

THE MARYLAND DEPARTMENT OF HEALTH AND MENTAL HYGIENE

Health Homes

eMedicaid Instructions

Maryland Medical Assistance

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Table of Contents

I. What is eMedicaid?3

II. Register in eMedicaid4

III. General Guidelines for using eMedicaid for Health Homes.....6

IV. Log in to the Health Homes eMedicaid System.....5

V. Add a New Participant.....8

VI. Search for a Participant.....12

VII. Add, Update & Review Participant Information.....13

 a. Report a New Diagnosis.....13

 b. View Diagnoses.....14

 c. Report Health Home Services.....14

 d. View Health Home Services.....15

 e. Report Health Home Outcomes.....15

 f. View Health Home Outcomes16

 g. Update Intake Information.....16

 h. Change Care Manager.....16

 i. Discharge a Participant17

VIII. View Reports.....18

IX. View Historical Data.....18

X. Log off the Health Homes eMedicaid System.....20

I. WHAT IS EMEDICAID?

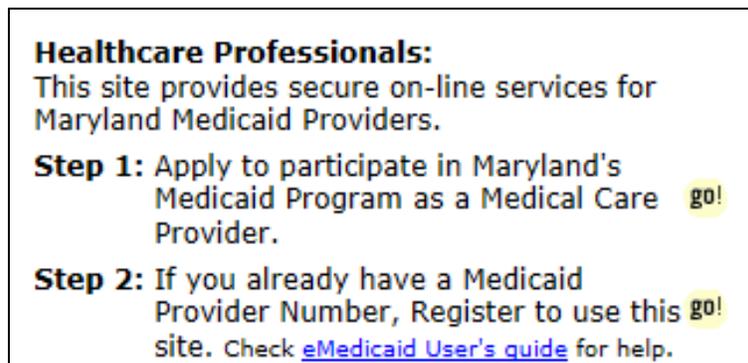
eMedicaid for Health Homes is an online portal that providers use to enroll participants and to report diagnoses, outcomes, and services delivered. Psychiatric Rehabilitation Programs (PRP) and Mobile Treatment (MT) providers will act as Health Homes for those with serious mental illness and serious emotional disturbance, while Opioid Treatment Programs (OTPs) will serve those with opioid substance use disorders. The reporting options vary depending on which provider type is using the system, so there are two separate logins for the two categories.

II. REGISTER IN EMEDICAID

The following instructions explain how to register with eMedicaid, which includes multiple tools including the eClaims and Health Home systems. If you are already registered with eMedicaid, you will need to assign all necessary staff user IDs and activate the Health Home option, as detailed below.

1. **Access the eMedicaid website:** <https://encrypt.emdhealthchoice.org/emedicaid/>

2. **Register for eMedicaid**
 - a. The user must already have an active Medicaid provider number to use eMedicaid.
 - b. To register for eMedicaid, click on “go!” under Step 2 on the eMedicaid page and complete the requested steps.



- c. For detailed instructions on eMedicaid registration, click on the “eMedicaid users guide” link under step 2.

3. **Assign a Site Administrator**

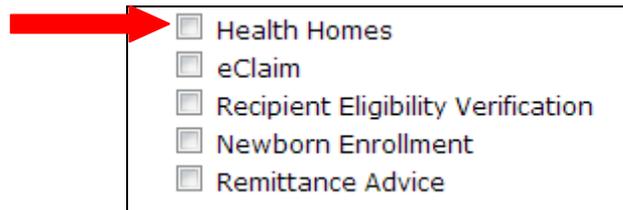
The site administrator will be responsible for setting up User IDs and authorizations for your organization (This Administrator may be any designated staff member in your agency).

 - a. After clicking the “Register Now” button, the site administrator will apply for a user name and password that will activate the Health Home option in eMedicaid.

- b. The administrator logs on to eMedicaid, and clicks the “Administrator Services” link.
- c. On the “Administrator Services” page, the administrator may:
 - Update their profile
 - Assign Care Managers for a Health Home site
 - View authorization and transaction logs.

4. Authorize Staff as Health Home eMedicaid Users

- a. Administrator clicks the “Add a New User” button” and creates a profile for each user. A profile should be created for any staff that will need to access the Health Homes portal for the purposes of reviewing or reporting services and outcomes, or determining billable participants each month.
- b. Check the “Health Homes” box for each site offering Health Home services that the user will be authorized to access. Users will only be able access or enter information for the sites for which they have been authorized.



- c. The administrator can also make changes to any user profile at any time by selecting the “Edit User” link next to each registered user per site, on the “administrator services” page.

****You are now ready to use the Health Homes eMedicaid system.****

III. General Guidelines for using eMedicaid for Health Homes

Please note:

- When using this site, please do not use your browser's "Back" button for navigation. Please only use the buttons or any of the links on this site for navigation. For example, those labeled "Services Home" or "Health Homes Main."
- An asterisk indicates that field must be filled or checked to submit and/or continue to the next page.
- Information appearing in tables will generally appear in chronological order by default. The user may choose to sort and group data by clicking the arrows that appear to the right of each column title.
- Many screens may be exported to excel documents by selecting an option at the bottom of the screen.

IV. Log-in to the Health Homes eMedicaid System

1. Sign In

Enter: <https://encrypt.emdhealthchoice.org/emedicaid/> into your web browser and sign in using your user id and password.

2. Select “Health Homes”



Maryland
MEDICAL PROGRAMS
Web Services
*... brought to you by the Maryland
Department of Health and Mental Hygiene*

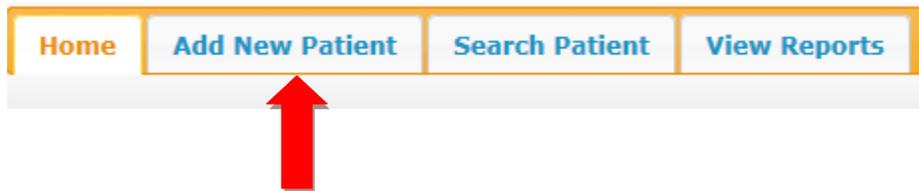
NEW FEATURE! Direct Claim Submission
The following provider types (click [here](#)) that bill on the CMS 1500 are now able to submit their claims electronically through this site. **This new feature is for single CMS 1500 claims ONLY, i.e., claims with attachments cannot be submitted.** Click [here](#) for an eClaim Overview and [here](#) for the eClaim Tutorial. If you have questions, please send them to: eMedicaidMD@dhmh.state.md.us.

 [Health Homes](#) [Recipient Eligibility Verification](#)

V. Add a New Participant

All new Health Home participants must be entered in eMedicaid. Providers may not receive reimbursement for any Health Home services provided to an individual until they have completed the eMedicaid intake for that participant. Similarly, only services with dates of service later than the initial enrollment may be reported in eMedicaid. To add a new participant to your Health Home, follow the instructions below.

1. Click “Add New Patient”



2. Select Health Home Site

If appropriate, select the Health Homes site at which the participant is enrolled from the drop down menu.

3. Enter Participant Identifiers

Enter the participant’s last name, date of birth and either MA number or Social Security Number (SSN). This will allow the system to prepopulate additional fields on the next screen from the state’s database.

A screenshot of a form titled 'Patient Demographics'. It contains the following fields: 'Medical Assistance Number:' followed by an input box, 'OR SSN:' followed by an input box, 'Last Name:' followed by a wide input box, and 'DOB(mm/dd/yyyy):' followed by an input box with a calendar icon. A 'Continue' button is located at the bottom right of the form.

- Please note that you receive the message “*Patient is not eligible for Health Homes Services*” the individual is not eligible to receive Health Home services, or may be enrolled with another Health Home provider.

4. Assign a Care Manager

Select the assigned to the participant from the drop down list of users on the right. *Only users authorized for Health Homes access at the location where the recipient is enrolled are shown in the list.*

The screenshot shows a web form titled "Intake Information" with a header bar containing "Patient Account Number: 0" and "Enrollment Status: INCOMPLETE". Below the header, the section "Care Manager Assigned" is highlighted in blue. A text box contains the instruction: "Select the care manager assigned for the patient. Only the users who are authorized for 'Health Homes' services in the location where the recipient is enrolled are shown in the list." To the right of this text is a dropdown menu with the text "Select the care manager" and a downward arrow. A red arrow points to this dropdown menu.

5. Enter the Participant’s Primary Therapist or Counselor at your Agency
6. Enter the Participant’s Primary Care Provider
7. Change Pre-populated Fields as Necessary

In the “Patient’s Demographics” box, some fields are automatically prepopulated, but some may be changed depending on the wishes of the participant (e.g. First Name, Gender Identity, Ethnicity and Race). Fields not specified with an asterisk are optional to complete.

8. Indicate Consent

Check the consent box when the Health Home consent form has been signed by participant or guardian and included in the participant records.

9. Enter Qualifying Diagnosis

Enter the diagnosis by which the participant qualifies for Health Home services. Diagnosis options will vary depending on whether the participant is an adult or under 18 years of age, as well as whether the Health Home is a PRP, Mobile Treatment, or OTP provider.

a. PRP/MT participants

Identify the qualifying diagnosis by selecting the primary mental health condition for which the participant qualified for PRP or MT services by clicking the appropriate box(es) or entering a diagnosis under “other.”

If the participant experiences secondary mental health diagnoses, indicate these by selecting the appropriate box(es) under the “Additional Mental Health Condition” section.

b. OTP participants

- i. Select the box attesting that the participant has been diagnosed with an opioid substance disorder and is currently being treated by this facility with methadone or buprenorphine therapy.
- ii. Select the risk factor that qualifies the individual for participation in the Health Home. This includes current use of tobacco, alcohol, or non-opioid substance use, or a history of dependence on any of these three substances.

10. Enter Chronic Conditions and Baseline Data

Some conditions and baseline data are prepopulated from the qualifying diagnoses, others must be entered as applicable.

- a. Enter the following baseline measures for the participant, BMI is automatically calculated based on entered height and weight:
 - Weight in pounds
 - Height in inches
 - Blood pressure
- b. Select any conditions listed with which the participant has been diagnosed, and enter the relevant baseline data, as available, by clicking on the box that corresponds with the appropriate diagnosis. You may select more than one diagnosis.

<input checked="" type="checkbox"/> Mental Health Condition <i>(must select one or more below)</i> <ul style="list-style-type: none"><input checked="" type="checkbox"/> Primary SPMI/SED diagnosis<input type="checkbox"/> Adjustment disorder<input type="checkbox"/> Anxiety disorder<input type="checkbox"/> Impulse-control disorder<input type="checkbox"/> Mood disorder(bipolar, depressive, etc)<input type="checkbox"/> Personality disorder(borderline, antisocial, narcissistic, paranoid, etc)<input type="checkbox"/> Schizophrenia or other psychotic disorder<input type="checkbox"/> Other (must specify): <input type="text"/> <input type="checkbox"/> Substance use disorder <input type="checkbox"/> Asthma <input type="checkbox"/> Chronic obstructive pulmonary disease(COPD) <input type="checkbox"/> Diabetes <input type="checkbox"/> Heart Disease <input type="checkbox"/> Hypertension <input type="checkbox"/> Overweight and Obesity-BMI over 25 <input type="checkbox"/> Infectious Disease
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11. Enter Social Indicators

Complete the Social Indicators section by selecting the appropriate options from the drop-down menus and entering notes as appropriate. Options will vary depending on the age of the participant.

12. Save, Submit, or Cancel

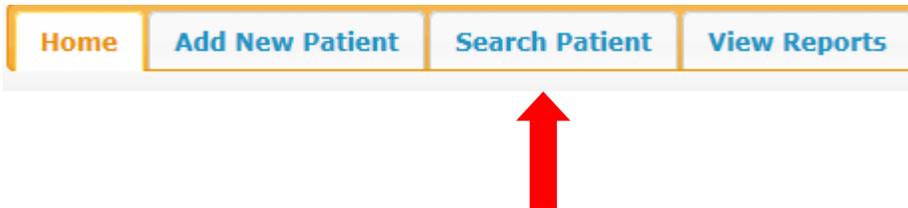
At the bottom of the form you have the option to select “Save & Submit Later,” “Submit Patient Intake” or “Cancel.”

- a. “Save & Submit Later” will redirect the user to the Health Homes eMedicaid home page, where the saved enrollment will be visible under “Draft Enrollments.” Please note that your participant has not been officially enrolled in eMedicaid and their services are not billable if you select this option.
 - To return to the intake application to complete and submit the form, click on the participant’s recipient account ID number (a unique number specific to each enrollee and health home site) under the “Draft Enrollments” box.
 - Please note that Draft Enrollment will be automatically deleted after 7 days from the draft created date.
- b. “Submit Patient Intake” will display a summary of the intake information and display three options at the bottom of the screen to allow the user to “Make Changes,” “Save & Submit Later,” or “Submit Intake.” Selecting “Submit Intake” will officially enroll the participant in the Health Home.
- c. “Cancel” will allow the user to exit the intake screen, discarding the enrollment

VI. Search for a Participant

If the user wishes to review, add, or update information for a Health Home participant, they may do so by searching for the participant and following the directions below. Please note that only the participants already enrolled in the system can be searched. Participants in draft enrollments are not included in the search results

1. Click “Search Patient”



2. Select Participant Location/Site

Under the “Health Home Provider” section, select from the drop down menu the location with whom the participant is enrolled. The provider base number (base Medicaid provider number) is automatically displayed here.

3. Enter Participant Information

Under the “Patient” section, enter the participant information and press “Search Patient.” You do not need to complete all the fields.

Health Home Provider	Patient			
Provider Base Num: <input type="text" value=""/>	MA Num: <input type="text" value=""/>	Date of Birth: <input type="text" value=""/>	Enrolled Date	Discharged Date
Select the location: <i>(Only the locations that you are authorized to access 'Health Homes' are listed)</i>	Last Name: <input type="text" value=""/>	First Name: <input type="text" value=""/>	<input type="text" value=""/> (from)	<input type="text" value=""/> (from)
All authorized locations <input type="text" value=""/>	Care Manager ID: <input type="text" value=""/>		<input type="text" value=""/> (to)	<input type="text" value=""/> (to)
<input type="button" value="Search Patient"/> <input type="button" value="Clear Form"/>				

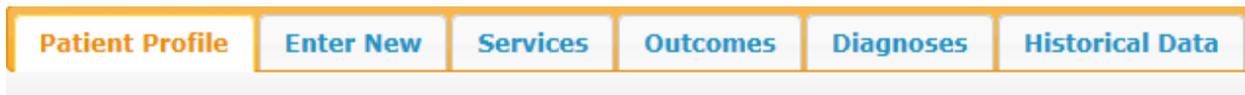
4. Select the Participant

- a. A listing will display all participants matching the search criteria.
- b. Click on the number in the “Recipient Account Id” box to view a detailed account of the participant. You may export basic participant information to an Excel spreadsheet by clicking on “Export: Excel.”
- c. The “Patient Profile” tab displays participant information including the patient’s Medicaid number, care manager, enrollment effective date, etc. A listing of care plan files for the participant will appear on the right side of the screen and may be viewed by clicking on them.

VII. Add, Update & Review Participant Information & Services

Health Homes will use eMedicaid to add, update, and review participant information, including diagnoses, services, and outcomes. Please note that any information reported may be edited or updated for a period of 30 days, for example if an error is noticed.

After searching for and selecting a participant, the user will see six tabs: Patient Profile, Enter New, Services, Outcomes, Diagnoses, and Historical Data. To report a new diagnosis, Health Home services, or Health Homes outcomes, select the “Enter New” tab.



1. Report New Diagnosis

- a. Select the “Enter New” tab after reaching the Patient Profile page.
- b. Click “Report New Diagnosis”
- c. The Diagnosis screen will appear, pre-populated with any previously-reported diagnoses and related data.
- d. Adjust weight, height, and blood pressure if these need to be updated. Doing so will create an updated entry while keeping the previous values saved in the system.

Weight:*	<input type="text"/>	lbs	<i>(whole numerical value 25-1000)</i>
Height:*	<input type="text"/>	inches	<i>(numeric value 24-90, up to one decimal place)</i>
BMI:	<input type="text"/>		
Blood Pressure:*	<input type="text"/>	/	<input type="text"/> <i>(whole numbers 0-300, both fields must be filled in)</i>

- e. Report any new diagnoses and associated data by selecting and completing the applicable boxes and fields. If a condition has been resolved, you may uncheck the corresponding box.
- f. When all updates have been made, click “Submit Diagnosis.”

- g. The “Back to Patient Profile” button will return the user to the Patient Profile without saving any changes.

2. View Diagnoses

- a. Click the “Diagnoses” tab at the top of the participant profile screen.
- b. A table will show the Serial Number (SN) (a unique ID generated by the Health Homes system for tracking purposes), reported data, who reported the data, diagnoses, and associated indicators.
- c. Every diagnosis will have a unique serial number. Users may click on the number to view more detailed diagnosis information or update the diagnosis information if it has been reported within 30 days.
- d. Diagnoses will be displayed in chronological order, but the user may choose to sort by any of the columns displayed by clicking the gray arrows next to each column title. This is true of all tables in eMedicaid.

3. Report Health Home Services

- a. Select the “Enter New” tab after reaching the Patient Profile
- b. Select the “Report Health Home Services” link
- c. Six core service categories will be displayed, each with specific services listed below.
- d. Select the box for the service you wish to report, and enter the required information, which may include date of service, notes, or additional details.
- e. Select “Back to Patient Profile,” “Save & Submit Later,” or “Submit.”
 - “Back to Patient Profile” will take you back to the participant’s profile. Please note that this option does not save your Health Homes services reports.
 - “Save & Submit Later” lets you save the data you entered as a draft without submitting it. Please note that draft Health Home Services are deleted automatically after 7 days from the date of creation. To access your draft at a later time, repeat the steps listed above to report Health Homes services and a link will appear that will take you directly to your draft.

- “Submit” saves your work in the eMedicaid record.

4. View Health Home Services

- a. To view services that have been reported for a participant, click the “Services” tab at the top of the participant profile screen.
- b. A table will display services reported and accompanying details in chronological order but may be sorted by any of the column titles.
- c. The user may export this information to a Microsoft Excel spreadsheet.

5. Report Health Home Outcomes

- a. Select the “Report Health Home Outcomes” link.
- b. A screen will display the outcomes most recently reported by the user. This will include both clinical and social outcomes.
- c. Enter updated information in the appropriate fields.
- d. When submitted, the new outcomes will be saved in the system. This will not erase the previously reported outcomes; they will still be visible in the “Outcomes” tab of the Patient Profile.
- e. Select “Back to Patient Profile,” “Save & Submit Later,” or “Submit Outcomes.”
 - “Back to Patient Profile” will take you back to the participant’s profile. Please note that this option does not save your Health Homes outcome reports.
 - “Save & Submit Later” saves the data entered as a draft without submitting it. Please note that draft Health Home Outcomes are deleted automatically after 7 days from the date of creation.
 - To access draft at a later time, repeat the steps listed above to report Health Homes outcomes and a link should appear that will take you directly to your draft.
 - “Submit” saves the data entered in eMedicaid.

6. View Health Home Outcomes

- a. To view services that have been reported for a participant, click the “Services” tab at the top of the participant profile screen.
- b. A table will display services reported and accompanying details in chronological order but may be sorted by any of the column titles. For example, if the user would like to review all outcomes associated with a particular diagnosis, they may choose to sort the table in this manner.
- c. The user may export this information to a Microsoft Excel spreadsheet.

7. Update Intake

- a. Please note the participant intake may only be updated within 30 days of the initial intake submission date. After 30 days, the "Update Intake" button will not be available on the screen.
- b. Select the “Update Intake” button on the bottom of the Patient Profile screen.
- c. You will be redirected to the “Intake Information” page where you can make changes to the participant’s intake information (For detailed directions see “ Add a New Patient” on page 8).
- d. At the bottom of the page, select “Update Patient Intake.”

8. Change Care Manager

- a. Click “Select a New Care Manager” on the Patient Profile screen
- b. Select the care manager assigned from the drop down menu. Only the users who are authorized for "Health Homes" services in the location where the recipient is enrolled are shown in the list.

Select a new Care Manager

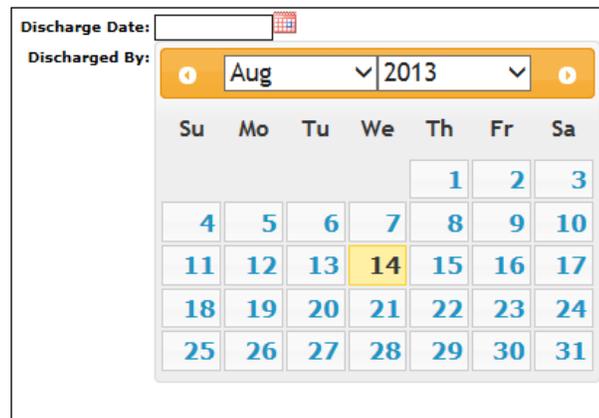
Select the care manager assigned for the patient. Only the users who are authorized for "Health Homes" services in the location where the recipient is enrolled are shown in the list.

Select the care manager ▼

- c. Click “Submit.”
- d. If you do not wish to save or complete this section you may go back to the previous screen by clicking, “Back to Patient Profile.”

9. Discharge a Participant

- a. Select “Discharge Patient” on the bottom of the Patient Profile screen.
- b. Select the reason for the discharge from the dropdown menu.
- c. Enter the discharge date. (The user may either manually enter the date in the mm/dd/yyyy format or by click on the date on the drop down calendar.



The screenshot shows a form with two fields: "Discharge Date:" and "Discharged By:". The "Discharged By:" field is expanded to show a calendar for August 2013. The calendar has a header with days of the week (Su, Mo, Tu, We, Th, Fr, Sa) and a grid of dates from 1 to 31. The date 14 is highlighted in yellow.

Su	Mo	Tu	We	Th	Fr	Sa
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

- d. Select “Discharge” to officially discharge the participant.
- e. The discharge information entered will now appear on the bottom of the participant’s profile.

VIII. View Historical Data

If a participant was formally enrolled with another Health Home, their previous eMedicaid information will appear in the “Historical Data” tab. This information may be viewed but not edited.

IX. View Reports

The reports tool can assist Health Homes with population level care management, as well as identify billable participants for each month. To access the reports feature, select the “View Reports” tab at the top of the screen from the Health Homes eMedicaid home page. Both forms of reports may be sorted by column or exported to excel, allowing for additional analysis.



1. Monthly Service Report

- a. Select “Monthly Service Report”
- b. By default, the report will combine data from all Health Home locations. If the user wishes to generate a report for a single site, select this from the dropdown menu.
- c. Enter the month and year for which you wish to view the report.
- d. Click “See Report.”
- e. The report will include ALL Health Home participants, both active and discharged, excluding draft enrollments.
- f. Those with YES in the “New Enrollee” column were enrolled during the month of the report, and the Health Home may submit a claim for their intake process.
- g. Those with YES in the “Minimum Services Delivered” column received at least 2 services during the report month, and the Health Home may submit a claim for their monthly rate.

- h. Additional fields display demographic information, total services delivered in the month, the assigned care manager, and whether the individual is discharged or active.

2. Diagnosis Report for Patient Panel

- a. Select “Diagnosis Report.”

- b. By default, the report will combine data from all Health Home locations. If the user wishes to generate a report for a single site, select this from the dropdown menu.

- b. Enter the month and year for which you wish to view the report.

- c. Select a diagnosis from the dropdown menu.

- d. Click “See Report.”

- e. You will be redirected to a screen that shows all of the participants for whom the Health Home has reported the selected diagnosis, as of the selected month.
- f. The table will include each participant’s name, Medicaid number, date of birth, whether they have been discharged, the date on which the diagnosis was first reported on and the name of the care manager.

X. Log off of the Health Homes eMedicaid System

1. Click the “sign out” link in the upper right corner of any screen where it says “You are currently signed in as...”
2. When you see the sign in screen you are officially logged off of the Health Homes eMedicaid system.

If you have require additional support when using eMedicaid, please contact Corden Kane at corden.kane@maryland.gov.