



COUNTY OF SANTA CLARA
Behavioral Health Services

FAST SERVICE ENTRY SUBMISSION

REV. 11/14/23

REVISIONS

Date	Slides	Revisions
08/01/23	18	Requiring Performing Provider and Performing Provider Type field
06/12/23	19	Add-On Code
06/12/23	13	Page through Procedure Code drop down menu.
09/20/22	25	Update what will be inputted in Close Batch and Date Claims Received.
06/13/22	14	Added Total Charge calculation.
06/13/22	22	Added Third Party Payor Explanation of Coverage.

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FAST SERVICE ENTRY SUBMISSION

Purpose of Form:

To enter member services. Services can be entered for an active member and funding source. Financial Eligibility & Diagnosis form needs to be completed before entering members' services.

SIGN ONTO PROVIDERCONNECTNX

Enter the System Code, Username, and Password that were provided to you.

 **Netsmart**
ProviderConnect NX

System

System Code

Username

Password

Login

Attention

The information contained in this information system is private and confidential, it is fully bound by the provisions of all federal and state regulations governing confidentiality of alcohol and drug abuse patient records. This system is intended only for the professional use of authorized agents of a Substance Abuse or Mental Health Treatment program or related agency. If you have reached this site in error, please contact Netsmart Technologies, Inc. at (877) 899-8800 immediately.

HOW TO ACCESS

After login click on **Search** and type **Fast Service Entry Submission**

The screenshot shows a search interface with a search bar containing the text "Fast Service Entry Submission". Below the search bar is a link for "Advanced Client Search". The results section is titled "Here is what I found:" and features four filter buttons: "All 1", "Clients 0", "Staff 0", and "Forms 1". The "Forms" filter is selected. Below the filters is a section titled "Forms" containing a table with the following data:

Undock	Name	Menu Option
	Fast Service Entry Submission	/ Avatar MSO / Claims Processing

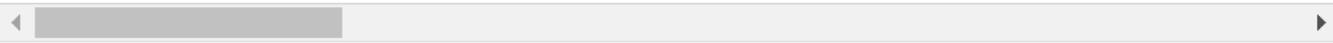
Click on **Fast Service Detail** first.

FAST SERVICE ENTRY Process Discard Add to Favorites

Fast Service Entry Summary 
Fast Service Detail 
[Online Documentation](#)

Fast Service Entry Summary *

Member Name Or ID	Funding Source	Provider	Date Of Service	Service Start Time	Service End Time
No records.					



Add New Item Edit Selected Item Delete Selected Item

Click 'Add New Item' in **Fast Service Entry Summary** to start adding services

Fast Service Entry Summary *

Member Name Or ID	Funding Source	Provider	Date Of Service	Service Start Time	Service End Time
No records.					

◀ [Progress Bar] ▶

[Add New Item](#) [Edit Selected Item](#) [Delete Selected Item](#)



Fill in the following fields:

Member Name or ID, Funding Source*, Provider, Contracting Provider Program, Date of Service.

Service Start Time and End Time is not needed.

In the **Copy Data On Add** field, select whether or not the current row of data should be copied over to the next new row if another service is added.

<p>Copy Data On Add *</p> <p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>	<p>Contracting Provider Program *</p> <p>All - 01/01/2018 - MOMENTUM ALAMEDA - ADULT OP - Outpatient SUTS-Adult ▼</p> <p>Process Report</p>
<p>Procedure Code Type *</p> <p><input checked="" type="radio"/> CPT Code <input type="radio"/> Revenue Code</p>	<p>Date Of Service *</p> <p>01/28/2022  <input type="button" value="T"/> <input type="button" value="Y"/> ▼</p>
<p>Member Name Or ID *</p> <p>SUTS,BOB R R (2638) </p>	<p>Date of Service (End)</p> <p> <input type="button" value="T"/> <input type="button" value="Y"/> ▼</p>
<p>Funding Source *</p> <p>Drug Medi-Cal (4) </p>	<p>Service Start Time</p> <p><input type="text"/> <input type="button" value="Current Time"/> H ▼ M ▼ AM/PM ▼</p>
<p>Provider *</p> <p>Momentum - SUTS (11000) </p>	<p>Service End Time</p> <p><input type="text"/> <input type="button" value="Current Time"/> H ▼ M ▼ AM/PM ▼</p>

FUNDING SOURCE

*The following can be selected for Funding Source:

DMH Medi-Cal (2)

County of Santa Clara – MH (3)

Drug Medi-Cal (4)

County of Santa Clara – SUTS (6)

Process Report - generates the Valid Authorizations report, which details authorizations associated with the member, funding source and provider, but is not needed and may be skipped.

Contracting Provider Program *

All - 01/01/2018 - MOMENTUM ALAMEDA - ADULT OP - Outpatient SUTS-Adult ▼

Process Report

Fill in the following fields: **Type of Service**, **Procedure Code***, **Total Charge****, **Service Units**, **Location**.

Duration is no longer a required field as only **Service Units** are required under CalAIM.

Type Of Service <input type="text" value="Select"/>	Duration (Minutes) <input type="text"/>
Procedure Code * <input type="text" value="Psychiatric Diagnostic Eval 15 Min (90791)"/>	<input type="button" value="Display Valid Authorizations"/>
Number In Group <input type="text"/>	Authorization Number * <input type="text"/>
Number Of Counselors In Group <input type="text"/>	Does This Service Represent An Admission <input type="radio"/> Yes <input type="radio"/> No
Group Service Units <input type="text"/>	Total Fee Table Amount <input type="text" value="0.00"/>
Total Charge * <input type="text" value="100.00"/>	Expected Disbursement <input type="text" value="0.00"/>
Service Units * <input type="text" value="10"/>	Approved Units <input type="text" value="0"/>
Location * <input type="text" value="OFFICE (11)"/>	Private Pay Amount <input type="text" value="0"/>
<input checked="" type="radio"/> Location ID Number <input type="radio"/> Location Description	

PROCEDURE CODE

*Since the Procedure Code drop down menu is listed in alphabetical order, page through the options to find the procedure code.

"For example, if you are looking specifically for Procedure Code *90791 (Psychiatric Diagnostic Eval 15 min)* without any modifiers, you would have to go through the pages and you would find it on page 11."

Procedure Code *

Results

Psy Dx Eval 15 Min PHP PG/PP (90791:UB:HD:95)
Psy Dx Eval 15 Min PHP PG/PP (90791:UB:HD:95:59)
Psychiatric Diagnostic Eval 15 Min (90791)
Psychiatric Diagnostic Eval 15 Min (90791:59)
Psychiatric Diagnostic Eval 15 Min (90791:59:93)
Psychiatric Diagnostic Eval 15 Min (90791:59:93:GC)
Psychiatric Diagnostic Eval 15 Min (90791:59:93:HL)
Psychiatric Diagnostic Eval 15 Min (90791:59:95)
Psychiatric Diagnostic Eval 15 Min (90791:59:95:GC)
Psychiatric Diagnostic Eval 15 Min (90791:59:95:HL)

Navigation: Home, Left, 9, 10, **11**, 12, 13, Right, Home

TOTAL CHARGE

To calculate **Total Charge, multiply **Service Units** by the program's contracted rate for that specific service which is stated in the CCP individual P-Auth file. The Total Charge will then accurately match the Total Fee Table Amount.

Documentation Time		Billed Amount	
Group Service Units		Allowed Amount	40.65
Total Charge *	40.65	Total Fee Table Amount	40.65
Service Units *	15	Expected Disbursement	40.65
Location *	OFFICE (11)	Approved Units	15
<input checked="" type="radio"/> Location ID Number		Private Pay Amount	0
<input type="radio"/> Location Description		Third Party Amount Paid	

Click **Display Valid Authorizations** to display the **Authorization Listing Screen** and select corresponding authorization.

The **Authorization Number** can also be typed in.



Duration (Minutes)

Display Valid Authorizations

Authorization Number *

?

Authorization Listing

Member 'Funding Source' (DMH Medi-Cal)

Auth #	Provider	Benefit Plan	Cont Prv Prg	Start Date	End Date
P	Momentum for Mental Hea	DMH Medi-Cal	MOMENTUM 200	07/01/2022	06/30/2023
P	Momentum for Mental Hea	DMH Medi-Cal	MOMENTUM 200	07/01/2022	06/30/2023
P	Momentum for Mental Hea	DMH Medi-Cal	MOMENTUM 200	07/01/2022	06/30/2023
P	Momentum for Mental Hea	DMH Medi-Cal	MOMENTUM 200	07/01/2022	06/30/2023
P	Momentum for Mental Hea	DMH Medi-Cal	MOMENTUM 211	07/01/2022	06/30/2023
P	Momentum for Mental Hea	DMH Medi-Cal	MOMENTUM 86	07/01/2022	06/30/2023
P	Momentum for Mental Hea	DMH Medi-Cal	MOMENTUM MAR	07/01/2022	06/30/2023
P	Momentum for Mental Hea	DMH Medi-Cal	MOMENTUM MAR	07/01/2022	06/30/2023
P	Momentum for Mental Hea	DMH Medi-Cal	MOMENTUM MAR	07/01/2022	06/30/2023
P	Momentum for Mental Hea	DMH Medi-Cal	MOMENTUM MAR	07/01/2022	06/30/2023
P	Momentum for Mental Hea	DMH Medi-Cal	MOMENTUM MAR	12/16/2022	06/30/2023

OK **Cancel**

Claim Status will be automatically be chosen depending on information provided. **Explanation of Coverage** will display the reasoning for approval/denial/pending. This section will update as information is entered in this form. This field is blank when the service has been approved with the exception of a Third Party Payor addition (see page 20).

Explanation Of Coverage

The service was denied for the following reason:
Performing Provider is blank.

Claim Status *

Approved Denied Pending

Claim Status Reason

Select

Type in the **Diagnosis** and choose from the drop-down menu.

Diagnosis *

alcohol depend

Diagnosis	ICD-9	ICD-10
Alcohol dependence, in remission	303.93	F10.21
Alcohol dependence, uncomplicated	303.90	F10.20
Alcohol dependence during childbirth	648.40	O99.314
Alcohol dependence during pregnancy	648.30	O99.310
Alcohol dependence with intoxication delirium	303.00	F10.221

Select **Performing Provider** and **Performing Provider Type**. These fields are not red required fields but will cause a denial if not selected.

Performing Provider

✕▼

Performing Provider Type

✕▼

ADD ON CODES

Add on Codes must be submitted on the same date and batch as the primary code.

For example, the primary procedure code is *96130 (Psychological Testing Eval First Hour)* would be entered as a service on 1/1/23, and the add on code *T1013 (Sign Language/Oral Interp Svcs 15 min)* would be entered as the next service on 1/1/23 as well and batched under the same batch number.

After the service has been added, scroll back up to the top of the page to continue adding more services, edit services, or delete selected service.

Fast Service Entry Summary *

Location	Duration (Minutes)	Billed Amount	Allowed Amount	Total Fee Table Am...	Expected Disburse...
11	30		0.00	0.00	0.00

◀ | ▶

[Add New Item](#) [Edit Selected Item](#) [Delete Selected Item](#)

SUBMITTING A BATCH

Once all services has been added, click **Fast Service Entry Summary**.
Select how you would like the service sorted in **Sort Summary By**, and the services will display in **Summary Data**.

Fast Service Entry Summary
Fast Service Detail
[Online Documentation](#)

Sort Summary By

Provider Funding Source Member

Summary Data

Member Name/ID	Funding Source	Provider	Date of Service	Proc. Code
TEST,ALLISON(2241)	DMH Medi-Cal(2)	Momentum for Menta	12/20/2021	99212

Total Expected Disbursement is a disabled field that shows how much disbursement is expected.

Close Batches is a disabled field that will show 'No'.

Enter today's date in **Date Claims Received**.

Click **Submit Fast Service Entry** once done.

The screenshot shows a web form with the following elements:

- Total Expected Disbursement:** A disabled text input field containing the value "40.80".
- Close Batches:** A disabled radio button group with "Yes" and "No" options. The "No" option is selected.
- Date Claims Received *:** A date input field containing "07/01/2022". To the right of the field is a calendar icon and two buttons labeled "T" and "Y".
- Submit Fast Service Entry:** A blue button with white text, highlighted with a red border.

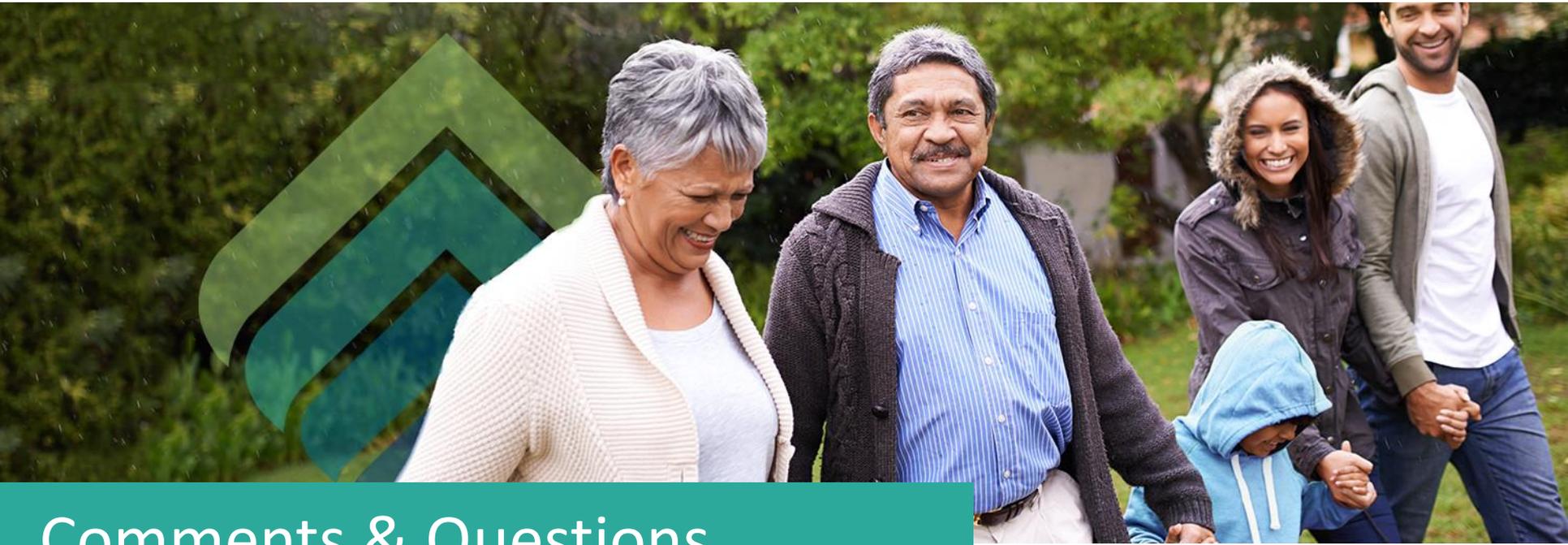
This message will appear, notifying batch has been created. Click 'OK'

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Fast Service Entry

Batch created: 1085

OK



Comments & Questions