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In reply, please refer to:
File: DOH/ADAD

Phase 1 End User Training Questions

All these questions were captured throughout Phase 1 End User Training.

Technical Questions

What should I do if I can't log in or my authenticator app isn't working?

Contact ADAD IT help desk. You may need to reset your multi-factor authentication or ensure your account is set up for the correct domain.

Can we release billing in WITS up until the 18th?

You can release billing in WITS up until October 17th. Starting October 18th, WITS will be READ-ONLY. After that, billing will transition to INSPIRE PLUS.

How do I log into the INSPIRE PLUS system?

Use your work email and password. If you need access to both prevention and treatment, you must have two separate email accounts.

How do I know if I'm logged in as a Treatment or Prevention user?

Check the app name in the top left (Pulama for prevention, Hoala for treatment). You can also check your business unit in your user record.

What should I do if I can't log in or my account isn't set up?

Email the ADAD IT help desk at DOH.ADAD.WITSHelp@doh.hawaii.gov for account setup or password issues.

What is the difference between the Pulama and Hoala apps?

Pulama is for prevention users; Hoala is for treatment users. You may only have access to one, depending on your role.

How do I use Advanced Find to search for records or tables not in the site map?

Click the search icon (top of page), select "search for rows in a table using advanced filters," choose your table, and apply filters as needed.

How do I open records correctly in INSPIRE PLUS?

Double-click in the white space or black text of a row, or use the “go to record” icon. Avoid clicking blue hyperlinks unless you want to open a related record.

How do I personalize or share views in INSPIRE PLUS?

You can update views by editing columns and filters, then save as a new view. You can share personalized views with others in your agency by using the “manage and share views” option.

How do I create and save custom charts or dashboards?

Use the “Show Chart” button, create or edit charts, and save as personal or shared views/dashboards.

How do I search for a client in INSPIRE PLUS?

Navigate to the ‘Clients’ tab in the Site map, use the global search to look up clients by name, email, account number, or other fields. If you don’t find the client, you can submit a client search request, which checks the entire INSPIRE PLUS system for matches across all agencies.

How do I use Advanced Find in INSPIRE PLUS?

At the top of the ribbon, using the Search Bar, select ‘Search for rows in table using advanced filters’. Here you can search for any table in the system. This helps you access tables not visible in the site navigation.

Who can see clients and cases in INSPIRE PLUS?

You can see all clients and cases assigned to your provider agency. You cannot see all clients in the system, only those within your agency.

Who can see clients and cases in INSPIRE PLUS?

Yes, your security roles and permissions should transfer over. The system is set up to mirror what you currently have in WITS, including staff assignments and access levels, please reach out to ADAD IT/help desk if you aren’t seeing the same security as in WITS.

How do I upload and manage documents in SharePoint?

Documents uploaded to the SharePoint area are accessible to anyone in your provider agency and remain in the client’s case even after download.

How do I upload documents to a group?

Use the related tab > Documents. Each group has a SharePoint folder with subfolders for attendance logs, curriculum, notes, rosters, and outcome measures.

Can I add fields from related tables to a view?

Yes, if the field exists in a related table, use “add related entity” in filters.

How do I pin a record for easy access?

Open the record you want to pin, click the pin icon next to the record name, and it will appear in your pinned items for quick access.

How do I export data to Excel and what is the difference between views and Excel in INSPIRE PLUS.

Select records, click “Export to Excel.” Only fields in the current view are exported. Exported data is a snapshot in time. Dashboards/views are real-time and update automatically. Excel exports are static and do not update.

How do I run SSRS reports (e.g., Education Strategy, Participant Demographics)?

Go to Reports, search for the report, enter parameters (agency, facility, dates), and click “View Report.”

How do I ensure group members appear in demographic reports?

Make sure their registration date is within the report’s date range and required demographic fields are filled.

Treatment Questions

Who can submit a client search request?

Only users with the “provider client search” security role can submit client search requests. If you need access, contact ADAD IT/help desk to have your security role updated.

What is a client search request and why is it required?

A client search request ensures you are not creating duplicate client records. It searches the entire system for existing clients before allowing you to create a new one. This process helps maintain clean data.

What information is needed to create a new client after a search?

You will need to provide details such as sex at birth, gender identity, sexual orientation, ethnicity, race, and address information.

How do I access a client’s record after creating them?

Change your view from “my active clients” to “active clients” to see all clients in your provider agency, the newly created client will appear in the view.

How do I add a client contact for consents?

Navigate to the client record, open the “client contacts” tab, and create a new contact.

How do I create and manage consents?

Navigate to the consent tab in the client or case record, select the consent type, fill in the required fields, and have the client or authorized person sign. Consents can be captured electronically in INSPIRE PLUS or uploaded as scanned documents if signed physically.

How do I begin an episode of care (case) for a client?

Navigate to the client, go to the case management tab, and click “new case.” Enter the start date, select “save” to generate a unique case ID.

Why is the intake field locked after creating a case?

The intake field is locked until a screening is marked as “completed” for the client.

How do I create a planned service?

Navigate to the Program Enrollment tab within the case, open the program enrollment, and use the planned services tab to create a new planned service. All required fields must be filled out before saving.

How do I create a screening for a client?

Navigate to the screenings tab in the case, click “new screening,” select the type, fill in required fields, and save.

What if I need to refer a client to another agency for a level of care?

Mark “unable to provide level of care” in the LOC Determination and submit for referral. Now the LOC Determination will be in the hands of the Hawaii CARES team to handle the referral process.

How do I handle ASAM/level of care for clients with multiple program needs (e.g., school-based, IOP, OP)?

The recommended level of care is entered, but if a client chooses a different level of care, a supervisor must override and document the actual level of care. Hawaii CARES must approve the override.

How do I know if a level of care determination is approved?

Check the status in the level of care determinations list or dashboard. There is no automated notification; you must check manually.

How do I submit a level of care determination for approval?

In the ribbon on the record, use the “flow” button and select “submit for approval.” This sends it to Hawaii CARES for review.

How do I create client needs, goals, objectives, and interventions?

Navigate to the case, select the “programs enrollment” tab, select “new treatment plan”, once that is save, then navigate to the “client needs” tab and complete a client need, then add goals, objectives, and interventions as needed. Each builds on the previous record.

How do I admit a client and enroll them in a program?

After level of care approval, fill in all required fields on the admission profile within the case and change the status on the case record from “new” to “admitted.”

Can I add existing assessments and diagnoses to a treatment plan?

Yes, use the assessments and diagnosis tabs within the treatment plan to add existing records.

Can I export assessments to Word or PDF?

Yes, you can export the Case by accessing the ‘Word Templates’ and selecting ‘Case Summary’. Here you can print the Case details as needed.

Does substance use info from assessments auto-populate into the substances used table?

No, these are separate records and must be entered manually if desired.

How are composite scores calculated in assessments?

They are calculated automatically based on answers to specific questions.

What types of screenings are available?

Available screenings include BH/BI, CAGE-AID, Columbia Suicide, CRAFFT, and DAST-10. The scoring and outcomes are automated and similar to WITS.

How are screening outcomes determined?

Based on the Screen Type that is selected, outcomes are automatically calculated based on the answers provided in the following tab (BH/BI, CAGE-AID, Columbia Suicide Screener, CRAFFT, or DAST-10).

How do I add existing assessments and diagnoses to a treatment plan?

Use the assessments and diagnosis tabs within the treatment plan to add existing records created earlier.

How do I create and manage treatment plans, needs, goals, objectives, and interventions?

Start with a treatment plan, add client needs, then goals, objectives, and interventions. Each record builds on the previous, and you can add existing assessments and diagnoses as needed.

How do I close or complete a treatment plan?

On the treatment plan, update the status reason on the general tab from “in progress” to “completed.” Each goal and objective can also have its own status.

How do I create and manage treatment team groups and members?

Create provider groups from the provider record, add members, and link them to the treatment plan. Existing groups from WITS will be migrated.

Who can sign off on a treatment plan?

A counselor with an active CSAC can sign. If not, a supervisor must sign. In training, CSAC credentials may not be active.

How do I create an assessment after intake?

Confirm the intake is marked as completed, then the Assessments tab will appear. Select the assessment you wish to complete and fill out the required fields.

What is required to complete an intake?

The only required field for intake is selecting at least one “population type.” Other fields can be filled out as needed.

How do I sign off on an assessment?

Go to the “sign on” tab at the end of the assessment. Only users with an active CSAC credential can sign off.

How do I unlock the intake field after a screening?

Complete the screening and set its status to “completed.” The intake field will then become available for you to create a new intake.

How do I use the DSM-5 assessment checklist and is it required?

To create a new DSM-5 Assessment, save immediately to load symptoms, mark symptoms present, and check “completed diagnosis checklist” to trigger automatic severity calculations. This is not a required assessment and is primarily used for Substance Use.

What if I make a mistake and need to remove a screening or intake?

You cannot delete records, but you can deactivate them. Deactivated records become read-only and can be reactivated if needed.

Are there restrictions on who can enroll clients?

All treatment providers can enroll clients once the level of care is approved.

Can I upload documents to a client or case?

Yes, you can upload documents directly to a case or to the SharePoint folder created for each case on the documents tab.

What happens when a user is restricted from a case?

The user can view but not edit the case or any child records. Once the restriction is revoked, editing access is restored. To access the restricted users on the related case, you can access the “Consent” tab and look at the “restricted users” subgrid to see which users are restricted.

How is the Essential Health record created?

Every time you create a new case, an Essential Health record is automatically created and linked to that case.

Does the DSM-5 code auto-populate when I enter a diagnosis?

No, the DSM-5 code does not auto-populate; it is a separate field.

How do I create and manage diagnoses in Essential Health?

Go to the diagnosis tab, create a new diagnosis, and mark it as primary or secondary. Only one primary diagnosis is allowed per record; marking a new one as primary will automatically update the previous.

How do I log allergies, medical conditions, and medications?

Use the respective tabs in Essential Health. Allergies and medical conditions require only a few fields; medications can be detailed but most fields are optional.

How do I log vaccinations, substances used, and hospitalizations?

Use the vaccinations tab in Essential Health for vaccines. Substances used and hospitalizations are on the health tab within the case, not in Essential Health. All are optional.

Prevention Questions

What are the required fields for a prevention plan?

Name, Provider Contract, Start and End date (must fall within contract dates).

Who can create prevention plans?

Only supervisors can create prevention plans. Line staff can view but not create or edit them.

Can multiple prevention plans exist for one provider contract?

Yes, but their dates cannot overlap. Each plan must be within the contract period and not overlap with other plans for the same contract.

What happens if my prevention plan dates overlap or are outside the contract?

You'll get an error and must adjust the dates. You cannot have two prevention plans within the same dates for the same provider contract period.

What if my plan is sent back for revisions?

You'll receive an email notification. Make the required changes, toggle the "submit prevention plan" again, and resave. If not resubmitted within 10 days, you'll get a reminder email.

How do I manage participant contacts and employment?

Add contacts (formerly known as collateral contacts), specify relationships, and employment details. Employment is optional.

How do I add group members and test scores?

Add participants as group members, specify status, registration date, and reason. Once record is saved, test score tab will appear, you will then be able to add any test scores (pre/post) for each member.

How do I search for and create participants?

Use global search or field filters (name, account number, DOB, etc.). If not found, create a new participant with required fields (first/last name, DOB, address type).

How do I submit a prevention plan for review?

Use the toggle "Submit Prevention Plan" to yes on the general tab and save. The status updates to "submitted" and now it is in the hands of ADAD to review it.

What are service notes?

Service notes are for any service billed to ADAD that doesn't fit implementation strategy or group session categories.

What if a participant is homeless or has no address?

Select "homeless" or "unknown" for address type. You can provide a generic location or leave address fields blank.

Who can create implementation strategies?

Both line staff and supervisors can create implementation strategies, but only from a community-based plan strategy.

Can I clone implementation strategies or activities?

Yes, use the “Clone Implementation Strategy” or “Clone Implementation Strategy Activity” flow buttons. Some fields (dates, activities, demographics) must be re-entered.

How do I add indicator measures?

Indicator measures are formerly problem indicators. Specify type, population, geotype, value, and data source. You can link them to problems, outcomes, and factors.

What are “problems and related behaviors”?

These are formerly known as outcome indicators. They require a problem statement and age group/category.

What are outcomes?

Outcomes are formerly known as goals. You must specify outcome, type (short/intermediate/long-term), target date, description, and target percentage.

How do I add factors and conditions?

Navigate to the prevention plan, on the “factors/conditions” tab, create risk factors, protective factors, or local conditions from the factors and conditions tab.

What are plan strategies?

Plan strategies define the approach (assessment, capacity, implementation, education, etc.), domain, data collection method, projected participants, service population, priority population, evidence base, IOM category, CSAP categories, geotype, and cities/towns. Only supervisors can create these.

Process Questions (Progress Notes, Provider Contracts, Invoicing & Billing)

How is billing handled in INSPIRE PLUS?

All billing is done directly in INSPIRE PLUS via validated notes. Monthly service forms are no longer sent to ADAD; everything is tracked in the Pulama app.

How do I create a progress note?

Navigate to the program enrollment, select the progress notes tab, and create a new progress note. Select the planned service, enter the required details, and save.

How do I create a service note?

Navigate to a Prevention Plan, select service notes tab, create new service note. Select the planned service, enter the required details, and save.

Should I create progress notes from the site map or from program enrollment?

Always create client progress notes from the program enrollment to ensure correct information and note types are populated.

What happens if a user is on payment hold?

The user cannot validate progress notes until ADAD removes the payment hold.

Can I unvalidate a progress note?

Yes, as long as it hasn't been paid. Use the "Unvalidate Progress Note" flow button, edit, and re-validate.

Can I save a progress note if it fails validation?

Yes, you can save the note as a draft, but it cannot be validated or 'released to billing' until all checks pass to ensure all the funding is confirmed on the related provider contract.

Do I need to create a planned service for every type of service (IOP, family counseling, etc.)?

Yes, you must create a planned service for each type of service you plan to provide to the client, even if there are no unit limitations.

What are the validation checks for progress notes?

There are three checks: (1) user is not on payment hold, (2) there are enough units in the planned service, and (3) there are enough funds in the associated provider contract. If any check fails, you cannot validate the note and user will receive error stating the reason why.

How is billing handled for group sessions?

On the Site Map in Inspire +, there is a 'Groups' tab, users will be able to create groups and group session Progress Notes.

What happens if I run out of units for a planned service?

You must request a service authorization (formally known as benefit exception) for additional units. This request goes to ADAD for approval.

How do I release an implementation strategy to billing?

Use the “Validate Progress Note” flow button. Only validated notes are released to billing.

What happens if there is not enough money in the provider contract?

You will not be able to validate the progress note. You will see an error message stating that the note exceeds the available funds in the related provider contract.

What is required to complete a progress note for adolescents?

The only requirement is that the client is enrolled in a program, if so you will be able to create a progress note at any time.

What is the difference between a planned service and a service authorization?

A planned service is a one-time setup for each service you plan to provide to a client, based on your provider contract. A service authorization (formally known as a benefit exception) is only needed if you need to request additional units than what your provider contract allows.

What is the difference between service units and adjusted service units?

Service units are auto-calculated based on service rate and duration. Adjusted service units allow manual correction for exceptions (e.g., billing for missed units).

Where do I enter client session details for a progress note?

There is a free text “Notes” field in the progress note where you can enter any narrative or details regarding the progress note.

Does adding an end date to a group make it inactive?

No, you must deactivate the group to remove it from active lists.

How do I see the number of sessions attended by a group member?

Navigate to the Group, select the “group members” tab, in the subgrid, there will be a column listed: “number of sessions attended”.

How do I track group sessions and attendance?

After your group has been created, group sessions progress notes can be create by selecting the service, enter in dates, mark attendees as present, excused, or no-show. Attendance is then tracked automatically.

What is the difference between authorized, pre-encumbered, encumbered, and expended amounts?

Authorized is the total amount allotted by ADAD. Pre-encumbered is money from validated progress notes not yet tied to a submitted or paid invoice. Encumbered is money on submitted invoices not yet paid. Expended is money from paid invoices.

How do I create a provider invoice?

Navigate to the Provider Invoices, click “new,” select your provider contract, enter start/end/invoice dates, and save. The invoice number is generated upon saving.

How do I batch and bill progress notes to an invoice?

On the invoice, use the “flow” button to run “find billable progress notes.” Only validated notes with end dates on or before the invoice end date are pulled in.

How do I allocate invoice funding by priority?

On the invoice, go to the funding sources tab, enter the invoice amount, and use the “allocate funding by priority” flow. The system will allocate the funds to the first priority contract funding source with available balance.

How do I submit an invoice to ADAD?

On the general tab, check the attestation box, save, then use the “submit invoice to ADAD” flow. The status updates to “program review.” The provider invoice is now in the hands of ADAD program team to review.

What happens if an invoice is sent back for revisions required?

You will receive an email and see the status updated to “revisions required”. You will make the necessary changes, select save, and resubmit by re-running the “submit invoice to ADAD” flow.

How do I update a progress note that was sent back for revisions?

In the ribbon of the progress note record, select the “flow” button, and select the “unvalidated progress note” flow, this moves the progress note into “draft” status and allows the record to be edited. Once the adjustments have been made, you will run the “validate progress note” flow. Finance team will have to rerun the batch and bill process to pull it back into the invoice.

Can I submit multiple invoices for the same month?

Yes, you can submit more than one invoice per month if needed. The end date on the invoice determines which progress notes are included.

How do I upload documents to a provider invoice and who can see the documents?

Navigate to the provider invoice, select the related tab > Documents, select a subfolder, and upload your file (e.g., monthly invoice template, supporting documentation). Every time a new provider invoice is created, there is a brand new SharePoint site created. Everyone within the agency will be able to see the documents associated to the Provider Invoice.

How do I handle invoices with both fee-for-service and capitated billing?

The system allows “mixed batch” invoices. Mark progress notes as rural remote for capitated billing; others are billed at the contracted rate. Allocate amounts accordingly.

How do I self-attest to capitated amount eligibility?

On the invoice, check the “did you meet the capitated amount eligibility requirements” box. If unchecked, only fee-for-service rates apply.

How do I split funds between invoice funding sources for capitated billing?

Enter the capitated amount in the first priority funding source. If needed, split between priorities, but do not exceed the monthly maximum.

Hawaii CARES & Referral Management

How do I process referrals in Hawaii CARES?

Use the dashboard “Hawaii CARES” to see incoming referrals, review level of care determinations, and approve or request revisions.

How do I know what records are shared with Hawaii CARES?

Consents specify which records (ASAM, DENS, treatment plan, etc.) are disclosed by the providers. You will not be able to edit the existing case, a new case will be generated.

How do I process a provider-to-provider referral?

Create a consent, specify records to disclose, and submit the referral. The receiving agency accepts or rejects it.

How do I process a referral from Hawaii CARES to a provider?

Create an application (intake), consent, and referral. The receiving provider will see the disclosed records.

How do I approve or deny a recommended level of care?

Open the level of care determination, update status to approved or revisions required, and add comments as needed.

What happens if a referral or level of care determination is rejected?

The provider receives the status and comments, makes changes, and resubmits. No new record is needed.

How do I know what provider or facility to select in a referral?

Use the search icon to select from available providers/facilities. In production, all data from WITS will be migrated.

How do I handle verbal consent in Hawaii CARES?

Enter the date of verbal consent and mark as captured physically if needed. The system currently requires a signature or physical capture. You can upload a physical document if required by your agency.

How do I see a client's provider history or previous care episodes?

Use the client's consents and level of care determinations to see which providers have entered data.