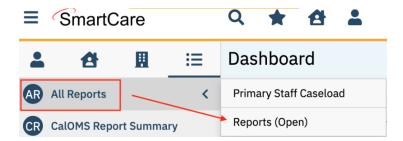| SmartCare Report Name | **Invoice Report - Complete Service (My Office)** |
|---|---|
| Report Purpose | This report provides a comprehensive way to track and analyze completed services, giving you insights into clinician activity, service duration, and billable time. Providers will use this report to generate a monthly Invoice Report from SmartCare. This report is based on "completed services" only. |
| Replaces InSyst Report | **MHS 854 A & B/SUD PSP 131 Report** |
| Report Timing | Providers will be able to generate real-time invoice reports from SC. |
| Record Selection | • Completed Services displayed in the list are chosen by the selected parameters:<br>   o **Start Date:** This is the starting date for the services you want to include in your view.<br>   o **End Date:** This is the ending date for the services you want to include.<br>   o **Program Name:** You can filter services by the specific programs they belong to.<br>• **Invoice Category:** Each sub-modality (service category) has been mapped to an invoice category.<br>• **Procedure Code ID:** This is a unique identifier assigned by SmartCare to each procedure code.<br>• **Procedure Code Name:** This procedure code identifies specific medical services or procedures performed by the Clinician.<br>• **Time (hours):** This represents the actual duration a client received the service, measured in hours. Time is in hours or units (depending on program type).<br>• **Travel Time**: This indicates the time a client spent traveling for the service.<br>• **Documentation Time:** This is the time the clinician spent on documentation related to the service.<br>• **Units:** These are units calculated based on defined minutes. It is derived from Charges, which is a calculation done by a SmartCare process that looks at procedure rates.<br>• **Service Count:** This simply tells you the total number of services completed by a clinician by procedure code.<br>• **Totals:** Can be found shaded in blue. This summarizes service/charges and group by Program, Degree/Invoice Category, and Procedure code. |

1. From the SmartCare home page, hover over **All Reports** on the menu at the left. Select **Reports (Open)** to open the List Page that shows all SmartCare reports.



2. The Reports screen will open displaying all SmartCare reports. To see the **Invoice Report**, type "invoice" in the Search box and hit Enter or click on the blue **Apply Filter** button at the right to narrow down the report list. Select **Invoice Report**.



| Reports(Open) (3) | | | |
|---|---|---|---|
| All Folders ⌄ | Search | invoice ◆ | Apply Filter |
| **Report Name** △ | **Description** | | **Folder** |
| Invoice Report | Invoice Category Code Type | | |
| Invoice Report - Practitioner | Invoice Report by Practitioner type | | |
| Invoice Report - Staff Details | Invoice Layout with Staff totals | | |

3. You can also find the report by using the magnifying glass search box and typing in "invoice" and selecting **Invoice Report (My Office)**.



4. The report parameters will appear in a separate window. In the **Start Date** field, enter the first date you want included in the report. In the **End Date** field, enter the last date you want included in the report.
**NOTE:** For monthly Provider Claims, the date range should be for the entire service month.
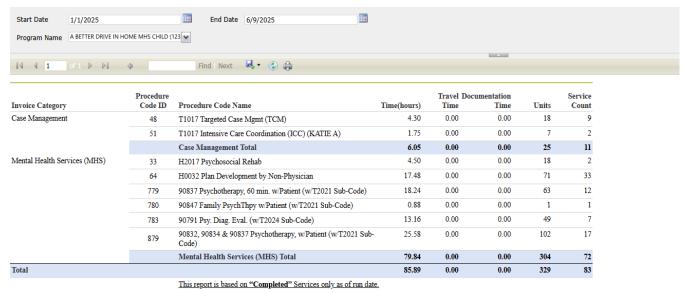
Using the Multi-select dropdown list, select one or multiple programs in the **Program Name** field. To select programs, select the [✓] check next to the program name in the drop-down list. Providers can select as many programs as needed; there is no selection limit in the program list.

5. Select the blue View Report button in the right-hand corner of the pop-up window.

   **NOTE:** Providers are limited to access to the Programs within their applicable CDAG permissions. Please note that the larger the file, the longer it may take to generate.

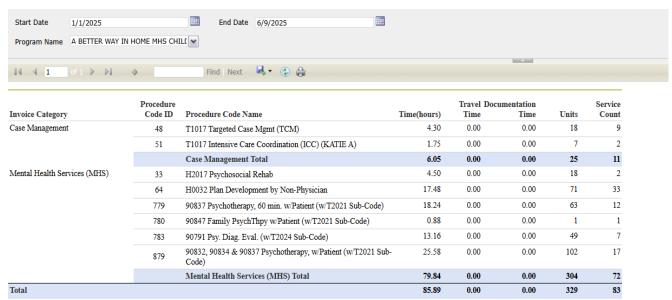| Start Date | 1/1/2025 | End Date | 6/9/2025 | | View Report |
| Program Name | A BETTER DRIVE IN HOME MHS CHILD (12 | | | | |

6. The report will appear for the dates and program(s) selected. If there are multiple pages, use the arrows on either side of the page number box to move through the pages. If there are many pages and you are looking for something specific, use the search box by typing in a keyword and clicking on **Find**. Click **Next** to see all instances of the search word.

| Start Date | 1/1/2025 | End Date | 6/9/2025 |
| Program Name | A BETTER DRIVE IN HOME MHS CHILD (123 | | |

| 1 | of 1 | | | Find | Next | | | |

| Invoice Category | Procedure Code ID | Procedure Code Name | Time(hours) | Travel Time | Documentation Time | Units | Service Count |
|---|---|---|---|---|---|---|---|
| Case Management | 48 | T1017 Targeted Case Mgmt (TCM) | 4.30 | 0.00 | 0.00 | 18 | 9 |
| | 51 | T1017 Intensive Care Coordination (ICC) (KATIE A) | 1.75 | 0.00 | 0.00 | 7 | 2 |
| | | **Case Management Total** | **6.05** | **0.00** | **0.00** | **25** | **11** |
| Mental Health Services (MHS) | 33 | H2017 Psychosocial Rehab | 4.50 | 0.00 | 0.00 | 18 | 2 |
| | 64 | H0032 Plan Development by Non-Physician | 17.48 | 0.00 | 0.00 | 71 | 33 |
| | 779 | 90837 Psychotherapy, 60 min. w/Patient (w/T2021 Sub-Code) | 18.24 | 0.00 | 0.00 | 63 | 12 |
| | 780 | 90847 Family PsychThpy w/Patient (w/T2021 Sub-Code) | 0.88 | 0.00 | 0.00 | 1 | 1 |
| | 783 | 90791 Psy. Diag. Eval. (w/T2024 Sub-Code) | 13.16 | 0.00 | 0.00 | 49 | 7 |
| | 879 | 90832, 90834 & 90837 Psychotherapy, w/Patient (w/T2021 Sub-Code) | 25.58 | 0.00 | 0.00 | 102 | 17 |
| | | **Mental Health Services (MHS) Total** | **79.84** | **0.00** | **0.00** | **304** | **72** |
| **Total** | | | **85.89** | **0.00** | **0.00** | **329** | **83** |

This report is based on **"Completed"** Services only as of run date.

Page 1 of 1

7. In the report example below, you can see all the completed services for the selected program with the invoice category, procedure code ID, procedure code name, time(hours), travel time, documentation time, units, and service count.
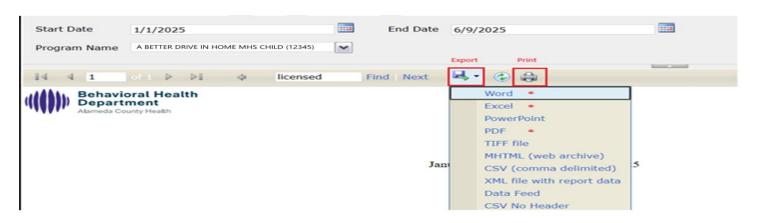
| Invoice Category | Procedure Code ID | Procedure Code Name | Time(hours) | Travel Time | Documentation Time | Units | Service Count |
|---|---|---|---|---|---|---|---|
| Case Management | 48 | T1017 Targeted Case Mgmt (TCM) | 4.30 | 0.00 | 0.00 | 18 | 9 |
| | 51 | T1017 Intensive Care Coordination (ICC) (KATIE A) | 1.75 | 0.00 | 0.00 | 7 | 2 |
| | | **Case Management Total** | **6.05** | **0.00** | **0.00** | **25** | **11** |
| Mental Health Services (MHS) | 33 | H2017 Psychosocial Rehab | 4.50 | 0.00 | 0.00 | 18 | 2 |
| | 64 | H0032 Plan Development by Non-Physician | 17.48 | 0.00 | 0.00 | 71 | 33 |
| | 779 | 90837 Psychotherapy, 60 min. w/Patient (w/T2021 Sub-Code) | 18.24 | 0.00 | 0.00 | 63 | 12 |
| | 780 | 90847 Family PsychThpy w/Patient (w/T2021 Sub-Code) | 0.88 | 0.00 | 0.00 | 1 | 1 |
| | 783 | 90791 Psy. Diag. Eval. (w/T2024 Sub-Code) | 13.16 | 0.00 | 0.00 | 49 | 7 |
| | 879 | 90832, 90834 & 90837 Psychotherapy, w/Patient (w/T2021 Sub-Code) | 25.58 | 0.00 | 0.00 | 102 | 17 |
| | | **Mental Health Services (MHS) Total** | **79.84** | **0.00** | **0.00** | **304** | **72** |
| **Total** | | | **85.89** | **0.00** | **0.00** | **329** | **83** |

This report is based on "Completed" Services only as of run date.

Page 1 of 1

8. In the report example, you can see all the completed services for the selected program with the Invoice Category, procedure code ID, procedure code name, time(hours), travel time, documentation time, units, and service count.

9. To export the report, click on the **Export** icon and select the desired export format. Best practice is to use Word, Excel or PDF to download the report. To print the report, click on the **Print** icon.

10. Created By: Automatically pull from the staff that is running the report.



**NOTE:** Before exporting the report to Excel, please delete the first 8 rows. This ensures that sorting and filtering functions work correctly.

11. **Invoice Submittal:** Providers will submit this report (pdf, excel or word), and will transfer this information to the Invoice template (excel). Please follow the instructions provided during Invoice Training.

📌 **Guidance/Considerations**:

➢ Travel & Documentation Time: Not all providers enter this information into SmartCare due to system limitations. If not entered in SmartCare, providers must submit separate backup documentation.

➢ Timing: SmartCare requires 3 days post-entry for services to be processed and appear in reports. Providers must complete service entry 3 days before the invoice is run to ensure inclusion. Timely data entry affects payment.

➢ Only "completed" services appear on the invoice report. Services in "show" status must be corrected by providers before they can be billed.

➢ A separate services in "show" status report will be available to help providers identify and fix errors. Please use the Services (My Office) List page as well.