

REFERRAL POLICY AND PROCEDURES

Effective Date: 5/1/15

PURPOSE:

To guide the administration of referrals within the Las Vegas TGA's Ryan White Part A Program. It is the intention that appropriate and timely referrals assist clients in accessing and maintaining core medical and supportive services. The intention is for referrals to be completed consistently among all Ryan White Part A funded agencies.

POLICIES:

Referrals are to be completed within the CAREWare database. Faxed referrals are no longer accepted. There are two types of referrals within CAREWare: internal and external. Internal referrals are made between providers within the Ryan White Part A provider network via CAREWare electronic transmittal and upload of scanned referral documents. External referrals are referrals made to non-Ryan White Part A funded agencies and are the responsibility of the referring provider to track or resolve. Ryan White Part A funded agencies are only required to enter in CAREWare internal referrals.

<u>Responsibilities of Provider Making Internal Referrals</u>

It is the responsibility of the referring provider to check client's Ryan White Part A eligibility prior to making any referral. Referring providers are to complete all the required data fields in the CAREWare **Referrals** tab, as well as scan and upload all necessary documentation to the **Referral Documents** tab.

The following fields must be completed in the **Referrals** tab for all internal referrals:

- ☑ Referral Date
- ☑ Type
- ☑ Refer-To Provider
- ☑ Request Service Category Type
- ☑ Referral Class
- ☑ Name of employee making referral
- ☑ Comments from employee making referral

The referring provider must ensure the specific purpose of the referral is clear. **Incomplete or inappropriate referrals may be rejected at the discretion of the provider receiving the referral.** Internal referrals must be documented in CAREWare within 5 days of the client encounter. Any referrals documented in CAREWare more than 5 days from the client encounter must be pre-approved by the grantee office.

Responsibilities of Provider Completing Internal Referral

It is the responsibility of all providers receiving referrals to address all incoming internal

CAREWare referrals in a timely manner. **Incoming Internal Referrals** can be found in the **System Messages** section on the right-hand side of the **Main Menu** screen. Providers completing/receiving referrals must verify client's Ryan White Part A eligibility prior to completing all referrals. Clients shall be contacted by provider completing referral within 5 business days of receiving all necessary referral documents. Clients shall receive an appointment with the receiving agency within 30 days of being contacted.

Providers receiving internal referrals are responsible for updating the **Referral Status** in CAREWare, entering a **Referral Complete Date**, as well as the **Name of employee completing referral**. Referrals are considered complete when an appointment has been scheduled, check has been issued, or other applicable item/service has been prepared.

Providers marking incomplete or inappropriate referrals as "Rejected" must indicate **Name of employee completing referral** and clearly state reason for rejecting referral in the **Comments from employee completing referral** field.

All internal referrals should be resolved, e.g., **Referral Status** changed to "Completed, Lost to follow up, or Rejected," within 30 days. A minimum of three attempts must be made to contact client prior to changing the **Referral Status** to "Lost to follow up."

External Referrals

External referrals made to non-Ryan White Part A providers must be tracked/resolved by the agency making the referral. As with internal referrals, providers have 30 days to mark outgoing external referrals as complete. Additional instructions on entering an external referral can be found in the Ryan White Part A Referral Procedures guide.

For more information on making and completing referrals, please see Ryan White Part A Referral Procedures guide or contact the grantee office.

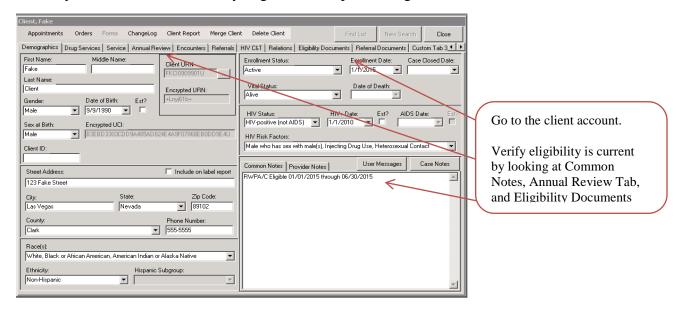
PROCEDURES:

All internal referrals are to be made in CAREWare. This includes sending a CAREWare internal referral and scanning and uploading all applicable referral documents to CAREWare. External referrals can also be entered in CAREWare but are not required. It is up to each agency to decide whether to enter external referrals. The procedures for making internal referrals, completing an internal referral, entering external referrals, and using the outgoing referral queue are detailed below.

Making an Internal Referral

Access client account and verify eligibility

- 1. Log in to CAREWare and go to the account of the client for whom you are making a referral.
- 2. Verify that the client is currently eligible before proceeding.



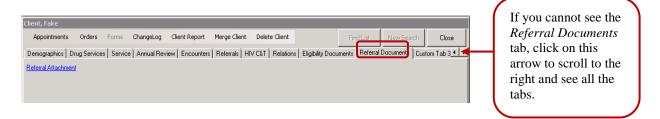
Prepare the Scanned Referral Document Packet

- 3. Only referral-related documents should be scanned and uploaded to the *Referral Documents* tab. Ensure that documents are current and within 5 days of the client encounter. Please consult the agency you are referring to for information on their required referral documents.
- 4. When scanning, all pages must be face up and face the same direction. Make sure any documents with small print, such as ID or insurance cards, are enlarged so that the text is legible.
- 5. Scan all referral documents as one PDF file. CAREWare can only accept PDF files. Clearly label the file with the client name, referral type, and date. For example: "FakeClient_HousingAssistance_04-22-2015"

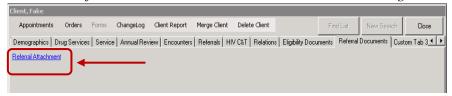
Each scanning and computer system is different. If you have questions on how to scan to your computer, consult with your IT staff.

Upload Scanned Referral Packet to CAREWare

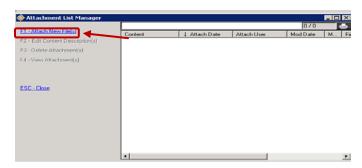
6. When you are ready to upload your file to CAREWare, go to the *Referral Documents* tab. If you cannot see the tab, click on the small arrow to scroll to the right.



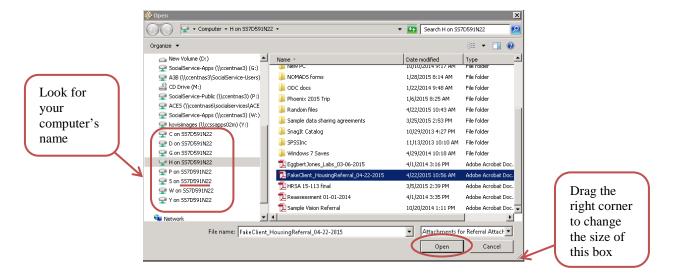
7. Click Referral Attachment and the Attachment List Manager window will appear.



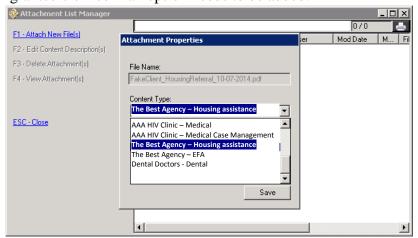
8. Click F1 - Attach New Files in the Attachment List Manager window.



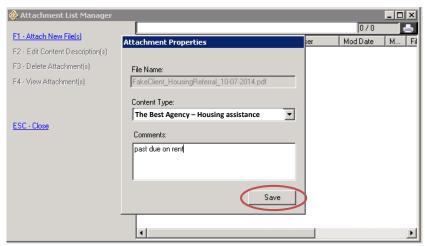
9. A screen with your computer files will appear. Make sure to scroll down to where you see your computer name and folders. Select the file you would like to upload and click *Open*.



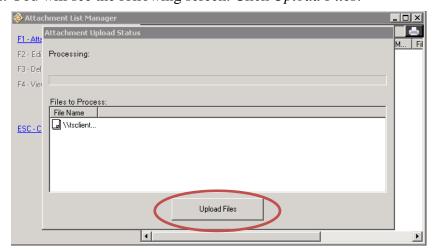
10. The *Attachment Properties* screen will appear. Click on the *Content Type* field and look for the name of the agency you are referring to and the type of service. Please contact the grantee's office if an option needs to be added.



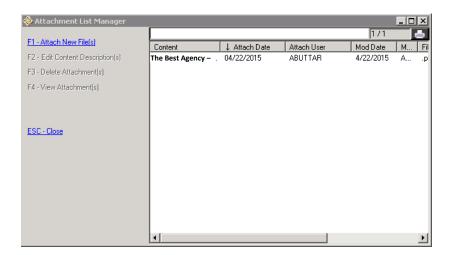
11. Include any important information in the comments field, and click *Save* when you are done.



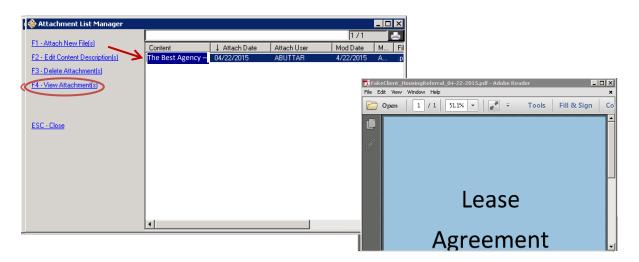
12. You will see the following screen. Click *Upload Files*.



13. When it is done uploading, you will see the screen below.



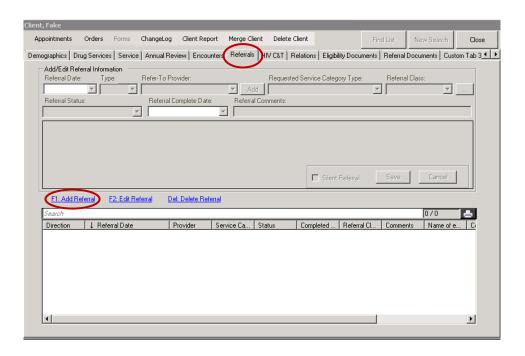
14. Verify that the packet uploaded correctly by selecting the file from the list and then clicking *F4- View Attacments(s)* on the right. The PDF will open.



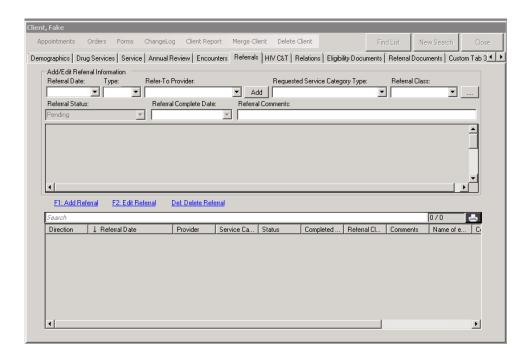
Uploaded documents can only be deleted by the Grantee's office. If a document is uploaded in error, please contact Linda Montgomery to delete.

Send an Internal Referral in CAREWare

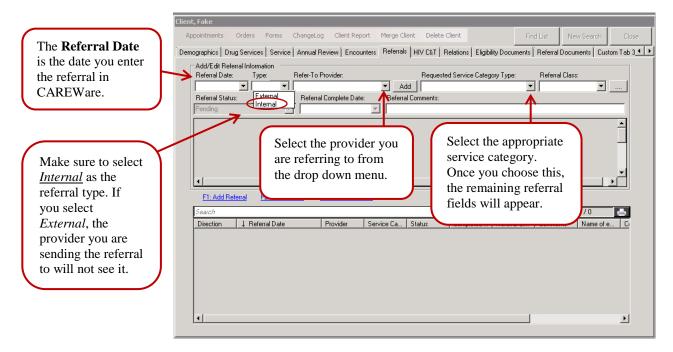
15. After you have uploaded and reviewed your referral document packet, you must complete an <u>internal</u> referral in CAREWare. This notifies the provider that a referral is waiting for them. Click the *Referrals Tab* and then click *F1: Add Referral*.



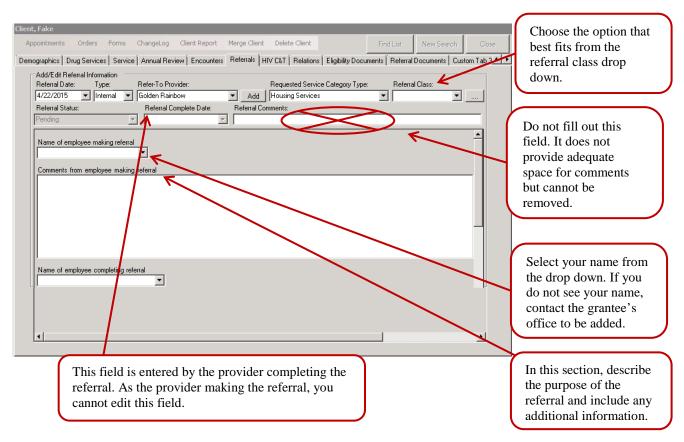
16. The referral fields at the top will be activated. It may look like some fields are missing, but once you select the *Requested Service Category Type*, the additional fields will appear.



Below are descriptions of what to enter for each field.

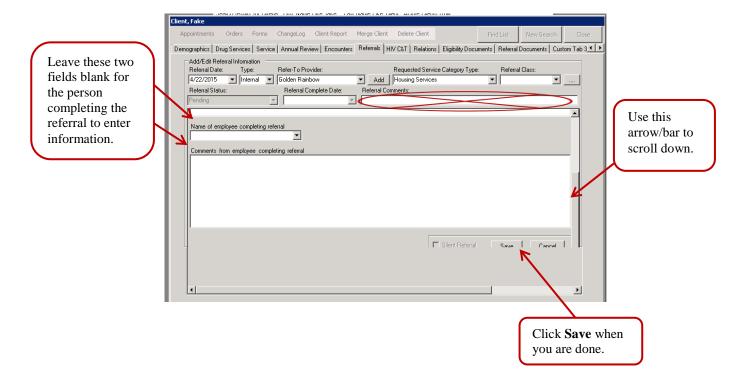


Now that you have selected the service category, the remaining fields will appear.

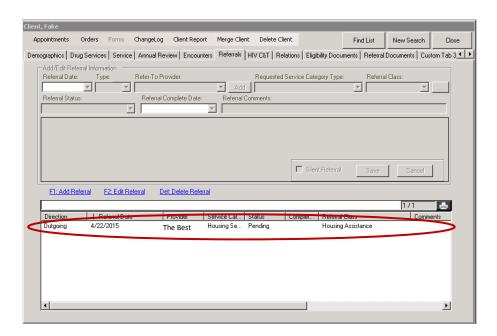


Once you have completed the *Name of employee making referral* and *Comments from employee making referral* fields, use the arrow on the right to scroll down and click *Save*.

Leave the *Name of employee completing referral* and *Comments from employee completing referral* fields blank. The person completing the referral will enter information in these fields.



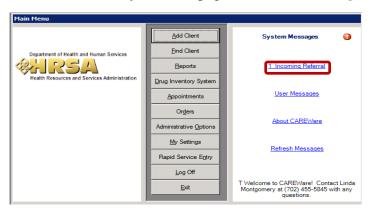
You will see the referral listed at the bottom. If you need to make changes, select the referral and click *F2: Edit Referral*. If you need to delete the referral, contact the grantee's office.



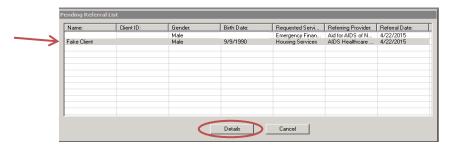
Completing an Internal Referral

Using the Incoming Referral List

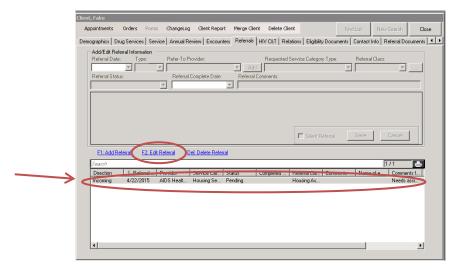
1. If you are a provider who receives referrals, you will use the CAREWare incoming referral list to receive notification of new. On your homepage, click the *Incoming Referrals* button.



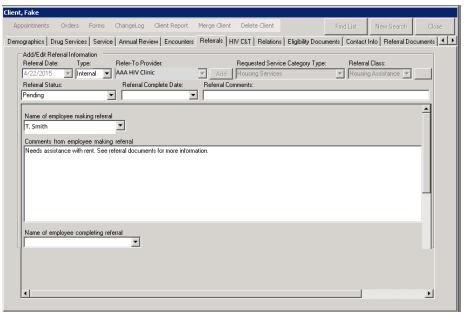
2. This will open the *Pending Referrals List*. Select the client account you want to view and click *Details* at the bottom.



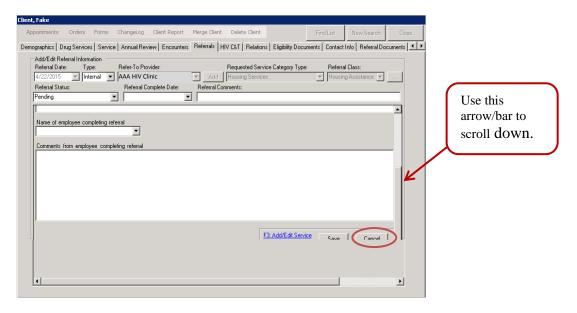
- 3. You will be taken to the *Referrals* tab. Before proceeding, verify that the client's Ryan White eligibility is current. It is the responsibility of both the person making the referral and the person completing the referral to verify eligibility.
- 4. In the *Referrals* tab. Select the referral you want to view and click *F2: Edit Referral* to view more information.



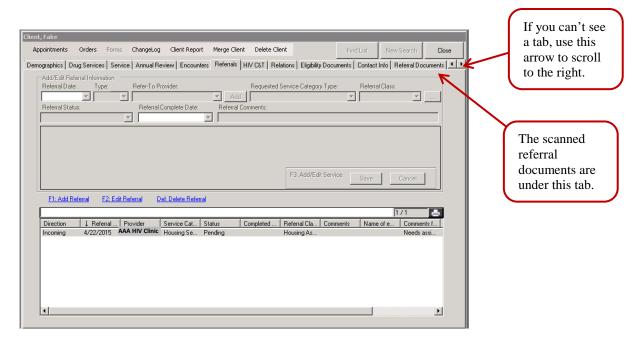
5. View the *Requested Service Category Type*, *Referral Class*, *Name of Employee Making Referral*, and *Comments from employee making referral* fields to get more information and the purpose of the referral.



6. Now that you have some background information, navigate out of the *Referrals* tab by scrolling down and clicking *Cancel* at the bottom.



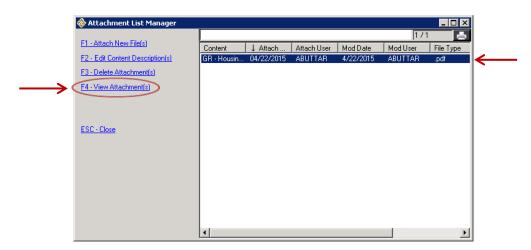
7. You can now navigate to other tabs, such as the *Referral Documents* tab. If you cannot see this tab click on the arrow to the right.



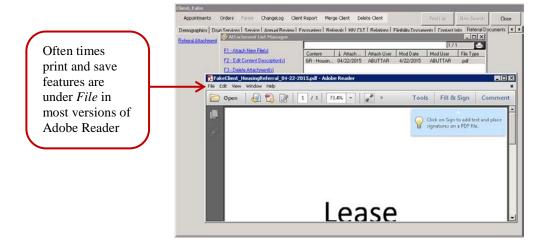
8. In the Referral Documents tab, click Referral Attachment.



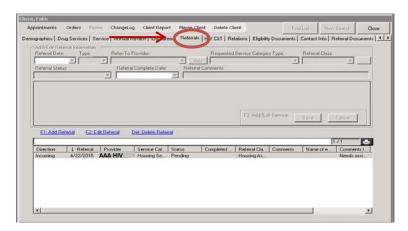
9. The *Attachment List Manager* window will appear. Select the document you would like to view, and click *F4: View Attachments*.



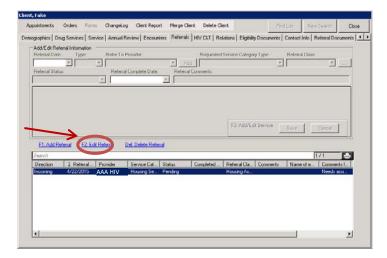
10. The PDF referral packet will appear in a new window. You can print the referral from this screen. If you have problems printing, please contact your agency's IT staff.



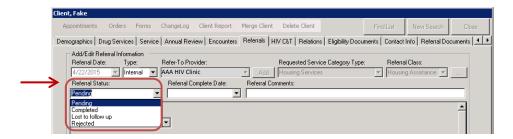
11. Once you review the documents and determine how to follow up on the referral, navigate back to the *Referrals* tab.



12. Select the referral you are working on, and click **F2: Edit Referral**.



13. At the top, update the *Referral Status* and *Referral Complete Date* accordingly. Below are the *Referral Status* definitions along with what to enter for the *Referral Complete Date*.



Pending

- If you are waiting for additional documentation or information, leave the referral as *Pending*. Add dated comments in the *Comments from employee completing referral* field to document steps taken to complete referral.
- Leave the *Referral Complete Date* blank.

Completed

- If you were able to schedule an appointment, issue a check, or prepare the applicable item/service, select *Completed*. This is **not** the date the client comes to the appointment or receives the applicable item. To be considered *Completed* we are only looking at if all the applicable items were prepared for the client. Services entered under the *Service* tab will be used to determine if the client actually received the service.
- For the *Referral Complete Date*, enter the date you prepared all items. This will most likely be different than the date the client actually receives the service.

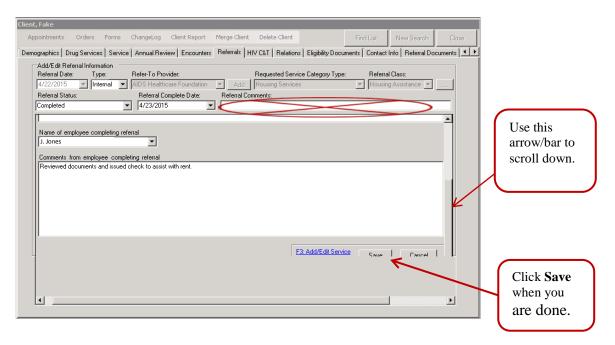
Lost to follow-up

- If you are not able to contact the client or obtain the necessary items to complete a referral within 30 days of the *Referral Date*, select *Lost to follow-up*. A minimum of three attempts must be made to contact the client prior to changing the *Referral Status* to *Lost to follow-up*.
- For the *Referral Complete Date*, enter the date you determined the referral to be lost to follow-up.

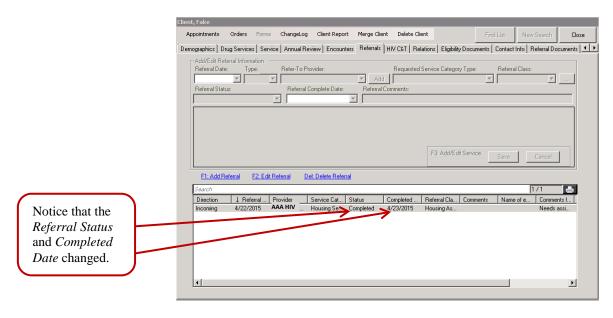
Rejected

- If the referral does not make sense, e.g. a request for a service your agency does not provide, no specific purpose for the referral, or a referral that was entered more than 5 business days after the client encounter, select "Rejected" and in the *Comments from employee completing referral* field document why you rejected the referral.
- For the *Referral Complete Date*, enter the date you rejected the referral.

14. Once you select the *Referral Status*, and enter the *Referral Complete Date* (if applicable), scroll down and enter your name and applicable comments. Remember, do not enter comments in the *Referral Comments* field at the top. Click *Save* at the bottom when you are done.



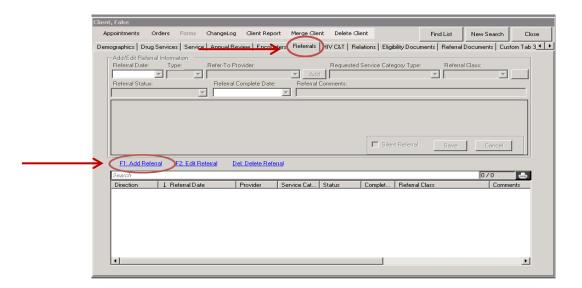
15. The *Referral Status* is now updated, and the provider who sent the referral will be able to access the information you entered. If you left the *Referral Status* as *Pending* remember to go back into CAREWare to update the status.



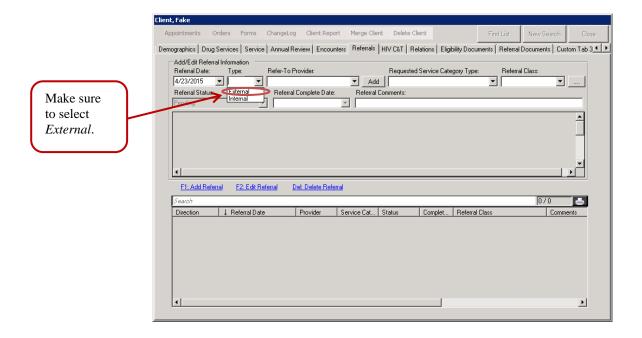
Entering an External Referral

External referrals are a way to track referrals sent to non-Ryan White Part A providers. They do not send any communications to other providers and can only be viewed by your agency. The Ryan White Part A Grantee's office does not require entry of external referrals in CAREWare, and it is the agency's decision whether to enter external referrals. It is your agency's responsibility to resolve all external referrals within 30 days.

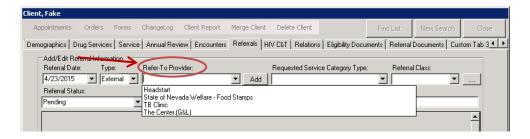
1. Go the Referrals tab and click *F1: Add Referral*.



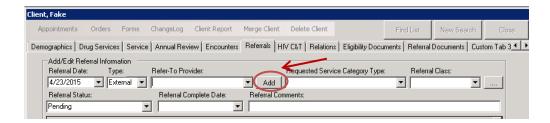
2. Enter the *Referral Date* and then select *External* under type.



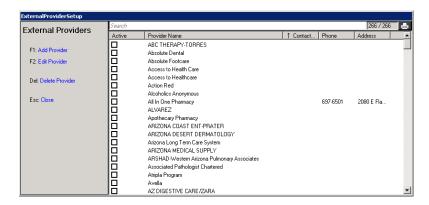
3. Select the provider you sent the referral to from the Refer-To Provider drop down



4. If you do not see the provider in the list, click *Add* to the right to add their name to the list.



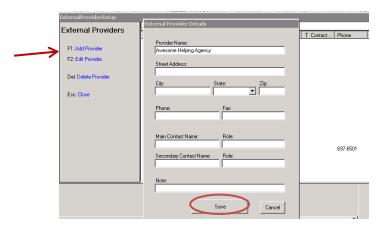
5. The ExternalProviderSetup window will appear.



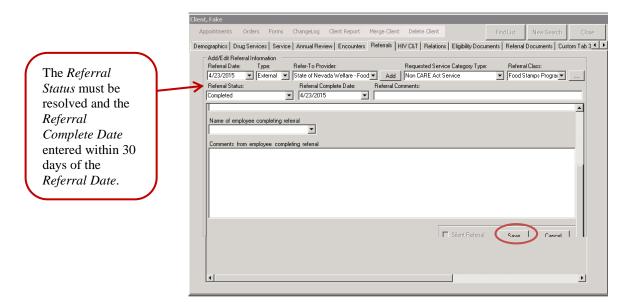
6. Search for the provider in the list by either typing in the top Search field or scrolling down. When you find the provider you are looking for, check the box next to the provider's name and then click *Add Provider*.



7. If you do not see the provider you are looking for, click *F1: Add Provider*, enter the applicable information in the window, and click *Save* when you are done. Double check that the provider is not in the list; they may be there but with a different spelling.



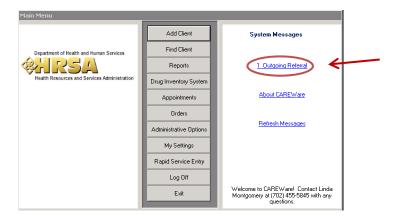
8. Then complete all remaining information as required by your agency's policies and procedures. The Referral Status must be resolved to *Pending*, *Lost to follow-up*, or *Rejected* within 30 days of the *Referral Date*. Scroll down and click *Save* when you are done.



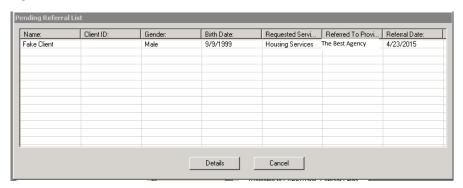
Using the Outgoing Referrals Queue

In the CAREWare home screen, there is a link called *Outgoing Referrals*. As the agency making a referral, this queue can help you identify which referrals are still pending and may need your attention. The *Outing Referrals* queue contains both internal and external referrals.

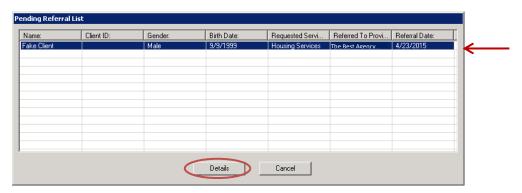
1. Click Outgoing Referral



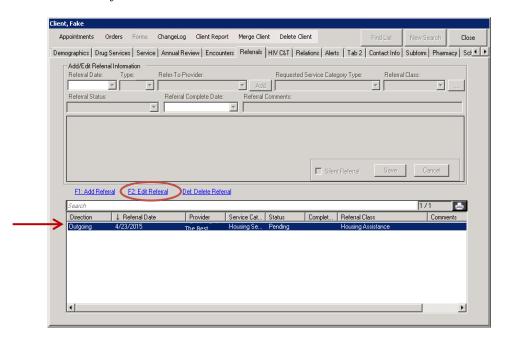
2. The *Pending Referral List* window will appear. The referrals in this list have a referral status of *Pending*.



3. If you would like to view more information on a referral, select it from the list and click *Details*.



4. You will be taken to the client's *Referrals* tab. Click on the referral you would like to view, and click *F2: Edit Referral*.



5. You will be able to see the information in the referral. You can add additional comments and you can scroll down to see comments from the employee completing the referral. If you add additional information, click *Save*, if not click *Cancel*.

