WISCONSIN DEPARTMENT OF

HEALTH SERVICES

DIVISION OF LONG TERM CARE

Licensed Bed Assessment e-Payment (LBAP)

User Guide

Last updated on 4/11/2013

Introduction

The Licensed Bed Assessment e-Payment (LBAP) is a web based application which allows the nursing homes to make electronic check payments. This payment method is in addition to the current paper check payment process. It allows you to combine payments due for multiple licenses and multiple months.

To use the Licensed Bed Assessment e-Payment (LBAP) program:

Sign Up to use the LBAP Application [screen 3]

1. Access LBAP via the Forward Health web site: https://www.forwardhealth.wi.gov/WIPortal/Default.aspx.
2. Create a WAMS ID unless you already have one.
3. Contact the LBAP application administrator at DLTC (Gregory.Leighty@dhs.wisconsin.gov) and provide your WAMS ID (not the password).
4. The DLTC administrator will inform you that you are granted access to LBAP.

Create/Edit a Payment Order

1. Access LBAP via the Forward Health web site: https://www.forwardhealth.wi.gov/WIPortal/Default.aspx.
2. Log In through the Web Access Management System (WAMS). [screen 5]
3. Use the DLTC e-Pay Payment Order Screens to Create/Edit a payment for a License. [screen 6]

Make an e-Check Payment [screen 13]

1. Select the "Make Payment" button on the DLTC Make e-Payment Instruction screen. [screen 12]
2. In Wisconsin's e-Check Screens verify payment amount and provide the necessary bank routing and account information.
3. The payment session is complete with a Confirmation number [screen 17] and you are returned to DLTC's e-Payment confirmation page. [screen 18]

This document will walk you through the various steps of this payment process.

1. **Go to the Wisconsin ForwardHealth Portal:** https://www.forwardhealth.wi.gov/WIPortal/Default.aspx.

wisconsin.gov home | state agencies | subject directory | department of health services

ForwardHealth
Wisconsin serving you

Report Fraud | Search

Welcome » December 3, 2012 11:20 AM
Login

Providers

- Register for E-mail Subscription
- Provider-specific Resources
- Become a Provider
- Online Handbooks
- Fee Schedules
- Trainings
- Wisconsin Administrative Code
- ForwardHealth Enrollment Data
- Health Care Enrollment
- Provider Recertification
- Certification Tracking Search

Welcome to the ForwardHealth Portal

The ForwardHealth Portal serves as the interface to ForwardHealth interChange, the new Medicaid Management Information System for the state of Wisconsin. Through this portal, providers, managed care organizations, partners, and trading partners can electronically and securely submit, manage, and maintain health records for members under their care. This Portal also provides users with access to the current health care information available.

Members

- Member Information
- Find a Provider
- Member Contacts

Partners

- Find a Provider
- Related Programs and Services

Trading Partners

- Trading Partner Profile
- PES
- Companion Guides

Providers | **Managed Care Organization** | **Partners** | **Trading Partners** | **Members**

. Bed Assessment e-Payment

(LBAP web link)

2. **Click on the LBAP web link.**

3. Register for the LBAP Application.

You must follow these steps if you are not already a registered LBAP user:

- Create a WAMS ID (skip this step if you already have one).
- Request Access to LBAP and identify all licenses associated with your WAMS ID.

WISCONSIN DEPARTMENT OF HEALTH SERVICES

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Home

Make a Payment

Request a WAMS ID

Contact

Monthly Licensed Bed Assessment Program

Make a Bed Assessment Payment Now!

Prior to using the e-Payment option for paying bed assessments for the first time you will need to:

- Obtain a Wisconsin "Web Access Management System" (WAMS) ID, and
- Request access to the e-Payment System

Don't have a WAMS ID?

1. Request an ID and Password
   - Follow the directions included in the confirmation email
2. Activate your Account
   - Click on the account activation link (provided in the email)
   - Log in with your new User ID and Password to activate the account

(Create a WAMS ID)

Request e-Payment System Access

(Request access to LBAP)

Send an email with your WAMS ID and the facility license numbers for which payments will be made for the bed assessment to Gregory.Leighty@dhs.wisconsin.gov.

For additional help or questions regarding e-Payment issues, contact Greg Leighty at 608-266-9746.

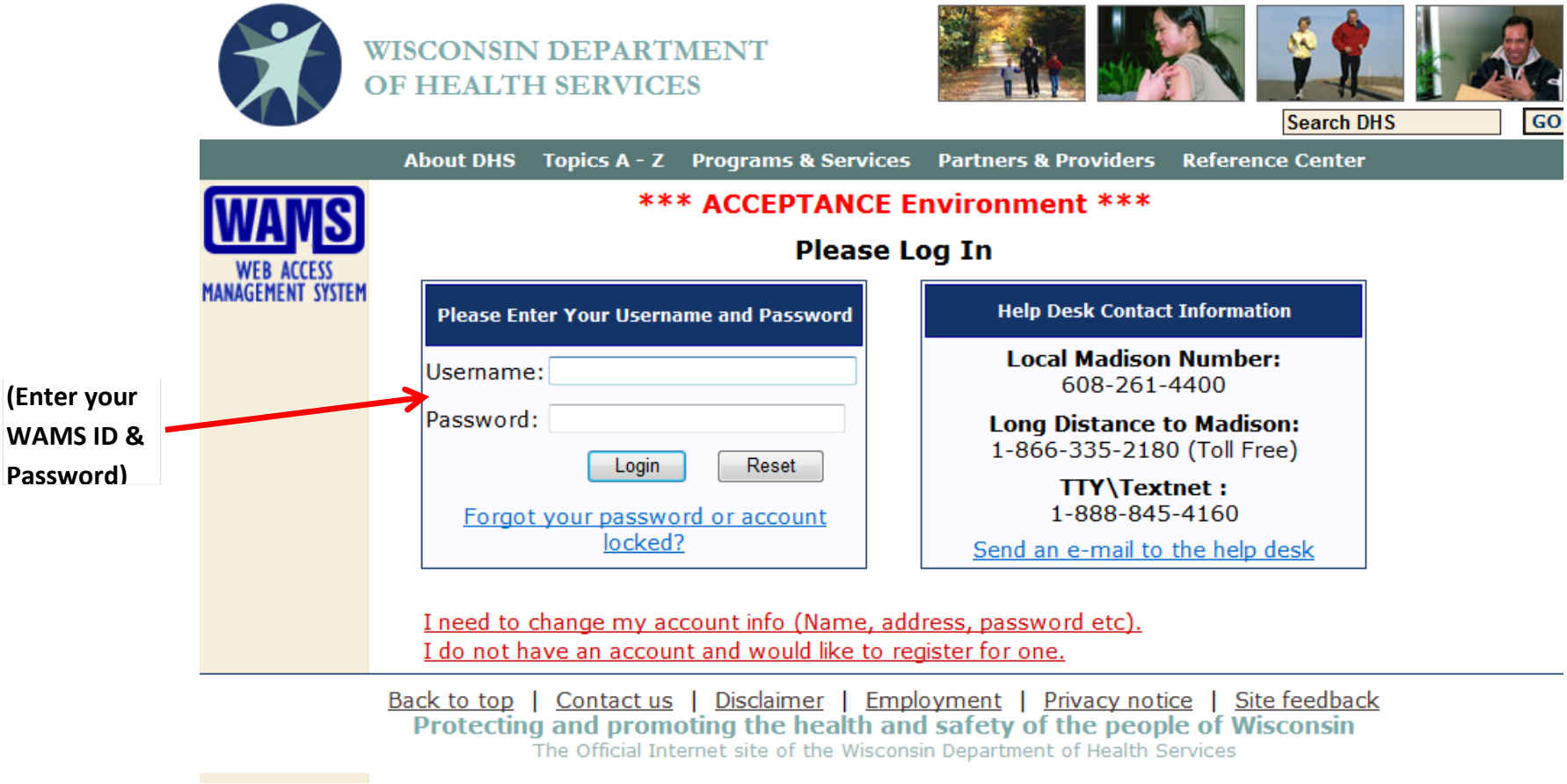
4. Create/Edit a Payment Order.

Now that you are a registered LBAP user you can log into the system.

- Click on “Make a Bed Assessment Payment Now” button.

5. Log into the Application

- You must enter your WAMS ID and password to enter the secure site.



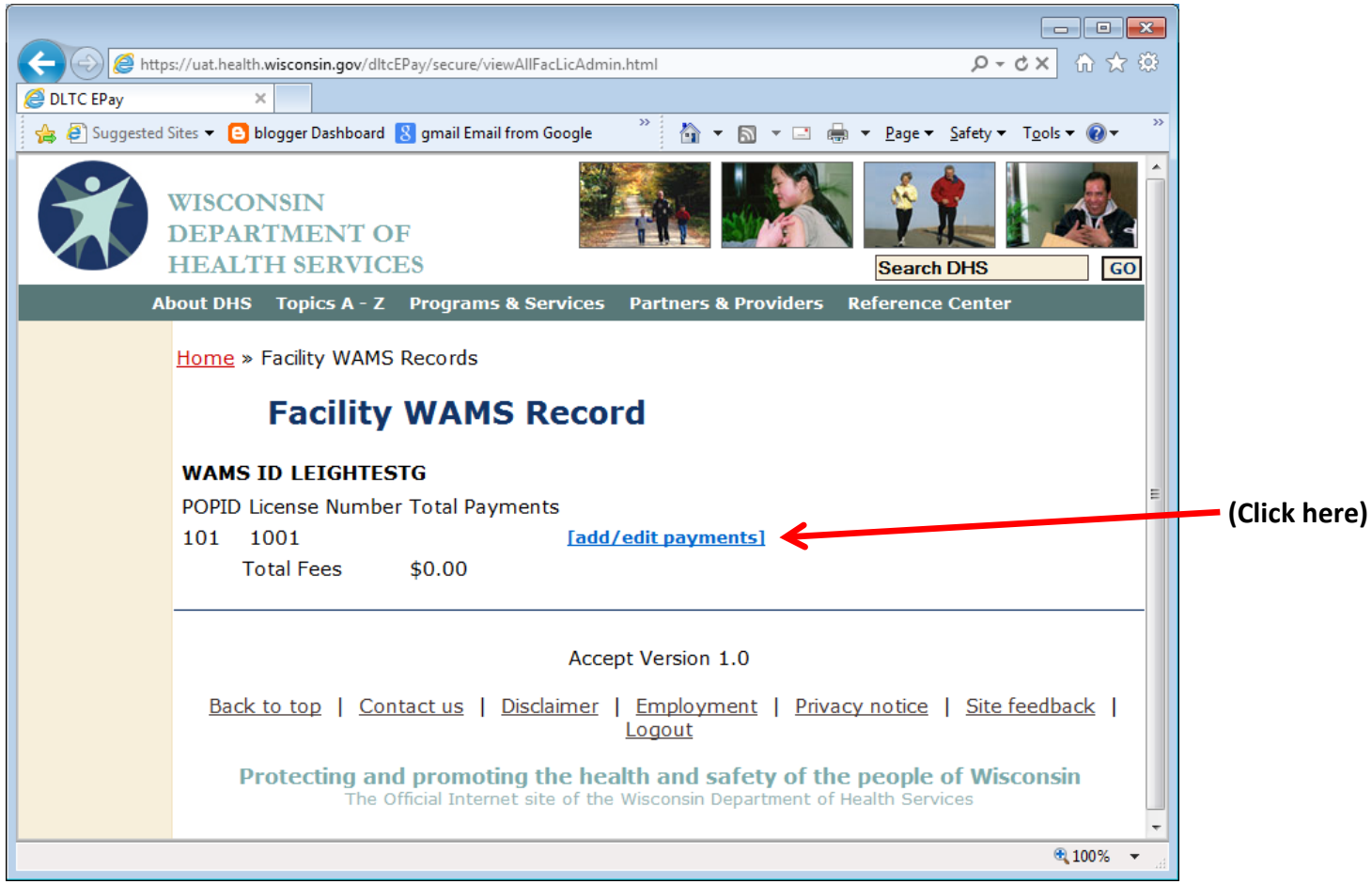
6. Begin an e-Payment Order session.

You are now into the 1st LBAP application page.

- Click on “Pay for Facility License” to add or edit a payment for each registered licenses under your WAMS ID.

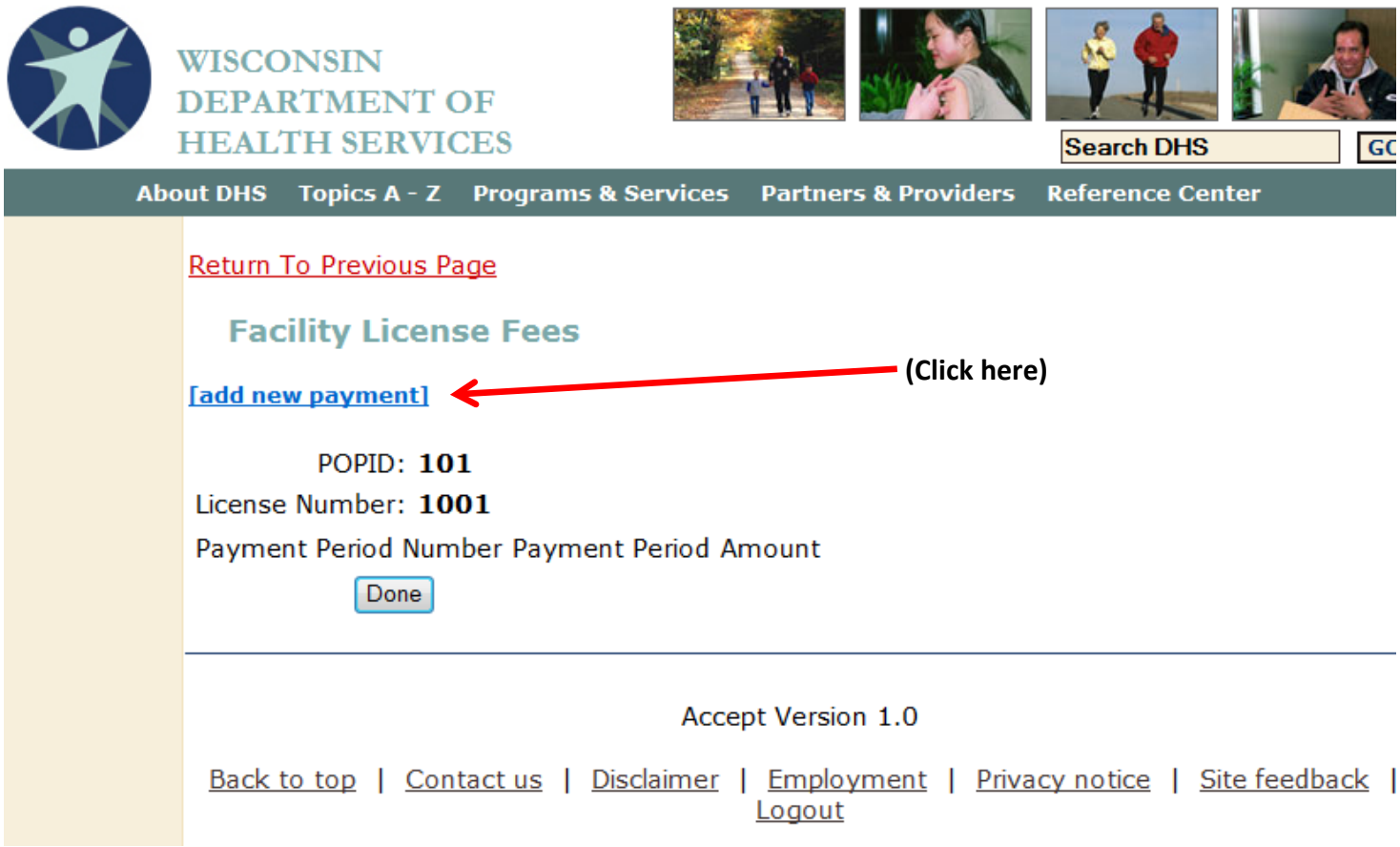
7. Create a single payment order for any number of licenses and invoice periods.

- For each license, click on “Add/Edit payments” to edit the payments associated with the license.



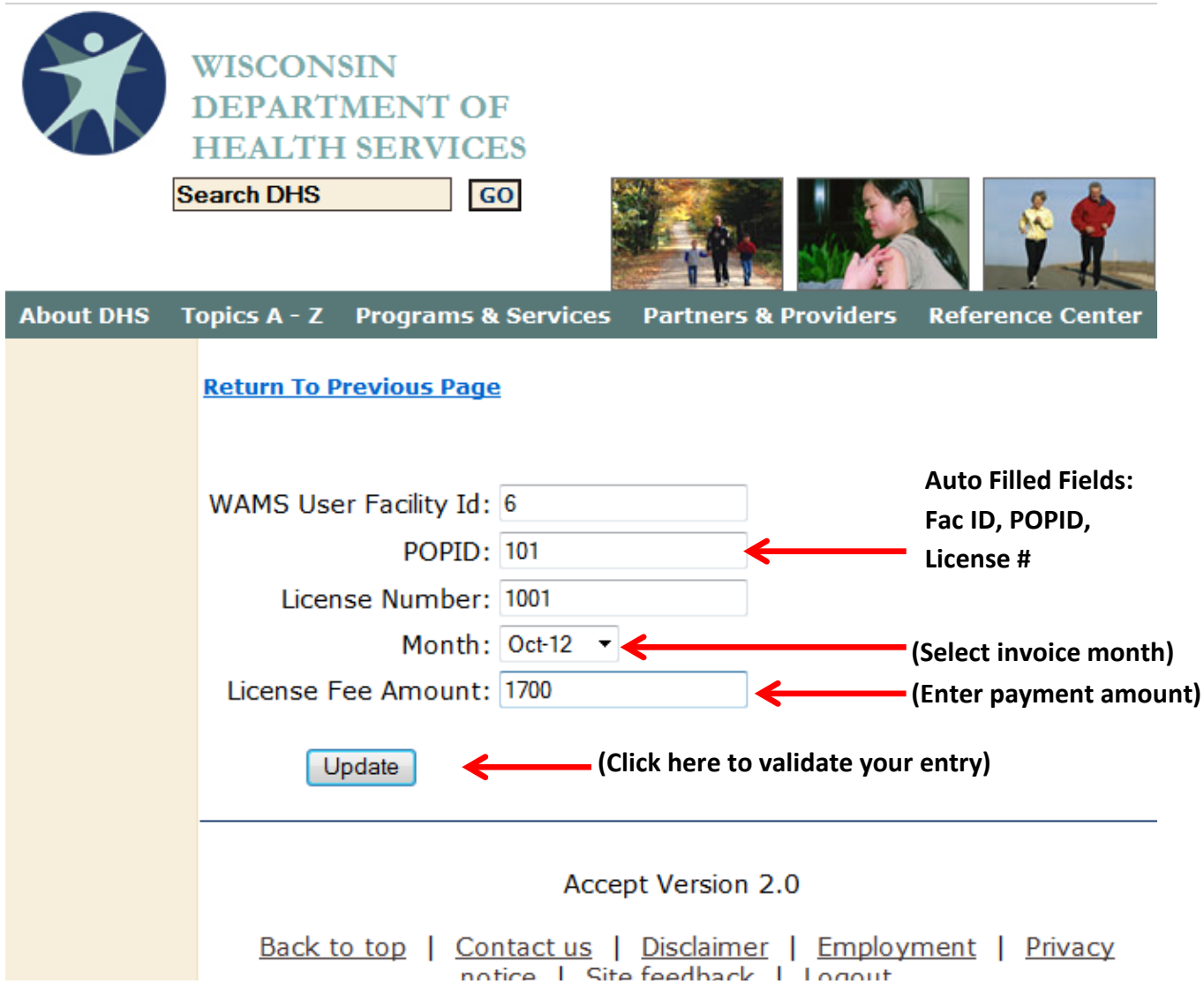
8. Click on "Add new payment" to set up or edit a payment for a single license number.

- A single payment **order** can be made up of multiple license numbers for multiple periods.



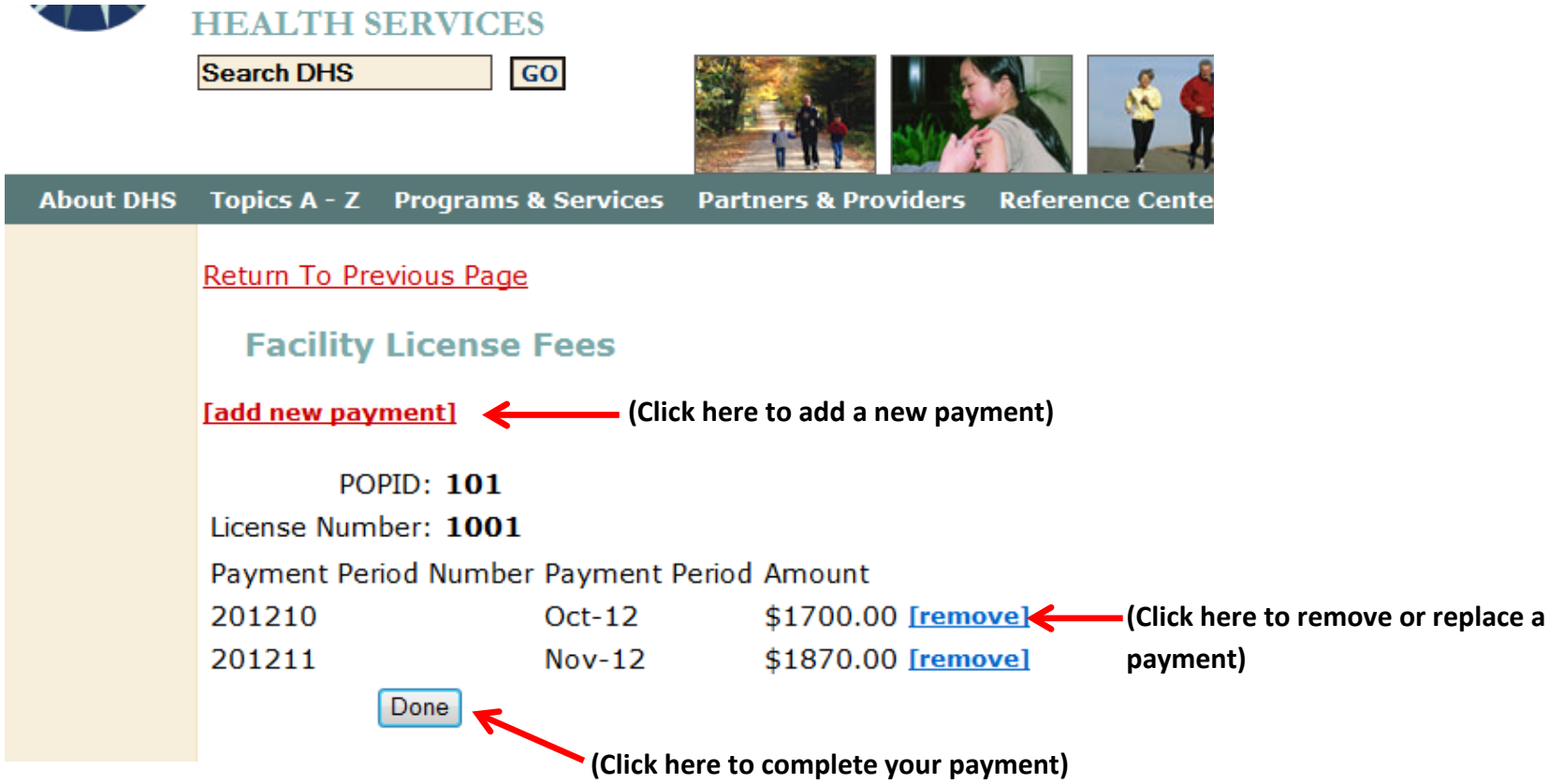
9. Enter the payment information associated the license then click "Update" to validate your entry.

- Payment must be entered separately for each month.



10. End or Continue Payment entry payment session for a License #.

- Each payment entry is displayed on a separate line.
- Click on “Add new payment” if you want to enter another payment.
- Click on “Remove” to remove an entry.
- Click on “Done” to complete your payment.



11. End or Continue Payment entry payment session for a WAMS ID.

- You will be presented with a final payment screen. The screen summarizes the total amount in the payment order.
- If no more additional payment entries or edits are required click on “Update and Pay” to complete the Payment Order.
- If you want to update a payment entry click on “add/edit payments.”

Home » Facility WAMS Records

Facility WAMS Record

WAMS ID LEIGHGC

POPID	License Number	Facility Name	Total Payments	
101	1001	TEST	$3750.00	[add/remove payments]
	Total Payment Order		$3750.00	

(Click here to update a payment)

Important thoughts before clicking [Update and Pay]

- Corrections to payment orders are not possible beyond this point.
  - Please Review and make payment changes prior to clicking [Update and Pay].
- The Payment Order amount **will not be paid unless** all steps beyond [Update and Pay] are completed and a confirmation number is emailed to you.

Update and Pay

(Click here to complete your

12. Read eCheck instructions and make payment if appropriate.

- The last screen prior to making an actual eCheck payment for an assessment payment order.
- Use the **back arrow** to return to Facility WAMS Record Screen to make edits if necessary.
- Click the [Make Payment] to pay the Payment Order Total amount for WAMS ID listed on this screen. This opens the State of Wisconsin's e-Payment Services Screen.

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Total Payment Order $3750.00

WAMS ID LEIGHGC

POPID	License Number	Facility Name	Total Payments
101	1001	TEST	$3750.00
Total Payment Order		$3750.00	

Read the following instructions before continuing

TO PAY TOTAL PAYMENT ORDER BY eCHECK

- Please Print this page for your records.
- Click [Make Payment] to pay the total payment order amount displayed above
- An eCheck Payment screen from State of Wisconsin e-Payment Services will open in a separate window. Complete all required information
- A payment confirmation number is provided on the Payment Confirmation Page if your payment is accepted.
- You will receive a payment confirmation email from State of Wisconsin e-Payment Services from noreply@epymtservice.com.

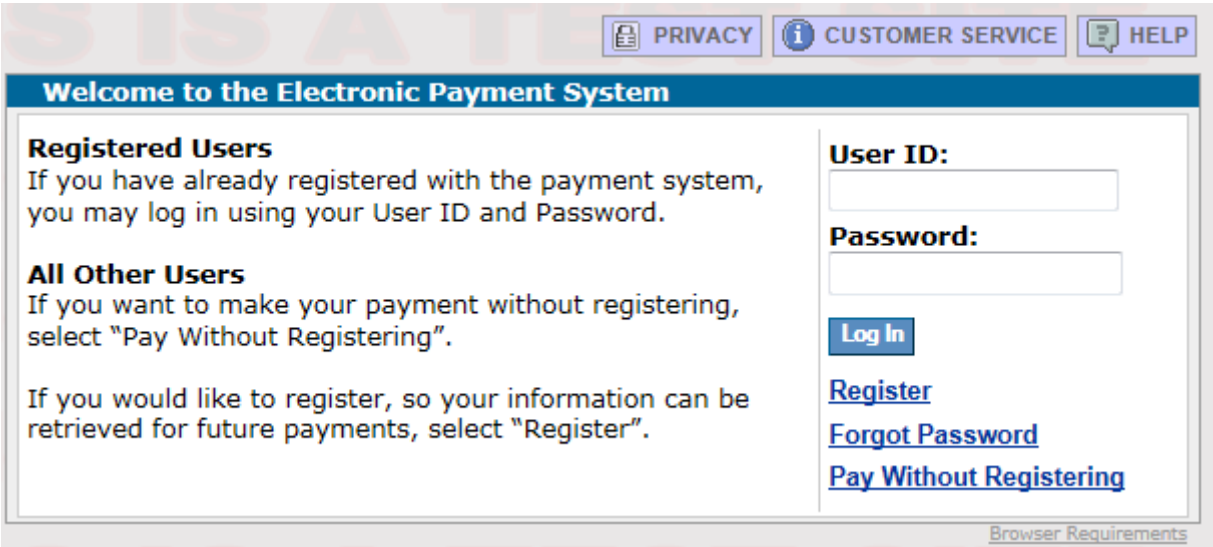
Important Reminder- The Bed Assessment Payment Order has not been paid if the eCheck process is not completed fully and a confirmation message is not emailed to you.

Make Payment

(Click Make Payment after reading the instructions)

13. "Welcome to the Electronic Payment System" Screen

- The first eCheck screen provides an option to Register your facility's Bank Account information for future use.
    - Registering will save re-entering bank account information for each e-payment order session.
- Screen Options
    i. Log in with a registered User ID and Password
    ii. Register for the 1st time
    iii. Pay Without Registering



14. User Registration Screen appears if Registering for the first time.

- Fill in and submit the *Required information to receive the “Registration Complete” message.
- Click [Continue] in the Registration Complete screen to complete the eCheck payment process.

User Registration

*Required Field

PAYOR IDENTIFICATION

User ID:* BartSimpson 6-16 characters

Password:* •••••••• 6-12 characters, at least one letter and one number

Re-Enter Password:* ••••••••

PAYOR PROFILE

First Name:* Bart

Last Name:* Simpson

Company Name:

Street Address 1:* 123 Easy St

Street Address 2:

City/Town:* Madison

State/Province/Region:* WI

Zip/Postal Code:* 53701

Country:* USA

E-mail Address:

Phone Number:* 266-9846

Shared Secret Question:* In what city were you born?

Shared Secret Answer:* Madison

Submit Cancel

Registration Complete

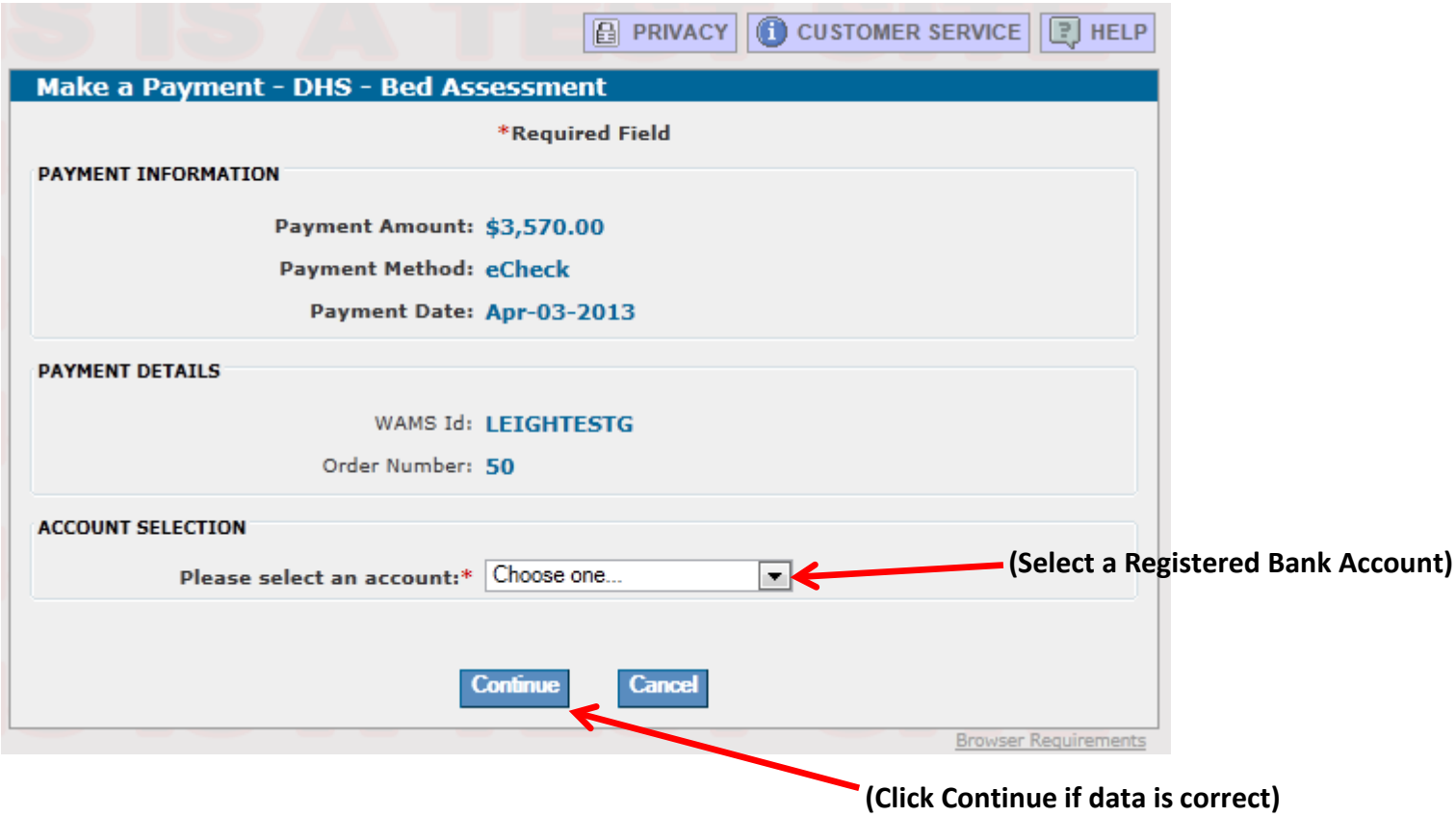
Thank you for registering. You are now logged in to the system. Please make a note of your User ID and Password for the next time you visit the payment system.

Continue

Browser Requirements

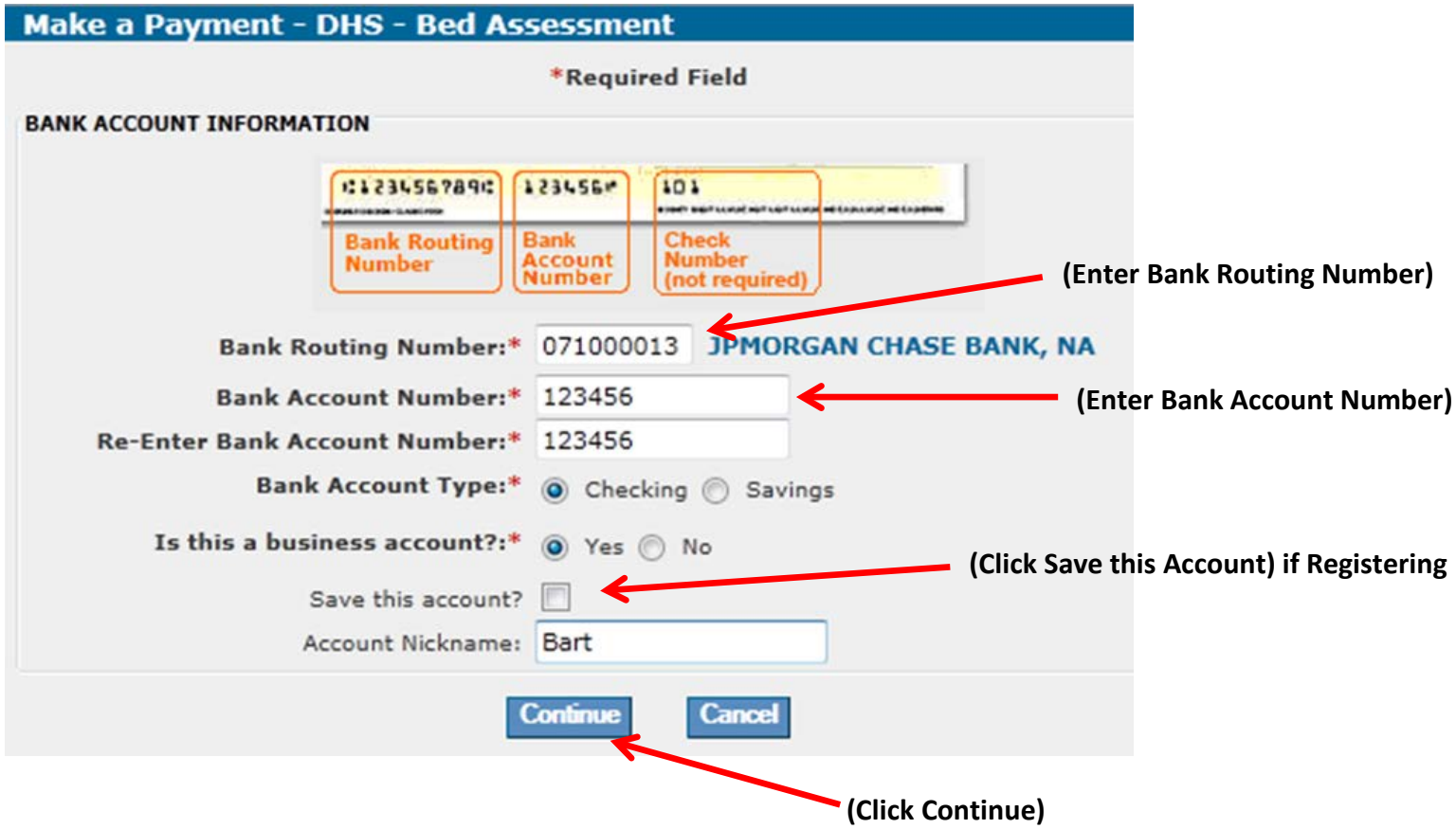
15. Review eCheck payment order .

- If a Registered user select a registered account in the “Account Selection” drop box and click [Continue] to complete the eCheck payment process.
- Non Registered users just click [Continue] to complete the eCheck payment process or
- Click Cancel to end the user session.



16. Enter required Bank Account Information

- Users are required to provide this information. One time for Registered Users.
- Click [Continue] or [Cancel] to exit eCheck session.



17. Enter required Non Registered Contact Information.

- This screen appears for Non Registered users only.
- Enter the *Required User information and click [Continue].

State of Wisconsin
e-Payment Services

PRIVACY | CUSTOMER SERVICE | HELP

Contact Information

*Required Field

CONTACT INFORMATION

First Name:*	Tom
Last Name:*	Edison
Company Name:	
Phone Number:*	608-999-9999
E-mail Address:*	Tom.Edison@gmail.com
Street Address 1:*	1 Mifflin St
Street Address 2:	
City/Town:*	Madison
State/Province/Region:*	WI
Zip/Postal Code:*	53703
Country:*	USA

BECOME A REGISTERED USER

User ID:	LeighTestg 6-16 characters
Password:	•••••••••••• 6-12 characters, at least one letter and one number
Re-Enter Password:	••••••••••••
Shared Secret Question:	In what city were you born?
Shared Secret Answer:	New York
Save Registration?	☑

Continue Cancel

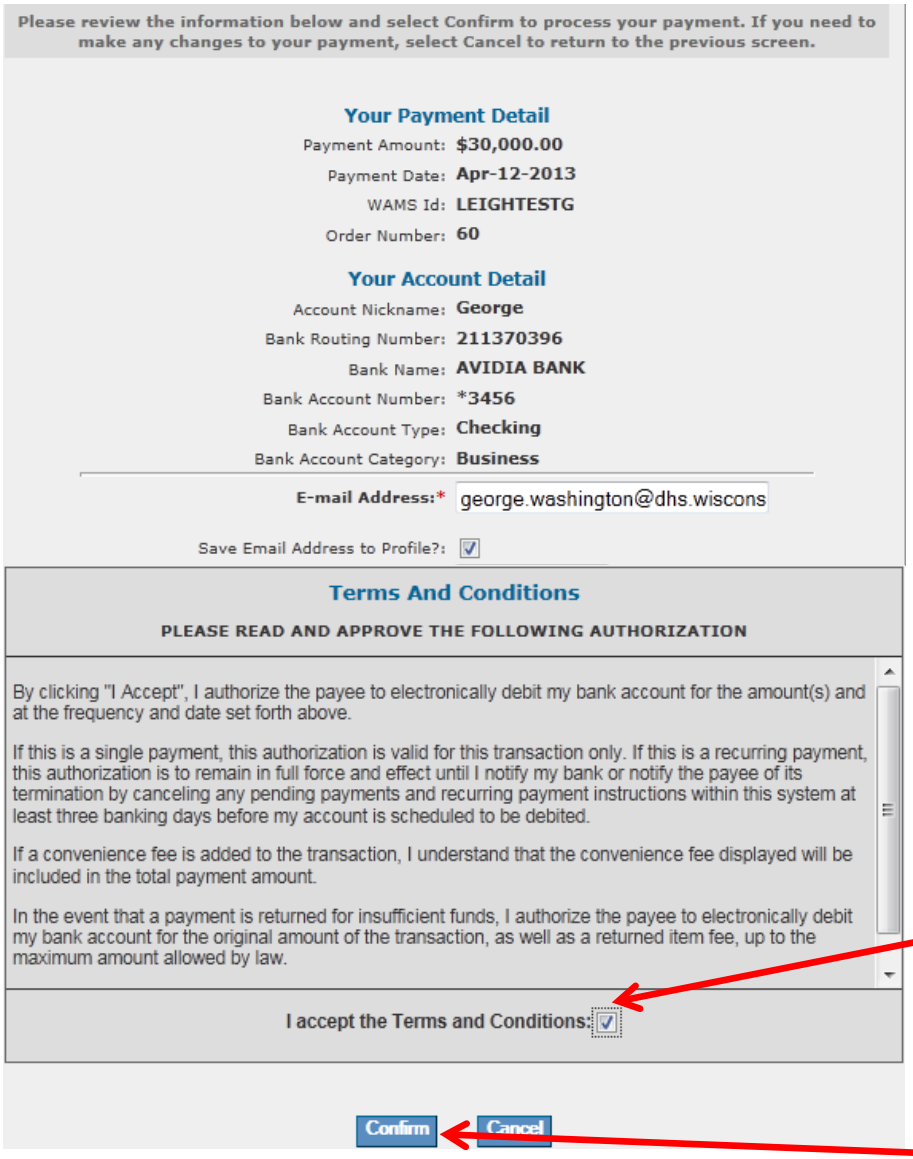
(Required Information for eCheck Payment)

(2nd Optional Chance to "Become a Registered User")

- Registering at this point will require Bank Account information at next login. But it will be available for future use from that point forward.

18. Accept Terms and Conditions to make eCheck payment.

- Review Detail, Terms and Conditions, Check the Acceptance box, and press Confirm to complete screen.

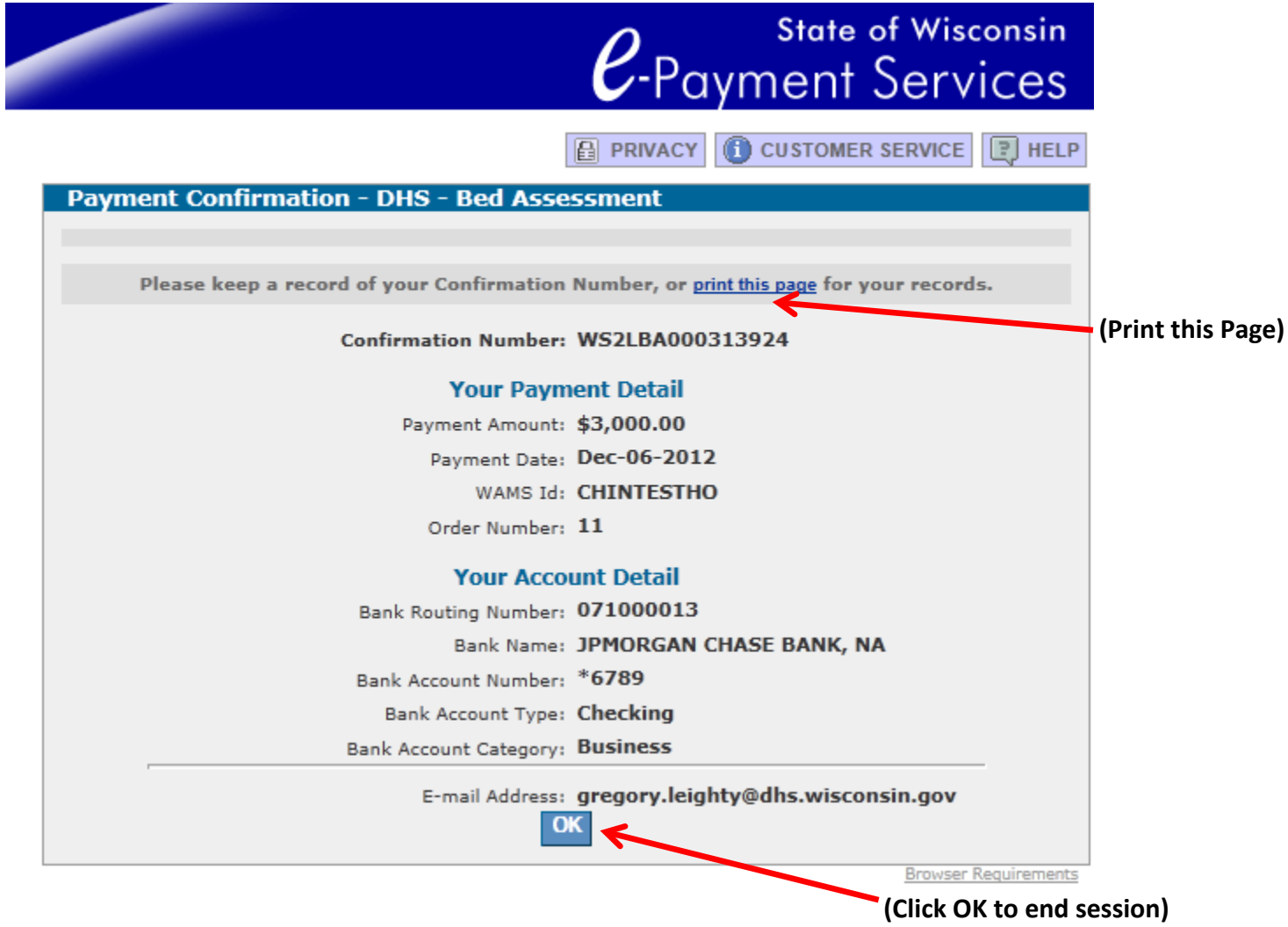


(Check Box to Accept)

(Click Confirm to continue)

19. Make note of the Confirmation Number for the eCheck payment.

- Click the optional [Print this page] and then Click [OK] to end the eCheck payment process and be returned to the DLTC LBAP e-Pay application confirmation screen.



20. You can now safely shut down the computer or application.

- This last screen confirms that you are successfully logged off the e-Payment application.