Thank you for joining us today for this informational webinar regarding the certification process in accordance with Part 132 for Community Mental Health Centers and Certified Specialty Providers. As a reminder, all attendees have been placed in listen only mode. We ask that you type any questions into the chat box during the presentation. All questions received will be answered and placed in a Q & A document. The Q & A document, as well as a recording of this presentation, will be posted on the Illinois Department of Human Services website. The web address for this website will be provided at the end of this presentation.
The purpose of today’s training is to assist attendees in fully understanding the process that must be taken to become certified under Part 132. In addition, other miscellaneous topics will be discussed such as adding or changing specialties/subspecialties and what to do when there has been a change in the predominant/primary funding source.
Acronyms are used throughout this presentation. Let’s cover these acronyms so we all are knowledgeable of what they stand for…….

The first acronym is BALC meaning the Bureau of Accreditation, Licensure and Certification which is a Division of the Illinois Department of Human Services. Next, there is CMHC which stands for Comprehensive Community Mental Health Center.

Then there is CSA which represents Certifying State Agency. The two CSAs are BALC, again meaning the Bureau of Accreditation, Licensure and Certification, and the second CSA being the Illinois Department of Children and Family Services or their designee.

Next is CSP, signifying Certified Specialty Provider.

Then there is DCFS, implying the Illinois Department of Children and Family Services which is the Child Welfare Authority, followed by DHS meaning the Illinois Department of Human Services.

Followed by DMH, representing the Division of Mental Health which is the Division within the Illinois Department of Human Services that operates as the Mental Health Authority.

And last on this slide is FEIN, meaning the Federal Employer Identification Number.
Here is another slide outlining additional acronyms that are going to be used during this presentation.

There is HFS signifying the Illinois Department of Health Care and Family Services which is the State Agency who serve as the Illinois Medicaid Authority.

Next is IMPACT standing for Illinois Medicaid Provider Advanced Cloud Technology. IMPACT is the Illinois Medicaid Provider Enrollment System that is governed by HFS.

Then IPI, meaning the Infant Parent Institute who serves as the DCFS representative in the Part 132 certification process.

Next is MCO signifying Managed Care Organization.

Then there is NPI denoting National Provider Identifier followed by NPPES, that corresponds to the National Plan and Provider Enumeration System which is the Federal Division under the Centers for Medicare & Medicaid Services. NPPES assigns unique identifiers termed NPIs for the purpose of improving the electronic transmission of health information and finally, PES representing Provider Enrollment Services which is a Division under HFS.
Before we start discussing steps and processes involved in the Part 132 certification process, there are several terms I would like to define so as to ensure we all have a clear understanding.

The first term is “Entity” as it relates to a CMHC versus a CSP.

The first arrow point describes the definition of an entity as it relates to a CMHC. For a CMHC, all sites operating under its organizational structure are considered the entity. So whether the CMHC has 10 sites or has only one site, all its total parts are considered a single CMHC entity. One other area I would like to mention is that for a CMHC entity, the entire organization is certified as a whole. The parts, meaning the sites, are not certified individually.

For CSPs, each CSP site serves as an entity by itself and each CSP site is individually certified.
Another term I would like to cover is “NPI”. We have found through our conversations with various providers that there has been some lack of understanding in regards to what a NPI is, the types of NPIs and how to get a NPI. First, a NPI is a unique 10-digit identification number issued to health care providers in the United States by NPPES which is a Division under Federal CMMS, meaning the Centers for Medicare and Medicaid Services.

There are two types of NPI numbers:

- **Type 1**: A NPI number associated with an individual healthcare professional (e.g., MD, Psychologist, LCSW, etc.). The individual may be a sole proprietor or may be employed by a clinic, group practice or other type of organization.

- **Type 2**: A NPI number associated with an organization, facility or practice. The Type 2 NPI is typically associated to the organization’s, facility’s or practice’s FEIN. When applying for a Type 2 NPI number through NPPES, you will be required to list your entities FEIN.

To apply for an NPI, one needs to refer to the NPPES website. The web address for NPPES will be provided at the end of this presentation.
### CMHC vs. CSP

<table>
<thead>
<tr>
<th>CMHC</th>
<th>CSP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meets the requirements outlined in Part 132, Subparts B and C</td>
<td>Meets the requirements outlined in Part 132, Subpart B</td>
</tr>
<tr>
<td>Must be certified by DHS/BALC or DCFS/IPI</td>
<td>Must be certified by DHS/BALC or DCFS/IPI</td>
</tr>
<tr>
<td>Allowed to bill HFS Illinois Medicaid for services rendered as well as any of their associated Medicaid Management Care Organizations (MCOs) thus must have a Type 2 NPI number for each CMHC site and must enroll each CMHC site separately in IMPACT</td>
<td>Not allowed to bill HFS Illinois Medicaid for services nor any of their associated Medicaid Management Care Organizations (MCOs) thus does not require a Type 2 NPI number for a CSP site and does not enroll the CSP site in IMPACT</td>
</tr>
<tr>
<td>Allowed to provide Psychosocial Rehabilitation (PSR) and Assertive Community Treatment (ACT) services</td>
<td>Not allowed to provide Psychosocial Rehabilitation (PSR) or Assertive Community Treatment (ACT) services</td>
</tr>
<tr>
<td>May provide specialty programs directly funded by DHS/DMH and/or DCTS (grant funding) if receives $200,000+ in grants, the entity must be accredited</td>
<td>May provide specialty programs directly funded by DHS/DMH and/or DCTS (grant funding) if receives $200,000+ in grants, the entity must be accredited</td>
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</table>

The last terms I would like to discuss are CMHC and CSP. The displayed chart nicely outlines the differences between a CMHC versus a CSP. Let’s review the chart.

First, a CMHC must meet the requirements outlined in Part 132, Subparts B and C whereas a CSP must only meet the requirements outlined in Part 132, Subpart B. Both CMHCs and CSPs must be certified by a Certifying State Agency, a CSA, that either being DHS who is represented by BALC or that being DCFS who is represented by IPI.

CMHCs are allowed to bill HFS Illinois Medicaid for services as well as any of their associated Medicaid Managed Care Organizations (or MCOs). A CSP by itself is not allowed to bill HFS Illinois Medicaid nor any of their associated Medicaid Managed Care Organization (or MCOs).

Since CMHCs are able to bill HFS Illinois Medicaid and their MCOs, CMHCs must obtain a Type 2 NPI for each CMHC site and enroll each CMHC site separately in IMPACT where as a CSP site does not require a Type 2 NPI and does not require enrollment in IMPACT as a CSP is not allowed to submit Medicaid claiming.

One of the major differences between a CMHC and a CSP is that a CMHC is able to provide the services of Psychosocial Rehabilitation, also known as PSR, and Assertive Community Treatment, also known as ACT, where as a CSP cannot provide these services.

Both CMHCs and CSPs may receive grant funding. Although not delineated in Part 132, I would like to mention as a reminder that if an entity receives $200,000 or more in grant funding, the entity must be accredited.
So now let’s start talking about the Certification Process. The next few slides are specifically referencing CMHCs, either a new CMHC entity who is enrolling with one or several sites or an existing CMHC entity adding a site or sites. We will pick up with the CSP process at around slide 16.

Enrolling in IMPACT is the first step that must be taken by a CMHC. In order to enroll in IMPACT there are two preparatory steps that must be carried out by the CMHC. The first preparatory step is obtaining a Type 2 NPI number for each CMHC site. Remember, each CMHC site, operating under a single CMHC entity’s FEIN must have a separate and distinct Type 2 NPI number to enroll in IMPACT. This NPI number must be associated with the taxonomy code displayed on this slide which signifies Community Mental Health Center. When you apply for your Type 2 NPI number with NPPES, you will need to link the taxonomy code shown on the slide to the Type 2 NPI number you are applying for, otherwise if not, this will only lead to claim rejection and/or your IMPACT application not being approved.

I understand that this may be confusing so let’s review the example on the slide. So we have a CMHC entity of 10 sites with the entity having a FEIN of nine 9’s. Now, each of the 10 sites will have their own separate and distinct Type 2 NPI with each Type 2 NPI applied for having been obtained from the NPPES website and linked to the taxonomy code displayed on the slide. In the end you will have 1 FEIN for the CMHC entity and 10 Type 2 NPI numbers.

I would like to add here that if you are currently enrolled in IMPACT and your assigned Type 2 NPI number with NPPES is not linked to the taxonomy code of 261QM0801X, please update your NPI information with NPPES to reflect this taxonomy code. In addition, you will then need to modify your approved IMPACT enrollment with this taxonomy code.

Lastly, as mentioned earlier, CSPs do not enroll in IMPACT therefore this preparatory step is skipped.
The second IMPACT preparatory step applies to all **new** CMHC entities. If already an existing CMHC entity and you are only adding another site, this step will have already been completed.

For new CMHC entity’s, you must have a W9 certified and on file with the Illinois State Comptroller if not already done. This must be completed prior to accessing the IMPACT system. If in need of having your W9 certified by the Comptroller, you may electronically forward the W9 to the email address listed on this slide. You will receive email notification once the W9 has been certified by the Comptroller.

Once you have received notification that the new CMHC entity’s W9 has been certified by the Illinois State Comptroller, please wait 1-2 days before accessing the IMPACT system to enroll so as to allow for the Illinois Comptroller System to communicate with the IMPACT system regarding the W9 certification having occurred.
The requesting entity shall gain access to the IMPACT System and enroll each site by completing all required steps, as well as any optional steps as applicable, outlined on the "Business Process Wizard" application screen ("Business Process Wizard" displayed on next slide).

Each CMHC site must have their own separate and distinct Type 2 NPI number and separate and distinct enrollment in the IMPACT System.

The following link accesses the IMPACT System:
https://impact.illinois.gov/

Again, we are only talking about CMHCs here. So as a CMHC, you now have your Type 2 NPI number for each site and you now have your CMHC entity’s W9 certified by the Illinois State Comptroller. After these preparatory steps are completed, you are ready to access the IMPACT System and complete the HFS Illinois Medicaid IMPACT electronic application.

It is very important to understand that each site under the auspices of a CMHC entity must have their own separate and distinct enrollment in IMPACT thus the reason for each site being required to have its own separate and distinct Type 2 NPI number.

Each site enrolled in IMPACT must complete all the required steps on the electronic application as well as any optional steps if applicable. The required and optional steps are outlined on the IMPACT screen titled Business Process Wizard which we will take a look at next.
Displayed is the Business Process Wizard. You will reach this screen after you access the IMPACT System, indicate your “Enrollment Type” and complete some “Provider Basic Information”. This screen will direct you through the IMPACT enrollment process. There are 14 steps for each CMHC site on the Business Process Wizard. The columns adjacent to the listed “Steps” outline for you if the step is a required or optional step, the date you started that step and the date you completed that step, which is indicated as “end date”. In addition, the status of each step, whether it is complete or incomplete, is indicated.

You **MUST**, at a minimum, complete all steps that are indicated as **REQUIRED** prior to submitting your application.
Getting through IMPACT has posed its challenges for some entities. Listed on this slide, as well as the next slide, are key points for assisting you in getting through IMPACT for some of these more challenging steps.

Let’s examine these key points.

Once you have accessed IMPACT, the first thing you will need to do is select your “Enrollment Type”. The “Enrollment Type” selected should be "Facility/Agency/Organization"

Next, the specialty and subspecialty combination or combinations selected in the “Add Specialties” step, which is Step 3 on the Business Process Wizard, is at the entity’s discretion but at a minimum must include a specialty/subspecialty combination of "Outpatient/None". Other specialty/subspecialty combinations may also be selected with these combinations being outlined on this slide.

One point to definitely keep in mind is that if you should select Crisis Response/Mobile Crisis Response or Crisis Response/Crisis Stabilization you will be required to have these services certified under HFS. Descriptions of these specialty/subspecialty combinations and their billing requirements are outlined in the HFS Community-Based Behavioral Services Provider Handbook. The web address for this handbook will be provided at the end of this presentation.
Log in to your secure portal and select "CMHC Site Enrolls in IMPACT".

**Specific Enrollment Instructions Continued:**

- The step for "License/Certification/Other" on the Business Process Wizard (Step 5) is an optional step and should be skipped.
- The site must associate with the Department of Human Services (DHS) or the Department of Children and Family Services (DCFS), whichever will be the predominant funding source for community mental health services, on the "Associate MCO Plan" step (Step 11) of the Business Process Wizard. If funding from DHS and DCFS are predicted to be equal, then associate with DHS.
  - To associate with DHS, enter the “Plan ID” number of 3000004.
  - To associate with DCFS, enter the “Plan ID” number of 3000007.
- The taxonomy code listed in the "Add Taxonomy Details" step (Step 11) on the Business Process Wizard should be that which is associated to the Type 2 NPI number for the site with NPPES, that being 261QM0801X.

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Step 5 of the Business Process Wizard is the “License/Certification/Other” step. This is an “optional” step and this step may be skipped. You still will be able to submit your application for approval with this step not having been completed. State staff will complete this step just prior to the site’s application being approved. I do want to mention that some State Staff may direct you to put pseudo-numbers in this step prior to the application being submitted. If this is the case, this way is acceptable as well.

Step 11 is the “Associate MCO Plan” step on the Business Process Wizard. All CMHC sites enrolling in IMPACT must associate with either DHS or DCFS. You will need the DHS or the DCFS Plan ID number in order to complete this step with these ID numbers being displayed on this slide. So, which one do you associate to.......the association is made based upon the predominant funding source for the entity **as a whole** for community mental health services. If the predominant funding source is through DCFS, then associate with DCFS. If the predominant funding source is through DHS, then associate with DHS. If the predominant funding source is equal between DHS and DCFS, then associate with DHS.

Step 11 is the “Add Taxonomy Details” step on the Business Process Wizard. You should indicate the taxonomy code listed in the third dot point on this slide. Remember, this is the taxonomy you associated with on NPPES when you applied for the sites Type 2 NPI number. As a side note, the IMPACT database is electronically linked to the NPPES database, so the taxonomy number and NPI number indicated in both databases must both be in sync.
A few more points on IMPACT.
If you should have questions about IMPACT or have difficulties in logging into IMPACT, please email HFS using the email addresses listed on this slide.

A very critical point to know is that after completing Step 1 of the Business Process Wizard, which is the Basic Information Screen, you will be issued an Application ID number by the IMPACT System. **Please write this number down and keep it for future reference.**

In addition, the IMPACT System serves as the System of Record for the receipt of Federal Funding, therefore, all CMHC sites are responsible for maintaining their IMPACT enrollments up-to-date and accurate at all times. Keeping your information up-to-date and accurate at all times is actually a Federal requirement per the Affordable Care Act.
So let’s review what we have learned thus far. At this point only CMHCs have been in the picture when discussing the certification process. We have talked about the two preparatory steps that must be completed for each CMHC site prior to enrolling in IMPACT, that being obtaining a Type 2 NPI number from NPPES for each site and having the entity’s W9 certified by the Illinois State Comptroller if the entity is a new CMHC.

After accessing the IMPACT system and enrolling the site, the application should be submitted to HFS.

On the HFS website, there is a power point presentation on how to gain sign on access to the IMPACT system. The web address for this website will be provided at the end of this presentation.
We are now continuing on in the process for CMHCs and we are also now going to have CSPs joining in on the steps to take to become certified.

This phase of the certification process involves CMHCs and CSPs accessing an Application Packet. The Application Packet may be obtained in several ways.

The first way is by contacting your respective Certifying State Agency, either BALC who serves as the DHS representative or IPI who serves as the DCFS representative. The CSA contacted shall be based upon the predominant funding source for community mental health services for the entity as a whole and is outlined in detail on slide 18. CSA contact information is also listed on slide 18.

If contacting your CSA either in writing or my email for the Application Packet, certain information is required. The information required in the request is shown on this slide. Due to CSPs not being required to complete an IMPACT enrollment, more detail is required from them in their request.

The second way to obtain an Application Packet is to refer to the DHS Part 132 website. The web address for this website will be provided at the end of this presentation.
CMHC OR CSP ACCESES A PART 132 APPLICATION PACKET CONTINUED

The Part 132 Application Packet shall be issued by the CSA within 10 business days of receipt of an entities written or email request. The packet issued shall consist of:

• An application consisting of a checklist of questions to answer and a listing of policies/procedures to submit for review;
• A fire clearance questionnaire (when available);
• Form 1 Request for Change to DHS/DMH Provider Record – Administration Information (CMHC only)**; and
• Form 2 Request for Change to DHS/DMH Provider Record – Site Location Information (CMHC only)**

**Required by the DHS State Contractor/The Collaborative for the processing of claims.

If submitting a request, either by US mail or by email, for an Application Packet, the CSA has 10 business days from the receipt of the request to issue the packet.

Application packets shall consist of the following items:
*An application consisting of a checklist of questions to answer and a listing of policies/procedures to submit for review;
*A fire clearance questionnaire. This questionnaire is currently under development and when developed and put into place, it will become part of the Application Packet and available on the DHS Part 132 website.
*Form 1 Request for Change to DHS/DMH Provider Record – Administration Information. This is for CMHCs only and is required by the State Contractor, known as the Collaborative, for the adjudication of claims.
*Form 2 Request for Change to DHS/DMH Provider Record – Site Location Information. This again is for CMHCs only and is required by the State Contractor, once more known as the Collaborative, for the adjudication of claims.
This slide outlines the contact information for the CSAs, if requesting an Application Packet by email or by US mail.

There are two email addresses listed for BALT. It is preferred that you use the Rule132BALC address but the other email address indicated will work as well. There is a plan to eventually phase out the DSHSBALC email address.

For DCFS their email address is listed. There is no US mailing address that may be used for contacting DCFS.
So you have obtained a Part 132 Application Packet and completed it. Once completed, the packet should be submitted to the respective CSA using the email or mailing address listed on the Application. The completed packet should contain:

- application with questions answered and the required attachments including supporting policies/procedures in line with Part 132;
- A fire clearance questionnaire (when this becomes available);
- Form 1 Request for Change to DHS/DMH Provider Record – Administration Information (CMHCs only); and
- Form 2 Request for Change to DHS/DMH Provider Record – Site Location Information (CMHCs only).
Application documents submitted should be done so all at once rather than in intervals. If multiple emails are required for submission of the documents due to the amount of information being forwarded electronically, the emails should be numbered (example: 1 of 3, 2 of 3, 3 of 3).

Please only submit those policies and procedures that are being requested on the Part 132 Application. **Do not** submit an Entity’s entire Policy and Procedure Manual as this will delay the review process and/or result in the Manual being returned to you to pull out of the Manual only the information that is being requested.
A CMHC or a CSP who have completed their Application Packet should submit the packet to their respective CSA. If a CMHC or a CSP should have any questions about the completion of the packet, the questions should be emailed to the addresses indicated on this slide.
So let’s review once again what we have learned thus far. In phase 1 we discussed CMHCs completing the two preparatory steps for enrolling each CMHC site in IMPACT, that being obtaining a Type 2 NPI number from NPPES for each site and having the entity’s W9 certified by the Illinois State Comptroller if the entity is a new CMHC. We also discussed CMHCs accessing the IMPACT system and enrolling each site after the preparatory steps have been completed and then the IMPACT application being submitted to HFS.

In the next phase, we discussed how to access a Part 132 Application Packet and how to seek assistance with the completion of the packet if such is needed. We also discussed that the completed Part 132 application packet should be submitted to the respective CSA.

Now I am going to turn it over to Charles to cover the next section of slides.
So now you have your Part 132 Application Packet completed along with any of the other required forms and you have submitted these documents to your respective CSA for review and validation of compliance with the Part 132 requirements. The CSA has 30 calendar days, from the date of receipt of the documents, to review and make a determination if the documents are or are not in compliance with Part 132.

If a determination is made that the documents submitted fail to meet the Part 132 requirements, the entity will receive a Notice of Violation. The entity shall have 30 calendar days, from the date of the Notice of Violation, to remedy all deficiencies. Once corrections and/or revisions have been made by the entity, the entity should resubmit their information to their respective CSA.
Next, fire clearance is scheduled by the CSA with the Office of the State Fire Marshall if fire clearance has not already been achieved. For CMHCs, the fire clearance will only be scheduled following the passing of the initial review of the sites IMPACT application by HFS/PES. This initial review by HFS/PES shall consist of validating the site’s information in the IMPACT application using various State and Federal databases as well as conducting background checks on any individual listed in the application.

The Office of the State Fire Marshal has the authority to determine if an on-site inspection shall be conducted by their office or if the CMHC/CSP site being in compliance with local and/or county building requirements/ordinances shall be sufficient due to their level of stringency.

Any questions for the Illinois State Fire Marshal should be emailed to them using the email address listed on this slide. Questions related to meeting fire clearance requirements cannot be answered by a CSA or the Division of Mental Health.
In order for a Provisional Certificate to be issued by the CSA to a CMHC or CSP the following has to have occurred:

- passing of the initial review of the sites IMPACT application by HFS/PES (CMHCs only);
- approval of the sites Part 132 Application Packet by the CSA; and
- receipt of documentation evidencing compliance with the fire clearance requirements as outlined in Part 132, Section 132.65.

The Provisional Certificate shall allow for the operation of the site effective with the date indicated on the certificate.

The CSA shall forward to the entity via U.S. mail and/or by email the Provisional Certificate.
Provisional Certificates shall also be electronically forwarded to the respective DHS/DMH Regional Director for the CMHC or CSP and for CMHCs, to HFS/PES for their files.

DHS/DMH Regional Directors, upon receipt of any Provisional Certificate, shall reach out to the CMHC or CSP to ensure that the site is becoming operational within the 12 month provisional time frame.

If a site fails to fully operationalize within the 12 month time frame from when the Provisional Certification was issued, a meeting shall be convened at the State level. Based upon the information presented by the DHS/DMH Regional Director and discussion held, a final determination shall be made by the CSA if the site will or will not be granted an extension to their Provisional Certification end date.
For CMHCs, once the Provisional Certificate is issued by the CSA, at the State level, the certificate information will be entered into the site's IMPACT application in the "Licensure/Certification/Other" step and the application will be approved.

The site shall electronically receive an IMPACT generated notification regarding the approval of the IMPACT application and the effective date of enrollment. This shall serve as further notification that services and care may be rendered and billed.
DHS/DMH NOTIFIES THE COLLABORATIVE

Once DHS/DMH is notified by the CSA of a Provisional Certificate having been issued and once having validated that the CMHCs IMPACT application for that site has been approved by the CSA, DHS/DMH shall notify the DHS State Contractor/The Collaborative of the newly certified CMHC site by forwarding to them Form 1 and Form 2 as well as a copy of the entities W9.

Once DHS/DMH is notified by the CSA of a Provisional Certificate having been issued and once having validated that the CMHCs IMPACT application for that site has been approved by the CSA, DHS/DMH shall notify the DHS State Contractor/The Collaborative of the newly certified CMHC site by forwarding to them Form 1 and Form 2 as well as a copy of the entities W9.

This step does not apply to CSPs.
The CSA shall conduct an on-site inspection within the Provisional Certification period and when the site is operational, which shall be within 12 months, unless the time frame is extended by the CSA. Operational, for the purposes of this presentation, shall mean that the site is involved in providing client services.

For CMHCs, the on-site inspection shall include the new site and, if there are already fully certified sister sites, may include some or all of these sites as well. The number of fully certified sister sites inspected for a CMHC shall be at the discretion of the CSA. Overall, the on-site inspection is for all sites tied to the CMHC entity.

The passing of the initial on-site inspection shall result in a Full Certificate being issued. The Full Certificate shall electronically be forwarded to:

- the respective DHS/DMH Regional Director for the CMHC or CSP;
- HFS/PES for their files (CMHC only); and
- to any other party so designated by DHS/DMH

DHS/DMH Regional Directors, upon receipt of any Full Certificate, shall reach out to the CMHC or CSP to offer further assistance and/or to answer questions.
So let’s review for a final time what we have learned thus far. In phase 1 we discussed CMHCs completing the two preparatory steps for enrolling each CMHC site in IMPACT, that being obtaining a Type 2 NPI number from NPPES for each site and having the entity’s W9 certified by the Illinois State Comptroller if the entity is a new CMHC. We also discussed CMHCs accessing the IMPACT system and enrolling each site after the preparatory steps have been completed and then the IMPACT application being submitted to HFS.

In the next phase, we discussed how to access a Part 132 Application Packet and how to seek assistance with the completion of the packet if such is needed. We also discussed that the completed Part 132 application packet should be submitted to the respective CSA.
In the final phase we discussed the workflow outlined on this slide from the CSA reviewing the completed Part 132 application packet to fire clearance being scheduled, if needed, to a Provisional Certificate being issued then to the on-site inspection being conducted.

Now I am going to turn it back over to Susan to finish up the presentation.
CERTIFICATION PROCESS IN ACCORDANCE WITH PART 132
CMHC FINAL STEPS

CMHC FINAL STEPS

INDIVIDUALS ASSOCIATE THEMSELVES WITH THE CMHC IN THE IMPACT SYSTEM

Individuals rendering or providing billable services to clients at the approved CMHC site shall enroll in the IMPACT System as an “Enrollment Type” of "Individual/Sole Proprietor - Regular Individual/Sole Proprietor or Rendering/Servicing Provider" and associate themselves with the CMHC. If the individual is already enrolled in the IMPACT system, the individual will need to modify their current IMPACT enrollment by associating themselves with the newly enrolled CMHC and submitting the modification for approval to HFS/PES.

CMHC ENROLLS WITH RELEVANT ILLINOIS MCOs AND ASSOCIATES THE CMHC WITH THE MCOs IN THE IMPACT SYSTEM

Enrollment in an Illinois Medicaid MCO is done so with the MCO and not through HFS/PES or a CSA. Once enrolled with the MCO, the CMHC must then re-enter the IMPACT System and modify their current IMPACT enrollment by:

- completing the "Associate MCO Plan" step;
- completing the "Complete Modification Checklist" step; and
- completing "Submit Modification Request for Review" step

For CMHCs there are some additional steps that will need to be completed following the issuing of the Provisional Certificate.

First, individuals rendering or providing billable services to clients at the approved CMHC site will need to enroll in the IMPACT System as an “Enrollment Type” of "Individual/Sole Proprietor - Regular Individual/Sole Proprietor or Rendering/Servicing Provider" – this is all one title under “Enrollment Type”. During this enrollment process the individual will need to associate themselves with the CMHC site. If the individual is already enrolled in the IMPACT system, the individual will need to modify their current IMPACT enrollment by associating themselves with the newly enrolled CMHC site and submitting the modification for approval to HFS via Provider Enrollment Services.

Individuals in need of enrolling in IMPACT and associating themselves to the CMHC site are outlined in the HFS Community-Based Behavioral Services Provider Handbook. The web address for this handbook will be provided at the end of this presentation.

Secondly, enrollment in a Illinois Medicaid Managed Care Organization (MCO) is done initially with the MCO and not through HFS via Provider Enrollment Services or through the CSA. Once enrolled with the MCO, the CMHC must then re-enter the IMPACT System and modify their current and approved IMPACT enrollment by completing the "Associate MCO Plan" step, completing the "Complete Modification Checklist" step and completing "Submit Modification Request for Review" step. If you recall, all these steps were outlined on the Business Process Wizard.
The displayed link when clicked on will illustrate a State map outlining which Managed Care Organization Programs service the various counties throughout Illinois.
Here is some more information about Full Certification. Upon completion of the on-site visit by the CSA following the issuing of the Provisional Certificate and the entity being found in compliance with Part 132, the Full Certificate shall be issued. The CSA shall forward to the entity via U.S. mail and/or email the Full Certificate.

The CMHC site IMPACT enrollment shall then be modified at the State level by updating the sites "License/Certification/Other" screen in the System by changing the "End Date" to "12/31/2999" and approving the modification/update. The site should electronically receive an IMPACT generated notification regarding the modification/update being completed and approved.

**NOTE:** If an entity should not successfully achieve Full Certification following a Provisional Certificate having been issued, a Notice of Violation shall be issued within 15 calendar days after the on-site review by the CSA. The site shall respond to the Notice by the due date indicated which shall be approximately 30 calendar days after the issue date of the Notice. See Part 132 Section 132.100 for additional information.
These final slides display some “Other Points” that we would like to share with the group before ending today.

An entity wishing to withdraw their CMHC or CSP enrollment request during the enrollment process shall notify their respective CSA. If a CMHC, the site’s pending IMPACT application will then be denied.

If a CMHC has a shift in their predominant or main funding source, meaning their main funding source has shifted from DHS to DCFS or vice versa or if a CMHC wishes to modify services (meaning their specialties/subspecialties) or if a CMHC wishes to change their Provider Type to a CSP, then please refer to the Illinois Part 132 website for the respective workflow to follow. These workflows may be accessed by using the web address indicated on this slide. After using the web address, you will be directed to the home page which is displayed where you will just click on the topic you are wanting to gain information about.
Here are a few more points to keep in mind.

This involves CSPs. CSPs may enroll as a Behavioral Health Clinic (BHC) which is a HFS/Illinois Medicaid Provider Type that is defined in HFS Rule 140. The requirements for a BHC are also outlined in Rule 140. If a CSP pursues enrollment with HFS/Illinois Medicaid as a BHC Provider Type, then the CSP must obtain a Type 2 NPI number and must enroll in IMPACT. The web address for Rule 140 is provided on slide 38.

The Mental Health and Developmental Disabilities Code was revised in 2017 as follows:

- 12 – 17 year old individuals may receive 7 (seven) therapy sessions up to 90 minutes each without guardian consent. This is a right so this should be noted in an entities client right policies and procedures.

- The Consent to Release Information and Consent to Treatment for 12 – 17 year old individuals must be signed by the individual as well as their guardian (consent form(s) need to be revised to reflect this).
Here is a slide outlining email addresses that were referenced throughout the presentation and you may need in the future. This includes HFS/PES, DHS/BALC, DHS/DMH, DCFS/IPI and the National Plan & Provider Enumeration System, known as NPPES.
Here is a slide outlining web addresses for resources you may need in the future. This includes resources such as the HFS Community-Based Behavioral Services Provider Handbook, Rule 140 which is a HFS Rule and Part 132, the DHS Rule.
Lastly, here is a link for CMHCs that will take you to one of HFS’s websites to assist you in answering questions regarding IMPACT. These questions could be:

How do I create a single sign on with IMPACT?
How do I enroll in IMPACT as a Facility, Agency Organization?
How do I complete a modification to my IMPACT enrollment?
What are Domain Administrator Rights?
Thank you very much for attending today. We hope that you have found this presentation very helpful.

Please email all questions to the email address shown on this slide or you may also place your questions in the chat box.

The answers to all questions submitted will be posted on the DHS Part 132 website.

Again thank you.