

ACTION

NEW and opening on

Please provide the date when the provider is officially opened and in operation.

CHANGE

No date is required for a change to the information about a provider. Examples of such changes can be (1) a name change where the provider continues to deliver the same service; (2) address change only if the provider continues to operate within the area of the Health Unit. Please note that CC-IMS, the system in which this information is being entered, is based upon HEALTH UNITS and not Health Authorities. If the service or type of care a provider offers changes substantially, it may be necessary to make the current provider inactive and create a new provider. Please contact the CC-IMS Help Desk if you have any questions.

MAKE INACTIVE

When a provider is made inactive, it is necessary to provide the date when the provider officially ceased its operation. A provider which will be made inactive may not have any clients on active care, no clients on a waitlist in CC-IMS and no outstanding financial transactions in CC-IMS.

**PROVIDER DATA
NAME**

This is the name of the provider as it appears on the building or office door. (note: 40 characters maximum length)

PAYMENT CLASS

PER DIEM CLAIMS. Check this if the provider receives a daily payment for the service provided. If you are unsure then contact the CC-IMS Help Desk or leave it blank.

HOURLY CLAIMS. Check this if the provider receives an hourly payment for the service provided. Example: home support provider. If you are unsure then contact the CC-IMS Help Desk or leave it blank.

PER DIEM FACILITY PAYMENTS. Check this if the provider is a residential provider and receives a daily payment for service provided. If you are unsure then contact the CC-IMS Help Desk or leave it blank.

FUNDED CAPACITY

Please provide only the funded capacity. Example: A residential provider. If the residential provider has 65 beds of which 50 are funded by the Health Authority and 15 beds are paid privately (perhaps by the resident), the number 50 should be entered in this field.

PROVIDER

The provider category codes for accommodation and community providers are the only codes that are available in CC-IMS. All providers must be assigned to one code. If you are unsure then contact the CC-IMS Help Desk or leave it blank.

RESPONSIBLE ASSESSOR

Certain providers, for example residential providers, have an assigned assessor to manage the clients. If this provider has a responsible assessor, please enter the assessor's number in this field.

Conditions For Making Application

Applies to Health Authorities using either CC-IMS or the HCC-MRR

Before making application for a provider number, health authorities must either:

- ▶ have a contractual relationship with the provider or
- ▶ own and operate the provider.

New Provider

Applies to Health Authorities using either CC-IMS or the HCC-MRR

- ▶ Health Authorities should make application for a provider number at least one month prior to the opening date or, if the nature of the service being provided in that setting is changing.

ACTION (Check One)				
<input type="checkbox"/>	NEW and opening on	YYYY	MM	DD

Change To A Provider

Applies to Health Authorities using either CC-IMS or the HCC-MRR

- ▶ Health authorities must notify the Ministry of Health Services at least one month prior to a change being made to a provider.
- ▶ To notify the Ministry of Health Services, a provider application form should be submitted indicating CHANGE on the form and the date when the CHANGE is applicable. The form should have the provider number, name, address and health authority information, including signature. The form should also record the change.

<input type="checkbox"/>	CHANGE	YYYY	MM	DD
<input type="checkbox"/>	MAKE INACTIVE			

HEALTH AUTHORITY AUTHORIZING SIGNATURE			
NAME (Print)		TITLE	
TELEPHONE (AREA CODE)	(LOCAL)	SIGNATURE	DATE YYYY MM DD

- ▶ Examples of a CHANGE
 - ▶ Provider's name changes. This may be due to another company assuming ownership.

Provider’s address changes.

Change to the funded capacity

Provider’s ownership category (private for profit, private not for profit, HA owned and operated) changes.

Inactive Provider

Applies to Health Authorities using either CC-IMS or the HCC-MRR

- ▶ Health authorities must notify the Ministry of Health Services at least one month prior to a provider closing or termination of its contract.
- ▶ To notify the Ministry of Health Services, a provider application form should be submitted indicating INACTIVE on the form and the date when the status is applicable. The form should have the provider number, name, address and health authority information, including signature.

<input type="checkbox"/> CHANGE			
<input type="checkbox"/> MAKE INACTIVE	YYYY	MM	DD

HEALTH AUTHORITY AUTHORIZING SIGNATURE		
NAME (Print)	TITLE	
TELEPHONE (AREA CODE) (LOCAL)	SIGNATURE	DATE YYYY MM DD

- ▶ The date on which the status of INACTIVE takes effect will be taken to be the closing date. That date will be recorded.

Example: A residential facility is in the process of closing and the last client will leave September 30th. On or before September 1st, an application form must be submitted indicating that the client should be made INACTIVE on September 30th.

Special case: A residential facility is in the process of closing for renovations and the last client will leave September 30th. When the renovations are completed, the location will be an assisted living residence. The health authority must submit a provider form indicating that the current residential facility must be made INACTIVE on September 30th (as in the example above). A second provider form must be submitted requesting a new number for the assisted living residence (see New Provider above).

Special Circumstances

One special situation involves assigning provider numbers to a campus of care.

- ▶ If the campus of care includes mental health services then contact the Mental Health Help Desk (HLTH.CPIMHelp@gov.bc.ca) for help on that aspect of the situation.
- ▶ If the campus of care includes adult day programmes, HCC residential care, assisted living then each one will require a separate provider number. The provider forms for the HCC residential and assisted living should include only the number of publicly funded beds or units.
- ▶ If the campus of care includes a home support agency whose purpose is to provide personal care to the assisted living residence, then no provider number will be issued for that home support agency. Personal care is an integral component of assisted living.
- ▶ If the campus of care includes a home support agency whose purpose is to provide personal care to the assisted living residence AND to the community, then the health authority may apply for a provider number. The provider number may only be used for community services and not for assisted living services.

Situations Applicable to Health Authorities Using CC-IMS

Applies to Health Authorities using CC-IMS

- ▶ An additional provider number is not required when a provider offers additional care covered by one of the service type codes used in CC-IMS:
 - 100 (regular care)
 - 200 (respite care)
 - 800 (palliative care)
 - 925 (convalescent care)
- ▶ A provider is offering a new service but, that service is part of the normal work of the provider
 - Example: A bathing programme is being offered in which clients are transported from home to a residential facility to be bathed. Afterwards, the client is returned home. The bathing programme is offered through a home support agency. The agency has a provider number. A new provider number will not be assigned for the bathing programme.
- ▶ Before a provider can be made INACTIVE in CC-IMS, the health authority must ensure that all care, waitlists and financial transactions are ended.
 - There can be no clients on active care.
 - There can be no clients waitlisted against that provider.
 - There can be no outstanding financial transactions against the provider.

Keeping Provider Information Current

Applies to Health Authorities using either CC-IMS or the HCC-MRR

- ▶ Health authorities are expected to keep the information current. This includes notifying the Ministry of Health Services of new providers, changes to provider (such as funded capacity), when providers become inactive and any change to the provider that affects the type of service being delivered. Send changes to the Ministry of Health Services CC-IMS Help Desk.

Questions

If you have questions about how to correctly fill in the form, which fields you need to complete or you want to make sure you send in the form in the right situation then, contact the Ministry of Health Services CC-IMS Help Desk.

- ▶ Telephone: (250) 952-1234
- ▶ E-mail: HLTH.CCIMSHelp@gov.bc.ca