



Provider Information Session Preparing New Jersey for EVV

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Webinar Presenters



NATHAN BURGESS

Director, Client Success (NJ EVVMS Contract Manager)

- 13 years of healthcare IT and payment integrity experience
- Prior experience at HMS in the payment integrity space focused on FWA
- Proven track record in information technology, operations, and program management



FATIMA SHEIKH

Implementation Specialist, Implementation Services

- 5+ years of healthcare IT, Analytics, and healthcare training
- Prior experience at CVS Pharmacy (Corporate), Agadia, & Asembia
- Worked previously as a Regional Trainer, Data Analyst & Business Analyst





Agenda

- About HHAeXchange
- What's Happening in New Jersey
- Understanding the EVV Process
- Next Steps/Timeline
- Demo





About HHAeXchange





HHAeXchange Mission & Purpose

To provide **simpler** and **better outcomes** for clients who represent some of the most vulnerable and fragile members of our society.

HHAeXchange connects the dots among payers, providers and clients. We're minimizing risk and simplifying processes across our homecare client environments.

Our Promise:

Enable the most effective homecare ecosystem every day





HHAeXchange as a Partner



4,300+ Homecare Agencies



\$12.8B Billed Annually



510,000 Patients Serviced



553,000 Caregivers Working

As of February 2020



198M Visit Confirmations

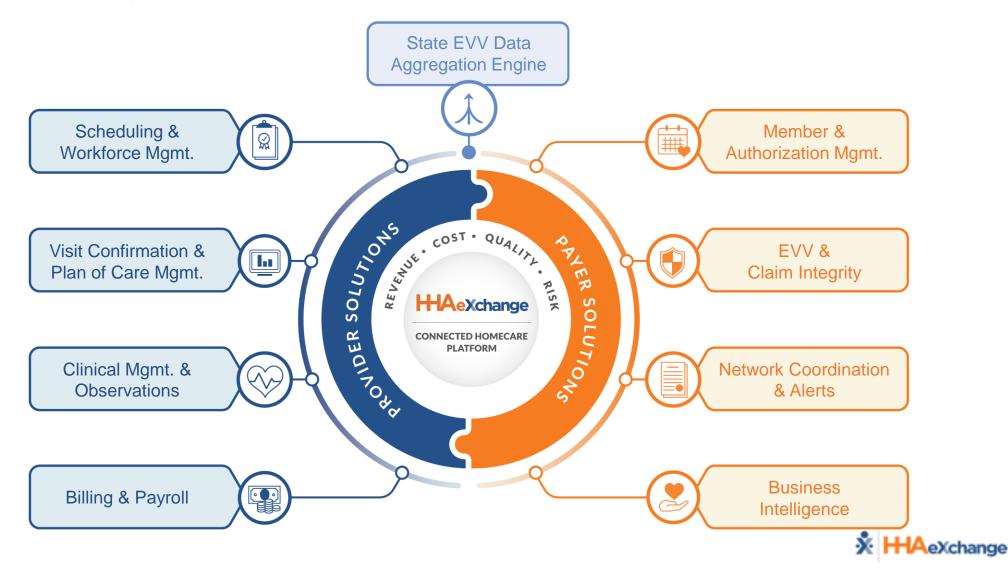


42,500+ Back-Office Users



Integrated Solutions for Homecare Stakeholders: Providers, Payers, States

Enabling enhanced economic performance and improved compliance across the homecare ecosystem



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What's Happening in New Jersey?





The 21st Century Cures Act

Passed by Congress in December 2016, the 21st Century Cures Act requires that providers of Personal Care Services confirm visits via Electronic Visit Verification (EVV) by January 1, 2021.





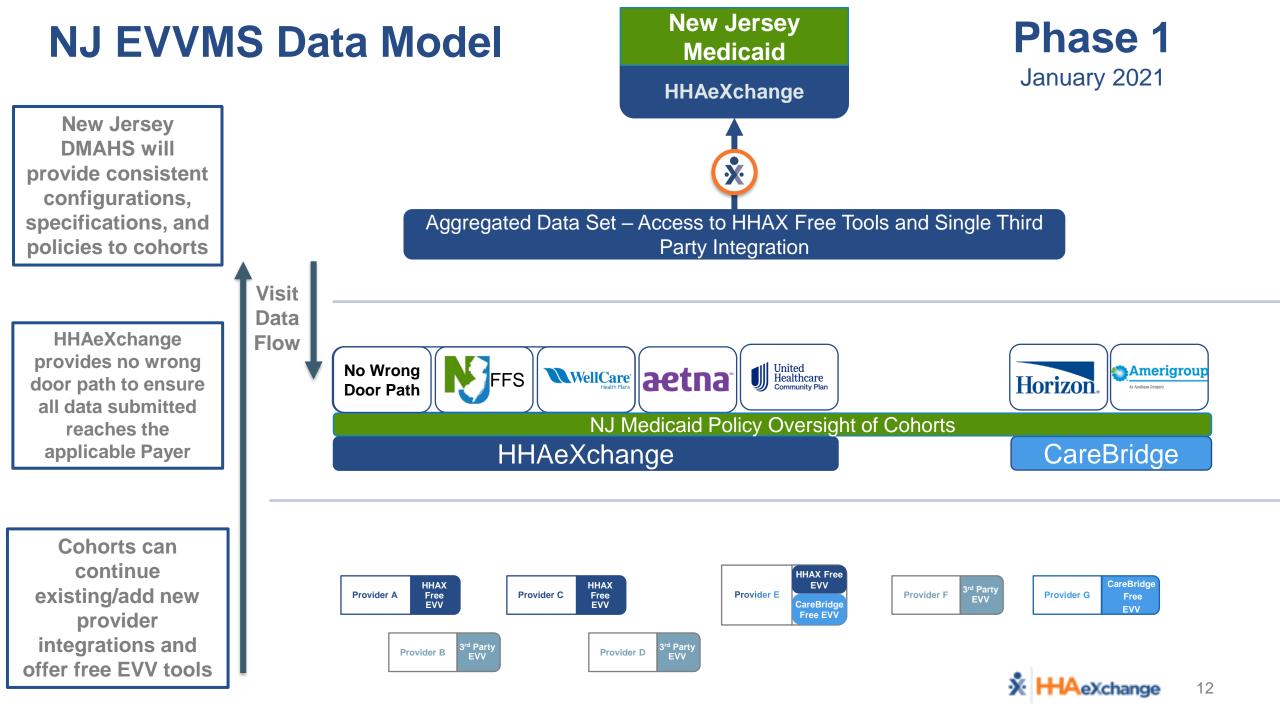


New Jersey and EVV

- New Jersey providers must implement EVV by January 1st, 2021
- New Jersey is an **Open Model state**
- HHAeXchange has been selected as the State Aggregator
- The State has adopted a "No Wrong Door Path" approach: HHAeXchange will consolidating all visit data, regardless of the EVV system being used.

Understanding the EVV Process and Your Options





Provider Services in Scope

- Personal Care Assistance_15M (T1019)
- Personal Care Assistance Group (T1019_HQ)
- Personal Care Assistance_PD (T1020)
- Personal Care Assistance (Self Directed) Individual (T1019_SE)
- Personal Care Assistance (Self Directed) Individual Agency (T1019_SE_UI)
- Personal Care Assistance Group (Self Directed) Group (S5125_SE_HQ)
- Personal Care Assistance (Self Directed) Group Agency (S5125_SE_U3)
- DDD Individual Supports (H2016HI)
- DDD Individual Supports (H2016HI22)
- DDD Individual Supports (H2016HIU8)
- DDD In Home Respite (T1005HI)
- DDD In Home Respite (T1005HIU8)
- DDD Community Based Supports (H2021HI)
- DDD Community Based Supports (H2021HI22)
- DDD Community Based Supports (H2021HI52)
- MLTSS Home Based Supportive Care (S5130)
- MLTSS Home Based Supportive Care Self Directed (S5130_HQ)
- MLTSS In Home Respite (T1005)



Provider Options





Provider Options

- Provider Types:
 - Option 1 Use your existing EVV system or a system you intend to implement by January 1 to collect and report to each plan and/or to DMAHS
 - Option 2 Use Free EVV tools provided by each Health Plan (HHAeXchange for WellCare, Aetna, UHC* and Fee-for-Service members; CareBridge for Horizon and Amerigroup members)
 - Option 3 Use the Free EVV tools provided by DMAHS (HHAeXchange) to collect and report visit data for all members regardless of Health Plan or Fee-for-Service.

Option 1: Timeline

Step	Timeline Dates	Expectations
1	October 21 st ,2020	Review API Specifications, Business Requirement document for Integration, and sign attestation. Review the (<u>API Specifications link once approved/published</u>) and (<u>Business Requirement</u> <u>link once approved/published</u>) documents to determine if you have resources and the ability to integrate with the New Jersey (NJ) EVV aggregation project
2	October 22 nd , 2020	Initiate contact with HHAX to begin the integration process Please submit a ticket to edisupport@hhaexchange.com with the subject line 'NJ EVV'.
3	Monday, October 26, 2020 Tuesday, October 27, 2020 Thursday, October 29, 2020 *Please select only one session to attend	Attend the Provider Information Session Sessions will be split between morning and afternoon including a demo of the HHAX platform. Attendance is only required for ONE session as all sessions provide the same information. The pre-recorded webinar sessions will allow for a Q/A chat option to answer all your questions. (Info session link found here)
4	November 12 th , 2020	Complete the LMS Course Complete the Learning Management System (LMS) video series, including the video (video link to be shared later)
5	December 8 th , 2020	Go Live Data for all Providers The Go Live date for all Providers is December 8th, 2020. *Note, providers contracted with WCNJ are going live 09/28/2020)
6	January 1 st , 2021	EVV Mandate All paid claims under the EVV mandate (PCS services) need to be supported by the visit data to be compliant with the CURES ACT Mandate.





Option 2 & 3: Timeline

Step	Timeline Dates	Expectations
1	Monday, October 26, 2020 Tuesday, October 27, 2020 Thursday, October 29, 2020	Attend the Provider Information Session Sessions will be split between morning and afternoon including a demo of the HHAX platform. Attendance is only required for ONE (1) session as all will provide you with the same information. The pre-recorded webinar sessions will allow for a Q/A chat option to answer all your questions. (Link found here)
2	November 12, 2020	System User training (applicable for providers using HHAeXchange) Receive login credentials for Learning Management System to review videos, documents, and test questions to ensure an understanding of the HHAeXchange Provider Portal.
3	November 30, 2020	Log-in to your Provider Portal Receive your Provider Portal credentials to login to the system and begin entering your caregivers. Ensure your portal is setup prior to go-live and work with your caregivers to ensure they are prepared for EVV (i.e. download the mobile caregiver app, review the EVV phone instructions).
4	December 8, 2020	Go-Live for all Providers Providers are expected to start utilizing the HHAeXchange Provider Portal to schedule, confirm and bill EVV compliant visits. Providers should ensure to move toward being EVV compliant prior to January 1 st , 2021. *Note: providers contracted with WellCare of New Jersey are expected to utilize HHA starting 09/28/2020 to schedule, confirm and bill EVV compliant visits for all WellCare members.
5	January 1 st , 2021	EVV Mandate All paid claims under the EVV mandate (PCS services) need to be supported by the visit data to be compliant with the CURES ACT Mandate.





Provider Workflow in HHAeXchange

Benefits of the HHAeXchange Portal

EVV Management

- Member Management for NJ FFS & 5 MCOs
- Clock-In / Clock-Out Exception
 Dashboard
- Submission / Aggregation of EVV
 Data to NJ FFS & 5 MCOs
- Mobile Application in Multiple
 Languages
- Telephony Lines in English and Spanish

Scheduling

- Master Week Scheduling
- Case & Scheduling Coordination
- Plan of Care Management for NJ FFS, Aetna, United, and WellCare

Communication

- Real-Time Two-Way Messaging with NJ FFS, Aetna, United, and WellCare
- Streamlined workflows

Benefits of the HHAeXchange Portal

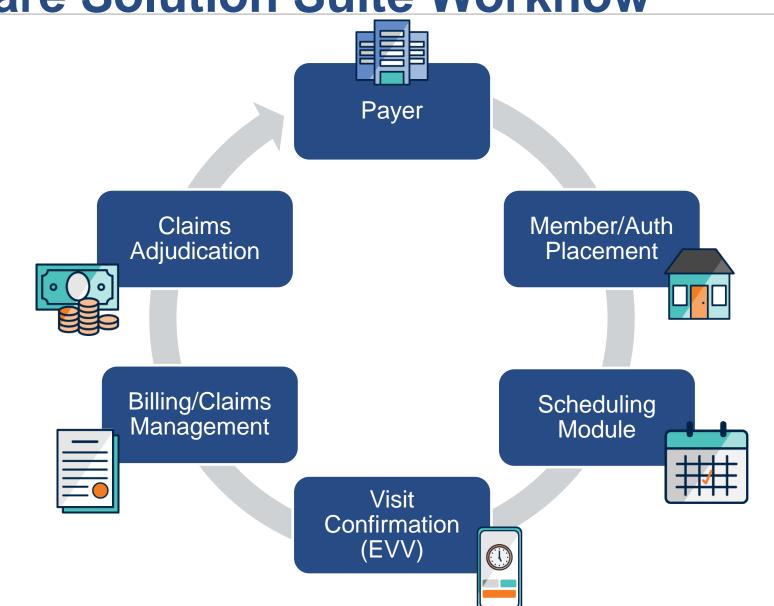
Compliance

- Automatic Authorization Receipt from NJ FFS, Aetna, United, and WellCare
- Manual Authorization Input for Amerigroup and Horizon
- Plan of Care Adherence
- Visit Confirmation Compliance
- Visit reporting to Horizon and Amerigroup

Billing

- Prebilling Claims Scrubbing
- real-time pre-claim edit checks to improve billing acceptance rates
- Invoice batching and direct eBilling and eRemittance
- eBilling (837) / eRemittance (835) for NJ FFS, Aetna, United, and WellCare

Homecare Solution Suite Workflow





Member & Authorization Management

- Providers will be receiving members and authorizations before go-live for the payers listed below:
 - Fee for Service
 - Aetna
 - United Healthcare
 - WellCare of NJ
- Providers will be responsible for adding new members and entering Authorizations into the system
 - > Amerigroup
 - > Horizon
- Providers will manage the member phone 2 & 3 and additional addresses sections of the Member Profile page within HHAeXchange to reflect where services should be provided



Communication

- Communicate directly in HHAeXchange with
 - Fee for Service
 - Aetna
 - United Healthcare
 - WellCare of NJ
- The HHAeXchange communication module will be the preferred method of communication for the payers above, but your regular modes of communication with each payer is still available
- The specific communication reasons will vary; however, listed below are some common examples:
 - Authorization Edit
 - > Death
 - Hospital and Other Admissions
 - Hospital Discharge
 - Missed Service
 - > Other





Communication Types

Member Notes
 (Communication between Provider and Payer related to a Member)

Automated Notes

(System Generated Notes, such as Authorization and Status Change)

Payer Communications

(Communications between Provider and Payer not related to a Member)



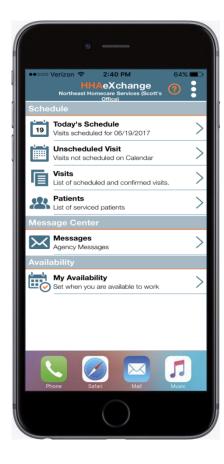
Scheduling

- Simplify schedule management with the ability to create recurring shifts or one-off visits
- Schedulers and coordinators can easily create and manage patient schedules based on authorizations, plans of care, and special patient needs, while validating each visit to eliminate complications at billing

Visit Confirmation EVV

HHAeXchange EVV Methods

Telephony



Caregiver Mobile App

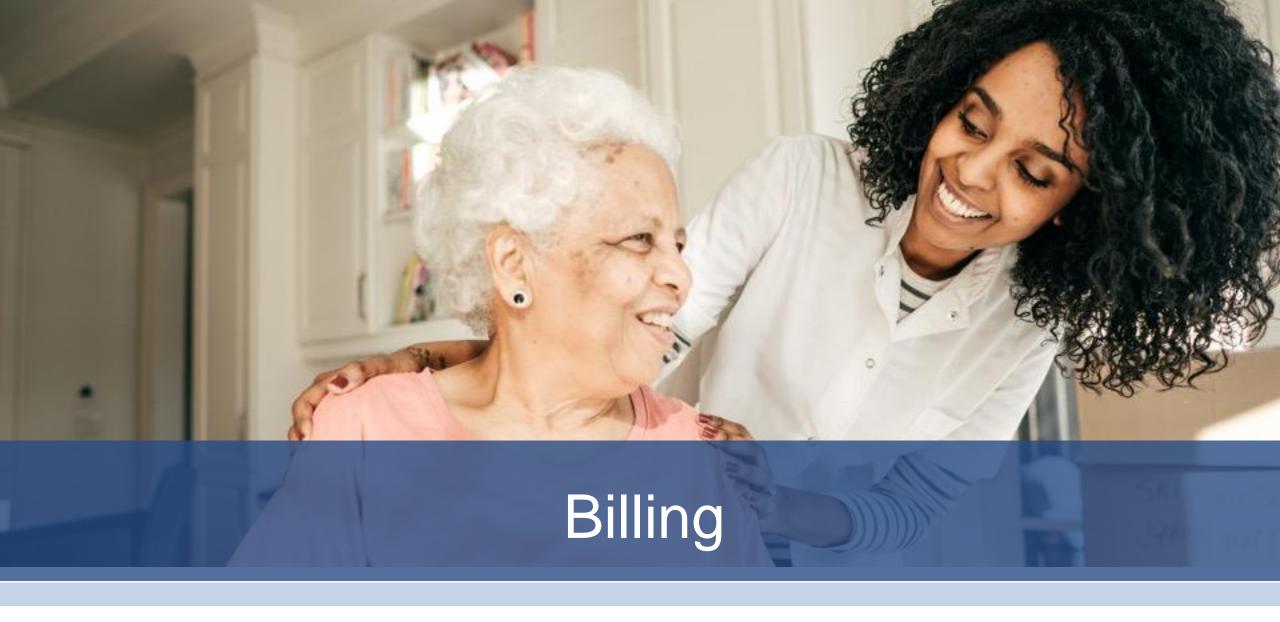


FOB Device



Manual Visit Confirmation

- Manual Visit Confirmation is required when a Caregiver fails to place EVV or EVV cannot be linked to the appropriate Visit
- > Manual visit confirmation or any EVV edit requires a reason and action taken
- > During audits, providers may be expected to provide documentation to validate services





Submitting Claims

Billing through HHAeXchange will only apply to services for NJ DMAHS FFS, Aetna, UHC, and WellCare

- > Authorizations are required for billing through the HHAeXchange platform
 - > Each payer is responsible for sending the authorizations into HHAeXchange
 - Provider to use appropriate service codes for scheduling services
- Providers are required to resolve all pre-billing issues before billing
 - HHAeXchange runs each invoice through a series of common billing error rules prior to the claim being released
- Re-billing will be done using HHAeXchange in the event anything needs to be corrected on the claim

Submitting Claims Cont.

- For denied claims, providers should continue to contact the appropriate payer's claims team for clarification
- > The HHAX provider portal will facilitate any required re-billing and correction to a claim

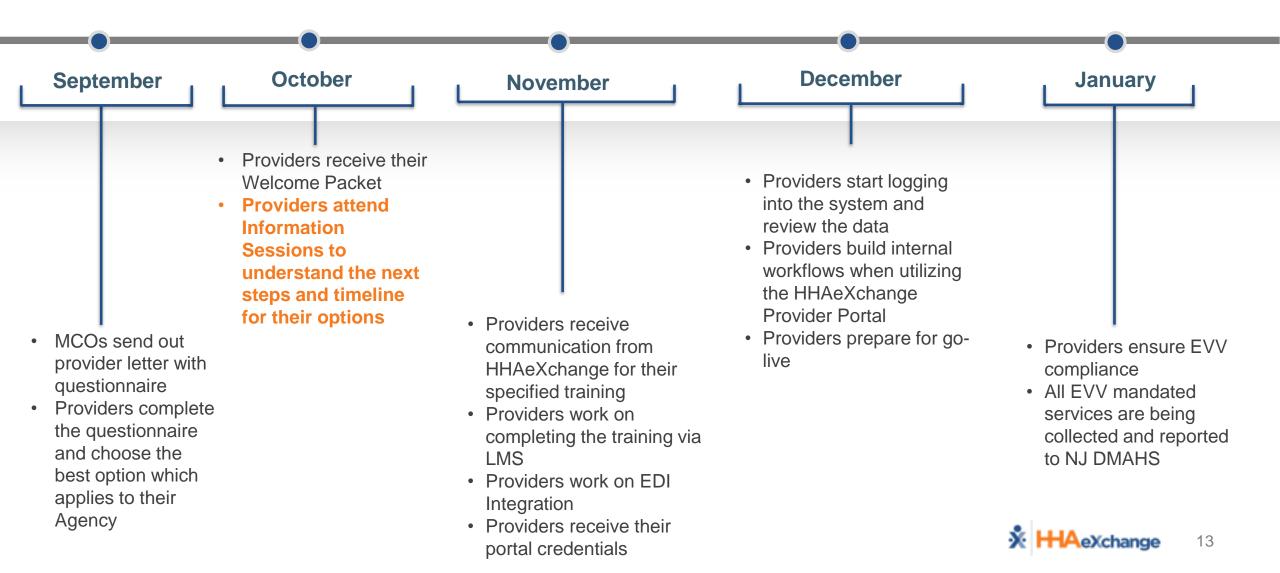
For claims resolution, please continue to follow the same process of contacting the MCO or NJ DMAHS

For additional system usage assistance, re-billing and correction to claims, please e-mail HHAX at support@hhaexchange.com



Timeline for Providers

Provider Onboarding Milestones by Month



Next Steps After This Session

- Visit the New Jersey DMAHS Information Center : <u>https://hhaexchange.com/nj-dmahs/</u>
- Complete the **Provider Portal Survey** under the "Overview" tab
 - Portals will be created, and credentials sent out one week prior to system user training
- Determine users for system access (admin, coordinators, caregivers, etc.)
 - Register for System User Training session *link will be sent via email*
 - Caregiver Online Learning Center is available on the Provider Information Center under the "Training" tab
- For EDI Providers **ONLY**:
 - Begin EDI Integration
 - Register for EDI Training Session *link will be sent via email*





System Demo





Contact Us



support@hhaexchange.com



855-400-4429

