



Expected Issues for Go-Live

Brought to you by the Florida Department of Elder Affairs and WellSky.

What I see in eCIRTS

Resource Directory:
The fax number for the agency is missing.

Workers:
Default Worker records do not exist for all Providers.

Programs:
APCL and APPL spans for LTCC records will be migrated as MLTC records.

Caregiver/Care Recipient:
The relationship on the Caregiver record will be "Relationship Missing" if the relationship was captured on the 701S.

Resources:
Service/taxonomy level hours are missing on resource records.

Resources:
There is no Resource Eligibility or Payment Option information in eCIRTS.

Service Area:
Each Resource has a Service Area record, but in CIRTS, Area Served is defined at the service level.

Resource Directory:
Formal Update, Email Broadcast are empty.

What do I do about it?

Look up the fax number in REFER and use the eCIRTS Admin or ADRC Records Management role to add it in eCIRTS.

If the Provider was in the CIRTS Provider table, there will be a Default worker record in eCIRTS. If the Provider was a location only in CIRTS, the Default worker record will need to be manually added in eCIRTS. Submit a request to BIT to have the generic Default Worker record added for the Provider.

Naming convention: **DEFAULT-WORKER-PROVIDER NAME**

LTCC records in CIRTS will be MLTC records in eCIRTS. LTCC and LTCN will not be used in eCIRTS.

Enter the Caregiver's relationship to the client manually in eCIRTS. The Associated People tab may have an entry for the Caregiver relationship as well.

Service specific hours from REFER will be migrated as the first line of information in the Service Description/Guidelines field in eCIRTS.

Look up the Eligibility and Payment Options data in REFER and manually update it in eCIRTS. These will be a combined, multi-select field in eCIRTS. They are currently text fields in CIRTS.

In eCIRTS, Areas served are also defined at the service level, but the application requires a 'master' service area to be created at the Resource level first, before service specific area can be added. For migrated resources, all have been given the State of Florida as the 'master' service area, but the county, city, zip code specific service areas are also defined on the service.

These fields will not be migrated to eCIRTS and can be manually updated during the annual review.

What I see in eCIRTS

Assessment Due Report:
Report displays late assessments only.

Provider Contracts:
Contract number is missing.

Provider Contracts:
There are duplicate provider contracts.

Resource Directory Updates:
The 'email blast' for the annual resource directory updates will be sent from REFER this year, but the updates received will be keyed into eCIRTS.

701 Assessments:
The Health Conditions section may include duplicates in the migrated assessments. Some values are Proper Case and some UPPER CASE.

Services:
Historical Provider is the provider for all migrated planned services.

Authorizations:
Authorizations do not exist in eCIRTS.

Resource Directory:
Proximity search does not exist.

What do I do about it?

After Go-Live, this report will be updated to run the report with an 'as of' date so users can know what is going to be due before it is overdue.

If the contract had a number in CIRTS it was migrated to eCIRTS. Several PSAs had contracts with a blank contract number. There are over 70K contracts that will not have contract numbers because they did not exist in CIRTS.

Contracts migrated from CIRTS will include only one service. For example if a contract in CIRTS had two services, it will be two contracts in eCIRTS, one for each service. Going forward, when new contracts are added to eCIRTS, multiple services can exist for one contract.

In Phase 2, the eCIRTS Resource Directory will manage the 'email blast' and updates.

Ignore the duplicates. If you need to print a migrated assessment, print from the source system, CIRTS, using the Turn Around report.

No changes needed. All migrated planned services will have the generic 'Historical Provider.' All planned services added into eCIRTS will use an actual provider.

Services will migrate if they existed in CIRTS, but additional services must also be added in eCIRTS. Providers/Assessors have until the next reassessment period to enter them. Once added, the 'Create Authorizations' functionality will be used in eCIRTS to create the authorizations.

For Phase 1 Go-Live, the resource search will not be a proximity search. The user will enter the Agency/Program's service area county, city and/or zip and matching results will be returned, but they will not be sorted by proximity to the client's zip code.

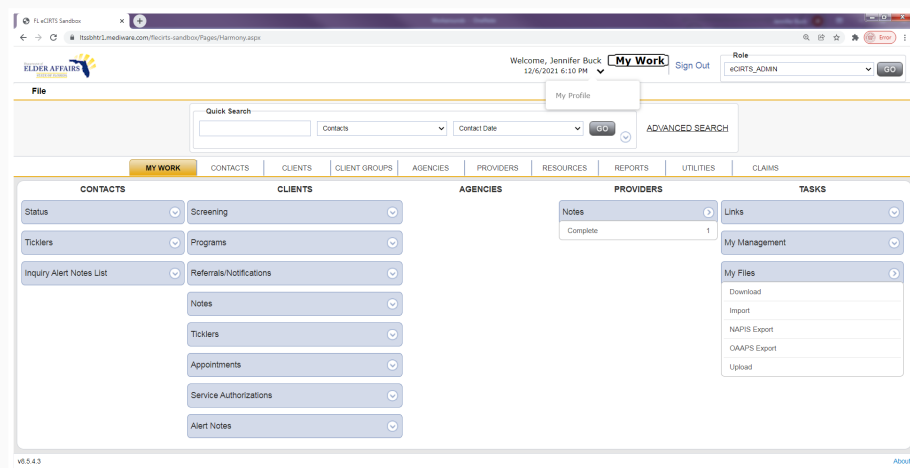
For Phase 2 Go-Live, the Resource Directory will be upgraded to include proximity search features.

What I see in eCIRTS

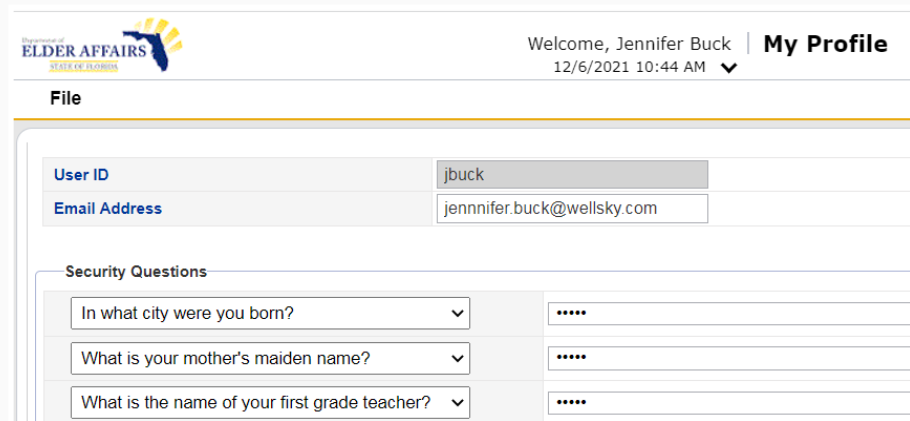
Forgot Password:
I want to enable the Forgot Password functionality.

What do I do about it?

A user must have an email and security questions on file to use the Forgot Password functionality. From My Work, access My Profile.



If an email was not migrated for your worker record, you can add it and create security questions.



REFER Follow Ups:
Do I have to enter all my REFER follow ups from before Go-Live in eCIRTS?

Follow ups that were scheduled in REFER should be completed in REFER.

Follow ups scheduled in eCIRTS should be completed in eCIRTS.

Add New Client:
Cannot be added from the Quick Search.

Click Advanced Search and then the option to add a new client will be visible in the File menu.

Remember to Use the Start/Stop Timer:
ADRC uses the Start/Stop Timer.
I&R does not.

For I&R Specialists, the 'clock starts' to record the duration of the call when the Contact Record is opened. The 'clock stops' the last time the contact record was saved on the same day.

What I see in eCIRTS

Resource Directory:
Search tips.

Updating SSN:
Who can update a client's SSN?

Best Contact Phone:
What number in CIRTS is the Best Contact Phone for a client in eCIRTS?

Important Client Data:
How are the SSN, DOB, Rank, Priority Score, Assessment Date and EMS Release date populated at the top of every client record?

Screening Queue:
How do I access the Screening queue for my ADRC?

Provider Referral Queue:
How do I access the referral queue for a Provider?

Assessments:
Can I copy the previous assessment to create this year's assessment?

What do I do about it?

It is fastest to use the Text Search at the top of the page when searching by one data element (i.e., Meals).

Use the Field searches underneath the text search when searching by more than one data element (i.e., Service Area Zip Code and Service Name).

Only the eCIRTS SSN Manager role can edit the SSN. Only certain users will be given the eCIRTS SSN Manager role at each PSA.

The 'Current Physical Location' phone number from CIRTS was migrated as the 'Best Contact' phone number in eCIRTS.

SSN, DOB, Rank, Priority Score, Assessment Date, and EMS Release Date from the Demographics page are also visible in the header that remains visible on any tab of the Client record. As data for these fields changes on Demographics, it will also change in the header. Rank, Priority Score and Assessment Date automatically populate/update on the Demographics page when an assessment is completed.

Other ADRC staff who assist with making screening referral assignments (which are NOT the primary worker on the screening record) can still help. They will not have a queue of records to work on My Work, but they can run the Screening Record Data report for a list of clients awaiting assignment.

A staff member selected as the worker on a referral to Provider record will have a queue of records on My Work. Other staff can view/work the queue if they are not the worker from the Provider record.

You can use the Duplicate Assessment feature to copy a previous assessment. We will have an obstacle to overcome with historical assessments. Historical assessments will migrate from CIRTS to eCIRTS but from a technical perspective, they will be on a different form. The historical form looks like the assessment form but could not contain the automation that the assessment forms have if added in eCIRTS. For the first reassessment in eCIRTS, you do NOT want to Duplicate the migrated assessment; you will want to add a new assessment. You can copy/paste responses from the historical assessment into the new assessment. For the second reassessment in eCIRTS and thereafter, you will use the duplicate assessment feature.

What I see in eCIRTS

Referrals to Providers:

What goes on the Referrals to Providers tab in eCIRTS?

Assessments:

What is the "Eligible for Waitlist" Section on the 701S, 701A and 701B?

Remove Notes from My Work:

How do I remove a note from the My Work Notes queue?

What do I do about it?

1. I&R: will add a PSA/Agency referral record when the client record created. This enables the ADRC to bill for intake services. A Client can have more than one PSA/Agency referral record if needed, i.e., if a client switches PSAs.
2. I&R: may add referrals to community resources that require 14-day follow up. Screening referrals have a separate 14-day follow-up requirement and are recorded on the Screening tab, not the Referrals to Providers tab.
3. Lead Agency: will add a Lead Agency referral record when the Client record is created by the Lead Agency, so the Lead Agency can bill for services.
4. CM/Assessors: will add a service provider referral record after the assessment is completed so the service providers can bill for services.
5. SNAP, SHINE and PEARLS referrals will also be managed on this tab.

New section has been added to the 701S, 701A and 701B assessments that lists the programs for which the client is eligible to be added to the APCL waitlist.

The screener/assessor answers trigger questions within the screening/assessment that prompt the Yes or No value in this section. These are the programs the screener/assessor should discuss with the client and if interested, the ones that will become program records in eCIRTS.

One of the trigger questions in this section is Age. Age is a value eCIRTS calculates automatically based on the date of birth. During the migration process from CIRTS, Age was not populated. The demographic record must be saved, just once before being able to use this section on an assessment in eCIRTS. Saving the demographic record forces the auto calculation and Age is now populated in the database. Once it is in the database, this assessment form can use the data to determine Yes/No for each program in this section.

Users can remove a Note from the My Work dashboard by marking the note as read. This is done from an open note record. From the **Tools** menu, select **Mark as Read**. This will remove the Note from the recipient's My Work page. Select **Mark as Read and Close** if you also want to close the note record after marking it as read.

What I see in eCIRTS

Assessments:

How do I key in an assessment completed by someone else?

Services:

Services must be added for case managed and non-case managed clients in eCIRTS. Exceptions are listed in the eCIRTS training manual.

Medications:

Any tips on adding medications faster?

Medication Section in Assessments:

The Add New Medication option does not work.

What do I do about it?

Data entry staff that key in assessment on behalf of another would change the Assessor/Worker field from themselves to the Assessor/Worker who completed the assessment. When the data entry staff completes the form in eCIRTS, by changing the status to complete, his/her name will populate as the Data Entered By Worker and the date the form was saved in complete status is populated as the Completed Date.

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).

If more than one medication is added for a client, the user can copy information like the prescriber's name from one medication record and paste it to the second or third medication record to save time.

The Add New Medication function in the assessment forms cannot be used until DOEA starts using a master medication list. This is not planned for Phase 1. The Search Existing Medication function in the assessment form does work and copies medication records from the Medication tab into the assessment form.

J. MEDICATIONS & SUBSTANCE USE SECTION

98. Do you take three or more prescribed or over-the-counter medications a day?

99. May I see all the medications you take, both regularly and those taken only as needed? Also, please show me all types of over-the-counter medications and any supplements that you regularly take.

0 record(s) returned

ASSESSOR/CM: Check the original bottles in the medicine cabinet, nightstand, and refrigerator, as well as non-prescription drugs, over the counter drugs, sleep aids, herbal remedies, vitamins, and supplements.

Add New Medication

Search

What I see in eCIRTS

Client Phone and Address Data:

Where are the phone and address records that had a relationship of SELF in CIRTS?

Caregiver Information:

Caregiver information could be on the 701S, 701A and/or 701B. When does it have to be added to the Caregiver tab in eCIRTS?

Screening > Primary Worker:

I cannot change the Primary Worker on the Screening tab.

Referral to Community Resources:

Which provider do I select on the Referral to Providers tab when I am making a referral to a Community Resource that requires a 14-day follow up?

14-Day Screening Follow Up:

In some PSAs, the 14-day Screening Follow-up is completed by the screeners. How will the screener receive the 14-day screening follow up ticket in eCIRTS?

What do I do about it?

Any Phone or Address data that had a relationship equal to SELF in CIRTS was migrated to eCIRTS under the Associated People tab as a temporary location. As Clients receive their annual rescreening/reassessment, the Assessor should clean up this data. He/she will inactivate the record on the Associated People tab and create new Client Phone or Address records on the Demographics tab.

Caregiver information is also captured on the 701S; however, it is not required to be added to the Caregiver/Care Recipient tab in eCIRTS until the client is active and receiving services and the 701A or 701B has been completed. The screener will not receive a tickler to add the Caregiver information after completing the 701S.

The Screening tab is used by the ADRC to track the completion of the INITIAL 701S and Significant Change screenings only. Annual screenings are tracked via ticklers and notes, NOT on the Screening tab. When Providers complete screenings those are tracked on the Programs tab, NOT on the Screening tab.

When used by the ADRC, the Primary Worker is assigned when the client record is first created. The Generic Worker for the PSA is selected as the Primary Worker. Later in the workflow when the actual screener is assigned, they are added as the Secondary Worker on the Screening tab.

Search for and select 'Community Resources' as the provider. All PSAs will use this same provider record. Assign the Generic Worker record for the PSA as the Worker. PSAs can filter the referrals by their PSA's generic worker to view all referrals to Community Resources for their PSA.

I&R Supervisors and ADRC Management have ultimate accountability for ensuring the follow-up is completed, but the actual completion of the follow-up tickler in eCIRTS can be completed by the screener. It will be the responsibility of the I&R Specialist who receives the tickler to reassign it to an actual screener. When the screener is not known, the I&R Specialist will reassign the tickler to the designee in their PSA who assigns the screener. That designee would then reassign the 14-day follow-up tickler to the actual screener.