How to Track Service Delivered Entries through the Submission/Approval process in eXPRS
(Abridged for PSW Providers)
(updated 3/21/2018)

PSW providers providers who have access to eXPRS to enter their own Service Delivered (SD) billing entries are able to track those SD billing entries to see when they were reviewed/approved for payment.

In order to receive timely payments for work completed, it is critical for PSW providers to make sure their SD billing entries are entered and submitted in eXPRS AND have submitted the required timesheet and progress notes documentation to the appropriate CDDP/Brokerage or CIIS Program within the cut off timelines.

<table>
<thead>
<tr>
<th>Pay Period</th>
<th>SDs entered/submitted in eXPRS and timesheets turned in</th>
</tr>
</thead>
<tbody>
<tr>
<td>1st – 15th</td>
<td>3 business days prior to the 23rd of that month.</td>
</tr>
<tr>
<td>16th – end of month</td>
<td>3 business days prior to the 8th of the next month.</td>
</tr>
</tbody>
</table>

Please refer to the PSW Payroll Calendar on the eXPRS Help Menu for specific dates.

**Key timeline points to remember:**

- A PSW’s SD billings must be created/submitted in eXPRS to pending status with signed timesheets turned in to the CDDP/Brokerage/CIIS Program by the PSW cutoff date (see above).
  - Entry/timesheet submissions that do not make a cut-off date can be processed in up-coming payment cycles, if moved from pending to approved status by that cycle’s cut-off date.

- SDs and timesheets must be reviewed/approved and moved from pending to approved status by the CDDP, Brokerage or CIIS program before the payroll cycle runs in eXPRS to be included for payment. CDDP/Brokerage/CIIS Program staff have 3 business days from the PSW submission cut off date to do this review.
• Only SDs that are in **approved** status by the time the aggregation cycle runs will be included in that cycle for payment. SDs that are submitted/reviewed and moved to **approved** after the cycle runs must wait for the next (or a future) payroll payment cycle process.

**To Track your Service Delivered Entries in eXPRS:**

1. Login in to eXPRS.

2. From the left-hand, navigational menu, click on **View Service Delivered Entries**. This will take you to the **View Service Delivered** page.

3. Once in the **View Service Delivered** page, users can enter criteria needed in the corresponding fields to search for a list of **Service Delivered** entries.
At least one piece of search criteria is required to successfully search. The more criteria you enter the more specific or narrow your search results will return.

**PRO TIP:** PSW providers only need to search using a date range that applies to the billings being searched. The date range defaults to the current calendar month, but users can change the date range, as needed.

With the search criteria entered or adjusted, click **Find** to get a list of service delivered entries. See example on the next page.
4. The results list of any SD billing entries that match the search criteria will be returned below the search fields.

<table>
<thead>
<tr>
<th>SPA ID</th>
<th>Auth Status</th>
<th>Client Name</th>
<th>Client ICN</th>
<th>SD Status</th>
<th>Claim ICN</th>
</tr>
</thead>
<tbody>
<tr>
<td>2E</td>
<td>Accepted</td>
<td>Last, First</td>
<td>Sam PSW</td>
<td>140</td>
<td>OR004</td>
</tr>
<tr>
<td>J6</td>
<td>Accepted</td>
<td>Last, First</td>
<td>lamin PSW</td>
<td>149</td>
<td>UN520</td>
</tr>
<tr>
<td>J1</td>
<td>Accepted</td>
<td>Last, First</td>
<td>san PSW</td>
<td>149</td>
<td>UN520</td>
</tr>
<tr>
<td>30</td>
<td>Accepted</td>
<td>Last, First</td>
<td>sani PSW</td>
<td>149</td>
<td>OR520</td>
</tr>
<tr>
<td>30</td>
<td>Accepted</td>
<td>Last, First</td>
<td>san PSW</td>
<td>149</td>
<td>OR520</td>
</tr>
<tr>
<td>35</td>
<td>Accepted</td>
<td>Last, First</td>
<td>san PSW</td>
<td>149</td>
<td>OR520</td>
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<td>Last, First</td>
<td>sani PSW</td>
<td>149</td>
<td>UN520</td>
</tr>
</tbody>
</table>

5. To determine where billing entries are in the review process flow, look at the information in the far 2 right columns of the results list for the billings; the **SD Status** and **Claim ICN** columns. The information displayed in these columns will give users information on the status of the corresponding SD billing entry and where it is in the process flow.

See the following example:
- **Row #1**: SD billing entry has **SD Status = Approved** AND has a blue number in the **Claim ICN** column.
  - This means the billing entry has been approved by the CDDP/Brokerage/CIIS program and has been aggregated into a claim for payment. This billing entry has been sent to the FMAS payroll vendor for payment processing.

- **Row #2**: SD billing entry has **SD Status = Approved**, but there is **NO blue number** in the **Claim ICN** column.
  - This means the billing entry has been approved by the CDDP/Brokerage/CIIS program **but has not yet been aggregated into a claim** for payment, and has not yet been sent to the FMAS payroll vendor for payment processing. It will be included in the next scheduled claims aggregation cycle.

- **Rows #3 & #4**: SD billing entries have **SD Status = Pending**.
  - This means these billing entries have been submitted by the provider, **but have not yet been reviewed by the CDDP, Brokerage or CIIS Program.** As explained on page 1, billing entries submitted by providers must be reviewed & moved from **pending** to **approved** status by the CDDP/Brokerage or CIIS Program before they can be put into claims for payment. This billing will not be processed for payment until reviewed & moved to **approved** status.
• **Row #5**: SD billing has **SD Status = Draft**.
  o This means the billing entry has been created & saved, *but has not yet been submitted by the provider*. Providers must first submit their *draft* billings to move them to *pending* status, and then submit a corresponding timesheet and progress notes documentation to the CDDP/Brokerage or CIIS Program for review.

• **Row #6**: SD billing entry has **SD Status = Rejected**.
  o This means the billing entry has been reviewed by the CDDP/Brokerage/CIIS program and has been *rejected*. If users hover their mouse/cursor over the word “rejected” a pop-up will display the reason the billing was rejected. Rejected billings will not be processed for payment, however new billings can be created/submitted to replace rejected billings, if needed.

6. To view a specific SD billing entry, for example, to see when it was approved by the CDDP/Brokerage or CIIS Program, users can click on the blue number in the **SD ID** column. This will open that specific SD billing entry to view more information.

7. In the **Service Delivered Detail View** page, users can easily see when the SD billing entry was created and last updated, and who took those actions.
8. Users can also click on the **Action Log Entries** header to expand the action log, which will show more specific details on the history of the SD billing, including date/time stamps when action on the billing was taken.

This section is especially useful to see when an SD billing was moved from **pending** to **approved** status, and if that action occurred before or after the scheduled claims aggregation cycle process was run.

In the following example, the **Action Log Entries** section is expanded.
• Users can see in the red circled log entry, the PSW provider submitted the SD billing entry to move it from **draft** to **pending** status at **12:49 pm** on **8/17/15**.

• Users can also see in the purple circled log entry, the CDDP Service Coordinator reviewed the SD billing entry and moved it from **pending** to **approved** status at **2:59 pm** on **8/19/15** (2 days later).

The next scheduled claims aggregation cycle occurred at 3:00 am on 8/22/15. Since this billing entry was moved to **accepted** status prior to that date/time, it was able to be included in that claims process cycle for payment to the PSW provider.

Tracking the date/time stamps for when SD billings were moved from **pending** to **approved** against the claims aggregation/PSW payroll cycle schedule can tell users when SD billings were approved and in which aggregation cycle they can expect to have the billing processed for payment.