

MEMORANDUM

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Date: January 10, 2002
To: Cornerstone Agencies
From: Thomas W. Simonds,
Chief Operating Officer
Illinois Primary Health Care Association
Subject: Cornerstone Software Upgrade Version 8.20

Cornerstone is being upgraded to version 8.20. The new version will be released in three phases according to the following schedule:

Clinic ID	Release Date
Child & Family Connection agencies	January 21, 2002
001001 – 031112	January 21, 2002
031113 – 099004	January 28, 2002
101001 – 203001	February 4, 2002

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, Breast & Cervical Cancer Program, Case Management, Diabetes, Early Intervention, Healthy Families Illinois, Healthy Start Case Management, Immunizations and WIC. If you have any problems or questions regarding the upgrade process, please contact the Cornerstone Call Center at (877) 447-4221 / (877)-4IPHCA1.

Cornerstone Version 8.20

The following changes have been made to Cornerstone as of the date of this version letter. However, based on the results of the pilot (January 14, 2002), Cornerstone Version 8.20 may actually contain slight modifications not outlined below. Please watch your Beginning of Day (BOD) messages for updated information. If you have any questions, contact the Cornerstone Call Center at toll-free 1-877-447-4221.

General Changes

- 7316 – Additional **occupation codes** have been added to Cornerstone. For a complete list of the codes, please refer to “Appendix C – System Code Table” in your electronic Cornerstone User Manual.
- 7255 – The **Case Management Caseload Summary Report (HSPR0745)** was modified to list participants under the correct case manager when selected by a specific program code.

Breast & Cervical Cancer Program (BCCP)

- New questions were added to the **BCCP assessment**.
- The BCCP **reimbursement rates** for CPT codes were updated to reflect the new rates that took effect January 1, 2002.
- The following new **procedure codes** have been added to Cornerstone:
 - 19102 – NEEDLE CORE BX WITH IMAGING
 - 19103 – BX WITH MAMMATOME DEVISE
 - 19295 – CLIP PLACEMENT WITH IMAGING
 - 76085 – CAD FOR SCREENING MAMMOGRAPHY
- The **Breast and Cervical Cancer Data screen (PA30)** was modified, as the “U.S. Citizen?” field was removed from the screen.
- The following new **procedure result codes** were added to Cornerstone (and are associated with the appropriate existing procedure codes). These procedures are used on the Procedure Specific pop-up box accessed from the Service Entry screen (SV01).

Existing Procedure Code	New Procedure Result Code	Procedure Result Description
88141, 88164	94	AGUS
99242, 99243	B1	NO INTERVENTION NECESSARY
99242, 99243	B11	BIOPSY RECOMMENDED
99242, 99243	B12	FNA RECOMMENDED
99242, 99243	B13	SHORT TERM FOLLOW-UP
99242, 99243	B14	CLIENT REFUSED
19100, 19101, 19120, 19125, 19126, 19290, 19291, 76095, 76942, 88305	B65	CANCER IN SITU, DUCTAL
19100, 19101, 19120, 19125, 19126, 19290, 19291, 76095, 76942, 88305	B66	CANCER IN SITU, LOBULAR
99242, 99243	C1	NO INTERVENTION NECESSARY
99242, 99243	C11	BIOPSY RECOMMENDED
99242, 99243	C12	FNA RECOMMENDED
99242, 99243	C13	SHORT TERM FOLLOW-UP
99242, 99243	C14	CLIENT REFUSED
57452, 57454, 57505, 88305	C8	NORMAL/BENIGN/INFLAMMATION
57452, 57454, 57505, 88305	C84	LOW GRADE SIL
57452, 57454, 57505, 88305	C85	HIGH GRADE SIL

- The following new **treatment provided codes** were added to Cornerstone. These procedures are used on the Procedure Specific pop-up box accessed from the Service Entry screen (SV01).
 - B4 - HORMONE THERAPY
 - C7 - HYSTERECTOMY

Case Management

- 7385, 7351 - The **Caseload Composition Report (HSPR0734)** was modified to not access the WAN when running during the automated End of Day (EOD) process. This process is no longer necessary, as updated Medicaid records will now be downloaded daily to Case Management agencies.

Diabetes

- 7335, 7336 – The **Diabetes Screening Report (HSPR0795)** was modified to allow users to print the report by location code.

Early Intervention (EI)

• Family Fee Changes

- 7299, 7301 – The **proof of income code** “22 – INCOME DOCUMENTED FOR SIBLING” was inactivated.
- The **no fee code** “22 – FEE ON SIBLING – NO FEE” was inactivated in Cornerstone.
- 7298, 7297 – The **Family Fee pop-up screen (PA25)** has been modified. Two new fields [“Financially Responsible (L, F)” and “SSN”] have been added to the screen, and are required to be completed if a family fee in an amount greater than \$0 is generated. Users will enter the first and last name and social security number of the person financially responsible for the participant.

The Family Fee pop-up screen (PA25) has also been modified to alert users if a participant is in a group by displaying a message in the upper right hand corner of the screen. The message “IN A GROUP” will be displayed if the participant is in an open/active group, or the message “NOT IN A GROUP” will be displayed if the participant is not in an open/active group or their group record is closed.

If a participant is in a group and changes are made to their family fee record (and the user presses “F4” to save the changes), Cornerstone will automatically update the family fee for all participants active in the group and display the message “All fees in group were updated.”

If the person who is financially responsible for the participant is someone OTHER than the Contact Person identified on the “R – Residence” address pop-up screen [accessed from the Participant Enrollment screen (PA03)], users MUST capture the address of the financially responsible party. This is accomplished by adding an “O – Other” record on the address pop-up screen [accessed from the Participant Enrollment screen (PA03)], and selecting the “Relationship” code of “FR - Financially responsible”. This must be done in order to ensure that family fee statements are mailed to the financially responsible adult.

- 7349 – A new **provider category code** “DV – DEVELOPMENTAL VISION SPECIALIST” was added to Cornerstone.
- 7407 – The following new **insurance codes** were added to Cornerstone to be used on the Early Intervention Program Data screen (PA35):
 - 07 – WAIVE INS / PROVIDER UNAVAILABLE
 - 08 – WAIVE INS / NO PROVIDER ENROLLED
 - 09 – WAIVE INS / SERVICE NOT COVERED
 - 10 – WAIVE INS / EXTRA 15 MIN / 30 MILE

- 7341 - The descriptions of the following **procedure codes** were modified:

Procedure Code	Modified Description
W7521	VISION GROUP SERVICES
W8776	VISION ASSESSMENT - ONSITE
W8777	VISION ASSESSMENT - OFFSITE
W8778	VISION IFSP DEVELOPMENT
W8842	VISION SERVICE - ONSITE
W8844	VISION SERVICE - OFFSITE

- 7385, 7351 - Updated **Medicaid records** will now be downloaded daily to Early Intervention agencies.
- 7384 – The **Employee Information screen (AD15)** has been modified. A new “Tax ID” field has been added to the screen to allow a Tax ID number (provider number plus suffix) to be entered for Early Intervention program staff. In order to complete this field, the employee must have a valid provider ID (from Provider Connections) and a provider category of “SC – service coordinator”.

For security purposes, the screen will only display the Tax ID number when the employee logged into Cornerstone is the same employee being updated on the Employee Information screen (AD15).

- 7369 – The **Early Intervention Service Authorization Entry screen (SV07)** has been modified. Two new fields [“Ordering (L, F)” and “License #”] have been added to the screen, and should be completed when a physician has ordered assistive technology equipment or devices. Users will enter the last and first name of the physician who ordered the AT equipment/device in the “Ordering (L, F)” field, and the physician’s license number in the “License #” field.
- 7291 – The **EI Authorized Provider Services Report (HSPR0771)** and the **EI Service Plan Report (HSPR0777)** were modified to correctly display the dollar amount in the “Max Amt” field. Previously, the dollar amount was sometimes truncated or rounded.

The EI Service Plan Report (HSPR0777) was also modified to correctly compute the dollar amount displayed in the “Max Amt” field based on the frequency entered.

- 7383 – The **EI Family Fee Report (HSPR0778)** was modified to reflect the “family group” concept. The report now displays the following information for each child in a family (or group) that is enrolled in Early Intervention: participant ID, EI number, name, birth date, IFSP period, and current fee date. The report also displays the financially responsible adult’s name, billing address and social security number; the family size for tax purposes, annual gross income, income documentation type, family fee maximum for current period and family fee monthly level payment amount for current fee period.

Healthy Families Illinois (HFI)

- 7340 – A new **activity code** “132 - HFI CREATIVE OUTREACH” was added to Cornerstone. Creative outreach activities should now be recorded on the Activity Entry screen (SV02) using this new activity code.
- 7338, 7339, 7340 – The following seven new **HFI category codes** were added to Cornerstone:
 - HFCO - HFI CREATIVE OUTREACH
 - HF11 - HFI LEVEL 1
 - HF12 - HFI LEVEL 2
 - HF13 - HFI LEVEL 3
 - HF14 - HFI LEVEL 4
 - HFIP - HFI PRENATAL
 - HFSS - HFI SPECIAL SERVICES

These additional codes will allow HFI programs to track the level of service intensity assigned to each family in the active caseload. For additional information on the use of these new category codes, see “Chapters 12 – Program Information Screen (PA15) for All Programs” and “Chapter 16 – Healthy Families Illinois” in the Cornerstone User Manual.

These new category codes should be used **only** for the group head. Other adults in the family who are enrolled in Cornerstone should be given category code, “G – Guardian”. Infants and children should be given category codes “I” and “C”, respectively.

As a result of this change, it is necessary to **manually** change the category code on the Program Information screen (PA15) screen **each time** a family changes service levels.

Because there is now a separate category for creative outreach, it is no longer necessary to close creative outreach cases in Cornerstone and reopen them as “E – Income/age eligible”. The “HFCO” category code enables reports to be written which factor creative outreach cases out of calculations of immunization and well-child visit percentages, but factor them into calculations of caseload weights.

The “CNTL” category code should still be used for each member of the families who are in the comparison group for the program evaluation. On the Program Information screen (PA15), these families should be given a program status of “E – Income/age eligible”. [NOTE: The changes to the Program Information screen (PA15) outlined below do not apply to new HFI records with a category of “CNTL”. When adding a new HFI record with a category of “CNTL”, the status will still be set to “E – Income/age eligible”.]

- 7337 – The **Program Information screen (PA15)** was modified. Once a user has added a new **HFI** record and pressed “F4 – Save”, the participant’s status will automatically be set to “A – Active” (except for HFI records with a category of “CNTL”. These records will still be set to “E – Income/age eligible”). Previously, the participant’s status would be set to “E – Income/age eligible” and would not be set to “A – Active” until an activity record was entered on the Activity Entry screen (SV02) with the an appropriate activity code. Because cases will become active in Cornerstone without the entry of a “130 - Family support” activity code, programs should not complete the Program Information screen (PA15) for a new family until they are ready to assign families to one of these levels of service intensity or enroll the family in the comparison group for the HFI evaluation.

As a result of this change, it is no longer necessary to record an activity code of “130 - Family support” to activate each family member in HFI. Effective immediately, activity records (“132 – Creative outreach” and “130 – Family support”) should be recorded only under the participant ID of the group head.

The next Cornerstone trainings for HFI will take place on February 6-7 (Springfield), and March 6-7 and April 15-16 (Chicago). The curriculum is being revised to reflect these changes to Cornerstone, and programs are strongly encouraged to attend one of these training programs. Registrations for these trainings should be faxed to (217) 753-8939 (Springfield) or (312) 326-4704 (Chicago).

Healthy Start Case Management (HSCM)

- A new **assessment type** “707G - PRENATAL HIGH RISK” (code and questions) was added to Cornerstone.
- A new **HSCM category code** of “PD – POST PARTUM DEPRESSION” was added to Cornerstone.
- 7340 – The following new **activity codes** were added to Cornerstone:
 - 537 - HEALTHY START
 - 538 - TEEN PARENT SERVICES
 - 539 - FCM NETWORKING
 - 540 - DIABETES CONTROL PROGRAM
 - 715 - CLINIC DEFINED ACTIVITY 11
 - 716 - CLINIC DEFINED ACTIVITY 12
 - 717 - CLINIC DEFINED ACTIVITY 13
 - 718 - CLINIC DEFINED ACTIVITY 14
 - 719 - CLINIC DEFINED ACTIVITY 15

Immunizations

- 7260 – **Forecasting** of HEP B immunization rules were modified to correct the months between dosages.
- 7267 – Cornerstone was modified so that when a user deletes an immunization record, the doses used field will not be updated for expired lots.
- 7268 – The **Clinic Immunization Activity Report (HSPR0310)** was modified to display the immunization type and description more clearly.

WIC

- Question number 2 was inactivated from the “**WICC – WIC - CHILD**” assessment.