

CORNERSTONE USER GROUP MEETING
QUESTIONS / CONCERNS
July 16, 2008

Attendance: Renee Korves, Denise Hunt, Jenna Murphy, Terry Shaffer, Patty Patton, Jeri Moffett, Carol Graham, Shelley Tulipana, Doris Hodes, Damaris Montano, Josefina Guzman, Valerie Jenkins, Mary Amberger, Debbie Neibert-Shandle, Nancy Martin, Lisa Cunningham, Michelle Chase, Kathy Vranas, Steven Foley, Lee Smith, Paula Dean, Sue Thornton, Candee Musgrove, Rita Whitte, Karen Shiflet, Jennifer Onken, Kelly Stewart, Regina Washington, Brenda Larry, Julie Sharp, Laurie Roxworthy, Yvonne Vieregge, Samantha Grant, Elaine Pennigsdorf, Julie Hagele, Debra Phillips, Becky Williams, Jeff Gaines, Cindy, Stephanie Bess, Ann Frieberg, Susan Pacot

- 1. Laurie Roxworthy; Will County:** When running the HSPR0305 Immunization report, there is an option to sort the report by case manager. Most of the participants are now listed under "Unassigned" or under the first case manager they were ever assigned to. Would it be possible to change the report to reflect the current manager assignment?

ANSWER: Although this is an immunization report, it appears that the question is not relevant to our program operations so it would be better for someone else. It does not affect our program requirements. Per Debra Phillips (Cornerstone Development Team) this will be fixed they are aware of the problem.

- 2. Laurie Roxworthy; Will County:** Could a new code be added for use on the SV01 to indicate that the "Notice of Privacy Practices" was given to clients for WIC? IT would be helpful if the code was at the beginning of the list (i.e. 001 is used for "Informed Consent Form Signed").

ANSWER: Per Julie Hagele: As far as the application goes it could be done, but this will need to be discussed with Jo Durkee. Julie will talk to Jo regarding this request and get back to Susan Pacot.

- 3. Laurie Roxworthy; Will County:** There is a message that appears when saving changes to the AS02 screen for clients receiving special formula for WIC. The message reads "Special formula is assigned, must complete FI08 WIC Special Formula Screen." Currently, the message flashes so quickly that it disappears before staff can see the message or read the whole message. Could something be changed so that the message is displayed for a longer period of time or the message is displayed and the staff must press another key before the message disappears? Newer staff and veteran staff are forgetting to complete the FI08 screen.

ANSWER: Per Debra Phillips (Cornerstone Development Team) They will fix this problem.

4. **Doris Hodes; Lake County:** On the PA13, there are exempt codes for reasons to not get immunizations (Disease History, Religious Contraindication and Med Contraindication –Unprotect. Can we have something like “Client Refusal” added? We have a client that just refuses to give her child shots because she thinks it is bad for her infant. While they try to educate her every visit, she is still not changing her mind. These three options do not seem to fit the situation.

ANSWER: Per Karen McMahan: We prefer to leave as is since the purpose is to remain consistent with what is acceptable proof of immunity once the child is in a day care, preschool, school or college environment. Illinois law allows only medical and religious objections for those not wishing to be vaccinated and disease history only applies to some diseases.

5. **Doris Hodes; Lake County:** Any updates on the Cornerstone Modernization project; Connections?

ANSWER: Per Julie Hagele: The State wheel is slow. Presentations for RFI's were scheduled for July 16, 17, 2008. They were cancelled because of travel restrictions and have been rescheduled for October 2008.

6. **Samantha Grant; Community Alternatives Unlimited:** We are a stand alone case management agency. On occasion PA07's for clients appear from other sites (we know this because the service is WCPP and we do not have WIC at our site). Why does this only happen on occasion and not for all pregnant clients that have existing PA07's at cornerstone sites? Also sometimes the PA07 that appears is for the same pregnancy that our site already has a PA07 in for (sometimes same edc, other times edc a few days off).

ANSWER: These problems need to be called in each time that this happens. The development team needs the examples you are receiving information.

7. **Samantha Grant; Community Alternatives Unlimited:** We had been instructed in the past by our CSSC to terminate the group relationship (PA06) when terminating clients who have aged out of FCM. Is this step in the termination process still necessary? If the client is in a group relationship at another site (for example WIC) can we shared data (F2) on one of the screen to be able to see who is the group head? F2 is an option on the PA03, when we use it on an infant PA03 the group id does not come up.

ANSWER: There is no technical reason to term the group relationship. All agencies in attendance were in agreement to not term. When you F2 shared data the Group # will never come across.

8. **Samantha Grant; Community Alternatives Unlimited:** FMC vs PORS CM (high risk infant) in PA15 and Cornerstone lookup PA01. Is there any plan in the future to differentiate between these case management programs in

Cornerstone, currently they both show as CM. In Chicago we have issued where APORS infants who should be working with public health nurses get re-assigned (on the 724) to agencies that only have FCM. We also have issued with transfers where it would be nice to know if the infant is being transferred to the public health department because they are APORS or just regular FCM.

ANSWER: Currently APORS status for reporting is determined solely by answering Yes to APORS question on the Birth Screen. This does not always yield accurate reports because a nurse might make a visit and determine the baby does not need to be seen in high-risk follow-up, or conversely, may make a visit on a non-APORS infant and decide the baby does not need high-risk follow-up. Once APORS question is answered, you cannot edit this information. Potential solution is to add another program category on PA15 for High-Risk Infant Follow-up. This would allow staff to enroll clients as such, and to terminate this status and move into regular FCM when/if appropriate. It would also allow them to run internal caseload reports showing which clients were in HRIF.
GROUP: All attendees like the idea of another category for this. Julie Hagele will get information to Jo Durkee for a MIS request.

9. **Kelly Stewart; Peoria County:** Right now we are able to add a variety of breast pump handouts on the PA29 screen; but there is not a code for a Medicaid pump and we order them all the time. I wonder if we had that capability if our pumping rates would change; and help us keep better track of who gets them, which would also lead to better follow up.

ANSWER: Per Stephanie Bess: These Medicaid pumps should be added as a referral.

10. **Kelly Stewart; Peoria County:** Could the system allow us to enter a case note in the administrative (AD24 lock/unlock screen? That way when there is a lock we will know why it is locked.

ANSWER: After group discussion this was decided that the comments do not transfer on the Lock/Unlock (AD24 screen). This becomes a problem when the FI's have been locked up at a different agency and then transferred in and you do not know why. Per Debra Phillips (Cornerstone Development Team) they will look at this and see if it can be changed.

11. **Julie Sharp; Kane County:** Is it possible to block PA07 for participants when their category code is infant?

ANSWER: The group would also like for this to be possible on the Birth Screen. Per the Development Team this is doable. Julie Hagele will take to Jo Durkee for MIS request.

12. **Julie Sharp; Kane County:** CM02/CM03 – We used to be able to use Page Down to move from window to window when first accessing the screen. Is there a reason we can't, and is it possible to change it?

ANSWER: Per Debra Phillips (Cornerstone Development Team) This happened when the screen was rewritten in Visual FoxPro and is not going to change.

13. **Julie Sharp; Kane County:** Is it possible to add the current telephone number to the address verification that occurs when you edit PA03?

ANSWER: Per the Development Team this change is doable and Julie Hagele will take to Jo Durkee for MIS request.

14. **Laura Demeuse; CFC #6:** Is it possible to auto-save (especially in AS03) instead of kicking us out after a period of idle. On screen that can't be edited after you save, there is usually a pop up that says "are you sure you want to save?" like on CM04 and AS01 screens.. these screens could have that same protection to make sure that the auto-save doesn't save things we weren't done with.

ANSWER: This is not going to happen. Cornerstone is under legal obligation for a 10 minute time out and cannot change this.

15. **Laura Demeuse; CFC #6:** People would still like to be able to print auths by print date or auth number.

ANSWER: This is for EI and Ann Freiberg will talk to CFC#6 regarding this problem.

16. **Laura Demeuse; CFC #6:** I was wondering if the print preview link in the reports screen (specifically HSP0771) could be fixed so that when you use the print option to print to the screen you can choose to print only one of the pages that you have viewed. I think the majority of us only use that feature so that we can pick out only the pages we need to print but have, if you want to only print that page you have to close the preview window, enter all the information into the screen again, select to print to the printer, and put in the page that you want to print out. This because if you hit the icon for the printer on the preview screen it will print all the reports which defeats the purpose of why we use the print option.

ANSWER: This is not an easy fix, but doable. The Development Team will look into what kind of time frame and cost it would take to make change and get back to Group.

17. **Sandra Krugman;** I feel that it would be helpful to see the EDC and the actual Birthday for each individual mom/child. It would be helpful to see the baby's weight. If we could get a printout of all three facts together this would be helpful. I believe this is information that is already entered into Cornerstone.

ANSWER: Per group and Development Team, this can be accomplished from a Foxfire report.

18. **Renee Korves; St. Clair Co.:** Is it possible to get it so that Case Management will auto term.. like WIC at some point. We have tons of clients going back over it that we saw once or twice. then never again. Occasionally we have mentioned that they transferred, but most of the time (I may be wrong and just not know how) but we can't tell if they transferred or are just not on it anymore. It seems many don't come back for the one year visit either. Either they only wanted formula, or maybe they got jobs after maternity leave and don't qualify. Bit I think transfer are the biggest group of people we lose.

ANSWER: There are some auto terms built into FCM, such as a category of pregnant without a prenatal screen. Auto-termining due to lack of contact in FCM would be difficult. FCM clients are often transient in nature, and it is not uncommon for a client to be "lost" for a period of time, then reappear. Case managers need to maintain a tickler or other tracking system on clients so that they know when next face to faced contact is due. Agencies need to have an internal policy that indicates when it is appropriate to close a client due to lack of contact. Group, the answer is NO.

19. **Denise Hunt; McLean County:** We have clients who have "view alerts" showing in the upper right corner of the screen. When you go to the CM07 view alerts screen, it gives pop up box that says you must access shared data to see the comment. After pressing F2 and accessing the WAN, it comes back with the message that there are no comments to show. However, the "view alerts" still shows. Why is this?

ANSWER: Per Development Team, they will look at how this screen works and see if possible to change.

20. **Denise Hunt; McLean County:** Here is a list of issues we are having regarding Medicaid numbers not being on the PA42 screen: **1)** Clients with two last names have medical cards listing only one last name. (Usually it is the first last name, but sometimes the second last name has been used). **2)** Clients with two last names have medical cards that have both last names, but they are hyphenated. (We have been instructed not to use hyphens in CStone). **3)** Medical cards sometimes have a middle initial directly following the first name (in the same field). **4)** Medical cards sometimes have a "Jr" following the first name (in the same field). **5)** Client's medical cards sometimes have the names misspelled. **6)** Client's medical cards occasionally have the wrong name for the client. (Sometimes it is the middle name or a "goes by" name, rather than the actual name on the birth certificate).

ANSWER: After much discussion regarding this question. Everyone agreed that it is not a perfect answer, but the data should be changed to match the Medicaid Data and then changed back the next day after merge is complete. The match is on Name, Gender, DOB.

21. **Denise Hunt; McLean County:** Frequently we see toddlers who come in early for the WCC1 visit before 1 year of age; they still have formula coupons in the system. Cstone makes the intake person print the remaining FI's before the PA15 can be termed and the client recertified. The problem comes when that infant is using a special formula; if the basic formula is entered, that is what will print. Special formula should be given by a nutritionist. Once the PA15 is changed, the client is considered termed as a infant. When the client gets to the nutritionist, we find out that they were using special formula and have two weeks of coupons left. We are unable at that point to reissue the coupons to the special formula, often a costly mistake for all. Is there a way we can void and reissue these remaining coupons to special formula?

ANSWER: Per Stephanie Bess, unaware that we were unable to reissue at this time. Program and Development will look at this and see how can be changed.

22. **Sue Magyar; Boone County:** Boone County has a private doctor that wants to have access to Cornerstone so she will be able to access immunization records and any lab reports we have (hgb and or lead). Please advise what I should tell this doctor.

ANSWER: Per Karen McMahan The doc would be best served by enrolling in ICARE for her patients and assuring the "consented" box is checked so that the data is shared. She will then be able to view the Cornerstone data that is available for her patients IF the patient has received services before through a site that uses Cornerstone. She should contact Teri Nicholson at 217-785-1455.

23. **Pamela Vandervime;** Could we ask to have any Family Planning appt. charged to PA at any facility to automatically download into cornerstone just like EPSDT and Immunizations do now? This would save us a lot of time.

ANSWER: This would be a huge undertaking and the Family Planning Program would never allow information in C/Stone because of confidentiality. The answer to this questions is No.

24. **Pamela Vandervime;** Documentation of Health Start/Grow Smart books is done in the service entry. Originally we used 807, but as of last October we were notified that with the new download there was a code specifically for this, 934. This is how we have documented, but during our recent audit our regional rep told us we should be putting it in 807. Would the state people please clarify this for us and how the reports are being run at this time. We are confused.

ANSWER: The 807 code was used because there was not a separate code for documentation of the required components of pediatric health education. Those codes have all been added in the past 6 months. Using each one will assure that your agency receives credit for compliance in providing each element of required education when reports are run. We can also run a report using the 807 code, but it does not tell us specifically which components of education were provided. We would have to see your agency policy which is listed what was to be distributed to satisfy requirements. GROUP: The answer to this question is "934". The group had additional questions regarding the status of MIS request

for additional codes requested. The MIS has been submitted and they are waiting for a version. Please keep in mind that the changes are made in a priority status.

25. **Jeri Moffett; Coles Co.:** On the PA40 Lead Screening could the number be increased to 3 digits? We have had a case who's BLL was 136 and it cannot be entered in Cornerstone. We do have it in Stellar but would like to have it Cornerstone for the staff that does not have access to Stellar.

ANSWER: This would be a huge undertaking to change for an occasional instance. After much discussion it was decided that if the number 99 was used this could automatically mean to look at the case notes. Also decided that program and group could mull this over a little and get back to Susan with any ideas.

26. **Susan Pacot; Vermilion County Health Dept.:** If you have a breastfeeding Mom past 6 months, you are unable to the service code WB2N and have to use the Term reason #19 (Change BF to not BF) on the PA15. The category stays Breastfeeding on the AS02 WIC assessment screen nor does it change the scheduled term date. What is the correct procedure on this?

ANSWER: The Development Team is looking at this and will get back to Susan.

27. **Susan Pacot; Vermilion County Health Dept.:** Does any one enter their diluents solution for MMR and Varivax into their biologics?

ANSWER: Per Karen McMahan: It is not required. We do not account for it separately.

28. **Susan Pacot; Vermilion County Health Dept.:** Could you add Rotorix and Pentacel to the AD05?

ANSWER: Per Karen McMahan: We will add the codes via an MIS since the products only recently became licensed. There is not a federal contract yet so it will be awhile before these products are offered through VFC. Beyond the coding issue, there will be forecasting necessary that will be much more involved.

29. **Paula Dean; Pike County Health Dept.:** We were wondering if when you hit the F2 Shared Data button would it be possible for it to pop-up a box that asks "Do you really want to Access the WAN?" Staff tend to hit that button on accident, then they click the cancel button, but it still takes a while to cancel. Would like for it to work like the pop-up box that was added to the Case Notes screen that ask "Do you really want to cancel?"

ANSWER: Per the Development Team this is doable. Julie Hagele will give to Jo Durkee for an MIS request.

30. **Mary Amberger; Question posed to her:** "I also wanted to see if you know the exact wording for each level that would appear and meet WIC guidelines. I know that all Assist levels are eligible. Do you know how the Share and Premium Level 1 and Rebate would read?"

ANSWER: There are two things on the PA42 that will distinguish this. Eligibility Type and MANG P. Eligibility Type for those that are WIC Eligible will be ALL KIDS < 200% FPL. Those who are not WIC Eligible will show ALL KIDS EXPANSION.

The MANG P description is what will distinguish if they are Assist, Share, Premium, Rebate, etc.

ALL KIDS ASSITS-INCOME<200%FPL

ALL KIDS SHARE-INCOME<200%FPL

ALL KIDS PREMIUM-INCOM<200%FPL

ALLKIDS REBATE-INCOME<200FPL – all of these are WIC Eligible and would show as ALL KIDS<200%FPL in the Eligibility Type

ALLKIDS PREMIUM-INCOM>200FPL – this would not be WIC Eligible and would show as ALL KIDS EXPANSION in the Eligibility Type

31. **Renee Korves; St. Clair County Health Dept.:** On the RF01 screen the nurses must follow up on all referrals and must enter the date that the appointment was made or kept. We have been documenting in the comment field if the client has refused the services. The nurses would like to see more choices such as refused, ongoing, preventative, etc.

ANSWER: Per the Development Team this is doable and Julie Hagele will give to Jo Durkee for MIS request.

32. **Lake County:** Could there be a code added for an "Infant of a parenting ward"; there is one for a child CFSN, but when you use it for an infant you get the message "Cannot use for an Infant".

ANSWER: This is being worked on by Glendean at this time. Susan Pacot will forward question to her and see what the status is.

33. Would it be possible to have a page up and page down for the history of when an original appt was made and by which staff person.

ANSWER: This was put on hold until next meeting in September giving time to think about it.

34. Could we see the comments made on the PA12 screen on the Immunization History screen?

ANSWER: This is possible will look into and have Julie Hagele give to Jo Durkee for MIS request.

35. Could activity be locked up at the end of the month during Time Study?

ANSWER: This is something that everyone need to think about. The Development will look into some way of locking. Not every agency felt that this would be helpful. It is a possibility that it is an individual agency wish.

36. Our CSSC did not know about the "Duplication Report", is it available yet?

ANSWER: This report is not yet available to the CSSC's. Development Team will let us know when it will be available.

37. Is it possible to have a place in Cornerstone where we can document names of proxies for the WIC program. Like in the service entry screen right below the comments, we can have 2 spots to add the names of proxies for that certification period. These can be updated at every certification or in between if needed.

ANSWER: There are several agencies that gave examples of how they manage the Proxy's at their agency. Documented in the PA07 and the CM04 screen and updated at certification's or other times.

CORNERSTONE UPDATES:

- Version 11.2 is out Statewide today July 16, 2008. One of the biggest changes per Julie Hagele is the change in the "Message Center" A message can be sent at any time of the day. It will pop up on the screen and you will have to read and designate that you have done so and exit. This is a great feature. There were also some changes in the "Genetics". Julie invited Karen Burgett to attend our user group but she was already obligated. All other changes were in the Version letter that everyone should have read on the BOD Message board.
- Version 11.3 should be Statewide by August 31, 2008. There will be Wisewoman changes, Mang P enhancements, and FASD Program (Fetal Alcohol Spectrum Disorder)
- Per Julie, They are moving in the direction of testing C/Stone without coming to Springfield. There are some issues still to be completed, such as connecting requirements when using virtual servers, how do we log in to server, then into Cornerstone. The "UAT Environment" is very soon to come.