6.08  How to Register a Consumer in the Program Participation System (PPS)

Once the consumer’s eligibility for CRS has been determined, and the service plan packet has been prepared, the care manager will enter their consumer into the Program Participation System (PPS). PPS serves to notify interChange (the Medicaid billing system) that the consumer is being enrolled in CRS. The steps required are quite simple and straightforward, and although this step will require the care manager to gain access to PPS, once that access has been obtained, you will find the system to be very intuitive.

6.09  Gaining Access to PPS

In order to access PPS, you must have a Web Access Management System (WAMS) identification. Most county and tribal care manager staff are likely to already have a WAMS ID, as this was the first step needed to gain access to Wisconsin’s functional screen system (FSIA). If you don’t have a WAMS ID, go to the State of Wisconsin’s “Gateway Page” to apply for one. The Gateway Page can be found at: https://pps.wisconsin.gov/ Click on the link titled “WAMS”, and follow the instructions.

If you already have a WAMS ID, the Gateway Page is also your entry point to gain access to PPS. From the Gateway Page, click on the link titled “PPS – Request Access”. Follow the directions related to completing the access form, and submit the form to your county or tribe’s internet security officer for processing. You will be provided with a user name and password with which to access PPS.

6.10  The PPS Home Page

Once your user name and password have been obtained, you are ready to access PPS. Return to the Gateway Page at: https://pps.wisconsin.gov/. Select “PPS - Production”, and enter your user name and password to log in. You will be taken to the PPS Home Page.
The PPS Home Page consists of a left navigation pane, and also presents a section which contains your most recently accessed participants. If you’re returning to PPS to work with a consumer’s file that you’ve recently accessed, simply click on the magnifying glass icon to re-open the case. You may also search for a consumer if they don’t appear in the main section of the page.

6.11 Handy Functionality – the FSIA to PPS Interface
If you are working in FSIA, and would like to go from that system to PPS to enroll your CRS consumer, simply click on the “Eligibility” link in FSIA’s left navigation pane. The FSIA eligibility page will display. If your consumer is functionally eligible for CRS, the word “yes” will be displayed on the CRS line in the Level of Care Details section. If the word “no” appears on this line, your consumer is not eligible for CRS. Provided that your consumer is displayed as eligible for CRS, you can go directly to PPS simply by clicking the blue hyperlink at the bottom of the page titled “Click here to Create/Add Update this individual in PPS.” Clicking this link will take you to the PPS log on screen. Following a successful log on, you will arrive at a PPS screen which has been pre-populated with your consumer’s information.
6.12 The PPS Individual Summary Page
Once you’ve logged into PPS, your consumer’s information will automatically fill into the Individual Summary page. Verify that the correct consumer has been carried forward into PPS prior to moving on to the next step.

6.13 Adding the Consumer in PPS
As shown above, from the Individual Summary page, select the “Add” button in the Mental Health Participation Information pane. Clicking the Add button will load the Mental Health Participation Page. Select your agency in the Responsible Agency drop down menu. Select “Mental Health Programs from the Category drop down menu. Select Community Recovery Services from the “Program” drop down menu. Then enter the date upon which you are requesting the CRS services to begin. When these steps are complete, select “Return”.

Select the “Add” Button
6.14 Verifying Medicaid Eligibility and/or Living Arrangement

Depending upon your consumer’s Medical Status or “MedStat” code, you may be asked to verify that they are eligible for Medicaid, and/or that they are in an allowed living arrangement. This should happen only rarely, but there are a few MedStat codes that may have eligibility criteria that allow for a higher income level than CRS, or perhaps a living arrangement not included in those allowed for CRS. On these occasions, the Medicaid Validation Results box will display. Simply verify your consumer’s income and/or living arrangement as requested by the dialog box(es). Work with your county or tribe’s Income Maintenance staff to make an accurate verification of these important criteria. Select “Return” or “Next” once you’ve supplied the requested information. At this point, your role in entering the consumer into PPS is complete. Please submit the consumer’s Service Plan packet for review.
6.15 Final PPS View Following Successful Submission

The illustration that follows shows the PPS screen that you will see after you’ve successfully completed the process of entering the consumer into PPS. Please note that clicking on the “Next” button will simply refresh the page, and does not take you out of this case file’s view. To continue working in PPS with the same or another consumer, please use the left navigation pane. If you’re work is complete, simply exit the system.
6.16 The State Approval Process

Upon receipt of the consumer’s service plan packet, the state’s Quality Assurance contractor will begin its review process. Service plan packets are reviewed in the order that they are received, and the review process will generally begin no later than one week following receipt of the consumer’s service plan packet. The time necessary to review a service plan packet can be highly variable, and much depends upon county and tribal care manager’s responding to questions posed by the reviewers in a timely manner. Following the review process, the Quality Assurance contractor reviews the service plan packet with the CRS Coordinator, who provides the final approval. The county or tribe is notified in writing of the outcome of the review process, but in the intervening time between submitting the service plan packet and approval notification, the care manager may log into PPS to check on the status of their consumer’s application. To the right of the magnifying glass icon in the Mental Health Participation Information pane is the State Decision column. A blue question mark will display until the state has made its decision on the consumer’s enrollment. The blue question mark will be replaced by a green check mark if the enrollment is approved. A red “X” indicates that the enrollment has been denied.

The magnifying glass icon to the right of the Health Participation Information pane allows you to view the information that has been entered for each line.

Following the approval of the service plan packet, the CRS Coordinator updates PPS to reflect such approval. The CRS Coordinator logs into PPS under a special state log in, allowing access to consumer files across all counties and Tribes. This access is of a limited scope, but allows the CRS Coordinator to approve or deny CRS consumer enrollments based upon the outcome of the review process.
process, specify the start date of CRS services, and indicate (based upon the service plan) which CRS services are being approved for the consumer.

6.19 End-Dating a CRS Episode
In the event that the care manager needs to end-date the CRS episode (an example might be that the consumer has moved to a different jurisdiction – state or county – and is no longer the responsibility of the originating county), simply log into PPS and access your consumer’s record. Select the open CRS episode, and add the end-date and end-date reason in the specified pane. Click the “Return” or “Next” button and exit PPS if your work is complete. PPS will update interChange (the Medicaid system that pays claims), and a notice will be generated by PPS.

6.20 Where to go for Help
If you have any questions about the above steps, please contact the CRS Coordinator in the Division of Mental Health and Substance Abuse Services the telephone number is (608)267-9864. Or via email at michaelb.jones@wisconsin.gov.