New State Financial System

All Screening for Life providers should have received a letter dated March 31, 2010 from the Chief Operating Officer for the Division of Public Health explaining the change in the State of Delaware's financial system. The upcoming implementation of the State of Delaware new statewide financial system will occur in July 2010. With such a large project comes the need for some fiscal deadlines and challenges regarding reimbursement for services. Below are important reminders to make the transition to the new system as seamless as possible:

- During this conversion the State of Delaware expects to have a period of downtime from approximately June 28, 2010 – July 19, 2010.
- Providers are encouraged to submit claims for services during the first two weeks of June by **Monday, June 14, 2010**. Submit your claims as you have always done.
- Please keep in mind that the state has the ability to make payments via credit card. This method of payment will expedite disbursements during this transition period and ongoing. If your agency is willing to accept credit card payments **without fees** please send an E-mail with "Credit Card" in the subject line to "Dhss_DPH_Records@state.de.us".

Secure Electronic Mail

To ensure confidentiality and maintain the Health Insurance Portability and Accountability Act (HIPPA), the State of Delaware has implemented a new secure way for state employees to communicate electronically with people outside the state network. In an effort to ensure client information is protected, SFL program staff will send all electronic communications that contain patient level information to providers via secure/encrypted email. In order to read the encrypted messages, providers will need to initiate a one-time self-registration process. This will enable providers to send and receive future encrypted email to and from SFL program staff. To register and obtain more information regarding this new system, please visit [http://extranet.dti.state.de.us/w2k/email_encryption_software-support.shtml](http://extranet.dti.state.de.us/w2k/email_encryption_software-support.shtml).
Screening for Life Newsletter

Screening and Diagnostic Forms

Screening for Life (SFL) requires providers submit breast, cervical, colorectal and/or prostate screening exam and test results for each procedure performed on specific program forms. As referenced in the SFL Provider Agreement, screening and/or diagnostic forms must be completed and submitted with the medical claims within 60 days of service in order to be reimbursed for services rendered. Providers are required to ensure forms are completed in their entirety and to not submit a form prior to receiving an associated cytology or pathology report. When the screening result is abnormal, the diagnostic workup section should be completed. Any medical plan including referrals can be noted in the comments section. Submitting claims without the associated documentation will cause a delay in reimbursement for services. The SFL program is required to submit this data to the state and/or federal government who fund our program. This data is used to evaluate program activities as well as to justify the need for continued funding. The SFL program distributes the forms periodically to participating providers; however a provider is encouraged to request additional forms as they are needed. If you are unsure on how to complete these forms or if you would like to order more forms, you may contact the SFL office at 302-744-1040.

Case Management

Eligibility for SFL screening services are determined and listed on each client's program identification card along with eligibility start and end dates. Services listed on a client's SFL identification card do not require prior authorization by a SFL case manager. However, prior authorization by a SFL case manager IS required when screening results are abnormal and additional diagnostic services are necessary for a final diagnosis.

Case Management is vital to assure clients receive the services necessary to reach a final diagnosis in a timely manner. Providers should call 1-302-744-1040 and ask for a SFL case manager to provide the necessary authorization and/or referral if the services are not allowed by the SFL program. The SFL case managers are available to assist providers with reaching patients regarding abnormal screening results and to assist clients with obtaining diagnostic services.