should be considered alongside the following technical documents:

- **DID NASC Load Specification v1.0**, or
- **DID Electronic Invoice Load Specification v1.0**

These documents detail the specific data and format of data that NASC Organisations and Providers are required to submit in order for payment processes to operate smoothly. The documents also contain the specific reasons for rejections in both the NASC Organisation and Provider electronic loads, and detail what needs to be done to resolve these.

Read in conjunction with one of the documents listed above, this document presents an overview of:

- The key processes,
- What role each party plays in these processes
- The necessary course(s) of action to provide resolution to eligibility and invoice rejections.

2 NASC Organisation Process Overview

This document, and the **DID NASC Load Specification v1.0**, applies to the electronic allocation of Home-based Support eligibilities for DHB funded clients only.

This document, and the **DID NASC Load Specification v1.0** document, does not apply to the electronic submission of client eligibility information for MOH funded clients by NASC Organisations as this is a Socrates NASC Organisation System Process.

Any queries on Socrates/MOH funded client electronic allocation can be directed to **Socrates_HDNSDS@moh.govt.nz**.

This document, and the **DID NASC Load Specification** document, also does not apply to allocations for MOH funded IFP (Interim Funding Pool) clients, which must be submitted manually. Any queries on manual allocation for IFP clients can be directed to **BST_DSD@moh.govt.nz**.

Allocation Submission Type	Funding Stream Type		
	DHB	MOH	MOH (IFP)
Electronic Allocation	Yes		
Manual Allocation			Yes
Socrates Allocation		Yes	

NASC Organisations are contracted by DHB's and/or the MOH to assess and allocate service eligibilities for Clients requiring Health and Disability services. Unless previously agreed with Ministry of Health (Sector Support), the Home Based Support eligibility information resulting from these assessments must be submitted electronically to Ministry of Health (Sector Support) by way of an email to **NASC@moh.govt.nz**.

(HBSS Allocations **must** be submitted electronically, rather than on manual forms [e.g. the blue NS1004 form]. The only exception is Interim Funding Pool (IFP) eligibilities which must be submitted manually).

Electronic allocations are submitted as DID NASC Organisation Loads (DID Load), consisting of a collection of CSV files:

- A Client Details File (CD): This contains various elements of 'client specific' data.
- A Needs Assessment File (NA): This contains details such as the client's assessment dates, disability group, and specifies the funder (DHB or MOH).
- A Service Eligibility File (SE): This contains details such as the specific service and period being allocated for.
- A Relationship File (RL): This contains details of the Support Carer if the client is receiving Carer Support. If the client is not receiving Carer Support, this file is not required.

For the technical specification of the format and data required, please consult the **DID NASC Load Specification v1.0** document (Sections 1-3).

Once received by Ministry of Health (Sector Support), the files are processed in sequence into CCPS and all accepted lines of data are recorded. CSV and RTF Reports are created for each CD, NA and SE file processed. For RL files there is only a RTF Report created. These reports detail the accepted and rejected lines and the reasons for any rejections. These CSV and RTF Reports are emailed back to the NASC Organisation.

NASC Organisation Files which are unable to be processed (, i.e. files which have formatting errors) are not processed, but instead an email is sent by the Ministry of Health (Sector Support) to the submitting NASC with instructions as to what needs to be changed. Once these errors are corrected, the files need to be resubmitted to Ministry of Health (Sector Support).

Documents Sent/Received in the NASC Organisation process	
Submitted to Ministry of Health (Sector Support) by NASC Organisation	Returned to NASC Organisation by Ministry of Health (Sector Support)
CD, NA, SE and RL CSV files	A CSV and RTF report file for each CD, NA, SE file submitted and an RTF report for the RL file if submitted, Or
	If the submitted files are submitted in an incorrect format, an email is sent advising of the error(s), with instructions on how to correct the files.

The entire Ministry of Health (Sector Support) process, from first receiving the files from the NASC Organisation, to loading them into CCPS and producing CSV and RTF reports, and emailing these reports back to the NASC Organisation, should be completed in a timely fashion (usually within three working days).

If the CSV and RTF reports (or an email advising of an error) are not emailed back to the NASC Organisation by Ministry of Health (Sector Support) in a timely fashion (as a guide allow three working days), the NASC Organisation should contact Ministry of Health (Sector Support) to ensure that the files were in fact received by Ministry of Health (Sector Support).

It is recommended that the NASC Organisation set a 'Read Receipt'¹ when emailing files to Ministry of Health (Sector Support). This will automatically return a notification when the email is received, letting the NASC Organisation know that the email has arrived safely.

The email return of CSV and RTF files from Ministry of Health (Sector Support) to the NASC Organisation is the confirmation that the files have been received by Ministry of Health (Sector Support) and processed into CCPS. The content of the CSV and RTF files is the advice of which eligibilities have been accepted and rejected.

If the processed CD, NA, SE and RL CSV and RTF reports contain allocation rejections, these allocation lines need to be addressed and resubmitted by the NASC Organisation before the allocations can be paid on. Please see Section 3 of this document.

If allocation data is:

- Not forwarded to Ministry of Health (Sector Support), or
- If the data submitted does not conform to the format specified in the **DID NASC Load Specification v1.0** document, or
- If the data is submitted, rejected, and not corrected, or if
- Incorrect data is supplied,

Then subsequent provider claims for Home Based Support will be rejected.

¹ For more information on Read Receipts, refer to your email applications help section or contact your IT support.

3 NASC Organisation Rejections

3.1 Overview

NASC Organisation rejections are lines printed on the CSV and RTF Reports which indicate that some of the submitted data could not be accepted by CCPS. Once identified, most NASC Organisation rejections can be resolved after some corrective action by the NASC Organisation.

Details of the submitted lines which were unable to be processed are contained in the CSV and RTF electronic reports returned to the NASC Organisation once the files have been processed by Ministry of Health (Sector Support).

	A	B	C	D
1	Service Coordination ID	Status	Client NHI	Client DOE
2		Referral Date Required	XXX1234	12-Sep-23
3		No parent Service Coordination exists	XXZ1235	20-Jun-20
4		Duplicate Line	XZZ1236	24-Mar-28
5		Date Start Required	ZZZ1237	8-Nov-32
6	12345678	Eligibility Exists, no need to resubmit record	ZXX1238	19-Jun-16
7	98765432	Match OK	ZZX1239	15-Oct-13

Example of a CSV electronic report

Descriptions of the allocation rejection reasons and the course of action for resolving them can be found in the **DID NASC Load Specification v1.0** (Section 5).

The accuracy of the allocations submitted to Ministry of Health (Sector Support) by the NASC Organisation is critical. Allocations which are rejected can not be paid against, so most allocation rejections will result, later on, in invoice rejections.

The NASC Organisation must correct and resubmit all rejected allocation lines listed on the CD, NA and SE CSV files. In order to avoid invoice rejections, rejected eligibilities should be resolved as soon as possible.

Research into Home Based Support invoice rejections indicates that a leading cause of invoice rejections for providers is not the quality of the eligibility data which Ministry of Health (Sector Support) receive from NASC Organisations, but instead eligibilities which Ministry of Health (Sector Support) do not receive at all, that is, clients/eligibilities which do not appear in any of the files sent to Ministry of Health (Sector Support).

Ministry of Health (Sector Support) are unable to advise NASC Organisations of the acceptance or rejection of eligibilities which are not submitted or received.

3.2 Common rejection reasons

Examples of the most common NASC Organisation allocation rejections include:

CD File:

- Invalid Addresses: CCPS holds address reference data which is sourced from Statistics NZ. All addresses processed into CCPS must be able to be matched to the data received from Statistics NZ. Any address which does not match will be rejected by the system.
- Date of Death Conflicts: Ministry of Health (Sector Support) receives Date of Death information from Providers, NASC Organisations and the NHI database. If a Date of Death is already held in the system and the Date of Death submitted by the NASC Organisation does not match this the line is rejected. This is because when a Date of Death is processed or changed system processes are triggered which can have an impact on payments.

NA File:

- Client Not Found: The NHI and Date of Birth submitted do not match to any Client in CCPS. This commonly occurs when a new Client is rejected in the CD file, or when the Date of Birth held in CCPS is not the same as that submitted in the file.
- Date does not fit criteria: There is an error in a date submitted in the NA file (Referral date, Service Coordination referral date, Review date)

SE File:

- No parent Service Coordination exists: The SE record either does not match the submitted record in the prior NA file or the record in the NA file has rejected, or has not been submitted.
- Client Not Found: No client possessing both the NHI and the date of birth submitted in the NA file matches any client in CCPS.

For a breakdown of the NASC Organisation allocation rejection reasons and solutions, please consult the **DID NASC Load Specification v1.0** document (Section 5).

3.3 Actions resulting from Provider rejections

If there are Invoice Rejections which are classed as 'eligibility related issues', the Provider will need to refer the detail of these rejections to the NASC Organisation. On the basis of this detail, plus the information contained in the **DID NASC Load Specification**, the NASC Organisation will need to resubmit a corrected allocation to Ministry of Health (Sector Support) in order for the rejection to be resolved.

If a claim has been rejected it is important to ensure that it is resolved quickly – failure to do so will potentially result in additional rejections and unnecessary work for the Provider, NASC Organisation, and Ministry of Health (Sector Support).

With some of these Rejections it may be necessary for the NASC Organisation to query the problem directly with Ministry of Health (Sector Support). Details of who to contact can be found in Appendix C (pg 14) of this document.

On any occasion that the NASC Organisation is unable to fix an eligibility rejection which should not be occurring, the NASC Organisation will need to notify Ministry of Health (Sector Support) of the issue that prevents them from correctly allocating.

4 Provider Process Overview

This document, and the **DID Electronic Invoice Load Specification v1.0**, applies to electronic invoicing for Home-based Support eligibilities for all DHB and MOH funded clients **except** MOH funded IFP (Interim Funding Pool) clients. Claims for IFP clients must be invoiced manually. Any queries on manual invoicing for IFP clients can be directed to **provider@moh.govt.nz**.

Invoice Submission Type	Funding Stream Type		
	DHB	MOH	MOH (IFP)
Electronic Invoicing	Yes	Yes	
Manual Invoicing			Yes

Providers must claim for Home Based Support electronically on the basis of the eligibilities for clients and services provided via DID Invoice Loads. The DID Invoice Load consists of two emailed CSV files (per invoice) – Note that separate invoices are required per Funder:

- Header File (Containing Provider Details and Invoice totals)
- Lines File (Containing Claim for Service)

For the technical specification of the format and data required, please consult the **DID Electronic Invoice Load Specification v1.0** document (Sections 2-5).

These files are emailed by the Provider to Ministry of Health (Sector Support) using the **provider@moh.govt.nz** email address. The files are then processed in sequence into CCPS and two CSV Reports and one RTF report are generated. These reports detail the status (accepted or rejected) of each invoice line and provide the reason for any rejections. The two CSV Reports and the RTF Report are emailed back to the Provider with an indication of payment date.

Payment for the accepted invoice lines is then made within agreed timeframes.² Printed documentation of any payments (Remittances and Buyer Created Tax Invoices [BCTI's]) are mailed out to the provider on the actual payment date.

Provider Invoice Files which are unable to be processed (i.e. files which have formatting errors), are not processed, but instead an email is sent by the Ministry of Health (Sector Support) to the submitting provider with instructions as to what needs to be changed. Once these errors are corrected, the files should be resubmitted to Ministry of Health (Sector Support).

Documents Sent/Received in the Provider Invoicing process	
Submitted to Ministry of Health (Sector Support) by Provider	Returned to Provider by Ministry of Health (Sector Support)
An electronic invoice which consists of both a 'Header' and a 'Lines' CSV file. These must be submitted to provider@moh.govt.nz	Two CSV and one RTF report file for each invoice submitted, Or If the submitted files are submitted in an incorrect format, an email is sent advising of the error(s), with instructions on how to correct the files.

If the CSV and RTF invoice reports (or the un-processable files) are not emailed back to the provider by Ministry of Health (Sector Support) by the end of the expected payment date, the provider should contact Ministry of Health (Sector Support) to confirm that the files were in fact received by Ministry of Health (Sector Support).

² For information on submission and payment schedules, please contact **provider@moh.govt.nz**.

It is recommended that the Provider set a 'Read Receipt'³ when emailing invoices to Ministry of Health (Sector Support). This will automatically return a notification when the email is received, letting the Provider know that the email has arrived safely.

The email return of invoice CSV and RTF files from Ministry of Health (Sector Support) to the provider is the confirmation that the files have been received by Ministry of Health (Sector Support) and processed in CCPS.

The content of the invoice CSV and RTF files is the advice of which individual invoice lines have been accepted and rejected.

Some accepted lines may appear on the processed CSV reports and the RTF Report with a variety of warning messages. This is often the case when CCPS automatically adjusts an incorrectly invoiced service rate to the correct contract rate. It also occurs if a client has a date of death which is part-way through an invoiced period. For any queries on these and other 'Accepted lines with Warnings', please contact **provider@moh.govt.nz**.

If the processed CSV and RTF reports contain invoice rejections, these invoice lines need to be addressed and resubmitted by the provider before payment can be made. Please see Section 5 of this document.

³ For more information on Read Receipts, refer to your email applications help section or contact your IT support.

5 Provider Rejections

5.1 Overview

Invoice Rejections are claims made by a Provider which are unable to be matched to a corresponding eligibility in CCPS.

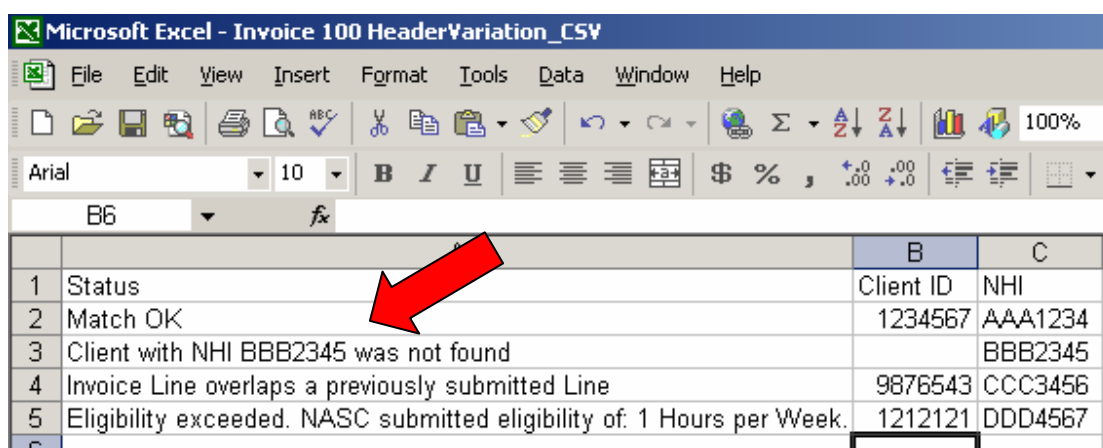
Once identified, most rejections require corrective action by the NASC Organisation and/or the Provider, depending on the type of rejection reason recorded in the Lines CSV file and RTF file.

Until the allocation or claim issue which has caused the invoice rejection is solved, no payment can be made.

It is also important to note that some invoice rejections are legitimately rejected, and will not be paid. Most commonly, this is the case when:

- The NASC Organisation does not intend an allocation for a given client/service/period, so there is no allocation which matches the invoiced claim.
- The Provider has claimed over-and-above the correct maximum allocation for the client.

Every rejection has a rejection reason and thus all rejections will require some action to resolve the cause. The reason for each rejected invoice line will appear in Column A of the CSV file and also on the bottom of the RTF Lines file which is forwarded to the Provider.



		B	C
1	Status	Client ID	NHI
2	Match OK	1234567	AAA1234
3	Client with NHI BBB2345 was not found		BBB2345
4	Invoice Line overlaps a previously submitted Line	9876543	CCC3456
5	Eligibility exceeded. NASC submitted eligibility of: 1 Hours per Week.	1212121	DDD4567

Example of a CSV electronic report

A detailed description of these rejections can be found in the **DID Electronic Invoice Load Specification v1.0**, along with details of what needs to be done to resolve the rejection (Sections 6-7).

Once the CSV and RTF files are received by the Provider from Ministry of Health (Sector Support), the Provider then has to address any rejections by:

- Correcting all Provider-submission claim errors which have caused rejections, and resubmitting these claims. This should be done by following the instructions in the **DID Electronic Invoice Load Specification v1.0** and alongside any additional information supplied by Ministry of Health (Sector Support).
- Notifying the relevant NASC Organisation of all 'eligibility related issue' rejections on the basis of the **DID Electronic Invoice Load Specification v1.0** instructions as quickly as possible. Once advised by the NASC Organisation that allocations have been (re)submitted and confirmed, the rejected claim should be resubmitted.
- Keeping track of those claims that initially rejected but have later been re-invoiced and paid.

5.2 The Leading Causes of Provider Invoice Claim Rejection

If eligibility data which matches the claim has not been forwarded to Ministry of Health (Sector Support) by the NASC Organisation, or if the format or data supplied by the NASC Organisation is incorrect, or if rejected eligibilities have not been corrected by the NASC Organisation then Providers invoice lines will reject.

Likewise, if the Provider supplied invoice contains data which does not conform to the format specified in the **DID Electronic Invoice Load Specification v1.0** document, or if other incorrect data is supplied by the Provider then invoice lines will reject.

The following three categories of rejection account for approximately 90% of surveyed Invoice Rejections nationwide (by dollar value):

- 5.2.1 No allocation, or no updated allocation, has been received by Ministry of Health (Sector Support)
No allocation for a given client/service/period has been *received* by Ministry of Health (Sector Support) which matches the claim which a provider has made.
- 5.2.2 Provider Over-claim
The Provider is claiming in-excess of the client's present & correct eligibility. This can often happen when a previous payment has not been reconciled by the Provider, and they reclaim for a period which has already been paid.
- 5.2.3 Client Invoiced Funding Stream is Incorrect
Providers must submit invoices separately for DHB and MOH funded clients, and must ensure that they are using the correct service codes depending on funder. Often Providers will invoice for DHB clients on their MOH invoices and vice-versa or will use the incorrect service code. This causes these claims to reject.

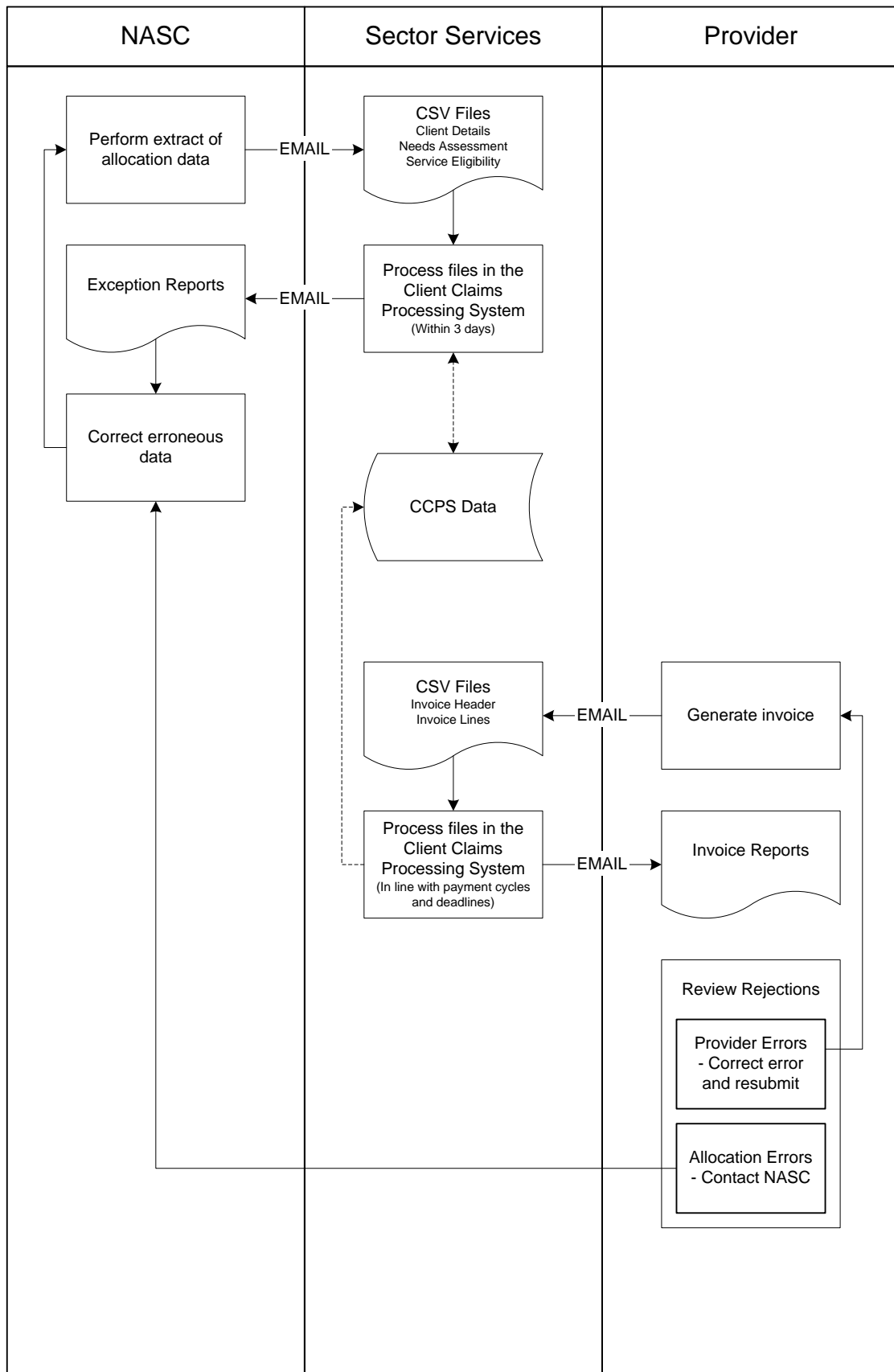
For the breakdown of invoice rejection reasons and solutions, please consult the **DID Electronic Invoice Load Specification v1.0** document (Sections 6-7). This document states the course of action for each rejection type. Depending on the solution recommended in the guide, providers should:

- Eligibility related issue: Query the allocation with the NASC Organisation, asking them to confirm the allocation, then to correct and (re)submit the allocations where necessary. Once advised of the correction by the NASC Organisation the Provider should resubmit the claim to Ministry of Health (Sector Support) in the normal manner (refer to Section 4 for process).
- Provider claim issue: Correct the invoice line according to the **DID Electronic Invoice Load Specification v1.0** guidelines (Sections 6-7) and resubmit the invoice line to Ministry of Health (Sector Support) in the normal manner.
- Ministry of Health (Sector Support) Issue: Contact Ministry of Health (Sector Support) (at the contact details provided in Appendix C).

6 Appendix A – Acronyms and Definitions

ACRONYM	DESCRIPTION
DHB	District Health Board
MOH	Ministry of Health
Ministry of Health (Sector Support)	A business unit within the Information Directorate of the Ministry of Health, responsible for many of the roles previously undertaken by HealthPAC.
NHI	National Health Index Identifier
CCPS	Client Claims Processing System
NASC Organisation	Needs Assessment and Service Coordination Agency
HBSS	Home-based Support Services
CSV	Comma Separated Values (Microsoft Excel File)
RTF	Rich Text Format (Microsoft Word File)
CD File	Client Details CSV File
NA File	Needs Assessment CSV File
SE File	Service Eligibility CSV File
RL File	Relationship CSV File
Allocation	The Client, Assessment & Service data contained in the NA and SE files
Eligibility, or Service Eligibility	A client specific eligibility for a service existing in CCPS– the result of a correctly submitted Allocation.
Invoice	An electronic invoice which consists of both a 'Header' and a 'Lines' CSV File.
Invoice Line	A single claim line on a Lines CSV File, containing client NHI, Service, Number of Units, Service Period, and Dollar Value
IFP Client/Manual Invoicing	A special type of MOH funded client who must be allocated for and invoiced for manually. Allocation queries for IFP clients should be forwarded to BST_DSD@moh.govt.nz . Invoicing queries for IFP clients should be forwarded to provider@moh.govt.nz .

7 Appendix B – Home Based Support Process Flow



8 Appendix C – Contact Details

Contact Details for NASC Organisations	
Submission/Query Type	Ministry of Health (Sector Support) Contact Point
NASC Organisation submission of CD, NA, SE and RL CSV files	NASC@moh.govt.nz
NASC Organisation Socrates queries	Socrates_HDNSDS@moh.govt.nz
NASC Organisation IFP queries	BST_DSD@moh.govt.nz
All other NASC Organisation queries	NASC@moh.govt.nz
	0800 281 222 (option 3)

Contact Details for Providers	
Submission/Query Type	Ministry of Health (Sector Support) Contact Point
Provider submission of Header and Lines CSV files	provider@moh.govt.nz
Provider queries	provider@moh.govt.nz
	0800 281 222 (option 3)