



## Connecticut Medical Assistance Program Workshops

### For Organizations and Individual Practitioners

### Enrolled as Autism Waiver Service Providers

### Presented by the Department of Social Services (DSS) and DXC Technology

The following workshops are being offered to assist **enrolled “Autism Waiver Service Providers”, and those providers not yet enrolled, who expect to continue their practice as of January 1, 2018**, delivering non-medical, home and community based services to Autism Waiver clients, with the transition to becoming a successful billing provider.

**This Autism Waiver Service Provider Billing and Web Claim Submission** workshop will review the components of successful claim submission for timely and maximum reimbursement of **Autism Waiver services**. **Topics of discussion will include a review of secure Web account set-up and capabilities, determining client eligibility, verification of services on the client care plan, common claim errors and resolution, claim activity reporting/reconciliation and billing resources**. The workshop will also include a review of the Web based claim submission functionality, Web claim submission options and time for questions.

Please follow the registration instructions below to register for the workshop of your choice. If you have any questions concerning this information, please contact the Provider Assistance Center at 1-800-842-8440. **You are strongly encouraged to attend**. To better accommodate the needs of our providers, we are offering three sessions of the workshop to ensure all can attend. We look forward to your attendance at one of the workshops offered to ensure your success as a billing provider of Autism Waiver services.

### WORKSHOP LOCATIONS, DATES, AND TIMES

Workshop locations, dates, and times for **Autism Waiver Service Providers** are listed below. The registration links are listed beneath the date of the workshop. To register for a workshop, select the appropriate link and register online. Please refer to the “How to Register for a Workshop” instructions below if you require further assistance with the registration process.

#### **AUTISM WAIVER SERVICE PROVIDER Billing and Web Claim Submission** **WORKSHOP**

**Workshop Location, Date and Time:**

**Registration Due Date:**

HPE MyRoom Virtual Classroom Training

Thursday, November 30, 2017 9:00 am – 12:00 pm

<https://www.surveymonkey.com/r/AUTWVRBLNGWKSHP11302017>

Monday, November 27, 2017

Connecticut Hospital Association, Wallingford, CT

Monday, December 4, 2017 9:00 am – 12:00 pm

<https://www.surveymonkey.com/r/AUTWVRBLNGWCSWKSHP12042017>

Tuesday, November 28, 2017

## HPE MyRoom Virtual Classroom Training

Tuesday, December 5, 2017 1:00 pm – 4:00 pm

Thursday, November 30, 2017

<https://www.surveymonkey.com/r/AUTWVRBLNGWCSWKSH12052017>

# HOW TO REGISTER FOR A WORKSHOP

To register for these workshops, visit the [www.ctdssmap.com](http://www.ctdssmap.com) Web site and go to Information, then Publications and scroll down to Provider Workshop Invitation Forms. Select the Autism Waiver Service Provider Billing and Web Claim Submission Workshop you wish to attend and click on the Registration Link.

Once you click “Register Now” at the bottom of your registration page, you will be provided a workshop confirmation number. Please retain this number for your records should you need to discuss your registration with DXC Technology. If you do not receive a confirmation number, you have not successfully registered for this workshop.

Please be sure to include all of the registration information indicated below to ensure timely and accurate attendance registration.

## HPE MyRoom Virtual Classroom Training

DXC Technology utilizes internet virtual classrooms that allow class participants to attend a workshop without leaving their office. Participants will be provided a key to an internet classroom to attend the **Autism Waiver Service Provider Billing and Web Claim Submission Workshop**. We have replaced HP Virtual Room with HPE MyRoom. As a result, providers who previously attended Virtual Room Workshops for other Connecticut Medical Assistance programs will need to download HPE MyRoom and set up an account in order to attend the virtual classroom training. In addition, participants will also dial into a conference call and have an opportunity to ask questions. Providers who register for this training will receive an email with directions on how to attend this training. **For this reason, it is critical that providers enter a valid email address at the time of registration.** If this email is not received three (3) days prior to the training, please contact the Provider Assistance Center toll free at 1-800-842-8440.

### Please supply the following information when registering for a workshop:

- Provider Name
- NPI Number or AVRS ID, if enrolled as an Autism Waiver Service Provider, or current application status
- Contact Name
- Telephone Number (including Area Code)
- Email Address (**Required for HPE MyRoom Virtual Classroom Training**)
- Name of Attendee

Once you click “Register Now” at the bottom of your registration page, you will be provided a workshop confirmation number. Please retain this number for your records should you need to discuss your registration with DXC Technology. If you do not receive a confirmation number, you have not successfully registered for this workshop.

## **IMPORTANT NOTICES:**

### **Copy of Workshop Presentation**

The workshop presentation will be available on the [www.ctdssmap.com](http://www.ctdssmap.com) Web site. To access a presentation, from the [www.ctdssmap.com](http://www.ctdssmap.com) Web site Home page, select Provider Services. Under Provider Training, click the “here” link. Under “Materials”, click the “Autism Waiver Service Provider Workshops” link to select the workshop(s) you wish to view and/or download.

### **Inclement Weather**

Should inclement weather occur on the date of a workshop, resulting in a late opening or closure, DXC Technology will post a notice of workshop delay or cancellation at **1-844-225-1164, extension 2154000**.

## **DIRECTIONS**

### **Connecticut Hospital Association**

**110 Barnes Road, Wallingford, CT 06492 (203) 265-7611**

- **1-91 NORTHBOUND:** Take Exit 15. At the end of the Exit ramp, turn LEFT onto ROUTE 68 WEST. Proceed approx. 1.8 miles on ROUTE 68 to the \*7th traffic light; Turn RIGHT onto BARNES INDUSTRIAL PARK ROAD NORTH; at the traffic light, turn LEFT onto BARNES ROAD; and take FIRST RIGHT into CHA driveway.
- **1-91 SOUTHBOUND:** Take Exit 15. At the end of the Exit ramp, turn RIGHT onto ROUTE 68 WEST. Proceed approx. 1.8 miles on ROUTE 68 to the \*6th traffic light; Turn RIGHT onto BARNES INDUSTRIAL PARK ROAD NORTH; at the traffic light, turn LEFT onto BARNES ROAD; and take FIRST RIGHT into CHA driveway.
- **Wilbur Cross (Route 15) NORTHBOUND:** Take Exit 66. At the end of the Exit ramp, turn LEFT onto ROUTE 5 SOUTH. Proceed approx. 1/4 mile to \*4th traffic light. Turn LEFT up short hill to next traffic light. Turn LEFT onto ROUTE 68 EAST. At FIRST traffic light; turn LEFT onto NORTH MAIN STREET EXTENSION. Take first RIGHT onto BARNES ROAD. CHA is the SECOND BUILDING ON THE LEFT.
- **Wilbur Cross (Route 15) SOUTHBOUND:** Take Exit 66. At the end of the exit ramp, turn LEFT onto ROUTE 5 SOUTH. Proceed approx. 1/4 mile to \*5th traffic light. Turn LEFT up short hill to next traffic light. Turn LEFT onto ROUTE 68 EAST. At FIRST traffic light; turn LEFT onto NORTH MAIN STREET EXTENSION. Take first RIGHT onto BARNES ROAD. CHA is the SECOND BUILDING ON THE LEFT.
- **I-84 EASTBOUND:** Take Exit 27. Proceed onto Route 691 East. Follow to the WILBUR CROSS PARKWAY SOUTHBOUND. Take Exit 66. At the end of the exit ramp, turn LEFT onto ROUTE 5 SOUTH. Proceed approx. 1/4 mile to \*5th traffic light. Turn LEFT up short hill to next traffic light. Turn LEFT onto ROUTE 68 EAST. At FIRST traffic light; turn LEFT onto NORTH MAIN STREET EXTENSION. Take first RIGHT onto BARNES ROAD. CHA is the SECOND BUILDING ON THE LEFT.

**\*IMPORTANT ~ Traffic light count includes light at the end of ramp**

## **IMPORTANT NOTICES:**

**CHA is a smoke-free campus.**

**\*\*\*\*\* NO SMOKING ALLOWED\*\*\*\*\***

The use of tobacco products is prohibited on the grounds, sidewalks, delivery areas, and parking lots.

Refreshments will **not** be served.