

### **Individual Service Agreement (ISA) – ENROLLING AND BILLING in AKAIMS**

How to Enroll a client in a Government Contract, Authorize services and units available to that client, enter an attestation of eligibility (for Adult, Youth, and ATR), and then bill the state for those services after they are provided. This guide focuses on Adult and Youth ISA, but most of it is also applicable for Trauma/Crisis and Access to Recovery ISA billing.

#### **ENROLLMENT in a GOVERNMENT CONTRACT**

Only ONE Govt. Contract should exist per payor plan/group (Adult, Youth, ATR-2, or Trauma).  
Click on:

- **Client List** – link in left menu; search and find the client you wish to enroll in an ISA
- **Profile** under Actions; puts you in the client profile screen/module
- **Client Group Enrollment** - in left menu in the module
- Click **Add Government Contract Enrollment** – link at right. **Only ONE – never add a second, identical ISA Payor Plan to the client's file if that plan is already listed here!**  
(If the link isn't there, call the plan's contact number below).
- Select the Plan and Group (Adult, Youth, ATR–IOP or OP, or Crisis)
- Start Date cannot precede the date the first Provider Agreement with your agency for that plan was signed by the state
- **Leave the end date blank** – it's optional. If it has been filled in, remove the end date if the plan is again needed. NEVER add another enrollment in the same plan.
- Click **Save**

#### **AUTHORIZATION**

At least one authorization must be created for each client in each fiscal year.

Click on **Authorization** – left menu

- Click on **Add New Authorization Record** – link at right
- Select Group Enrollment and Plan
- The Authorization # must be unique for each one. Fiscal year is fine; e.g. “2015”.
- The start date must fall on or after **all** of the following:
  1. the Group Enrollment/Govt. Contract start date
  2. the most recent Provider Agreement signed by the state
  3. the start of the fiscal year
  4. the Client Admission date
- End date may be up to but not after the end of that fiscal year.
- Date approved defaults to today's date - you may change that if you wish

To add/authorize each service for which you will be billing, click on

- **Add Service** – link at right (once added, this is also where you may **Edit** services/units)
- Select the service code from the drop-down list –refer to Planned Services in the Tx Plan
- Enter total number of units client is anticipated to need, but only up to the maximum allowed per client per year; requests for exceptions will be considered.
- Click **Finish**

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### ELIGIBILITY ATTESTATION (required for Youth, Adult, & ATR, *not* TIC)

Risk must be supported by written clinical documentation in the client file via a Miscellaneous Note. There must be one such note for each fiscal year in which ISA funding is used.

- In the Client Activity List, in the left menu click Notes, Misc Note, and “Add” link at right
- For **Type**, select: ISA Client Verification of Eligibility” for Youth, Adult, or ATR
- For **Frequency**, select “Yearly”
- In **Summary**, enter the fiscal year or date range the verification covers
- Click the button **Add Note** - a box opens with text prompts about the client’s eligibility.
- Type your note and click **Finish**, placing it into the unsigned note box
- Click **Sign Note**, adding your name, date, and time to the note and locking it
- Click **Finish**. The list view displays type: ISA verification and summary: the year it’s for

### BILLING FOR SERVICES

**Check your balance:** (Video [HERE](#))

It is always best to pre-confirm adequate funding is in your account. Steps: Agency - Contract Management - Profile - Authorization - Tiers

If a released note appears in the Claim Item List as “Awaiting Review – Insufficient Funds,” you may request additional funding from your ISA contact (posted at the end of this guide). Before proceeding, confirm funding is in place, and then from the claim item list, each item must be re-released. If it is re-released before enough funding is added, the system only allows two strikes, and it is automatically and permanently denied.

**ISA Funding Cap:** For ISA-specific services for Adults and Youth there is a cap of \$7,500.00 per client. For Trauma/Crisis, the cap is 10 services; for ATR it’s \$5,000 for IOP and \$1,500 for OP.

**For an ISA service (except for ATR services), the complete note is required:**

### Encounter Profile

- Under Activity List, click on **Notes** – left menu
- For an existing note, click **Go** to see the list and then **Review**, under Actions, to open the note; check the steps below, finishing with releasing it to billing
- For a new note, click on **Add New Treatment Encounter Note** – link on right
- For Youth or Adult ISAs, select **Note type: ISA**. (not applicable for TIC or ATR).
- From the Services drop-down list, select the appropriate one (all but TIC start with “ISA”)
- **Sessions/Days** and **Billing Units** must be filled in if present. If they’re 1 unit = \$1.00 services, the numbers must be the same – so if cost was \$25, both sessions and units show “25”. If one unit is not \$1.00, calculate accordingly. Two examples are: ISA-ANS – 1 session is 1 night *and* 1 unit; whereas ISA-YTC – 1 session is the 1 service but 1 unit is 15 minutes, so an hour is 4 units. See tables below for Adult and Youth rates.
- Rendering Staff – defaults to the person who is signed in to AKAIMS and entering the data; change it appropriately if someone else provided the service
- At least Primary Diagnosis must be filled in; it auto-populates from Admission or most recent diagnosis elsewhere in the client file (most recent signed BHA or Tx Plan). If you

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have only diagnosis at Admission in AKAIMS, and the client's diagnosis has changed during the course of treatment, you must manually change it on notes.

- Click **Save**, then click  (next) (for ATR notes, you may skip to Release to Billing, unless you are using AKAIMS for full records or you choose to enter complete notes for clients receiving ATR-billable services, to facilitate adjudication)

### Encounter Note (text of your note)

- Click **Add Note**. If ISA type was selected, this will open a box stating: *Describe service provided in sufficient detail to assure the appropriate procedure code was selected and verified by a receipt at agency (if an item purchased) and indicate total amount of claim.* Type the note and click **Finish**, placing the text in the Unsigned Note box (you may delete the auto text if you wish, leaving only your note).
- Click **Sign Note**, moving your note up to the gray box and locking it. Additional notes may be added, such as a clinician signing off on their note entered by admin staff, or someone adding a clarification or correction.
- Tx Plan is not required, but if you have an active, signed treatment plan in AKAIMS, Goals, objectives, and interventions applicable to this service may be selected and attached, before or after writing the note. Select applicable part(s) and click **Finish**
- When you are satisfied all is correct, click **Save**

### RELEASE TO BILLING

- It is strongly encouraged to keep track of spending. Assign the role Contract Management to your billing staff, and check Agency – Contract Management, click Go, select Profile and then Authorization, and look at Tiers. You may also use the ISA report in Report Manager that shows state to agency funds assigned, expended and remaining. If not enough is “Remaining,” STOP. Do not release a note without sufficient funds.
- When you are satisfied all is correct, click the blue link under **Administrative Actions** near bottom of page: **Release to Billing** (no link? Check staff account roles). This action locks down the entire encounter record, turning it gray and un-editable.
- Select the correct Group Enrollment and click **Finish**. If you get “**There is no active authorization for this service**”, check all steps above and check all dates.
- **NSF**: If notes are released when your agency has **insufficient funds**, in the claim item list their status is Awaiting Review NSF. Once funding has been added, on the Claim Item list change the Item Status to All Awaiting Review. For those showing Insufficient Funds, check the little box. Then in the white box on the blue bar, select Release and then click **Update Status**. They then appear in the claim item list as released and can be billed. *Warning*: if this is done without funding in place, it is automatically denied and cannot be billed again.
- **Closed Case** prevents Release to Billing, regardless of correct dates and funding.

### AFTER A NOTE IS RELEASED TO BILLING (but not yet billed to the state)

- In the left menu, click on **Agency – Billing – Claim Item List**
- Released items appear, or you may **Clear** fields or enter search criteria and click **Go**

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- View/QA items by clicking on [Profile](#) – blue link on right, then [Finish](#) to return to list
- Click on [Create Batches](#) – blue link directly above “Claim Item List” on left. Once a month is fine, but if you are billing a lot, you may want to batch weekly.
- A screen opens with Available Plans; select and move one or all and click [Go](#)
- The system batches items by plan – a statement appears: “...this may take a few minutes”
- Click on **Claim Batch List** – left menu (wait and click Go again if nothing appears)
- You may leave “Released” or clear or change criteria and click on [Go](#)
- Click on [Profile](#) – blue link on right - (or click on [Claim Items](#) to once more review each – this is your last chance to send a claim item back)
-  Click [Bill It](#) to **submit to the state** – blue link under [Administrative Actions](#) at the bottom of the screen. *This is the vital point at which the services are actually BILLED.*
- A designated person at your agency receives an automatically generated e-mail saying the state has accepted the batch; it includes the total amount billed, but not necessarily what will be paid. Final adjudication occurs at the end of each month; the agency will receive an invoice and a check within 30 days of final adjudication.

### REVERSALS & ADJUSTMENTS

Links to reverse/adjust vanish after the fiscal year (including the grace period of 30 days) - old claims must be manually refunded.

To prepare to reverse or adjust a claim item for a service provided in the current fiscal year:

- In claim item list, click [Clear](#) and type or paste any search criteria.
- Click [Go](#) (Suggestion: copy/write down the **encounter ID#**)
- Click on [Profile](#) – blue link on right – to open the claim item.

**Before** an item has been billed to the state (before [Administrative Action](#): “[Bill It](#)”):

- The links [Awaiting Review](#) or [Hold](#) simply change the status for your internal purposes.
- [Reject \(Back Out\)](#) opens a note for you to type in the reason for sending it back; [Finish](#) unlocks the encounter in the client’s file. The status of the note is in red and says “**Rejected (details)**” and clicking on [Details](#) opens the note showing the reason. Changes can be made as needed, and it can be re-released, batched, and billed as usual.

**After** an item has been billed to the state and accepted and adjudicated, on the claim item:

- [Reverse](#) warns you “Are you sure you want to reverse this claim item?” Clicking [Yes](#) puts a new item “Released” on your claim item list with the same Encounter ID# but with the billed amount negative, effectively reversing the charge to the state. You may then batch and bill it along with the rest. If the state pays the first one, the reversal refunds the state.
- [Adjust](#) is not set up to be used yet in AKAIMS. Until it is, this must be arranged the old fashioned way, by approval of the plan adjudicator and on paper.
  - Clicking [Adjust](#) gives a warning “Are you sure you want to adjust this claim item?” and yes/no options. Yes reverses the claim, making it a negative identical amount.
  - [Administrative Actions](#) now available are [Awaiting Review](#), [Hold](#), and [Delete](#). [Hold](#) changes your internal status of the billed item and may be used for your own needs.

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Delete reverses the reversal, negating the transaction and leaving the item as is.

Awaiting Review places the item and its reversal in the Claim Item List.

### REBILLING for a REVERSED / DENIED CLAIM

If it was billed and then a mistake was caught or the claim was denied, to re-bill, a new encounter must duplicate the original. Two differences will exist in the new note:

- The incorrect item(s) fixed/changed
- An addendum to the note stating that it is a deliberate duplicate for billing purposes only, including the reason, changes, and the unique Encounter ID # of the original note.

### STAFF ROLES NEEDED for BILLING

There are several roles related to the various parts of billing, The minimal roles your staff will need for each step/section of AKAIMS are as follows:

- Client Profile (Full Access) – for adding or editing group enrollment, authorization, and authorized services and units
- TxEncounter (Full Access) – for adding or editing encounter notes; if entered by clinician, billing staff may need to edit billing units before releasing to billing
- Release to Billing – activates the link on Encounter Notes, enabling the staff person to assign the payor plan to the service and send it to billing
- Agency Billing – for access to the billing module, specifically the Claim Item List and the Claim Batch List, where released items are billed to the payor
- Create Agency/Facility Claim Batch – one of these must be assigned to enable batching and billing released items; if the agency has multiple facilities with separate billing departments, you can limit billing to only the approved facility in the staff file.
- Contract Management (read only) – for billing staff to check funding available/spent

### Contact Information for ISA clinical, regulatory, or funding questions/requests:

#### **Adult:**

**James McLaughlin**

Mental Health Clinician III

[James.McLaughlin@alaska.gov](mailto:James.McLaughlin@alaska.gov)

(907)269-1044

#### **Youth:**

**Lynn Squires-White**

Mental Health Clinician III

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(907)465-8469

#### **Trauma-Crisis:**

**Lisa Rosay**

Mental Health Clinician III

[Lisa.Rosay@alaska.gov](mailto:Lisa.Rosay@alaska.gov)

(907) 269-3972

#### **Access to Recovery:**

**Karen Ivory**

Administrative Assistant II

[Karen.Ivory@alaska.gov](mailto:Karen.Ivory@alaska.gov)

(907)264-0678

### Contact Information for AKAIMS Helpdesk:

**Patrick Swiger**

Trainer II

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(907) 269-3608

**Lisa Good**

AKAIMS Assistant

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## ISA Guide for using AKAIMS to bill for ISA services

### Individualized Service Agreement (ISA) Codes - for Adults or Youth only.

Trauma Informed Care and Access to Recovery ISA services are not included here.

<b>Adult Services - Purchase items/services at least cost and maintain receipts \$7500/person annual limit</b>				
Code	Service	Rate	Max Charge	Description
ISA-ARX	BH Rx meds	\$1.00	Maximum program limit	Payment for medications prescribed by a psychiATRic provider not otherwise covered (co-pays or whole prescriptions) if ISA is payor of last resort.
ISA-ATR	Transport	\$1.00	Maximum program limit	Transportation from home (and return) to BH treatment/service - via staff transport (reimbursement at Federal Rate), cab vouchers, gas card, or bus pass.
ISA-AHA	Housing Assistance	\$1.00	Actual Cost	To facilitate client's move-in to rental housing. Limited to up-front cost of security deposit, and first and/or last month rent not to exceed two months' rent.
ISA-ATC	Transition Coord.	\$17/per 15 min.	Maximum program limit	Necessary coordination (face-face or phone) to facilitate discharge readiness or discharge planning during psychiATRic in-patient admission.
<b>Other goods and services specific only to Adult ISA</b>				
ISA-ACR	Adult Crisis Respite	\$500 / day (7 day max)	\$3,500	To defray emergency housing and support costs for individuals assessed by a clinician to be at risk for a higher level of psychiATRic care. Housing can be an apartment or other supervised living situation. 24 hour on-site supervision must be provided. Maximum two clients/agency at any one time. Programs are expected to develop procedures consistent with crisis respite guidelines.
ISA-ANS	Night Supervision	\$50/night	Maximum program limit	Non-RSS* supervision (*staff in staff office or staff apartment on-site but not in client's household). Must be on-site at least 4 hours/night to provide supervision for client safety. Can be provided to more than one ISA client simultaneously. Not payable for clients in licensed residential facilities.
ISA-Alab	Lab Work	\$1.00	Maximum program limit	Lab work ordered by psychiATRic Provider (MD, ANP) directly related to the prescribing of psychiATRic medication.
ISA-APPV	Pre-placement ASL Visit	\$45/day	7 days	Pre-placement day visits to Assisted Living Homes licensed for individuals with Mental Illness to assess appropriateness of longer term stay.

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<b>Youth Services - Purchase items/services at least cost and maintain receipts \$7500/person annual limit</b>				
Code	Service	Rate	Maximum Charge	Description
ISA-YRX	BH Rx meds	\$1.00	Maximum program limit	Payment for prescription medications not otherwise covered (allowable for co-pays or full cost of prescriptions if ISA is payor of last resort)
ISA-YTR	Transport	\$1.00	Maximum program limit	Transportation to/from client's home or school to BH treatment/service - via staff transport (reimbursement at federal rate), cab vouchers, gas card, or bus pass.
ISA-YHA	Housing Assistance	\$1.00	Actual cost	To facilitate move-in to rental housing. Limited to upfront costs of security deposit and first and/or last month rent, not to exceed two months' rent.
ISA-YTC	Transition Coordination	\$17/per 15 min.	Maximum program limit	Facilitation of discharge readiness or discharge planning (face-to-face or phone) provided during length of stay (admission through discharge) when youth is in RPTC or acute psychiatric care.
<b>Other goods &amp; services specific only to Youth ISA</b>				
ISA-YR	Youth Respite	\$1.00	Maximum program limit	Service to relieve family or foster parents, primary unpaid caregivers, and court-appointed guardians.
ISA-YFS	Family therapy without the youth present when youth is in acute or RPTC	\$25/15 minutes	Maximum program limit	Family therapy (provided by a clinician) for family of youth in acute psychiatric care or RPTC from admission through discharge.
ISA-PLL	Multi-family group therapy without the youth present for Parenting with Love & Limits	\$25/15 min	Maximum program limit	Multi-family group therapy (provided by a clinician) for family of youth enrolled in PLL program, for specific services required in this program.
ISA-SWH	Home Visit	\$150	Per diem. Limited to 2x/yr.	Clinician visit, in the home, per diem. Assessment of home, physical and family environment to determine suitability to meet client BH needs. Not in licensed home.
ISA-YEC	Essential Clothing	\$1.00	Annual limit of \$500	Immediate need for essential clothing
ISA-YEF	Food/utilities	\$1.00	Annual limit of \$750	Immediate need for food, heating or cooking fuel, or utilities

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ISA-YED	Educational Support	\$1.00	Maximum program limit	Educational assistance for youth (grades k-12) through completion of high school or GED, including tutoring and graduation expenses. Also covered are non-credit living skill classes. Does not include private school tuition/fees, trade schools, college or university tuition/fees, room & board or other associated expenses.
ISA-YSSA	Structured & Supervised Activities	\$1.00	Maximum program limit	Structured and supervised activities inside Alaska that are structured and supervised by staff other than CBHC paid staff, which will assist the youth to accomplish identified treatment goals.
ISA-YPC	Parenting Classes	\$20	Per class	Per ISA youth in class
ISA-YAMG	Anger Management class	\$20	Per class	Per ISA youth in class
ISA-YSMG	Stress Management class	\$25	Per class	Stress management class
ISA-YHCM	Health Club membership	\$1.00	\$500 Annual cap	Health Club membership
ISA-YTML	Transport, meals, lodging	\$1.00	Maximum program limit	Transport, meals, or lodging not otherwise covered by Medicaid, OCS, or DJJ. Requires prior authorization.
ISA-YMSC	Miscellaneous	\$1.00	Maximum program limit	Service or item not defined in Alaska Medicaid procedure codes or youth ISA service codes. Requires prior authorization.

\*Trauma-Crisis & Access to Recovery ISA steps and billable services vary in several ways from Adult/ Youth ISA. This guide was created primarily for Adult and Youth payor plans. For clarification or specifics on any of these ISA plans, processes, etc., please contact the applicable assistance above.