

Providers IDOLS Q&A

How to set up an account:

<http://www.dbhds.virginia.gov/ODS-UsefulInformation.htm#DELTA>

First step: Read the DELTA – IDOLS Explanatory document and the 3 DELTA quick reference cards. They explain the process to register for DELTA and the various roles that will need to be assigned.

Second step: The agency head completes the attached DELTA-Account Request Form and e-mails it to deltaprod@dbhds.virginia.gov. This is also the e-mail address that can be used to ask questions about the account request process. There are two versions of the form located on our website. Please see the attachment or use the website.

Third step: When you receive an e-mail notification about your completed registration your Security Officer and supervisor will complete the necessary forms to assign the other roles which is explained, in detail, in the attached documents.

Fourth step: Read the attached IDOLS Service Authorization Manual. This manual contains all the information needed to complete service authorization requests (ISARs) in IDOLS.

Fifth step: View the YouTube videos: <http://www.youtube.com/user/ODSVA>

Q & A:

1. What services can providers see in IDOLS?
Answer: Providers can only see information for the individuals who they are approved to provide services. Providers who have both residential and day support services have access to all individuals receiving these services. Providers cannot access the information of other providers as they have different NPI numbers. Providers will retain any history once an individual leaves their services.
2. If the Service Facilitator or others are a one person(s) operation those providers have to fulfill all roles in Delta?
Answer: Yes.
3. If doing a service modification and switching from high intensity to regular intensity do you have to terminate one ISAR and do another?
Answer: Yes, because the two service levels are different and have different criteria.
4. Can a service being terminated and another service replacing that service be requested at the same time?
Answer: A provider can terminate the old service and can open the new one once it is assigned by the CM/SC (It could be the same provider or different provider). The SC/CM will take action once each is submitted.
5. Who will the e-mail go to once the SC/CM has opened a service to a provider?
Answer: All IDOLS-enrolled provider staff at the identified provider location with the same provider number.
6. Can additional justification be attached in IDOLS?
Answer: Yes, one document can be attached in IDOLS. To send more than one document, cut and paste the multiple documents into one combined document before attaching. See *Navigating IDOLS Virginia's Electronic ID/DS Waiver Service Authorization System* manual for details.
7. How are approved, pending or denied service request from PA handled if the SC/CM is on vacation or out sick?
Answer: The provider has the ability to view the action that ODS has taken as soon as PA enters it into the system. However, the provider cannot respond directly to request that have been pending by ODS. The SC must forward the pending action made by ODS to the provider. Pending request require a response from the provider and must be sent to ODS by the SC/CM within 30 days of the pending date. All SC/CM within an agency can approve requests. Providers should communicate with CSB SC/CM Supervisor to determine how submissions are handled in these instances.

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8. If a box is not checked on a request in IDOLS, will the system give a prompt to complete the area?
Answer: The system will prompt to complete certain fields, but will not do so in all circumstances. It is important that the provider and the SC/CM review submissions for accuracy.
9. How long does information stay in the Holding for Request file in IDOLS?
Answer: Requests will stay in the "Awaiting Provider Completion" list until action is taken. In cases of pended requests, the submission window will expire and the provider will need to submit a new request. If at any time a Provider feels justified in requesting an earlier start date, the provider and the SC/CM should submit justification for the date and a request should be made for re-review/reconsideration.
10. Can an internal review of a service request be completed in IDOLS before submitting to the CM/SC?
Answer: Yes. After a request is entered the "Save" feature can be used to save the information entered for viewing at a later time. After all reviewing is completed; the request can be approved and submitted to the SC/CM.
11. When should a provider begin services?
Answer: Providers should not begin services until the request is in the DMAS notification system and can be viewed online, via phone or notification letter. It is important to review the information and determine if the information on the DMAS notification is the same as the approved request in IDOLS. If the information is not the same the PA Consultant should be contacted.
12. When should a service request be submitted to a SC/CM?
Answer: The Medicaid ID Waiver Manual in Chap 4 recommends that requests are submitted to the SC/SM at least 30 days prior to the start date.
13. Can a provider request and justify back dating a service request?
Answer: These are considered to be rare exceptions and these re-reviews or reconsiderations will be considered by Preauthorization on an individual basis along with justification.
14. Can providers respond to request that have been pended by ODS without going through the SC/CM?
Answer: No, the provider is able to view the ODS action, but cannot respond to pended request until the SC forwards the request in IDOLS. Once completed, the provider returns additions/corrections in IDOLS to the SC who forwards to ODS. Pended request must be resolved within 30 days of the pended date
15. If the Fax attached option is checked by the Provider, does this attachment automatically get forwarded to the SC/CM?
Answer: No. When this option is chosen the Provider should fax information directly to the SC/CM and the SC/CM will then fax it to the PA staff.
16. What happens if a provider submits an ISAR that is incorrect? Answer: The provider can contact the SC/CM as soon as the mistake is discovered. If the ISAR has not be sent on to PA then the SC/CM can either fix the problem if it is small, or reject the ISAR which will send it back to the provider who can then make corrections. Remember, each provider is responsible for the ISARS they submit.
17. How long does it take the newly licensed provider to sign up for IDOLS and receive DELTA access, as the SC needs to have access to the provider in IDOLS in order for service request to be authorized?
Answer: DBHDS will get an updated list from DMAS weekly of all approved and active Providers. This list is placed into IDOLS. The Provider will not be able to access IDOLS or gain DELTA access if not on this list.