

MEMORANDUM

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Date: June 21, 2001

To: Cornerstone Agencies

From: Thomas W. Simonds,
Chief Operating Officer
Illinois Primary Health Care Association

Subject: Cornerstone Software Upgrade Version 8.0

Cornerstone is being upgraded to version 8.0. The new version will be released in four phases according to the following schedule:

Clinic ID	Release Date
Child & Family Connection agencies	July 2, 2001
001001 – 031112	July 9, 2001
031113 – 099004	July 16, 2001
101001 – 203001	July 23, 2001

Note: The first time you select "Cornerstone" from the network menu after receiving the updated version, it will take approximately fifteen (15) to thirty (30) extra minutes to load the system due to the processing involved in updating your computer with the new version.

While the system is processing the version upgrade, you will see a blue screen containing a white window with a message that states "DHS UPDATE PROCESS IS RUNNING ON THIS MACHINE - WORKSTATION TEMPORARILY UNAVAILABLE - PLEASE WAIT - THANK YOU". Until the processing is complete and this message has been removed from the screen, no one should attempt to logon at any other workstation. Users may begin logging into Cornerstone after this process is complete.

The descriptions of the changes made in the version have been broken down into the following sections: General Changes, BCCP , Immunizations, WIC and EI. If you have any problems or questions regarding the upgrade process, please contact the Cornerstone Call Center at (877) 447-4221 / (877)-4IPHCA1.

The following changes have been made to the Cornerstone software since the release of Cornerstone Version 7.30. Please note that some of these enhancements were previously released in Cornerstone Version 7.31 or 7.32. Therefore, if your site received one of these versions, some of these modifications may not be new to your site.

GENERAL CHANGES

- ◆ The **Electronic Cornerstone User Manual** has been modified to reflect the changes found in Version 8.0 and outlined in this version letter. In addition, the following changes were also made (and downloaded to Cornerstone agencies on June 1, 2001):
 - ◆ Chapter 2: System Environment – A new section “2.12 - Standard Cornerstone Server Room Equipment” has been added. This section contains a diagram of standard Cornerstone equipment found in a server room, along with a description of the function of each piece of equipment. In addition, section “2.13.4 - Computer Care Tips” has been updated.
 - ◆ Chapter 9: Administrative Screens – The section “9.1 Automated EOD/BOD Process (AD00)” has been updated.
 - ◆ Chapter 12: Program Information Screen for All Programs – A screen print of the Program Information screen (PA15) has been added to this chapter.
 - ◆ Appendix A: Cornerstone Screen Flow Diagrams – A ‘table of contents’ has been added to this appendix to allow users to quickly access a specific screen flow. In addition, various screen flows (including Early Intervention) have been updated.
 - ◆ Appendix H: User Procedures for Standard Reports Using Foxfire – For easy reference, a hyperlink has been added from this appendix to Appendix J – The Cornerstone Data Dictionary.
 - ◆ Appendix K: Cornerstone Forms – The Moves, Adds and Changes (MAC) forms have been added to this appendix, and the Authorized Vendor forms have been updated with new prices.
 - ◆ Appendix L: Duplicate Resolution Procedures – These procedures were updated.
 - ◆ Appendix M: Cornerstone Site Listing – This appendix contains a statewide list of all Cornerstone sites. The report is available sorted alphabetically by name or numerically by Clinic ID number.
 - ◆ Appendix N: Ad Hoc Foxfire Reporting Using the Cornerstone Database – This appendix will assist users in creating and running ad hoc Foxfire reports from Cornerstone.
 - ◆ Finally, various faulty hyperlinks have been modified and now work correctly.
- ◆ The **password security** for Cornerstone has been changed. Due to the numerous programs included in Cornerstone and the confidential nature of the data maintained within Cornerstone, the Cornerstone system was modified to comply with DHS standards for password lengths and iterations of a password after its expiration/change.

As a result, the required minimum length of a Cornerstone password is now five characters. A user's current password will remain in effect until the date it is scheduled to expire and the user is prompted to enter a new password. At that time, the new password must be a minimum length of 5 characters. In addition, each password can not be used again until a ‘cycle’ of 15 different passwords have been utilized.

- ◆ The **Group Browse** function has been modified so that users can not use fastpath keys when the pop-up box is displayed. [The Group Browse feature functions in the Participant Standard Processing Block (PSPB), as well as in specific fields on the Schedule Appointment screen (SC02) and the Class Schedule screen (SC03).]
- ◆ The following modifications have been made to the **Participant Med/Insurance screen (PA05)**:
 - ◆ The “F9=Enrollment” fastpath key has been changed to “F8=Enrollment”, and a new “F9=Address” fastpath key has been added.
 - ◆ The following modifications have been made in regards to insurance (INS) records:
 - ◆ In order to add an insurance (INS) record on PA05, users must first use the “F9=Address” function to enter an address record for the insurance company.
 - ◆ The following fields are now required:
 - ◆ “Ins Prov Name” (new field)
 - ◆ “Address”
 - ◆ “City, State, Zip”
 - ◆ “Phone”

- ◆ “Contact Person” (users should record the name of the policy holder/insured person)
 - ◆ “Relation” (users should record the relationship between the insured person and the participant)
 - ◆ Users can enter a street address into the address line.
 - ◆ Insurance (INS) records must be added in sequence (i.e., an “INS1” record must be present before an “INS2” record can be added, etc.).
 - ◆ Insurance (INS) records and corresponding address records can not be deleted.
- ◆ The **Postpartum Data screen (PA10)** and the **Birth Data screen (PA11)** have been modified. When using the “F1=Help” function key in the “Hospital ID” field on these screens, the hospital codes are now listed alphabetically by hospital name. In addition, the Birth Data screen (PA11) has been modified to not allow the ID entered in the “Mother’s ID” field to be the participant’s ID.
 - ◆ The following screens have been optimized to increase the speed with which the screen loads:
 - ◆ **Household Members screen (PA16)**
 - ◆ **Participant Appointments screen (SC04)**
 - ◆ **Caseload Reassignment screen (AD17)**
 - ◆ **Produce Food Instruments screen (FI01)** [optimized to increase the speed with which Food Instruments (FIs) are printed]
 - ◆ **Food Instruments Inquire screen (FI02)**
 - ◆ The **Activity Entry screen (SV02)** has been modified to verify that an HFI, EI or FCM record exists on the Program Information screen (PA15) before program-specific activity codes can be entered. Cornerstone will now warn users if a program record does not exist.
 - ◆ The **Next Available Appointment** pop-up box [accessed from the **Schedule Appointment screen (SC02)**] has been modified so that users can not use the fastpath keys when the pop-up box is displayed.
 - ◆ The **Participant Appointments screen (SC04)** has been modified to clear the connection message from the screen. Previously, after accessing the “F2=Shared Data” and exiting the screen, the connection message did not clear from the screen.
 - ◆ The **Case Notes screen (CM04)** and the **Participant Forms screen (CM10)** have been modified to allow users to scroll through the text section (at the bottom of the screen) using the “CTRL+Page Up” and “CTRL+Page Down” key combinations.
 - ◆ The **Alerts Comments screen (CM07)** has been modified. Previously this screen would freeze when using the “F2=Shared Data” function.
 - ◆ The **Assessment screen (AS01)** has been modified to allow the mouse to be used on this screen. Previously users received an error when attempting to use the mouse while working on this screen.
 - ◆ The **Clinic Schedules screen (AD04)** has been modified. When accessing the “F9=Identify Resources/Slots” pop-up box, users can no longer use apostrophes in resource names.
 - ◆ The **Schedule Closed Dates screen (AD19)** has been modified to not allow clinic exceptions on Sunday.
 - ◆ The **Caseload Composition Report (HSPR0734)** and the **Caseload Composition Detail Report (HSPR0734A)** have been modified to update the Medicaid status on case managed clients. When the report runs automatically with the End of Day (EOD) processing on the first day of the month, the WAN will automatically be accessed and the Medicaid status of case managed clients will be updated. When users run the report manually, they will be given the option to access the WAN in order to update the Medicaid status on case managed clients. A message will display on the report indicating if the WAN was accessed.

The Caseload Composition Report (HSPR0734) was modified to only select children and infants whom are grouped with an active participant. Previously, the report selected infants and children whom were grouped with an inactive participant.

BCCP

- ◆ The **CPT code 88164** rate was changed from \$7.14 to \$14.60.
- ◆ The following **BCCP service codes** were added to Cornerstone:
 - ◆ BCD1 – Breast Cancer Diagnostic
 - ◆ BCD2 – Breast Cancer Diagnostic
 - ◆ BCD3 – Breast Cancer Diagnostic
 - ◆ BCD4 – Breast Cancer Diagnostic
 - ◆ BCD5 – Breast Cancer Diagnostic
 - ◆ CCD1 – Cervical Cancer Diagnostic
 - ◆ CCD2 – Cervical Cancer Diagnostic
 - ◆ CCD3 – Cervical Cancer Diagnostic
 - ◆ CCD4 – Cervical Cancer Diagnostic
 - ◆ CCD5 – Cervical Cancer Diagnostic
- ◆ The **Breast and Cervical Cancer Data screen (PA30)** has been modified. A new “US Citizen?” field has been added in which users will indicate “Y” for “Yes” or “N” for “No”. This field is a required to be completed at the time of enrollment.
- ◆ The **BCCP Detailed Procedure and Reimbursement Report (HSPR0783)** has been corrected so that totals for each provider are listed in the 'Amount' section and page breaks occur properly.

NOTE: Important changes have been made when adding an insurance (INS) record on the **Participant Med/Insurance screen (PA05)**. Please be sure to read about these changes in the “General Changes” section of this version letter.

IMMUNIZATIONS

- ◆ Immunization forecasting was updated to match current CDC guidelines.
- ◆ The description of “14 – HEP B – PEDIATRIC” was changed to “14 – HEP B – ADOLESCENT (2 DOSE)”
- ◆ The description of “15 – HEP B – ADULT” was changed to “15 – HEP B – ADULT (3 DOSE)”
- ◆ A new “28 – HEP B – PEDIATRIC (3 DOSE)” was added.
- ◆ The description of “26 - PREVNAR” was changed to “26 – PNEUMOCOCCAL CONJ (CHILD)” and forecasting was changed to not forecast unless a shot already exists.
- ◆ A new adult immunization “27 – PNEUMOCOCCAL POLY (ADULT)” was added.
- ◆ Forecasting for “17 – IPV” was modified in accordance with the 2001 CDC Guidelines.
- ◆ Forecasting for “22 –HIB/HEP B” has been modified to meet the 2001 CDC Guidelines.
- ◆ The **Summary of Immunizations for Monthly Accountability report (HSPR0304)** has been modified to allow users to run the report for a specified date range. In addition, the report has also been optimized to increase the speed at which the report is generated.
- ◆ The **Two Year Old Immunization Coverage Levels (HSPR0305)** has been modified to allow the user to chose how the report is sorted. Users can now sort the report by Immunization Type or by Immunization Date. 7050

In addition, when running the report for any program except Immunization, the report has been modified to count all active immunizations records in the total. Previously, the report counted only immunizations of participants who had an active “Immunization” Program Information (PA15) record.

WIC

- ◆ A new service entry code of “**WTNG – WIC Termination Notice Given**” was added to Cornerstone.

Due to the increased volume of questions relating to termination notification and clarification of what is actually required, this new service code is now available to assist in the documentation process. The intent of this code is to assist agencies when providing the notification of termination to all participants. Users can use the “WTNG – WIC Termination Notice Given” code on the Service Entry screen (SV01) to satisfy documentation requirements. This code does not replace the requirement of providing a written notice to all participants, but allows the agency to document that the client received a written notice on a corresponding date.

The introduction of this code does not require any agency to change their current notification process if it is being performed in compliance with the state and federal regulations. It is intended to assist agencies that wish to utilize the Cornerstone system in the most efficient and effective manner as possible. The only requirement for agencies using this code will be to identify in the Local Agency Policy Manual if they will utilize this code in lieu of written documentation. This requirement will be identified in the next revision of the WIC Policy and Procedure Manual.

- ◆ On the **WIC Assessment screen (AS01)**, the question “Consumes less than 400 mcg of folic acid daily... Yes or No?” has been added to the WICB assessment (question 24) and to the WICN assessment (question 21). If the assessment question is answered “Yes”, Cornerstone will generate the risk factor “S050 – Inadequate Folic Acid on AS02”. This risk factor is a priority 4 for category “B – Breastfeeding” and priority 6 for category “N – Postpartum”.

This screen has also been modified to correctly generate risk factors.

- ◆ The **Food Instrument Stock Range screen (FI06)** has been modified so that the “Page Up” and “Page Down” functions work properly. Previously, these keys stop functioning after canceling out of a new record.

Monitoring Special Formula

- ◆ Cornerstone has been enhanced to allow WIC to **monitor 900 series special formulas** in addition to the 700-800 series formulas via the modification of the WIC Assessment screen (AS02), the WIC Special Formula Screen (FI08) and the WIC-Special Formula report (HSPR0116):

- ◆ When a special formula food package (i.e., non-contract or “special” food package numbered 700-899 or 900 series) is entered on the **WIC Assessment screen (AS02)**, a message is displayed directing users to complete the new WIC Special Formula screen (FI08). Users can use the “F10=S/Formula” fastpath key to directly access the WIC Special Formula screen (FI08).

NOTE: The CHP who has issued the 900 special formula food package should continue to follow procedures as described in PPM 5.7 including 1) continuing to send the Regional Nutritionist Consultant a copy of the 900 Authorization form and prescription, 2) retention in participant chart and 3) Case Note documentation.

- ◆ The **WIC Special Formula screen (FI08)** displays all food packages assigned to the participant via the WIC Assessment screen (AS02), and users are able to use the “F6=Edit” function to enter additional information about the special formula (only) packages. The additional information includes the reason the special formula was assigned and the participant’s Next Doctors Appointment, if available. If the specific reason the formula was prescribed is not found on the “F1=Help” list, the reason should be recorded in Case Notes (CM04). There must be either a reason or an appointment date for each special formula food package assigned before Cornerstone will allow Food Instruments (FIs) to be printed for that package.

- ◆ The corresponding **WIC-Special Formula report (HSPR0116)** allows users to monitor active participants who are receiving special formula. The report displays the participant's name and birth date, first day to use the food package, formula name, diagnosis, provider's name from the Participant Enrollment screen (PA03), the next medical and clinic appointments, and effective with version 8.0, the CHP's name based on the ID number of the person completing the WIC Special Formula screen (FI08). The report will continue to calculate the number and percent of infants who are receiving non-contract formula.

This report will continue to automatically print at the end of each month, and can be printed on demand. Local agencies should submit the WIC-Special Formula report (HSPR0116) to their Regional Nutritionist Consultant. The CHP who has issued the 900 special formula food package should continue to follow procedures as described in PPM 5.7 including 1) continuing to send the Regional Nutritionist Consultant a copy of the 900 Authorization form and prescription, 2) retention in participant chart and 3) Case Note documentation.

- ◆ **The WIC – Special Formula report (HSPR0116)** has also been modified to only print a participant once on the report, even if the participant was issued more than one special formula food package during the reporting period.
- ◆ Cornerstone has also been modified to prevent users from printing Food Instruments (FIs) that contain 900 series food package special formula if the WIC-Special Formula screen (FI08) has not been completed. When attempting to print FIs from the **Produce Food Instruments screen (FI01)**, a message will be displayed directing users to complete the WIC-Special Formula screen (FI08) before the FIs can be printed.

Local Agencies should contact their Regional Nutritionist Consultant if they have any question about issuance of special formula food packages or these enhancements.

EARLY INTERVENTION

Family Fee

- ◆ A new **Family Fee pop-up screen (PA25)** has been added to Cornerstone in order for users to enter Family Fee data. This pop-up screen is available through the Early Intervention Program Data screen (PA35) and the Early Intervention Service Authorization Entry screen (SV07) by using a new "Ctrl+F11=Fee Data" fastpath key. While the option is not displayed on the PA05 screen menu, PA25 can also be accessed from the Participant Med/Insurance screen (PA05) by using the "Ctrl+F11" function.
 - ◆ Multiple Family Fee records can be added for a participant, and users can view the multiple records by using the "Page Up" and "Page Down" keys.
 - ◆ When adding the first Family Fee (PA25) record, the "Household Size", "Income Amount" and "Proof of Income" will automatically fill based on data entered on the Program Information screen (PA15):
 - ◆ Cornerstone first checks the "EI" Program Information record for the data.
 - ◆ If no data was entered on the "EI" Program Information record, Cornerstone then checks for the existence of an active "WIC" Program Information record.
 - ◆ If no data has been entered on either of these Program Information records, the first Family Fee record will be blank and the user will be required to complete these fields.
 - ◆ After the "Household Size", "Income Amount" and "Proof of Income" fields are completed and the record is saved, Cornerstone will automatically calculate and display the appropriate amount in the "Fee" field (based on the EI Program Family Fee Schedule).

NOTE: Changing the "Household Size", "Income Amount" and/or "Proof of Income" fields on the Family Fee screen (PA25) will not update the Program Information screen (PA15) and vice versa.
 - ◆ The "Proof of Income" codes available are:
 - ◆ "01 – Medicaid"
 - ◆ "06 – Two (2) Check Stubs"
 - ◆ "08 – Federal Income Tax Form – 1040"
 - ◆ "17 – WIC ID Card"
 - ◆ "18 – Med Exp Exempt"
 - ◆ "19 – Disaster Exempt"

- ◆ “20 – Pending Exempt”
- ◆ When adding the first Family Fee (PA25) record, the “Effective Date” (begin date) will default to the “Current IFSP” start date as recorded on the Early Intervention Program Information screen (PA35), or to “October 1, 2001”, depending upon the participant’s “Current IFSP” start date. (See “NOTE ON INSURANCE AND FAMILY FEE” on page 8.)
- ◆ When adding an additional Family Fee (PA25) record, the “Effective Date” (begin date) will default to the current date. The “Effective Date” (end date) of the previous Family Fee record will default to the current date minus one day.
- ◆ The “Effective Date” fields are not editable.
- ◆ When adding an additional record, the “Change Reason” field should be used to document why the Family Fee information changed. 7040 – Four “Change Reason Codes” have been added to Cornerstone for use in this field:
 - ◆ “A – Annual Redetermination”
 - ◆ “H – Household Size Changed”
 - ◆ “I – Income Changed”
 - ◆ “P – Proof of Income Changed”
- ◆ Any changes to the “Current IFSP” end date on the Early Intervention Program Data screen (PA35) will change the “Effective Date” (end date) of the current record.
- ◆ Family Fee (PA25) records can not be deleted, only added.
- ◆ On the **Early Intervention Service Authorization Entry screen (SV07)**:
 - ◆ If only an “Interim IFSP” has been entered, any authorizations can be generated and a Family Fee record (PA25) is not required.
 - ◆ After the “Current IFSP” start date is entered on the Early Intervention Program Information screen (PA35), no authorizations can be entered unless a Family Fee record (PA25) exists.
 - ◆ See Appendix A for a list of authorizations subject to the Family Fee.

In addition, a new “CTRL+F11=Fee Data” function has also been added to the bottom of this screen to allow access to the Family Fee pop-up screen (PA25).

- ◆ A new **EI Family Fee Report (HSPR0778)** has been added to Cornerstone. This report will be used by the CFC to send to the parents when the family fee is determined or changed. The report includes: the child’s name, date of birth, EI Number, and participant ID, as well as the total annual gross income, family size for tax purposes, proof of income used, monthly participation fee, and Current IFSP start and end dates. In addition, the report also includes a narrative about the monthly participation fee, participation fees not to exceed value of services, discontinuation of services due to non-payment of fees, and changes and disputes.

Due to the addition of this new report, the family fee information has been removed from the following reports:

- ◆ EI Authorized Provider Services Report (HSPR0771)
- ◆ EI Pending Provider Services Report (HSPR0772)
- ◆ EI Service Plan Report (HSPR0777)

Insurance

- ◆ A new **EI Participant Insurance Report (HSPR0794)** has been added to Cornerstone. This report prints all participant insurance information and will be used by the CFC to give to the providers. The report includes the following information: CFC site and phone number, service coordinator and phone number, child’s name, EI number, social security number, date of birth, and participant ID, and the status of insurance use. The report also displays the following information for each insurance (INS) record for the participant: insurance provider name, address and phone number, insured party, group and individual numbers, and the effective and termination dates.

NOTE: Important changes have been made to the **Participant Med/Insurance screen (PA05)**. Please be sure to read about these changes in the “General Changes” section of this version letter.

NOTE ON INSURANCE AND FAMILY FEE:

- ◆ If the “Current IFSP” start date on the Early Intervention Program Information screen (PA35) is before July 1, 2001, the CFC will have until October 1, 2001 (unless otherwise notified) before the Family Fee and insurance information is required.
- ◆ If the “Current IFSP” start date on the Early Intervention Program Information screen (PA35) is on or after July 1, 2001, the Family Fee and insurance information is required in order to enter authorizations.

Multiple Early Intervention Program Data (PA35) Changes

- ◆ Multiple Early Intervention Program Data records can be added for a participant, and users can view the multiple records by using the “Page Up” and “Page Down” keys.
- ◆ If a participant’s Early Intervention program record is terminated on the **Program Information screen (PA15)**, Cornerstone will update the following records/screens:
 - ◆ On the Early Intervention Program Data screen (PA35), Cornerstone will automatically change the “Status” field on all “Active” or “Pending” records to “Closed” and will change the “Current IFSP” end date to the current date minus one day.
 - ◆ On the Early Intervention Service Authorization Entry screen (SV07), Cornerstone will automatically change the “End Date” field on all associated authorization records to the current date minus one day.
- ◆ Adding (F5) an Early Intervention Program Data (PA35) record
 - ◆ A new record can be added on the Early Intervention Program Data screen (PA35) only if the “Status” of the previous record is “Closed” or “Active”.
 - ◆ Only one “Active” Early Intervention Program Data record is allowed at a time.
 - ◆ When adding a new record, the “Status” will default to “Pending”.
 - ◆ The “Intake Period” dates will default to the “Intake Period” dates recorded on the previous record.
 - ◆ A new “Entry Date” field has been added which defaults to the current date. This field is not editable; it is for display only.
- ◆ Editing (F6) an Early Intervention Program Data (PA35) record
 - ◆ If the “Current IFSP” dates are blank, the following fields can be edited:
 - ◆ “Elig Determined”
 - ◆ “Determination”
 - ◆ “Interim IFSP” dates
 - ◆ “Current IFSP” dates
 - ◆ “Status”
 - ◆ If the “Current IFSP” dates are completed (and the “Status” is “Active”), the following fields can be edited:
 - ◆ “Status”
 - ◆ “Next Follow-up”
 - ◆ “Reason”
 - ◆ “Private Insurance”
 - ◆ Once the “Current IFSP” dates are completed, saving the record will change the “Status” from “Pending” to “Active”.
 - ◆ The “Status” field can be changed from “Active” to “Closed” or from “Pending” to “Closed”.
 - ◆ Once the “Status” field is changed to “Closed”, the record can not be edited.
- ◆ Saving (F4) an Early Intervention Program Data (PA35) record
 - ◆ When the user presses “F4=Save” to save a new Early Intervention Program Data record and the “Elig Determined”, “Level of Delay” and “Determination” fields are completed but the “Current IFSP” dates are blank, Cornerstone will:
 - ◆ leave the “Status” in “Pending”
 - ◆ change the “Status” of the previous Early Intervention Program Data record (if one exists) to “Closed”
 - ◆ At the time when the user edits the new PA35 record and enters the “Current IFSP” dates, Cornerstone will:
 - ◆ change the “Status” to “Active”

- ◆ change the “Current IFSP” end date on the previous record to one day before the “Current IFSP” start date recorded on the new record.
 - ◆ close all existing authorizations on the Early Intervention Service Authorization Entry screen (SV07) by changing the “End Date” on each authorization to one day before the “Current IFSP” start date recorded on the new PA35 record. (This is done in order to ensure that all authorizations correspond to one and only one IFSP.)
- ◆ When the user presses “F4-Save” to save a new Early Intervention Program Data (PA35) record and the “Elig Determined”, “Level of Delay”, “Determination” and “Current IFSP” dates are completed, Cornerstone will:
 - ◆ change the “Status” to “Active”
 - ◆ change the “Status” of the previous Early Intervention Program Data record (if one exists) to “Closed”
 - ◆ change the “Current IFSP” end date on the previous record to one day before the “Current IFSP” start date recorded on the new record.
 - ◆ close all existing authorizations on the Early Intervention Service Authorization Entry screen (SV07) by changing the “End Date” to one day before the “Current IFSP” start date recorded on the new PA35 record.
- ◆ Deleting (F7) an Early Intervention Program Data (PA35) record
 - ◆ Users will not be able to delete Early Intervention Program Data records.
- ◆ Due to the new multiple Early Intervention Program Data (PA35) function, the following changes have been made to the **Early Intervention Service Authorization Entry screen (SV07)**:
 - ◆ Authorizations associated with an IFSP will be discontinued automatically when a new Early Intervention Program Data (PA35) record is added and becomes “Active”. (Note that authorizations are not discontinued when the associated Early Intervention Program Data (PA35) record is changed to “Closed”.)
 - ◆ When adding a new authorization and two (2) Early Intervention Program Data (PA35) records exist (one “Active” and one “Pending”), a pop-up box will be displayed prompting the user to select the Early Intervention Program Data (PA35) record / IFSP period with which the new authorization will be associated.
 - ◆ If the “Pending” record is selected and the “Interim IFSP” dates are blank, only evaluation authorizations will be allowed, and within the Intake Period dates. As a result, the “Auth Type” field will default to “EA - Evaluation”.
 - ◆ If the “Interim IFSP” dates are completed, any type of authorization will be allowed.
 - ◆ A new “EI Entry Date” field has been added. This field displays the “Entry Date” as recorded on the associated Early Intervention Program Data screen (PA35) record and is not editable.
- ◆ Due to the new multiple Early Intervention Program Data (PA35) function, the **EI Authorized Service Inquiry screen (SV08)** has been modified. A new “Entry Date” field has been added to the screen. This field displays the “Entry Date” associated with the authorization [as recorded on the associated Early Intervention Program Data screen (PA35) record].

Targeted Case Management

In order for Early Intervention to account for their time and activity in providing Targeted Case Management, the following changes were made to Cornerstone:

- ◆ A new “**800 – Service Coordination**” activity code has been added to Cornerstone for use on the Activity Entry screen (SV02).
- ◆ The **Activity Entry screen (SV02)** has been modified to allow Early Intervention staff to enter activities.
- ◆ The **Case Manager Activity Summary report (HSPR0722)** and the **Case Manager Activity Report (HSPR0723)** were both modified to not include Early Intervention activity code 800 in the reports.

PLEASE NOTE: The security administrator will need to access the Screen Security screen (AD16) and give security rights for the Activity Entry screen (SV02) to those staff members who will be entering the participant-related activities.

General EI Changes

- ◆ The **Early Intervention Program Data screen (PA35)** has been modified:
 - ◆ The “OK to Use Private Insurance” field has been changed to “Private Insurance”. 7075 - Instead of selecting “Yes” or “No”, users will now use one of six new codes:
 - ◆ “1 – No Private Insurance”
 - ◆ “2 – Bill Insurance First”
 - ◆ “3 – Ins Exempt / Indiv Plan”
 - ◆ “4 – Ins Exempt / Cap On All”
 - ◆ “5 – Ins Exempt / Cap On Some”
 - ◆ “6 – Pending Exempt”
 - ◆ If code 2 or 5 is used, users will not be able to save the Early Intervention Program Data (PA35) record unless insurance information has been recorded on the Participant Med/Insurance screen (PA05).
 - ◆ The “Current IFSP” dates can not be deleted out when editing an existing record.
 - ◆ The “Intake”, “Interim IFSP” or “Current IFSP” end dates can not exceed the child’s third birthday.
 - ◆ The “Next Follow-up Date” can not exceed the child’s third birthday.
 - ◆ The “Elig Determined” date is required to fall between the “Intake Period” begin date and the current date.
 - ◆ The “Intake Period” end date can not be greater than 45 days from the “Intake Period” begin date.
 - ◆ The edits on the “Intake Period” begin date field was loosened for in-state transfers. When the Early Intervention Program Data (PA35) record is transferred in the in-state transfer process, the original “Intake Period” dates are also transferred. If the site requesting the in-state transfer attempts to edit the “Intake Period” begin date, previously Cornerstone would not allow the record to be saved if the “Intake Period” begin date was prior to the “Date of Initial Contact” recorded on the Program Information screen (PA15). This edit has been loosened in Cornerstone to allow the site requesting the in-state transfer to edit the “Intake Period” begin date appropriately.
 - ◆ A new “CTRL+F11=Fee Data” function has been added to allow users to access the Family Fee pop-up screen (PA25). In addition, the “F10=Service Authorization Entry” fastpath key has been renamed “F10-Auth Entry” on this screen.
- ◆ The following general changes were made to the **Early Intervention Service Authorization Entry screen (SV07)**:
 - ◆ The “Individual Provider” field is now cleared out if the “Payee” field is accessed. Previously, if a user selected an individual provider on the “Individual Provider” field, then selected a different payee on the “Payee” field, the individual provider information remained in the field and did not blank out.
 - ◆ When adding a new authorization, all fields are now blank except the service dates.
 - ◆ An Assistive Technology (AT) authorization can not be saved with a blank “Status” field.
 - ◆ Overlapping authorizations for the same authorization type, service code and procedure code within the start and end dates of an existing authorization are not allowed.
 - ◆ Users can not enter “0” (zero) as a value in the “Frequency Times” field. In addition, the “Frequency Times” field was modified to default to “1 per auth” for Assistive Technology (AT) authorizations.
 - ◆ The “Amount” field now reads “Amount Each”.
 - ◆ A new “Total” field has been added for Assistive Technology (AT) auths only. This display-only field calculates the “Frequency Times” multiplied by the “Amount Each” field.
 - ◆ Users can now backdate authorizations 10 calendar days only (effective April 1, 2001).
 - ◆ Only “EA – Evaluation” authorizations can be issued without completing the “Current IFSP” dates, “Elig Determined”, “Determination” and “Level of Delay” fields and the Family Fee information.
 - ◆ Users can not edit the “End Date” field of an authorization in “Discontinued” status.
 - ◆ When adding new authorizations, users can no longer use the “DISC – Discontinued” code in the “Status” field. Instead, users should discontinue an authorization by changing the “End Date” of the authorization and using the “ADJT – Adjusted” code. In addition, users will only be able to use the “CAN – Cancelled” code in the “Status” field if the authorization “Start Date” is greater than the current date.
- ◆ Various **Assistive Technology (AT) procedure codes** were deleted from Cornerstone, and new AT procedure codes were added. These codes can be found in the manual that was distributed at the Early Intervention program trainings held in January 2001. (from BOD)

In addition, for AT procedure codes, the following “Method Types” are available:

- ◆ “P – Purchase”
- ◆ “R – Rent”

◆ “X – Repair”

The “Method Type” of “I – Individual” is no longer available for Assistive Technology.

- ◆ The **Participant Forms screen (CM10)** has been modified to only allow one “EICV – IFSP Cover Page” form to be entered for a participant.
- ◆ The **EI Authorized Provider Services Report (HSPR0771)** was modified so that the Individual Provider is displayed on the report when printed from a laptop that is not connected to the network. Previously, the Individual Provider was not displayed on the report if printed from a stand-alone laptop.
- ◆ The **EI Pending Provider Services Report (HSPR0772)** now runs with the daily EOD reports. If there are no pending authorizations in Cornerstone, the report will generate but display the message “No participant data” on the report.
- ◆ The **Early Intervention Service Plan report (HSPR0777)** has been modified so that “Individual Provider” and address information are printed on separate lines.

APPENDIX A: Early Intervention Service/Activities NOT Subject to Family Fees

PROCEDURE CODE	BRIEF DESCRIPTION	AUTH. TYPE	CATEGORY
W7494	PT EVAL/ASSESS - ONSITE	AS	EI
W7494	PT EVAL/ASSESS - ONSITE	EA	EI
W7495	PT EVAL/ASSESS - OFFSITE	AS	EI
W7495	PT EVAL/ASSESS - OFFSITE	EA	EI
W7496	SLT EVAL/ASSESS - ONSITE	AS	EI
W7496	SLT EVAL/ASSESS - ONSITE	EA	EI
W7497	SLT EVAL/ASSESS - OFFSITE	AS	EI
W7497	SLT EVAL/ASSESS - OFFSITE	EA	EI
W7498	OT EVAL/ASSESS - ONSITE	AS	EI
W7498	OT EVAL/ASSESS - ONSITE	EA	EI
W7499	OT EVAL/ASSESS - OFFSITE	AS	EI
W7499	OT EVAL/ASSESS - OFFSITE	EA	EI
W7500	NURSING EVAL/ASSESS - ONSITE	AS	EI
W7500	NURSING EVAL/ASSESS - ONSITE	EA	EI
W7501	NURSING EVAL/ASSESS - OFFSITE	AS	EI
W7501	NURSING EVAL/ASSESS - OFFSITE	EA	EI
W7510	A/R ASSESSMENT - ONSITE	AS	EI
W7510	A/R ASSESSMENT - ONSITE	EA	EI
W7511	A/R IFSP DEVELOPMENT	DS	EI
W7515	A/R ASSESSMENT - OFFSITE	AS	EI
W7515	A/R ASSESSMENT - OFFSITE	EA	EI
W7522	FTS IFSP DEVELOPMENT	DS	EI
W7533	SCHOOL S/L EVAL/ASSESS-ONSITE	AS	EI
W7533	SCHOOL S/L EVAL/ASSESS-ONSITE	EA	EI
W7535	SCHOOL S/L EVAL/ASSESS-OFFSITE	AS	EI
W7535	SCHOOL S/L EVAL/ASSESS-OFFSITE	EA	EI
W8716	EXAMINATION BY AN AUDIOLOGIST	AS	EI
W8716	EXAMINATION BY AN AUDIOLOGIST	EA	EI
W8717	HEARING AID ASSESSMENT	AS	EI
W8717	HEARING AID ASSESSMENT	EA	EI
W8728	DT EVAL/ASSESS - ONSITE	AS	EI
W8728	DT EVAL/ASSESS - ONSITE	EA	EI
W8729	DT EVAL/ASSESS - OFFSITE	AS	EI
W8729	DT EVAL/ASSESS - OFFSITE	EA	EI
W8732	DT IFSP DEVELOPMENT	DS	EI
W8737	SW EVAL/ASSESS - ONSITE	AS	EI
W8737	SW EVAL/ASSESS - ONSITE	EA	EI
W8738	SW EVAL/ASSESS - OFFSITE	AS	EI
W8738	SW EVAL/ASSESS - OFFSITE	EA	EI
W8741	SW IFSP DEVELOPMENT	DS	EI
W8746	PSY EVAL/ASSESS - ONSITE	AS	EI
W8746	PSY EVAL/ASSESS - ONSITE	EA	EI
W8747	PSY EVAL/ASSESS - OFFSITE	AS	EI
W8747	PSY EVAL/ASSESS - OFFSITE	EA	EI
W8750	PSY IFSP DEVELOPMENT	DS	EI
W8756	PT IFSP DEVELOPMENT	DS	EI
W8760	SLT/SCHOOL S/L IFSP DEVELOPMNT	DS	EI
W8766	OT IFSP DEVELOPMENT	DS	EI
W8770	NURSING IFSP DEVELOPMENT	DS	EI
W8772	NUTR ASSESSMENT - ONSITE	AS	EI
W8772	NUTR ASSESSMENT - ONSITE	EA	EI
W8773	NUTR ASSESSMENT - OFFSITE	AS	EI

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PROCEDURE CODE	BRIEF DESCRIPTION	AUTH. TYPE	CATEGORY
W8773	NUTR ASSESSMENT - OFFSITE	EA	EI
W8774	NUTR IFSP DEVELOPMENT	DS	EI
W8776	O/M ASSESSMENT - ONSITE	AS	EI
W8776	VT ASSESSMENT - ONSITE	AS	EI
W8776	O/M ASSESSMENT - ONSITE	EA	EI
W8776	VT ASSESSMENT - ONSITE	EA	EI
W8777	O/M ASSESSMENT - OFFSITE	AS	EI
W8777	VT ASSESSMENT - OFFSITE	AS	EI
W8777	O/M ASSESSMENT - OFFSITE	EA	EI
W8777	VT ASSESSMENT - OFFSITE	EA	EI
W8778	O/M IFSP DEVELOPMENT	DS	EI
W8778	VT IFSP DEVELOPMENT	DS	EI
W8840	OPTOMETRIC EXAMINATION	AS	EI
W8840	OPTOMETRIC EXAMINATION	EA	EI
W8861	MEDICAL DIAGNOSTIC EVALUATION	AS	EI
W8861	MEDICAL DIAGNOSTIC EVALUATION	EA	EI