

Adult Provider Portal - Process Support

Last Updated: 4 August 2022

This document contains supporting information to the Provider Portal User Guide to provide additional context and use case examples. The information contained will be updated regularly as a result of system/process developments and feedback from both internal and external users.

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Using Actions for Queries

There may be several circumstances whereby you need to submit a query via the Lancashire Provider Portal. The type of Action to be submitted, and against what 'Entity' will be determined by the nature of the query itself.

The below is a table which details which type of Action should be submitted for various query types, and what Entity is it expected these would be submitted against

Query Type	Action Type	Entity/Entities
Scheduled Payment Query	Payment Query	Contract or Client
Invoice Query	Payment Query	Invoice or Client
CPLI incorrect	CPLI Amendment (...)	Client *
Missing CPLI	CPLI Outstanding	Client
Third Party Amendment	Third Party Amendment Request	Contract

** As these Actions should be created from the Care Package Line Item screen, the details will auto-populate*

Scheduled Payments

Before submitting a Scheduled Payment Query, please check the following:

- Is the agreement I am querying showing as commissioned?
- Is the start date, end date, weekly rate and service type correct?

Where a new/amended service has not been authorised by Adult Social Care, this should be sought by contacting the allocated or duty Social Worker via Customer Access.

Where a new/amended service has been authorised by Adult Social Care, has not yet been applied, and the start date of the new/amended service is within the last 7 days, this should be queried directly with the Care Navigation Service.

Where a new/amended service has been authorised by Adult Social Care, has not yet been applied, and the start date of the new/amended service is more 7 days ago, a CPLI Amendment/Outstanding Action should be submitted via the Lancashire Provider Portal to the Care Data Team.

Where a new/amended service has been authorised by Adult Social Care and applied incorrectly, a CPLI Amendment Action should be submitted via the Lancashire Provider Portal to the Care Data Team.

Query Actions should only be sent to the Accounts Management Team for general payment queries, or where all of the above is correct but have a follow-up query not related to the commissioning of the service itself

Invoiced payments (inc. Portal submitted Actuals)

Before submitting an Invoice related payment query, please check the following:

- Is the start date, end date, weekly rate and service type correct?
- Do the confirmed Actuals match those on your record?

Where a new/amended service has not been authorised by Adult Social Care, this should be sought by contacting the allocated or duty Social Worker via Customer Access. Following resolution, any resulting Actuals should be submitted as normal.

Where a new/amended service has been authorised by Adult Social Care, has not yet been applied, and the start date of the new/amended service is within the last 7 days, this should be queried directly with the Care Navigation Service. Following resolution, any resulting Actuals should be submitted as normal.

Where a new/amended service has been authorised by Adult Social Care, has not yet been applied, and the start date of the new/amended service is more 7 days ago, a CPLI Amendment/Outstanding Action should be submitted via the Lancashire Provider Portal to the Care Data Team. Following resolution, any resulting Actuals should be submitted as normal.

Where a new/amended service has been authorised by Adult Social Care and applied incorrectly, a CPLI Amendment Action should be submitted via the Lancashire Provider Portal to the Care Data Team. Following resolution, any resulting Actuals should be submitted as normal.

The Accounts Management Team will not be able to progress any query sent in relation to incorrect or outstanding agreements.

In the event the Actuals do not match, amend the Actuals as per your record (except where the agreement is incorrect). This will in turn generate any outstanding costs to be processed for payment; negating the need to submit a bespoke query.

Query Actions should only be sent to the Accounts Management Team for general payment queries, or where the all of the above appear correct, yet you are unable to reconcile the payment received against the expected balance.

Queries Initiated by Lancashire County Council

In addition to the above, some Actions may be initiated by Lancashire County Council to cover other common areas. These will be applied as follows:

Query Type	Action Type	Entity/Entities
Outstanding Actual Details	Outstanding Actuals	Contract
Overpayment Notification	Debit Balance	Credit Memo or Contract
Received Invoice Query	Returned Invoice	Invoice

Whilst these options are available to you to raise an Action, we ask that these be reserved for the above Lancashire initiated reasons only.

Other Uses for Actions

Actions are also used for the submission of Rolling Respite and APL Supported Living Void claims.

Confirmation of the Action Type and Entity for these submissions is given below:

Submission Type	Action Type	Entity/Entities
Rolling Respite Claim	Rolling Respite Claim	Contract
APL Supported Living Void Claim	APL Supported Living – Void Claim	Service

In both cases, a single claim form for each entity (either Contract or Service) should be attached to a single Action.

Rolling Respite Example: A claim for Rolling Respite for three clients should be submitted using a single consolidated form attached to one Action (per contract).

APL Supported Living Void Example: A single claim form for each property/period, should be attached to one submitted Action; with each period being submitted as a separate Action.

Submitting Actuals

Regardless of how Actuals are submitted (refer to the User Guide for details), certain rules must be followed for submissions to be accepted and processed for payment.

Line Total

When submitting a line, the sum of the Actual, Frustrated and Missed fields **must** equal the Planned quantity of care. The only exception is where the Planned Quantity has been calculated to a Pro-Rata value due to a mid-week start/end date on the agreement where irregular service is delivered.

Please see below some examples of expected submissions

Example 1: Regular service commissioned. Client cancelled a single visit in advance, and subsequently was admitted to hospital but the end date has not yet been applied to the agreement.

Details

Planned Quantity	Care Delivered	No-Entry/ Short Notice Cancellation	Emergency Hours	Notice Period	Initial Assessment
10.5	4	0		4.5	

Submitted as

Actual	Planned	FSTD	Missed	Extra	Visits	Suggested Comments
4	10.5	0	6.5	4.5	11	Notice : 4.5hr(s)

Example 2: An irregular service commissioned (3 x 0.5hrs per day, Monday to Friday only) Client required additional support on Thursday after 1st visit while waiting for Ambulance, with notice payable due to hospital admission same day. Agreement also ended on Thursday.

Details

Planned Quantity	Care Delivered	No-Entry/ Short Notice Cancellation	Emergency Hours	Notice Period	Initial Assessment
4.2857	5	0	1	2.5	

Submitted as

Actual	Planned	FSTD	Missed	Extra	Visits	Suggested Comments
5	4.2857	0	0	3.5	4	Waiting for Ambulance: 1hr(s) / Notice: 2.5hr(s)

To assist these calculations, a copy of the tool used for the above is available on request.

Comments on Actuals

As there is currently identifier on the Provider Portal to indicate where an Actuals has been submitted/confirmed, it is recommended that all submission contain a comment.

Should you wish to include your internal invoice reference, this can be input into the comments, ensuring it is prefixed with the | symbol.

Example: |INV001

All lines which do not match the planned quantity of care must include comments before the | symbol to indicate reason for the variance so that the Accounts Management Team can review these prior to processing payment

Example: *Waiting for Ambulance: 1hr(s) / Notice: 2.5hr(s)|INV001*