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Services

Once the Assessment is completed, the service needs for the client will be known and will be added to the Services tab in eCIRTS. The Services tab will house Service Plans and Care Plans. Case managed clients will have a Care Plan. Non-case managed clients will have a Service Plan. In CIRTS, services were only added for clients who required a care plan. In eCIRTS, one-on-one services planned out in advance (even if reported in the aggregate) will be added as services. For example, Companionship (COMP), Homemaker (HMK, HMKV), TRANSPORTATION (TRS, TRSG, TRSI, TRSV, DPTRS), Personal Care (PECA, PECV.)

This will allow a better overview of a client's needs, help with monitoring providers to ensure service delivery, and assist with monitoring spending plans by provider. For each service, a provider will be selected to deliver the service. Non-Department (NDP) funds can also be entered as eCIRTS Services, but it is up to the AAA and/or provider if they choose to enter them. Once the services are entered and accepted by the provider, they are turned into authorizations in eCIRTS. Authorizations will be used to control the number of units a provider can bill by client. This will assist providers with their spending plans, ensuring they do not go over their contracted funds, and aid the AAAs and providers in monthly Surplus/Deficit discussions. With this being a new function, the Department recommends setting the service/authorization limits high for the first year so that constant re-authorizations would be unnecessary. However, in future years the limits should be reduced to align with contracted funds to ensure providers stay within their budgets. A provider is also able to deliver and bill services outside of the authorized limits when needed to care for the client.

Services/authorizations are not required for the following services:

- APS Crisis Revolving Services
- NDP services (optional)
- Information
- Referral
- Intake
- Screening and Assessment
- Congregate Meals Screening
- All OA3D services.
- Medication Management Group (MMG) CCE and LSP
- Powerful Tools for Caregivers (PTCG) OA3E
- Caregiver Training/Support (CTSG)

- Caregiver Support Groups (CSG)
- Gerontological Counseling (GECO)
- Counseling (Mental Health/Screening) (MHSG)
- Health Support (HSUG)
- Education/Training (EDUCG),
- Legal Assistance (LEG),
- Medication Management Group and OA3D Medication Management Individual (MMG, MEMAG, MEMAI),
- Recreation (RECR), and
- Telephone Reassurance (TERA, TERACV)
- Legal Assistance (LEG)



Note

The Department recognizes that this will be additional work for providers during the transition to eCIRTS who will be entering services for non-case managed clients for the first time. The providers are encouraged to enter the information as soon as they can. However, services must be entered into eCIRTS no later than the client's next reassessment or care plan review, whichever comes first. Setting up the services in eCIRTS at the time of assessment can be billed to Screening and Assessment, Congregate Meals Screening, or Intake (whichever service the provider typically uses to report completing an assessment).



General Information

Before the services can be added, some general information must be added first. This general information record serves as the parent record and the services are the child records in eCIRTS. The general information record is referred to as a Plan record in eCIRTS. One Plan record will be created per year.

1. The Assessor or Case Manager will click on the **Services** tab.



- 2. From the **File** menu, select **Add Plan**.
- 3. The General Information page will display. Update the following fields:
 - a. **Division**: This field will display the Division that has an open status on the Screening page.
 - b. Program: select DOEA Services



Note

The DOEA Services program record was added automatically when the client record was created. It is a required field for eCIRTS authorization functionality to work correctly, and DOEA will always select 'DOEA Services.'

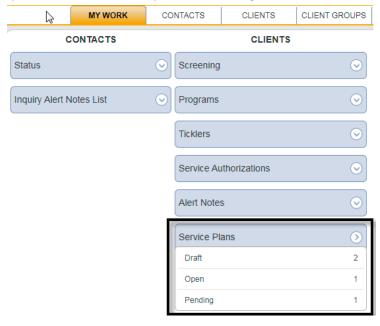
- c. Agency: This field will display the Agency associated with the selected Screening value.
- d. **Worker**: This field will default to the worker creating the record and most of the time also be the one who completed the assessment. Update it if it is not correct.





Note

If you are the worker, this Plan will also appear on your My Work page in the Service Plan queue. This makes it easy for Case Managers and Providers to keep up with their case loads.

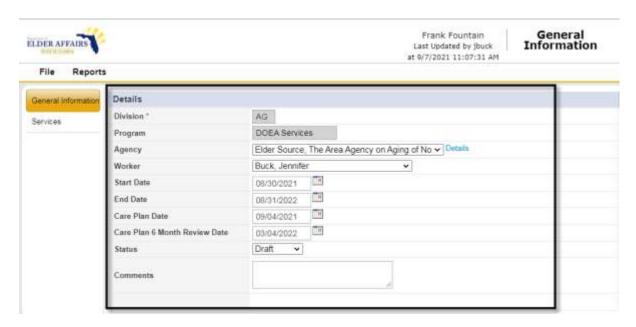


- e. Start Date: This is the start date of the client's care plan or reassessment cycle.
- f. **End Date**: This is the last day of the month one year later.
- g. Care Plan Date: When applicable, this is the date the Care Plan is reviewed with the client.
- h. **Care Plan 6 Month Review Date**: When applicable, this is the date the Case Manager completes the sixmonth care plan review with the client.
- i. **Status**: This field will display the status of the plan.

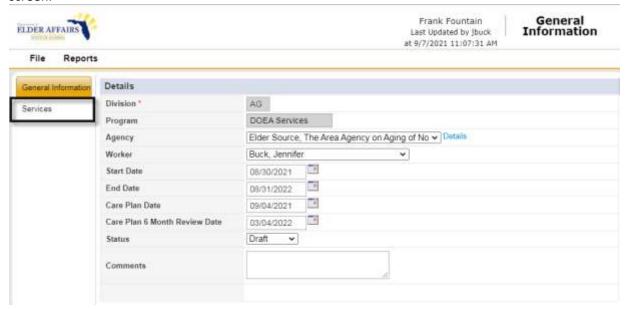
Status	Use
Draft	Indicates that the record is active, and services are still being added to the record.
Open	indicates that the record is active, and services have been added to the record. Modifications can be made to the record throughout the year.
Complete	indicates that the record is complete, and no modifications can be made to the record. This status is used at the end of the year to 'close out' one year and open the next.

j. **Comments:** notes about the plan record.





4. From the **File** menu, select **Save Plan**. Select the Services subpage which is now visible on the left side of the screen.



Provider Services

It is important to understand the link between provider services and client services in eCIRTS. A provider must be contracted to provide a service before you can add a service for that provider on a client's record. A service record for the provider must exist for the service, program and client county you are adding the client service for. This provider service will have a start and end date within the start and end date of the client service.

Sometimes there is not a single provider service record that covers the date span on the client service record.



Usually this happens because there are 2 provider service records and together, they cover the data span on your service record.

Or you do not have any provider services that cover the full date span on the service record, usually because the client service start date is before the provider service start date.

eCIRTS will warn you when one of these issues exist and even offers to make the corrections for you.



The result will be one or more client service records, each with a start/end date that aligns with the associated provider service record, collectively covering the full client service date span.



Example

Provider has 2 CSG OA3E services. First with a date range of 10/1/21 - 12/31/21. The second with a date range of 1/1/22 - 12/31/22.

CSG	CSG CAREGIVER SUPPORT GROUPS	OA3E	10/01/2021	12/31/2021
CSG	CSG CAREGIVER SUPPORT GROUPS	OA3E	01/01/2022	12/31/2022

The client service has start date of 10/1/21 and end date of 2/24/22.

There is not a single provider service that covers this date range, there are two. Two client services need to be added. The first will have a date range of 10/1/21 - 12/31/21. The second with a date range of 1/1/22 - 2/24/22.

Add a Service

Each provider will have their own service record for the client. For example, a client needs 40 hours/week of Chore services, delivered by two providers. There will be two service records in eCIRTS. One for 30 hours and second for 10 hours. Each service record will have a provider who will deliver the services.

1. With the Services subpage selected, from the File menu, select Add Planned Service.





- 2. The Service Details page displays. Update the following fields:
 - a. **Division**: This field displays the Division the client is open to.
 - b. **Start Date:** This field displays the date the services will start.
 - c. **End Date**: This field displays the date the services will be stop.
 - d. **Funding Source:** This field displays the funding source for this service.
 - e. **Program:** the program under which services will be received. This will be the same program you selected for the Funding Source.
 - f. **Client County:** This field pulls the client County from the Demographic page. It is needed for this page to filter the list of matching providers correctly later in the workflow.



Note

If Client County is not populated, stop and close the window. Go to the Demographic page and make sure the County field is populated. If not, add the County. If County does exist just save the record. Select File then Save Demographics. No changes have been made but your save is putting the county data where it needs to be for the Services page to pull it in.

g. **Service Code:** Search for an select the service code. This list will include Services that are active during the start and end dates on the service record for the selected Funding Source for the selected Program on the service record. Service codes in eCIRTS begin with the abbreviation/code that used to be used in CIRTS. Each service code in eCIRTS has a Service Type and Service Category which are also helpful when the abbreviation or name is not known.

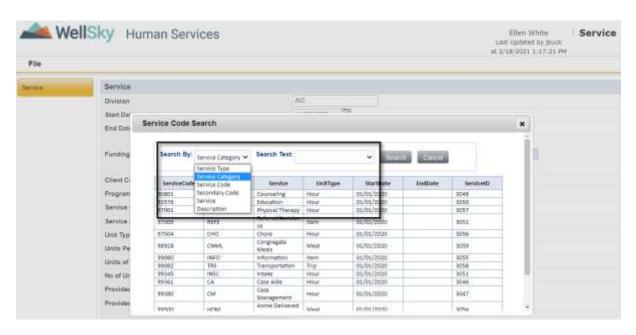


Example

CHO in CIRTS will be CHO Chore in eCIRTS.

HDM in CIRTS will be HDM Home Delivered Meals in eCIRTS.





- h. **Service Description**: Description representing the delivery of a specific service. This will auto populate after the service code is selected from the service code search.
- i. **Unit Type**: This field displays the unit type associated with the service code. (e.g. hour, mile, session) This will auto populate after the service code is selected from the service code search.
- j. **Units Per**: This field is used in conjunction with the Units of Measure field to specify the frequency, or how often a service can be delivered.
- k. **Units of Measure**: This field is used in conjunction with the Units Per field to specify the frequency, or how often a service can be delivered.



Note

Units Per and Units of Measure are used to indicate the frequency of service delivery. The data entered is left to the user's discretion and often, there are several combinations of data that will result in the same number of units.



Example

A service that runs for an entire year, 1 unit per calendar day and 365 units per year will both result in the same number of units (365).



Example

A service that runs for an entire year for SCAS or CMV. 1 hour per month or 12 hours/year will both results in the same number of units (12).

I. No of Units: This is a calculated field based on the Units Per and Units of Measure.



m. **Number of Periods**: This is an eCIRTS required, read-only field that is calculated using the date range and the units of measure.



Example

If a service runs for an entire year, then when the unit of measure is year, the number of periods is 1. If the unit of measure is quarter, the number of periods is 4, and for a unit of measure of week, the number of periods is 52.

- n. **Provider ID**: This fields displays the system generated ID for the Provider after the user has searched for and selected a value. Provider ID field is not required until Service Status: Accepted or Requested.
- o. **Provider**: This field displays the name of the Provider that will deliver the service.
- p. **Unit Cost**: This field will auto populate when the provider is selected and displays the unit cost associated with the service for the selected provider.
- q. Max Amount: This is an auto calculated field based on the unit cost and units per.
- r. Comments: add any comments that need to be visible on the authorization
- s. **Service Status:** This field will display the Service Status according to the table below:

Status	Use
Needed	Determined when doing assessment. Services are needed but a subcontracted provider or agency has not been identified to provide the services yet.
Requested	Services needed and a subcontracted provider or agency has been identified, but not accepted yet.
Accepted	The subcontracted provider or agency has agreed to provide services to the client.
Declined	The subcontracted provider or agency has declined providing services to the client.

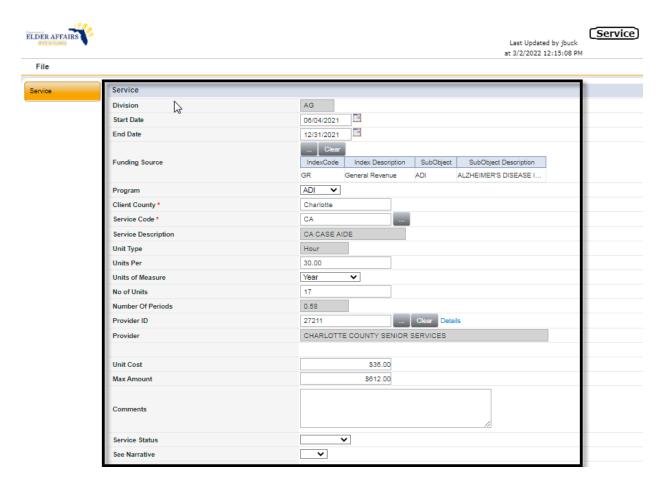


Note

Service status: Accepted will trigger a reminder to the user to follow up with the client within 14 days from the start of the service to verify services have been started and needs have been met. See Service 14 Day Follow Up section for more details.

- t. **See Narrative:** Each funding source will have its own service record. When services are split between 2 funding sources, it will be noted in the Narrative. On the services page, the See Narrative field should equal YES as a trigger to check the Narrative record.
- u. **Corresponding Auth No:** This field will display the corresponding authorization number, when applicable. This is an eCIRTS generated identification number for the authorization.





- 5. When complete, from the **File** menu, select **Save and Close Planned Service**. The Provider/Case Manager is returned to the Services list view page.
- 6. Proceed to the <u>Create Authorizations</u> section and be sure to <u>Add a Referral to Service Provider</u> record for each provider added to the Services list.

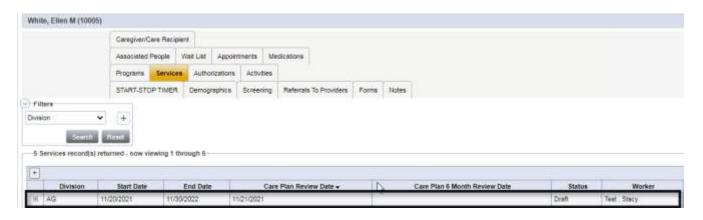
Add a Referral to Service Provider record

Every provider who will deliver services for the client must have an active Referral to Providers record in eCIRTS. Do not add the Referral to Provider record until you want to allow the Provider to bill for this client. When you close this Referral to Provider record, the provider will no longer be able to bill services for the client. Navigate to the **Referrals to Providers** tab. See the Add a Referral to Service Provider record section for more details.

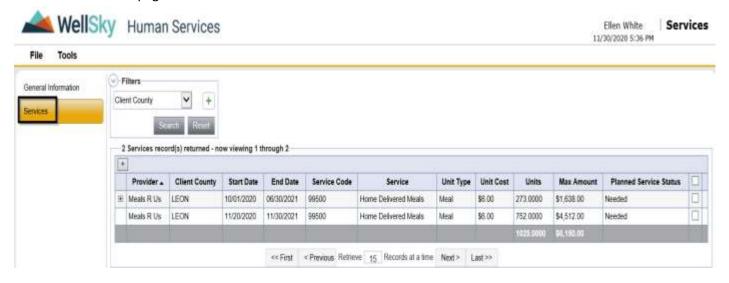
Edit a Service

1. If the service records need to be updated at any time, click on the **Services** tab and select this year's record.

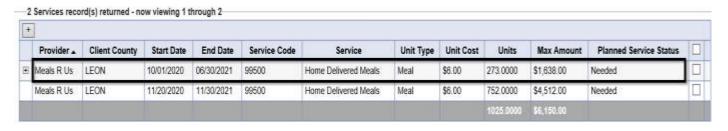




- 2. The **General Information** page will display.
- 3. Click on Services subpage.



4. Click on the Service record in the list view grid.



5. Make any edits as needed. In eCIRTS, the old service will be discontinued, and a new service is added.





Example

In Oct 2020 we thought the client would get 10 meals/day 11/01/2020 - 11/30/2021. Service #1 was added for 10 meals/day 11/01/2020 - 11/30/2021.

Later, in June, we reduce her to 5 meals/day. Service #1: 10 meals/day was changed to 11/1/2020 - 5/31/2021. Service #2: 5 meals/day 6/1/-21 - 11/30/21 is added.

- 6. From the File menu, select Save and Close Service.
- 7. When Services are edited, their associated authorizations must also be updated. See the <u>Update Authorizations</u> section.

Service 14 Day Follow Up

When the Assessor/CM saved the service record with a status of Accepted, a Workflow Wizard triggered a tickler for a service 14 day follow up. The Assessor/CM will be reminded to follow up with the client within 14 days of the service start date to make sure services have been received. All services with status of Accepted will trigger its own tickler.



Note

The System Change Task Force (SCTF) is looking into ways to make this reminder process more efficient. Right now each tickler requires a note to resolve the tickler but usually the worker adds one note that addresses all services. This can be changed so the reminder is just a message not requiring the creation of a Note. This must be approved by the SCTF before it will be updated in eCIRTS.

 Daily, the Assessor, Case Manager or OAA Provider will monitor My Work for new ticklers. Service referral follow up tickers will be due 14 days from the date the service started and are visible from My Work > Clients > Ticklers.



- 2. Select **Ticklers** to display a list of ticklers currently due.
- 3. Use the **Search** filters at the top of the page to narrow down your results if needed.

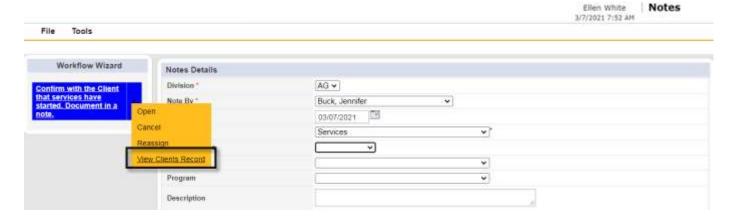




4. Locate the **Confirm with the Client that services have started. Document in a Note** tickler. Click on the tickler name to open it.



5. The Note Detail page displays. Contact the client to follow up on the service. Use the tickler flyout menu as a shortcut to **View Client Record** and lookup information to complete the follow up.



- 6. The Assessor, Case Manager or OAA Provider will complete the follow up and in a note in eCIRTS.
- 7. Return to the open **Workflow Wizard** window and complete the Notes detail page. Update the following fields:
 - a. **Note Type:** Select Services, APS-High or Case Management Narrative according to the scenarios below.



Note Type	Use
Services	Lead Agency and OAA Providers who completed the assessment and added services will select Services as the Note Type.
Case Management Narrative	Case Managers who completed the assessment and added services will select Case Management Narrative as the Note Type instead of Services.
APS-High	Lead Agency, OAA Providers and Case Managers who completed the assessment and added services for an APS-High risk case will select APS-High as the Note Type instead of Services. This will make the monitoring of APD-High risk case requirements easier.

b. **Note Sub-Type:** The Assessor, Case Manager or OAA Provider will select a Note Sub-Type according to the table below.

Sub-Type	Use
14-Day Follow Up Completed	Used when Note Type is Services or APS-High and the referral follow up has been completed within 14 business days.
14-Day Follow Up Not Completed	Used when Note Type is Services or APS-High and the referral follow up has not been completed within 14 business days.
14-Day Follow Up	Used when Note Type is Case Management Narrative

c. **Description:** leave blank

d. Status: Complete

e. Note Recipient: Leave blank

8. When finished, from the **File** menu, select **Save and Close Notes**.

9. The tickler is marked as complete when the note is saved. The Workflow Wizard window can be closed.

10. The Note is visible on the client Notes tab.



Authorizations

Authorizations are created from Services in eCIRTS. Each authorization is associated with a specific provider, but a client can have multiple authorizations with different providers. Authorizations will be used to control the number of units a provider can bill by client, by service and by program. This will assist providers with their spending plans, ensuring they do not go over their contracted funds, and aid the AAAs and providers in monthly Surplus/Deficit discussions. With this being a new function, the authorization limits will be set high for the first year so that constant re-authorizations will not be needed. However, in future years the limits should be reduced to align with contracted funds to ensure providers stay within their budgets. A provider is also able to deliver and bill services outside of the authorized limits when needed to care for the client. Authorizations are not be required for several services. Please see the Services section for a complete list.

Create Authorizations

- 1. From the **Services** tab, select the applicable **General Information** record.
- 2. The General Information page displays with the Services subpage visible on the left.
- 3. Select the **Services** subpage. The Services list view displays.
- 4. Click the checkbox next to each Service record that is ready to be turned into an authorization.
- 5. From the File menu, select Create Authorizations.



6. A notification displays that the authorization was created and an eCIRTS assigned authorization number will be added to each service.



Note

The Program on the General Information page must equal DOEA Services for the Create Authorization functionality to work correctly.

Update Authorizations

Authorizations are created from services. When Services are updated, their associated authorization needs to be updated. This is done on the Services list view page.



- 1. From the **Services** tab, select the applicable **General Information** record.
- 2. The General Information page displays with the Services subpage visible on the left.
- 3. Select the **Services** subpage. The Services list view displays.
- 4. Select the Service that needs to be updated and make your changes. See the <u>Services</u> section for additional information.
- 5. Click the **checkbox** next to each Service record that is ready to have its linked authorization updated.
- 6. From the File menu, select Update Authorizations.

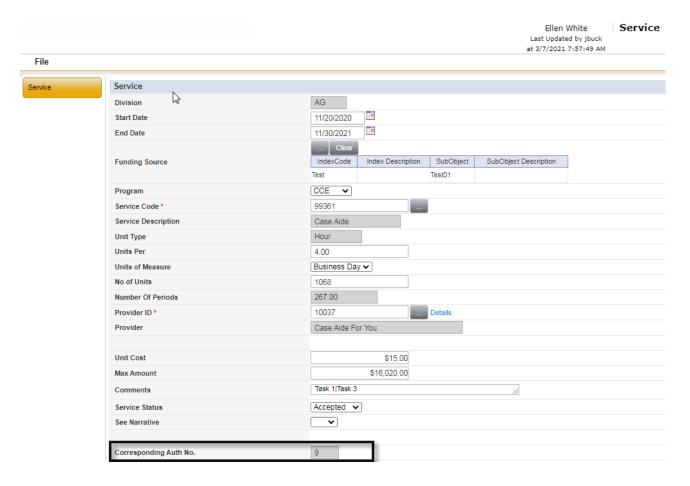


7. A notification displays that the authorization was updated.

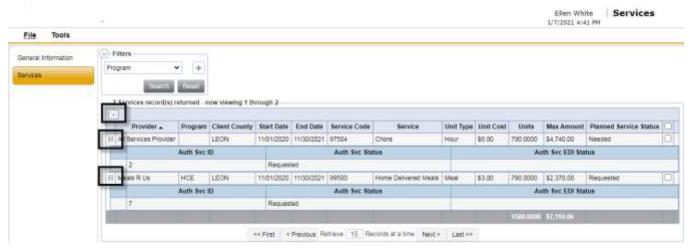
View Authorizations - Client record

- 1. The authorization information is visible on the Service record and on the Authorizations tab of the Client record.
- 2. On the Service details page, the Authorization number is visible.



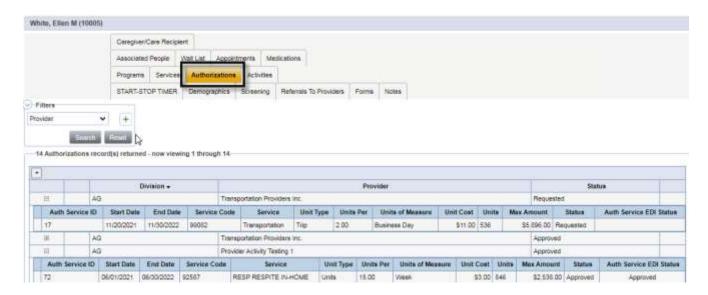


3. On the Services List view page, the Authorization number and statuses are visible by selecting the + expansion icon.



4. The Authorization information is also visible on the Authorizations tab of the Client record.





Print Authorizations

For Phase 1 go live of eCIRTS, PSAs will continue their current processes of suppling printed Service Authorization forms to providers. A copy of the form will be scanned and attached to a note in eCIRTS. Additional options to print and distribute the authorizations within eCIRTS are being explored for Phase 2.

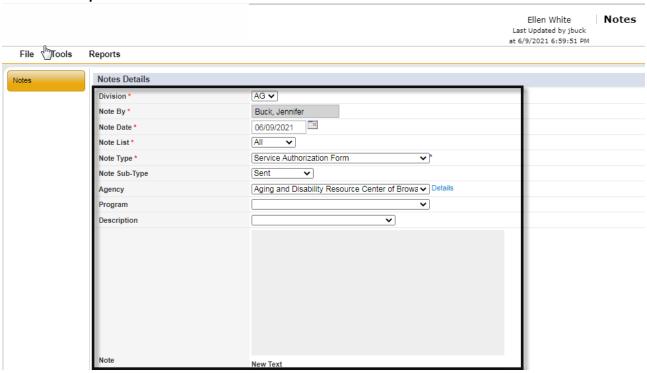
- 1. Once the Service Authorization form is completed and given to the provider, a copy will be saved as an attachment to a note in eCIRTS.
- 2. Open the Client record and select the **Notes** tab.



- From the File menu, select Add Notes.
- 4. The Note Details page displays. Update the following fields:
 - a. Division: Defaults to AG
 - b. Note By: Defaults to self
 - c. Note Date: Defaults to today
 - d. Note List: Select Provider or ADRC
 - e. Note Type: select Uploaded Forms
 - f. **Note Sub-Type**: Service Authorization form
 - g. **Description**: lookup values that change depending on the Note Type selected.
 - h. **Description**: Select from the lookup. The values in this field are dependent on the Note Type selected.



- Note: Enter details.
- j. Status: select Complete
- k. Date Completed: This field will auto populate with the date when the status is changed to Closed.
- I. Add Attachment: Search for and select the electronic Service Authorization Form on your workstation.
- m. Add Note Recipient: None needed



5. From the File menu, select Save and Close Notes.

View Authorizations - Provider Record

1. For Providers, the Authorization information is visible on the Provider record on the Authorization tab.





Care Plans

A Care Plan is the tool used by the case manager to document a client's assessed needs, services to be provided, and costs associated with the provision of services. The care plan is a plan of action, developed in conjunction with the client, caregiver, and the client's family or representative. It is designed to assist the case manager in the overall management of the client's care. The Care Plan is a document that can be printed from eCIRTS, pulling data from the Services page. As stated earlier, the Services page will be completed for all clients, whether they require a Care Plan or not. When a care plan is required, periodic follow ups must also be completed. the Case Manager will be reminded of these by Workflow Wizards.

- 1. All services the client is to receive will be entered on the **Services** tab of the client's record. See the <u>Services</u> section for more information.
- 2. After the 701B is completed and it is determined the client will receive Case Management services, the Case Manager will complete the Care Plan and attach a signed version to a note in eCIRTS. The Case Manager can use the 203 Care Plan Form outside of eCIRTS or can print a version of the 203 Care Plan form out of eCIRTS.
- 3. If the Case Manager will use the 2032 Care Plan form, skip to step 9.
- 4. If the Care Plan will be printed from eCIRTS, use the **Service Record Data Report**. The report will be run for one client at a time.



Note

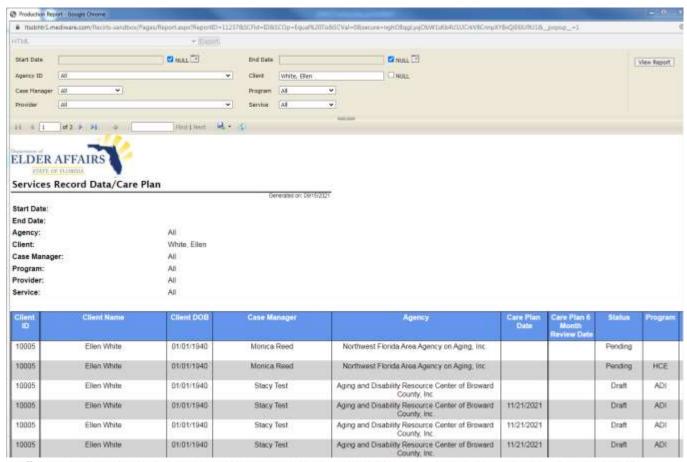
Services must exist before printing this report. See the <u>Services</u> section for additional details.

5. Select the Reports chapter. From the Report menu at the top of the page, select Service Record Data report.



6. Select the start and end dates in the report filters. Enter the client's name.





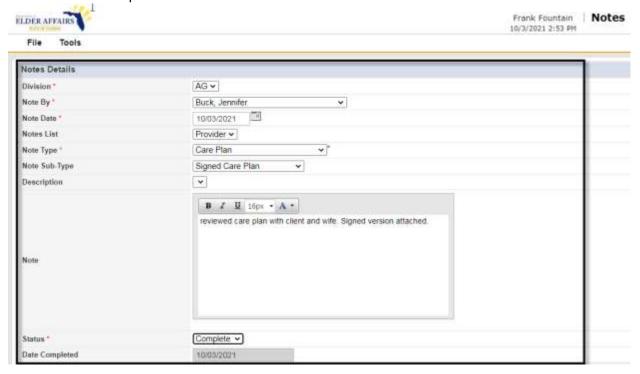
I have participated in developing this care plan through discussion regarding y assessed needs and the services and service providers available to help meet those needs. I understand that the amount of assistance I receive is dependent upon my ability and preference. I understand I am entitled to a grievance review if my services are reduced, changed, or terminated. I authorized the provider to release information concerning the services i receive under all programs to the Florida Department of Elder Affairs.

Client	
Caregiver and/or Designee	6
Date	
Case Manager	F
	All
Date	ŧ.

- 7. The Report displays. Export it to Excel so you can make the final edits before reviewing with the client.
 - a. Delete the selected filter rows and any other columns that do not need to be displayed on the Care Plan.
- 8. Save a copy of the edited report to your workstation and print a copy for the client to sign.
- 9. The Case Manager will get the Care Plan signed or verbally signed by the Client.
- 10. Once the Care Plan has been reviewed and signed by the client, the Case Manager will save a copy to a Note.
- 11. Navigate to the client's record and select the **Notes** tab.

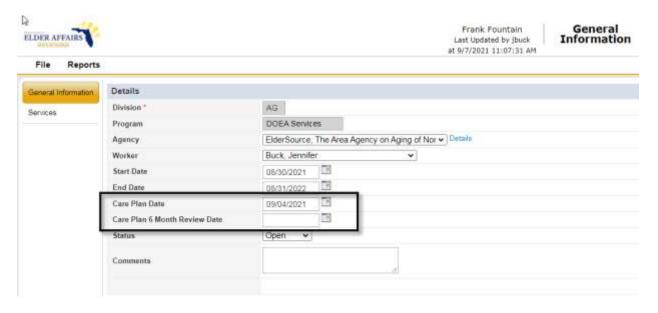


- 12. From the File menu, select Add Note. The Note Details page displays. Update the following fields:
 - a. Note Type: Care Plan
 - b. Note Sub-Type: Signed Care Plan
 - c. **Attachment**: attach a scanned copy of the signed version of the Care Plan.
 - d. Status: Complete



- 13. From the File menu, select Save and Close Notes.
- 14. The Case Manager will also update the pertinent care plan dates on the **Services** tab. Select the **General Information** record for the current year. Update the following fields:
 - a. Care Plan Date: enter the date the Care Plan was signed by the Client.





- 15. From the File menu, select Save and Close Plan.
- 16. When the General Information page is saved with a Care Plan Date, a Workflow Wizard triggers a tickler for the Worker on the General Information page (the Case Manager) to complete the 6-month Care Plan review. This tickler is not due right away so it will be visible in the Case Manager's **My Work > Ticklers** queue.

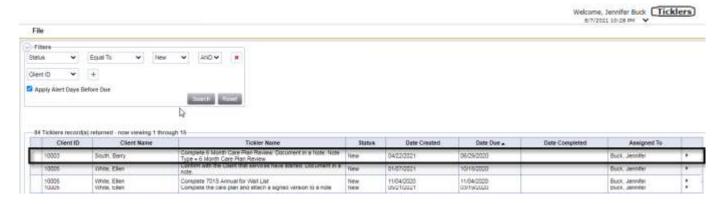


6 Month and Annual Care Plan Review

The Case Manager will be reminded by a tickler in eCIRTS to complete a 6-month care plan review and an annual care plan review. The 6-month tickler is due 6 months after the Care Plan Date on the General Information page.

1. The Case Manager will monitor his/her **My Work > Tickler**s queue daily and work the ticklers due that day/week. Closer to when the 6-month review is due, the Case Manager will open the tickler from **My Work > Ticklers** queue and locate the tickler.





- 2. Select the 6-month review tickler to open the Note Details page. The Case Manager will contact the client and complete the review and document the details in a note in eCIRTS.
- 3. From the tickler, the Note Details page displays. Update the following fields:

a. Division: Defaults to AGb. Note By: Defaults to selfc. Note Date: Defaults to today

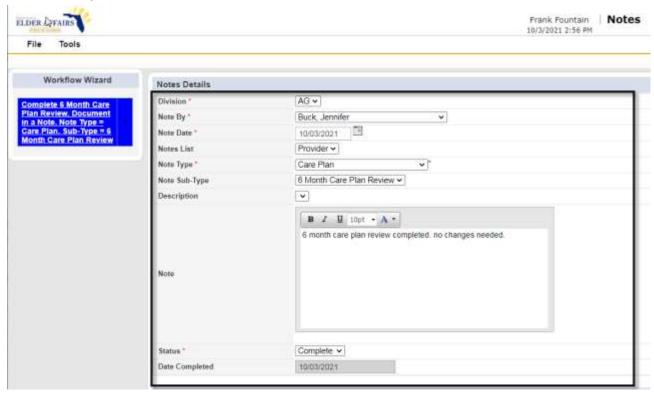
d. Note Type: Care Plan

e. Note Sub-Type: 6 Month Care Plan Review

a. Description: None

f. **Note**: Enter details of the 6-month care plan review.

g. Status: Completeh. Note Recipient: None





4. From the **File** menu, select **Save Note**. The tickler is marked as complete.



5. The Care Plan is reviewed annual as part of the annual reassessment/rescreening process. See the <u>Annual Rescreening/Reassessment</u> section for additional information.



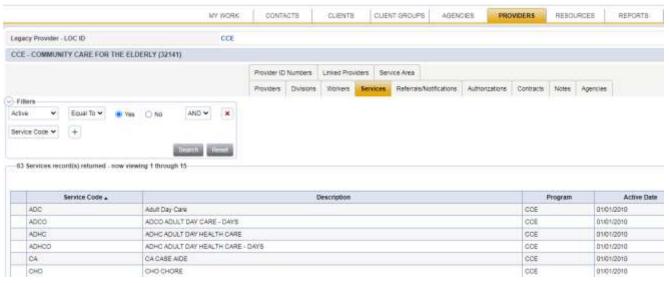
Activities

This tab is used to capture information about the services a provider delivers to a client for billing. In eCIRTS, billable services are called Activities. If service delivery information needs to be recorded for multiple consumers at once, the Activity Roster on My Work can be used. For larger service providers, the Activity Import on My Work can be used to upload service details for multiple clients at once, fed from the provider's system and exported into an eCIRTS formatted file. This replaces the former 'EDI Upload.' Before a provider can submit activities for a client in any of the methods described above, the provider must have an open referral record for the client. See the Referrals to Service Providers section for more details.

Before you Bill

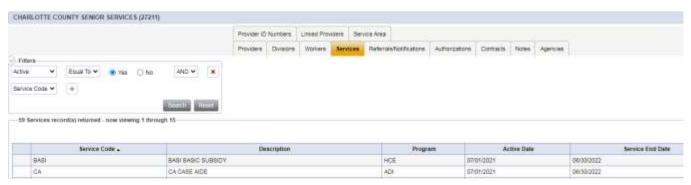
DOEA required the new eCIRTS to have substantially more checks and balances regarding billing than legacy CIRTS. The checks and balances only work if the data in the system has been completely and correctly set up. Providers will not be able to bill until setup is correct. All of the setup steps are listed below for informational purposes only. Changes can only be completed by someone with the eCIRTS Finance or eCIRTS Admin role.

- 1. DOEA: Is the service allowed to be billed under the program you've selected? Check the Financial Configuration Workbook. This document lists the services and associated programs the Department approved to be set up in eCIRTS. If it's not there it must be approved by DOEA before proceeding.
- 2. Service: Is the service your billing listed under the Services tab of the Program and effective before you are trying to bill?

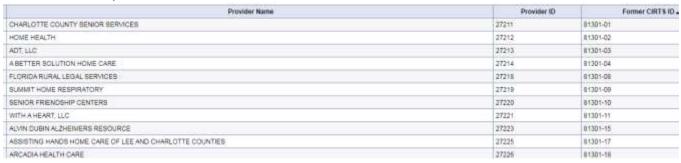


3. Service: Is the service your billing active and under your Providers > Services tab and effective before you are trying to bill?





4. Provider: Are you billing under the correct provider? In CIRTS, billing was under the 'parent.' In eCIRTS you bill under the location/who delivered the service. Each location has their own Provider record in eCIRTS.



5. Agency: Is your provider record listed under the Agency Providers tab for the agency you are trying to bill under?

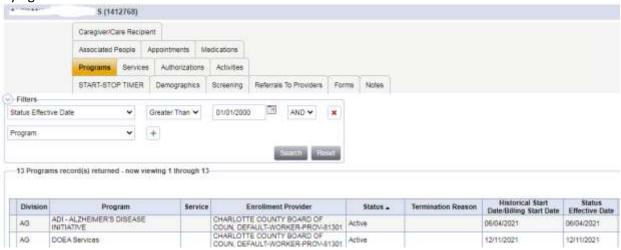


6. Program: Is the program you're adding on the Activity page under the Agency Program tab for the agency you are trying to bill under?



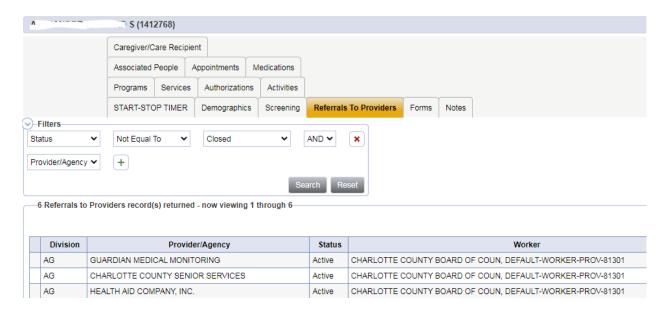


7. Program: Does the client have an open enrollment for the program you are billing and for a date before you are trying to bill?



8. Referral to Providers: Does the client have a referral record for your Provider for a date before you are trying to bill?



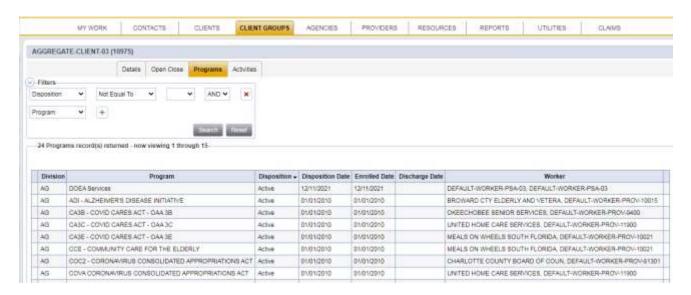


For Aggregate Billing

Aggregate services are added to a Client Group, not an individual client record. Most of the same checks and balances exist for Client Group as we just reviewed for Clients.

- 1. DOEA: Is the service allowed to be billed under the program you've selected? Check the Financial Configuration Workbook. This document lists the services and associated programs the Department approved to be set up in eCIRTS. If it's not there it must be approved by DOEA before proceeding.
- 2. Service: Is the service your billing listed under the Services tab of the Program and effective before you are trying to bill?
- 3. Service: Is the service your billing active and under your Providers > Services tab and effective before you are trying to bill?
- 4. Provider: Are you billing under the correct provider? In CIRTS, billing was under the 'parent.' In eCIRTS you bill under the location/who delivered the service. Each location has their own Provider record in eCIRTS.
- 5. Agency: Is your provider record listed under the Agency Providers tab for the agency you are trying to bill under?
- 6. Program: Is the program you're adding on the Activity page under the Agency Program tab for the agency you are trying to bill under?
- 7. Program: Is the program you're adding on the Activity page under the Program tab for the Client group?

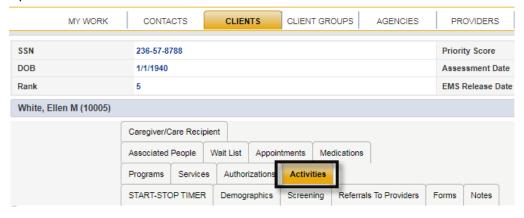




Add Billable Services for One Client

This functionality will most likely be used to enter services for APS High Risk clients. The ADRC would also bill for Intake and Screening services for a client on this page. Finally, the Lead Agency or OAA provider could use the Activities tab to bill for Screenings and Assessment services.

Open the Client record and select the Activities tab.



- 2. From the File menu, select Add Activities.
- 3. The Activites Details page displays. Update the following fields:
 - a. Start Date: Enter the start date of the service delivery. The field defaults to today.
 - b. Start Time: leave blank. None of the services used by DOEA are time based so this field is not required.
 - c. **End Date:** Enter the end date of the service delivery. The field defaults to today.



Note

If the number of units being billed is for multiple dates of service, enter the first date of service as the start date and the last as the end date.

d. End Time: leave blank. None of the services used by DOEA are time based so this field is not required.



- e. **Auth ID:** search for and select the authorization for the service being billed. eCIRTS has been configured to prevent a provider from billing services if the Service/Auth doesn't exist on the client record. Only services/authorizations with status: Approved will display in the list.
- f. **Exception:** If services need to be delivered outside of the authorization limits, the provider can switch the Exception field to Yes to remove the requirement for an Auth ID. Also, providers can bill for services before a client is active in a program, meaning no records will be on the services tab yet so no Auth ID will exist. The Auth ID requirement needs to be removed. Examples include intake, activities completed when coming off the waiting list, but the client never becomes active, and client specific NDP services.
- g. Division: This system-required field will display AG.
- h. Type: Select Standard
- i. **Service Provider:** this field auto populates when the authorization is selected. When an authorization is not used, search for and select the name of the provider who delivered the service.

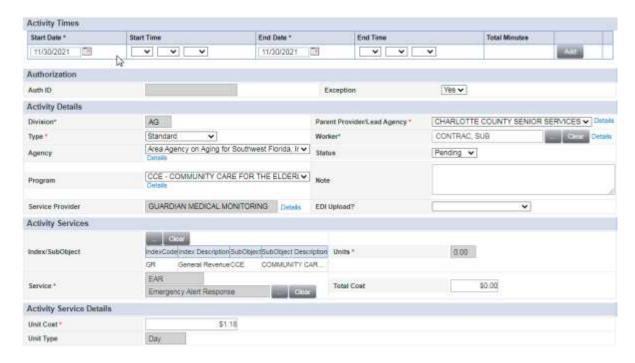


Note

Select the provider/location who rendered the service, not the agency/parent.

- j. **Parent Provider:** When the Service provider is selected, if they have a 'Parent' provider, the name will populate in this field. If there is no parent, the name of the Service Provider will also populate as the Parent Provider. This is how activities can be reported at the provider/location and/or lead agency level.
- k. **Agency:** The agency of the provider.
- I. **Program:** The program under which the service is being delivered.
- m. Worker: This field defaults to the user.
- n. **Status:** This field defaults to Pending and should be changed to Complete when all the service details have been entered.
- o. **Note:** This field will display notes, if applicable.
- p. **EDI Upload?:** This field is read only and will be populated with "EDI Upload" only if the Activity was added from the EDI upload. See the <u>Import Activities for Multiple Clients</u> section for additional information.
- q. **Index Sub Object:** the value selected in this field impacts the Area Plans functionality. Select the Index Sub Object for the program you selected in the Program field.
- r. **Service:** If the authorization is associated to only one service, this field will auto populate when the Auth ID is selected.
 - If the authorization is associated to multiple services, the user must search for and select the service. If an authorization is not used for this service, a list of active services for the selected provider is displayed for the ISO you selected. Be sure to select the correct service for the Program you are billing for.
- s. Units: Enter the number of units being billed
- t. **Total Cost:** This field will auto populate when the service and units are entered. It can be edited if needed, especially if the service selected does not have a default cost because it varies between client, like supplies. Those services will have a default cost of \$0 and the user will need to update the Total Cost to the actual amount.
- u. **Unit Cost:** This field will auto populate when the service is entered.
- v. **Unit Type:** This field will auto populate when the service is entered.





4. From the File menu, select Save and Close Activity.

Add Activities for Multiple Clients – Activity Roster

The Activity Rosters feature lets you search for and group clients receiving the same service from the same provider, such as a case management services, and create activities for many clients in one session. Use this feature to save time when creating the same activity for the same service for multiple recipients. This process includes four main steps:

- Filter for the type of service and client location
- Add the information that you will assign to all activities
- Filter to find clients eligible for specific services
- Record service units for each client



Example

A Billing Sheet for Case Management services is received from a Provider. The eCIRTS ID is listed as the Client identifier instead of the SSN. The eCIRTS Unit Posting staff will create an activity roster of active case management authorizations. This will return a list of clients with active Case Management authorizations. There shouldn't be anyone on the billing sheet that doesn't have an authorization ... with the occasional exception. The eCIRTS Unit Poster should find each client on the billing sheet in the matching consumers list in the Activity Roster and can key the number of units per day per client.



Note

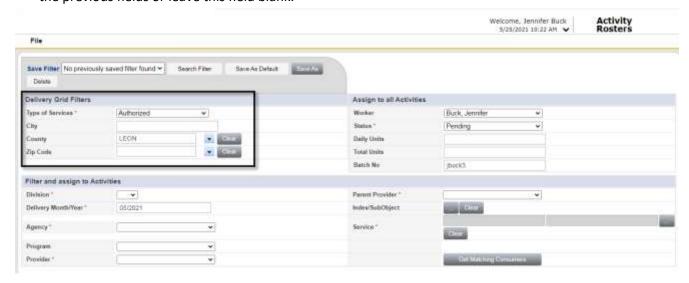
The Activity Roster cannot currently be used for services with a \$0 unit cost. Individual activities for clients must be added for these types of services. The roster will be updated in Spring 2022 to allow for \$0 unit cost services as well.



Navigate to My Work. From the Tasks queue on the right, select Activity Rosters.



- 2. The Activity Rosters page displays. There are several sections to be completed. First, search for the group of like clients in the **Delivery Grid Filters** section. Use the following filters to specify the type of service and find clients within specific geographic areas.
 - Type of Services: Required field. Depending on the service you are billing, select Authorized, Non-Authorized or Planned and Not Authorized.
 - Select Authorized to search for authorizations.
 - Select Non-authorized to search clients Screening, Program and Referral to Provider records. For a
 Client to be found with these filters, the Clients status date for Program records, Referral to Provider
 records, and Screening record must overlap the delivery month and year that you enter by at least
 one day.
 - Select Planned and Not Authorized to search the same as above, plus clients with Services that have not yet been turned into Authorizations.
 - **City**: select the city from the drop down or leave this field blank.
 - **County**: select the county from the drop down. This list will be filtered by the city selected in the previous field or leave this field blank.
 - **Zip**: select the zip code from the drop down. This list will be filtered by the city and county selected in the previous fields or leave this field blank.





- 3. Use the **Assign to all Activities** section to select information that will be added to all client activity records created in this session. The information in this section does not filter records. This information will be added to all the activity records that you create during this session. Update the following fields:
 - Worker: You must have a worker selected before selecting "Get Matching Consumers" otherwise no results will be returned.
 - **Status**: this defaults to Complete. You would change it to Pending only if you want all individual activity records created from the Activity Roster to be editable. This would require you to edit each one on the client record to eventually change it to a complete status.
 - **Daily Units**: Skip this field. If a value was entered, it would apply it to all matching clients for each day in the month. One activity record for each day of the month is created for each client. You will enter daily units for some of the matching clients instead of all later in the workflow.



Example

Enter 2 in this field and 2 units will be applied on 5/1, 5/2, 5/3, 5/4, 5/5, 5/6, etc.

Total Units: This field is optional. If entered, Total Units will be applied to all matching clients. One
activity record that spans the month is created for each client. You will likely skip this field and enter
units for some of the matching clients instead of all later in the workflow.



Example

Enter 20 in this field and 20 units will be applied for May for each client.

Batch No: eCIRTS will assign a unique batch number/identifier for each session.



- 4. Use the **Filter and assign to Activities** section to further filter the list of matching clients. Only clients with matching information will be listed in the list view grid at the bottom of the page. Required fields are marked with a red asterisk (*).
 - **Division**: Defaults to AG. This filter will include clients who had an open screening record during the delivery month and year.
 - **Delivery Month/Year**: Select the month in which the service is delivered. You can select the current month or past months, but not dates in the future. When you select the month and year, the application



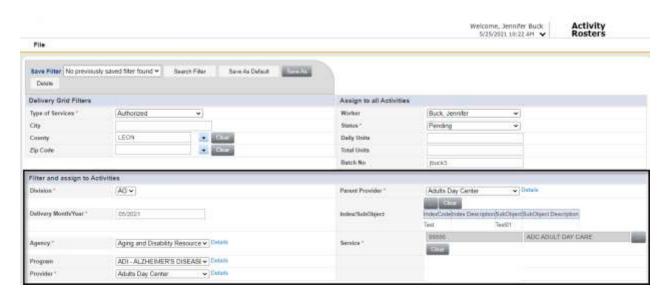
filters to show values that have matching month and year information. This includes internal program, parent provider, Index SubObject, and Service. This field is required.

- **Agency**: The agency through which the service was provided. If the Unit Posting role is being used, the list of Agencies will be limited to only those your Provider record is associated to (Agency Providers tab.)
- **Program**: The program through which the service was provided. Matching clients will be returned if they have an open Program record with the selected program during the delivery month and year.
- **Service Provider**: Use this field to record the service provider name. If the Unit Posting role is being used, the list of Providers will be limited to only those you are a worker for. Matching clients will be returned if they have an open Referral record with the selected provider during the delivery month and year.
- **Parent Provider:** This is the provider organization under which the current service provider operates. It populates when Service Provider is selected.
- Index/SubObject (ISO): Use the ellipsis search icon to open the popup. Click to select an
 index/subobject from the popup. Select the ISO that aligns with the Program selected in the Program
 field.
- **Service**: This list will include Services that are active for the provider during the full delivery month/year for the selected ISO on the service record. Be sure to select the correct service for the Program you are billing for.

Use the ellipsis search icon to open the vendor service search popup. If necessary, use the Search By dropdown to select a search criteria. Type at least three characters of search value and click Search. Click to select the service.







5. Select **Get Matching Clients** to retrieve consumer records that are eligible to receive services specified in the Filter and Assign to all Activities sections. Matching client records will display in the service delivery grid at the bottom of the page.





Note

If you are not seeing the expected results for matching consumers, you may need to close the Activity Roster page and start over. Sometimes fields on the filter criteria don't refresh between searches. Closing the page and reopening will fix the issue.

6. Use the service delivery grid to record the units delivered to each client. Select the date field and key the number of units. Scroll to the right to see additional date columns.



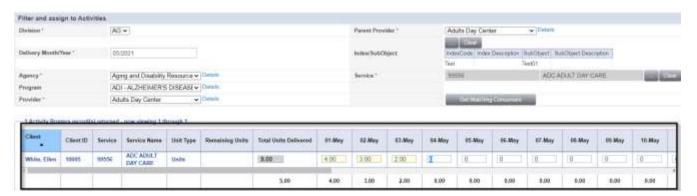
Note

You cannot record units for future dates. Those field will be grayed out/read only.

You cannot record units for dates before the provider service is active. Those fields will be grayed out/read only.

7. You can enter units by day or Total Units Delivered for the month. Unsaved changes are highlighted in yellow.







Note

When you add units by day, the roster will create one activity record for each day for each client. When you add units by Total Units Delivered, the roster will create one activity record that spans the month created for each client. The Start date will be the first of the month.

8. If there are existing activity records for the consumer for the selected provider, program, and service you cannot enter Total Units Delivered. The total number of units by day will display on the Activity Roster in the date columns and the Total Units Delivered will be the sum and will be grayed out/read only.

Client	Client ID	Service	Service Name	Unit Type	Remaining Units	Total Units Delivered	01-Feb	92-Feb	63-Feb	64-Feb	05-Feb	06-Feb	07-Feb	05-Feb
	1363616	RESP	RESPITE IN- HOME	Hour		0	0	0	0	0	0	n	0	0
	1412765	RESP	RESPITE IN.	Hour		23.00	400	4.00	2.00	1.00	1.00	1.00	1.00	0
	1501101	RESP	RESPITE IN- HOME	Holar		4.00	0	[0]	0	0	0	0	0	0
	562634	RESP	RESP RESPITE IN- HOME	Hour		0	(0	(0	0	0	0	0	0	0

9. From the File menu select Save Activity Rosters or Save and Close Activity Rosters.



Note

A popup message will display when you attempt to create an activity for ineligible records. For example, if you attempt to create an activity record for a client whose program enrollment ended mid-month, you will receive an alert message. If you attempt to create an activity for a service/program/provider that already exists, you will receive an alert message. Activities will still be created for the eligible client records.

10. You can edit activities from the roster. If there are existing activity records for the consumer for the selected provider, program, and service they will be displayed under their respective date of service in the service delivery grid. If more than one activity record already exists for the client for the same service, provider and program the units will not be editable. For those that are editable, you can type a new number of units into the date field and after saving, the units on the original activity record are updated. It is preferred practice to update the activity from the client record instead of the roster.





Note

Several enhancements to the Activity Roster are coming Spring 2022.

Search results will load faster.

You will be able to lock the header row of the service delivery grid so when you scroll down, you know what field you are on.

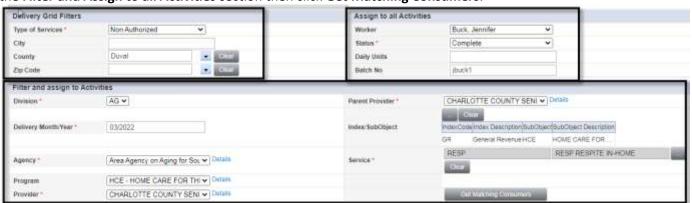
You will be able to filter the search results by the status of the program. For example, return just active enrollments vs. those in APCL or APPL status.

As mentioned earlier, you will be able to use the Activity Roster to enter billable units for \$0 unit cost services.

Saved Search Filters

Save a filter that you'd like to reuse to save you time next time you use the Activity Roster. Filters are specific to the user and role. If you have access to multiple roles you will only see filters associated with your current role.

1. To save a filter, you must first complete the **Delivery Grid Filter** section, the **Assign to all Activites** section, and the **Filter and Assign to all Activities** section then click **Get Matching Consumers**.

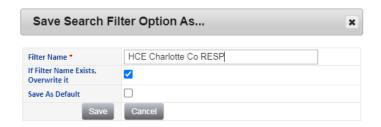


2. One the results are returned, select **Save As** at the top of the page.



- 3. Update the following fields:
 - a. Filter Name: Enter a name for the saved filter
 - b. **If Filter Name Exists, Overwrite it**: If you want this filter to replace an existing one with the same name, check this box. If not, keep it unchecked and a new filter will be created.
 - c. **Save as Default**: If this should be the filter that displays by default each time you open the Activity Roster, check this box.





- 4. Select Save.
- 5. The next time you use the Activity Roster, you can select your saved Filter from the list and click **Search Filter**. This will populate the Delivery Grid Filters, Assign to all Activities and Apply to all Activities sections, saving you time from looking them up again.



Note

If you saved a filter that now includes invalid data, the filter values that are no longer valid and will be returned as blank and will need to be selected again. For example if your saved filter was for a service that the provider is no longer contracted to provide, the service in the saved filter is now invalid data.





Note

After using a saved filter, if you change the Delivery Month/Year you will need to reselect your ISO and Service. You should save this updated search as a new filter for the new delivery month/year.

Add Aggregate Services (Non-Client specific)

Aggregate services are billed through a Client Group in eCIRTS. Client Groups allow providers to bill for services/create activities that are not identified by individual clients. Some examples include an exercise class for senior citizens, telephone information and referral calls, legal assistance, or congregant meals.

Activities captured via Client Groups feed into OAPPS reporting. Once a Client Group is created, billable services can be recorded on the Client Groups > Activities tab. Each PSA has its own Client Group in eCIRTS. PSA 1 will use the Aggregate Client 01 client group. PSA 2 will use the Aggregate Client 02 client group, etc. eCIRTS users can use the standard report, Consumer Group Activities Export, to report on this data.



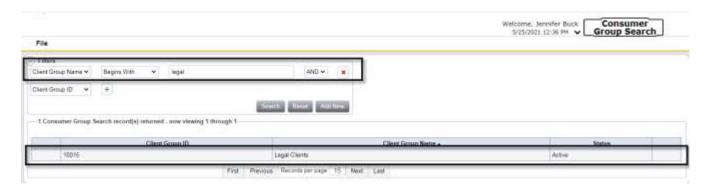
Create Client Group

Eleven client groups have already been set up for use by the PSAs. Additional services or programs can be added/removed from Client Groups at any time by DOEA IT staff. If the need to add a new client group ever arises, it can be completed by the DOEA IT staff by following the steps below.

1. Open the **Client Groups** chapter. From the **File** menu, select **Add New Client Group Search.** The Demographics Search page opens. You must search for an existing Client Group before adding another.



- 2. Use the filters to search for an existing group. For example, you can search by Client Group Name.
- 3. If a matching group already exists, select it from the list to view the details. Make sure this isn't a duplicate group of the one you want to create.



4. If no matching group already exists, click Add New.



5. The Client Groups Details page opens. Update the following fields:



- a. Client Group Name: Enter the name of the group.
- b. Initial Fund Code: Defaults to AG



- 6. Select Save and Close Details from the File menu.
- 7. The Open Close record displays. A client group must be open to AG Division before activity records can be created for the group. Update the following fields:
 - a. Division: Defaults to AG
 - b. **Disposition**: Select Open
 - c. Disposition Date: Default to today and will update anytime the status value changes.
 - d. **Primary Worker**: defaults to show the current worker, but you can use the search ellipsis to search for and select another worker, such as the generic worker for the PSA.



- 8. Select Save Open Close from the File menu.
- 9. The **Track Disposition** page becomes available in the left-hand navigation. You can use the Track Disposition page to view a history of changes to the Open Close disposition.

Add Client Group Programs

- 1. Client groups are associated with programs under which providers can deliver services and activities for that group. The services that are assigned to a program are the ones a provider can enter activity data for in a client group.
- 2. Like Client Group records, DOEA IT can add Programs to Client Groups. To associate a Program to a Client Group, select the **Programs** tab.
- 3. From the File menu, select Add Program.



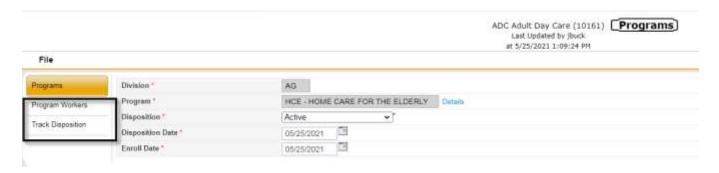


- 4. The Program Details page displays. Update the following fields:
 - a. Division: Defaults to AG
 - b. Program: select the name of the program from the drop-down list
 - c. **Disposition**: Select Active
 - d. **Disposition Date**: Defaults to today and will update anytime the status value changes.
 - e. Enroll Date: defaults to today but can be changed if needed
 - f. **Primary Worker**: defaults to show the current worker, but you can use the search ellipsis to search for and select another worker.



- 5. From the File menu, select Save Programs.
- 6. The primary worker is saved on the **Program Workers** tab. The worker can be changed on this tab if needed, but it's not part of the current workflow.
- 7. The **Track Disposition** page becomes available in the left-hand navigation. You can use the Track Disposition page to view a history of changes to the Program.





Add Aggregate Services for Client Groups

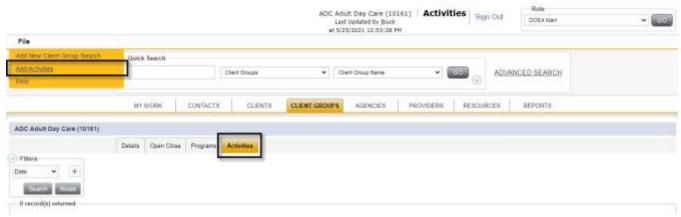
1. Once a Client Group has been added and Programs assigned, the Providers can enter aggregate services for the group on the Activities tab. From the Client Group record, select the **Activities** tab.



Note

Legal Services is required to capture and report de-identified demographic data. DOEA will use the ACL Legal Services Excel tool to capture and upload the data into OAAPS, outside of eCIRTS.

2. From the File menu, select Add Activities.



- 3. The Client Group Activites page displays. Update the following fields:
 - a. Start Date: Enter the start date of the activity
 - b. Start Time: leave blank
 - c. End Date: Enter the end date of the activity
 - d. End Time: leave blanke. Division: Select AG
 - f. **PSA**: select the PSA
 - g. Program: select the Program. This list is filtered by the PSA selected in the field above.
 - h. **Service Provider**: Select the Provider. This list is filtered by the PSA selected in the field above.
 - i. **Parent Provider**: When the Service provider is selected, if they have a 'Parent' provider, the name will populate in this field. If there is no parent, the name of the Service Provider will also populate as the Parent Provider. This is how activities can be reported at the provider/location and/or lead agency level.



- j. **City**: Some PSAs report their aggregate services by City. They will use this field to record the City where services were rendered.
- k. **County**: Some PSAs report their aggregate services by County. They will use this field to record the County where services were rendered.
- I. **Service Area**: Some PSAs report their aggregate services by Service Area. They will use this field to record the Service Area where services were rendered.

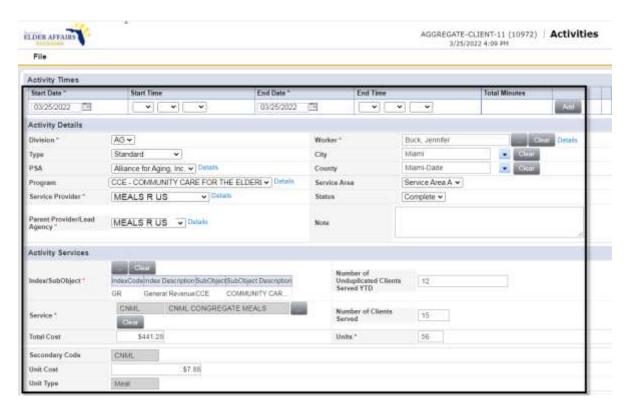


TIP

Select the Details link after selecting a Service Provider to see more details about the provider, including Legacy CIRTS ID.

- m. Worker: Defaults to self but can be changed if Data Entry staff is entering on behalf of someone else
- n. **Status**: Defaults to Pending. When data entry is complete, the status can be changed to Complete making it read only.
- o. **Index/Sub Object**: Search for and select the correct ISO code which is a combination of funding source and program
- p. **Service**: Search for an select the Service. This list is filtered by the PSA and Program and Provider selected in the section above.
- q. **Number of Unduplicated Clients Service YTD**: Provider keeps track of the YTD number outside of eCIRTS and number will 'reset' at the beginning of each contract year. This will be a running total. Would expect the YTD number in Aug to be higher than the YTD number in July... assuming the provider continues to add consumers they are serving. This number is required for LSP services but optional for other programs. This field gives providers somewhere to put that data (for the services this applies to) instead of the PSA having to contact the provider for the information, required on the DOEA reports. Up to the PSA to decide if the field will be used or not and become part of the PSAs billing procedures that will be communicated to the provider.
- r. **Number of Clients Served**: Enter the number of clients served.
- s. **Units**: enter the total number of units delivered to the clients on the dates of service for the activity.
- t. The remaining fields will auto populate.





4. From the **File** menu, select **Save and Close Activites**. The activity data from this record is pulled into several reports used for invoicing and monitoring.

Import Activities for Multiple Clients

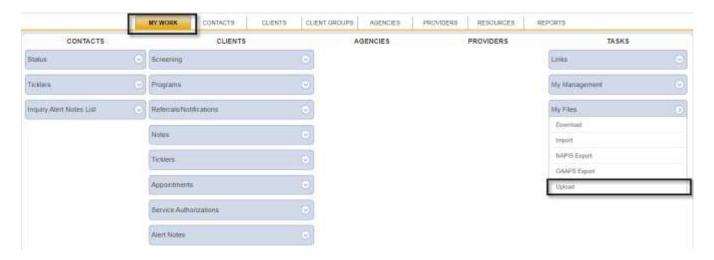
Providers can import select service delivery data into eCIRTS in lieu of keying the data directly into the application. Providers will send service delivery data through an XML file for import directly into eCIRTS. An activity record will be created for each client in eCIRTS.

Each provider is responsible for creating their own XML file. There are several data elements required in the XML file. Some are values supplied by the provider, and others are eCIRTS generated data elements. A report exists in eCIRTS that provides the eCIRTS generated data elements. The provider or worker will upload the file into eCIRTS on the My Work page. Any errors with the upload can be viewed by the provider/worker in eCIRTS. The provider will update the failed records in the file and re-upload their file.

Upload the XML File

- 1. Log into eCIRTS.
- Using the eCIRTS Unit Posting, eCIRTS Vendor or eCIRTS Worker role, navigate to My Work > Tasks > My Files > Upload.





Note

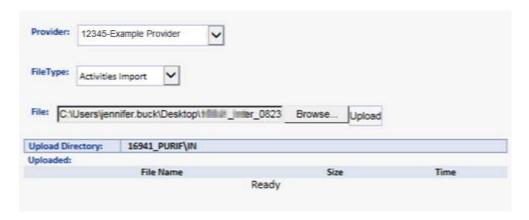
The user will not be able to see the Upload option on My Work if access has not been granted. This access is defined at the provider > worker level and typically managed by the service providers.

Navigate to the **Providers chapter**. Search for and select the worker's Provider record. Select the **Worker** tab. Search for and select the applicable worker. Select the **worker record** to open. Select the **Providers** subpage. Select the applicable Provider record > the Worker Provider details page displays. Check the **Upload HIPAA Files and Download HIPPA Files** checkboxes. From the **File** menu, select **Save and Close**. This worker can now upload and download files for this provider in eCIRTS.

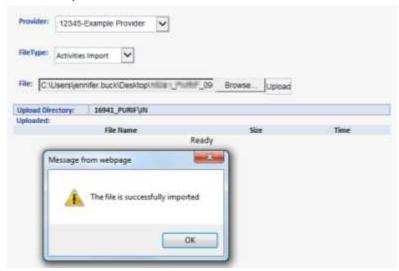


- 3. The File Upload window displays. Update the following fields:
 - a. **Provider:** Select the provider that is uploading the XML file. Only the providers the worker is associated to will display.
 - b. File type: Activities Import
 - c. File: Browse to the location of the XML file on your computer and select to upload.
- Click Upload.





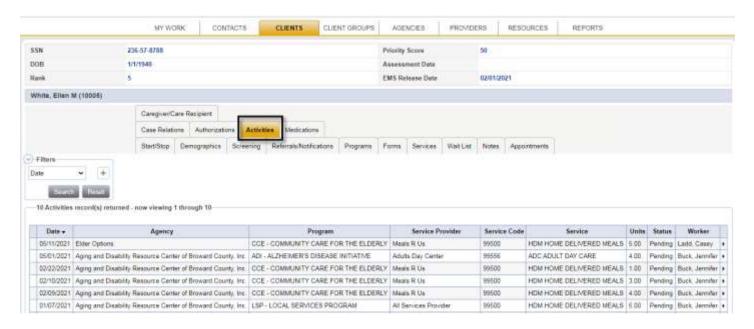
5. Receive import success notification. Select **OK**.



Viewing the Activity Record

- 1. Navigate to the Client's record that was in the XML file.
- 2. Select the **Activity** tab. From the list view, select the Activity record.





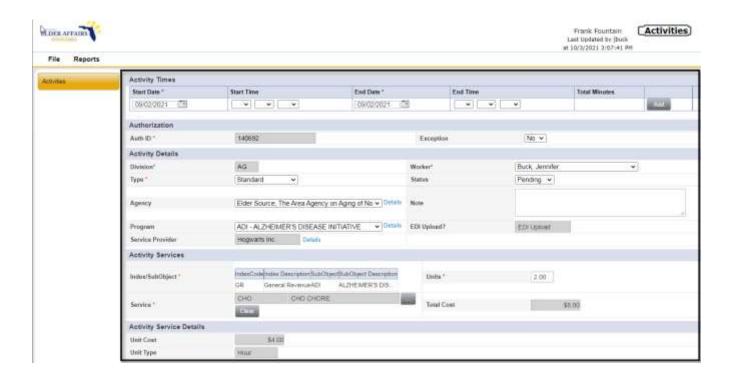
3. The Activity Details page displays where the information uploaded from the XML file can be viewed.



TIP

If the status of the record is Pending, this page is still editable.

If the status of the record is Complete, this page will be read only.





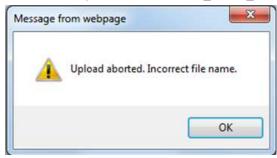
File Upload Errors

There may be times in which the file upload fails. The user will receive an error message or instructions to check the error log for details.

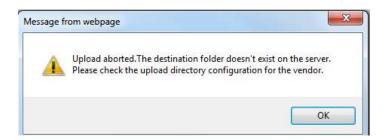
Some common file upload errors include:

- 1. **Incorrect File Name**: From the File Upload window, select Upload to upload the XML file > receive an error message about incorrect file name. The XML file is not uploaded, and the Activity records are not created in eCIRTS.
 - a. How to Correct: The file name must match the required naming convention.

[Submitter ID]_ MMDDYYYY_HHMMAM or HHMMPM_ActivitiesImport.xml Example filename: 16941_PURIF_ 20190902_1020AM_ActivitiesImport.xml

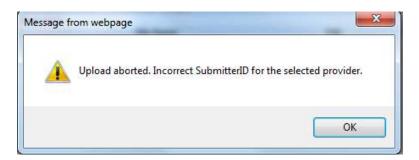


- 2. **Destination Folder:** From the File Upload window, select Upload to upload the XML file > receive an error message about a missing destination folder. The XML file is not uploaded, and the Activity records are not created in eCIRTS.
 - a. **How to correct:** Contact eCIRTS Support Desk. A SenderID record needs to be created on the Provider's record in eCIRTS which is done by DOEA IT staff.

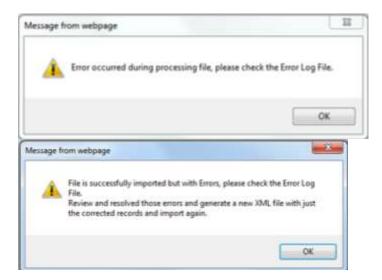


- 3. **Submitter ID:** From the File Upload window, select Upload to upload the XML file > receive an error message about mis-matching Submitter ID. The XML file is not uploaded, and the Activity records are not created in eCIRTS.
 - a. **How to correct:** The Submitter ID in the XML file must be the eCIRTS Provider/Vendor ID plus the first 5 characters of the Providers last name and be the same as the Provider selected in the "Provider" field on the File Upload page.





- 4. **Error Occurred.** From the File Upload window, select Upload to upload the XML file > receive an error message about an error processing the file. Not all records in the file imported successfully.
 - a. **How to correct**: Check the Downloads folder on My Work for the error log. Select the correct log file and click Download. Update the XML file for each error and resubmit the file. Records with the same case number, service, start and end date are considered duplicates and will not re-import, meaning the provider does not need to remove the successfully uploaded records from the XML file when making the corrections



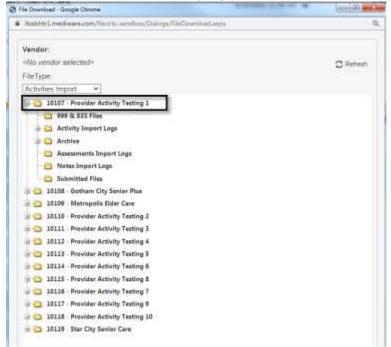


Checking the Error Log

1. From the My Work page, select Tasks > Download.

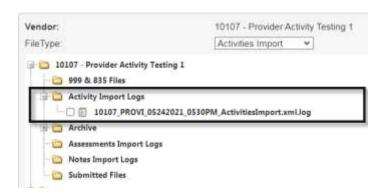


2. Select the **Provider** who submitted the file. Multiple providers may exist in this list if the worker has access to Upload/Download files for multiple providers. This access is controlled by the DOEA IT Department.



3. Select the + next to **Activity Import Logs** to list the error logs. DOEA is not using any of the other imports at this time so most of the remaining sections do not apply.

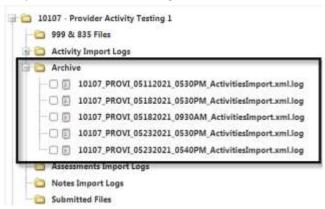




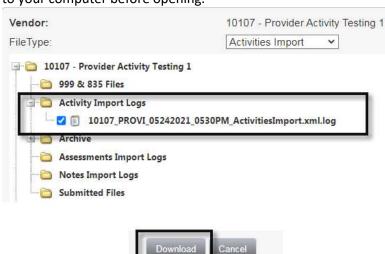


Note

Error Logs will periodically move from the Activity Import Logs folder to the Archive folder in case they need to be reviewed again.



4. To view the error log, **check the box** next to the log and click the **Download** button. You will have to save the file to your computer before opening.

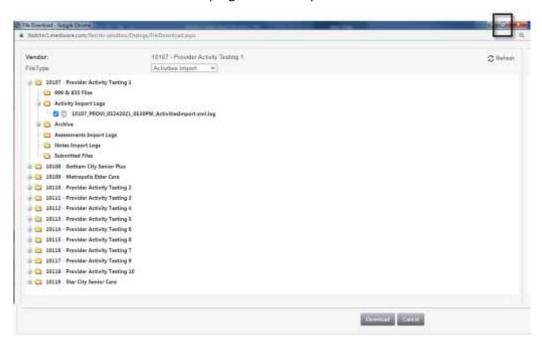






TIP

The File Download window must be maximized/full size to view the Download button. Click the **Restore** button in the top right corner of your browser window.



- 5. Review the details in the error logs. Update the XML file with the corrections and re-upload. Some common errors include:
 - a. Example 1: One record in the file successfully imported and one was rejected and not imported.



b. Example 2: Null Reference Exception. The XML file does not contain all of the required placeholders. i.e. place of service, location, primary diagnosis.

```
2030-08-11 11:11:04-711 [NFO ] — Start Log for Casens: 61007
2030-08-11 11:15:04-729 [tamos] — System mullmeferencetrosprion; object reference not set to an instance of an object.

at FW. Bunchessakus, Activities import. Signer. Valuation: Available receives is essentivities becapened justivities apport in the set of a start of the signer. Activities import. Engine. Processing of the start of the start of the set o
```

c. Example 3: Duplicates will not import. The XML file contains data for activity records that already exist in eCIRTS. Same case number, service, start and end dates.

Exact Log for Cayeou: GIBO'
At least one date range overlags are stating activity, dulinating activity records overlag with existing records: Case Mo(SISO), Service Ende(3854), Mart Sate(7:07000 5:05000 PM), End Sate(7:07000 1:05:000 PM)

**STATE Log for Case(9:05:04)
At least one date range overlags as estating activity, Pollowing activity records overlag with existing activity, Pollowing activity records overlag with existing activity, Pollowing activity records overlag with existing activity. Pollowing activity records overlag with existing activity, Pollowing activity, Pollowing activity, Pollowing activity records overlag with existing activity. Pollowing activity records overlag with existing activity.