

June 6, 2022

Healthfirst Provider Information Session

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➤ — **Team Introductions**

➤ — **Information Session Goals and Overview**

➤ — **Provider Landscape + Key Implementation Dates**

➤ — **Provider Workflow in HHAeXchange**

➤ — **Contact Information**

Team Introductions



Healthfirst

Marvin Brown

AVP, Ancillary Provider Services

HHaExchange

Brandon Jones

Project Manager

Sarah Murphy

Implementation Specialist

HH AeXchange Implementation Overview





Information Session Goals

- Distribute key information about the timeline of the HHAeXchange implementation
 - Understand the provider options for using HHAeXchange with Healthfirst
- Review the future-state provider workflow in HHAeXchange
- Understand the key next steps for providers to be ready for go-live
- Provide contact information and where to find additional resources and support to prepare for go-live

Cures Act Mandated EVV



Section 12006 of the 21st Century Cures Act requires states to implement an Electronic Visit Verification (EVV) system for Medicaid-funded Personal Care Services (PCS) by January 1, 2019, and for Home Health Care Services (HHCS) by January 1, 2023. Federal legislation delayed penalties for PCS implementation until January 1, 2020, and a Good Faith Exemption extended the deadline to January 1, 2021.

HHAXchange will be implemented for Healthfirst on **August 15, 2022**, to ensure compliance with the Cures Act. All EVV-mandated claims will be required to be submitted through HHAX as of **January 1, 2023**

The six data elements
Required to be collected
to meet the CURES Act
EVV Requirement



What is HHAeXchange?



HHAeXchange is the premier Homecare Management Software company for the Medicaid LTSS population. We are the leaders in connecting payers and homecare agencies to enable more collaboration, communication, and workflow efficiencies. Through the use of the HHAeXchange portal, our goal is to make working with Healthfirst easy and efficient.

How We're Helping Healthfirst Meet the Cures Act Mandate

- Industry-leading scheduling and billing platform for back-office users and EVV confirmations
- Easy-to-use point-of-care visit confirmation tools for caregivers

What does the HHAeXchange Portal provide to homecare agencies?

- Electronic case placement and authorization transfer
- Efficient schedule and visit management
- Free EVV solution for time & attendance and duty tracking
- Electronic billing



Services in Scope

Personal Care Aide

- Level I 15 Minutes
- Level I Two Client
- Level I Multiple Client
- Level I Weekend/Holiday
- Level II Basic – 15 Minutes
- Level II Basic Two Client
- Level II Multiple Client
- Level II Hard to Serve
- Level II Two Client Hard to Serve
- Level II Weekend/Holiday
- Level II Live In
- Level II Live in Two Client
- Level II Live in Two Client Hard to Serve
- Level II Live in Weekend/Holiday

Consumer Directed Personal Assistant

- Basic – 15 Minutes
- Enhanced
- Two Consumer
- Two Consumer Enhanced
- Live in
- Live in Enhanced
- Live in Two Consumer
- Live in Two Consumer Enhanced



Services in Scope Continued...

Nursing

Nursing Assessment/Evaluation

Nursing Care in Home (RN)

RN – Per Hour

Nursing Care in Home (LPN)

LPN – per hour

Home Health Care

Occupational Therapy

Physical Therapy

Speech Therapy

Nutritional Counseling

Medical Social Services



Notable Exceptions/Unique Processes (CHHA's)

- Service code S9122 (rev code 572) is not in scope. Healthfirst will not be sending authorizations for this.
- Code T1001 is in scope but not mandated by EVV. Please submit this code through HHAeXchange. If it's submitted outside of HHAeXchange it will not be denied

Provider Options





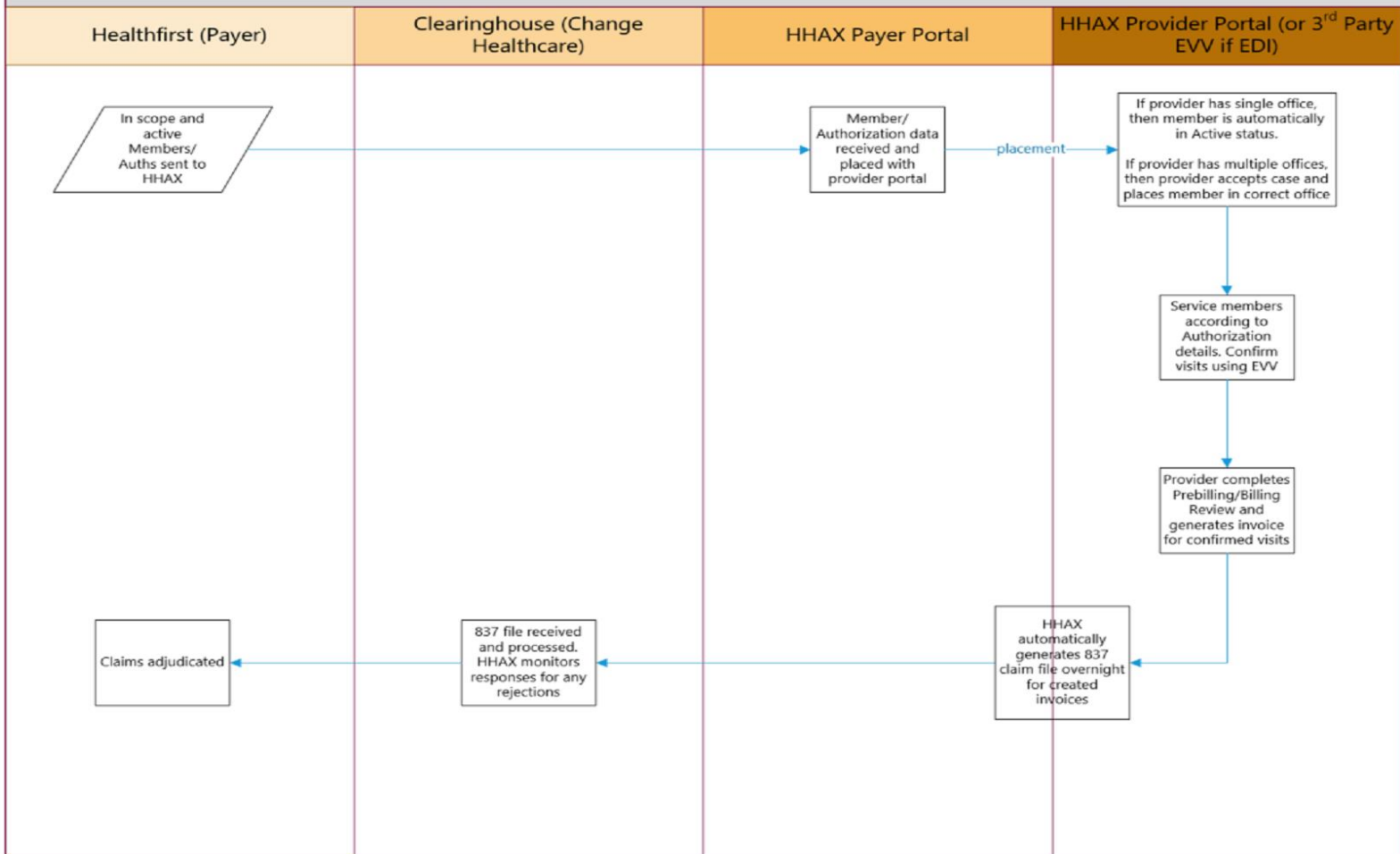
Provider Landscape

- **Existing EDI Providers:** Providers who have their own HHAX portal which is used to integrate confirmed and billed visit data with their third-party EVV system
 - EDI providers may continue to work in their own system, but the data will be sent to HHAX via integration
- **Existing Free EVV Providers:** Providers who have their own Free EVV HHAX portal which is used to manage EVV and billing to ensure compliance with linked payers
- **New Providers:** Providers who do not have an existing HHAX provider portal (including CHHA's). These providers have two options for this implementation:
 - **EDI:** Integrate their existing third-party EVV system with an HHAX portal to send confirmed and billed visits to Healthfirst
 - **Free EVV:** Use a Free EVV HHAX portal to confirm and bill visits

HHAX Provider Workflow Review



End-to-End Process Map





Member Management

- Members and Authorizations will be sent to your provider portal prior to the 8/15 go-live
 - Providers will validate the data received to ensure accuracy and reach out to Healthfirst with any discrepancies
 - Providers will have the option to make changes to member demographic information in the system including phone number and mailing address updates. Providers cannot change a members' billing address.
- Providers with multiple HHAX offices (locations), will need to accept the case and assign to the correct office prior to servicing member; providers with a single HHAX office will receive the placement automatically
- Members are discharged from their HHAX portal by the payer based off the latest authorization loaded to the system
 - Members will be discharged on the last day of service plus an additional 30 days. The authorization file coming to HHAX from Healthfirst will indicate any applicable authorization end dates for members. Discharge will happen 30 days after the end date
 - Members will be reactivated by receiving a new authorization sent to HHAX via file



Authorization Management

- Providers will use the authorization imported to HHAX to schedule, confirm, and bill visits for members
 - Providers will validate the data received to ensure accuracy and reach out to Healthfirst with any discrepancies
 - Authorizations will be sent as total hours for the duration of the authorization to HHAX. Providers will need to check the notes to determine the weekly breakdown of hours.
- Authorizations will be transmitted from Healthfirst to HHAX. The process to request/adjust authorizations will remain the same as it is today.
- Healthfirst will be sending diagnosis codes on the file. Providers are responsible for validating and adjusting diagnosis codes as needed in HHAX. Further system training on how to do this will be provided.



Visit Confirmation

- Visits will be confirmed using EVV, either using the HHAeXchange EVV tools or a third-party vendor's EVV tools
- Manual visit confirmations require a timesheet to be maintained outside of HHAX for auditing purposes
 - In HHAX, providers will enter an edit reason and action taken for why the visit was manually edited
- For missed visits, providers are required to indicate the OMIG missed visit reason and action taken
- Plan of Care compliance will not be enforced by Healthfirst in HHAX



Billing Process

- For dates of service 8/15/2022 and forward, providers can submit invoices via the linked contract in HHAX
- HHAX will generate the 837-claim file and send to Change Healthcare
 - HHAX will monitor clearinghouse responses to ensure successful transmission
- Once the claim is received by Healthfirst, standard adjudication and payment process will follow
 - The current process for receiving an 835 will remain in place (either through Change Healthcare or VPay)
 - Any required rebilling will occur in HHAX
- **Starting January 1, 2023, any claims for in-scope, EVV-mandated service codes submitted outside of HHAX will be denied by Healthfirst**
 - All EVV-mandated claims will be required to be submitted through HHAX as of this date to ensure the required visit data elements are being captured in accordance with the Cures Act



Billing Process

- Providers will be responsible for resolving all Prebilling and Billing Review issues in HHAX to ensure invoices are compliant and to reduce denials
- Initial rates will be uploaded as part of the 8/15 go live conversion only. Providers are responsible for updating rates ongoing





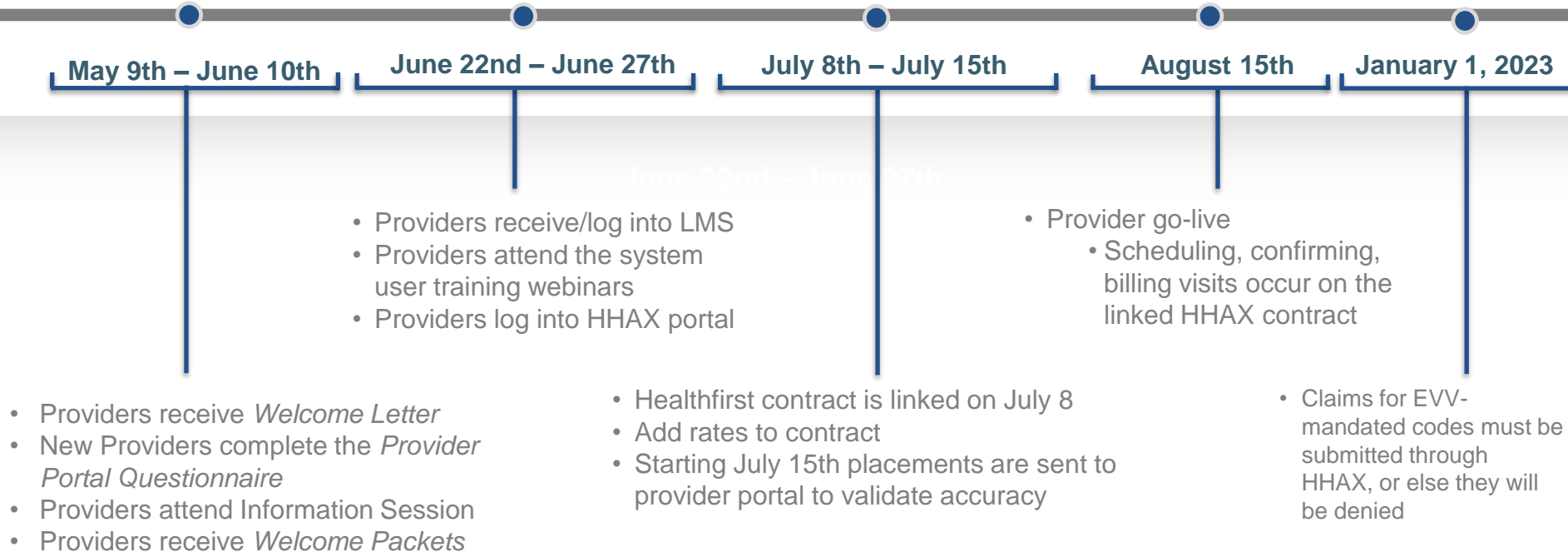
Communications

- The HHAeXchange Communication Module will be used at go-live. This application allows providers to send and receive messages to and from Healthfirst in a timely manner. It also allows you to keep the two-way communication history safe, secure, and easily accessible. Further training to be provided on this.
- For Healthfirst-related communications (plan specific policies/procedures, authorization requests, claims questions etc...), providers should contact your account manager or the provider call center: 1-888-801-1660
- For all HHAX-related communications (system questions/troubleshooting, training requests etc...), providers should contact support@hhaexchange.com
 - If EDI (third-party EVV integration) related, then contact EDIsupport@hhaexchange.com

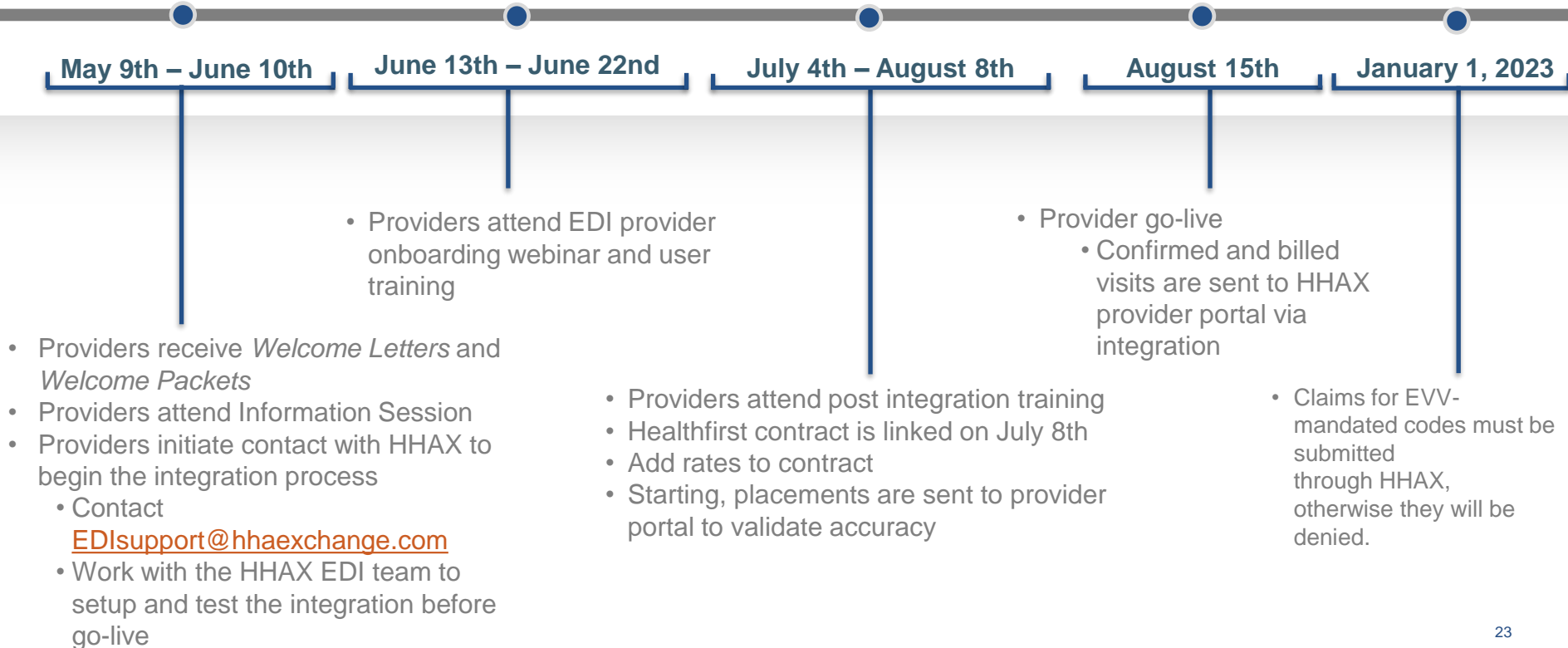
Timeline and Next Steps



Provider Onboarding Milestones: Free EVV + New Providers



Provider Onboarding Milestones: EDI Providers





Next Steps

- EDI Providers:
 - Contact EDIsupport@hhaexchange.com with the subject line of “Healthfirst Integration” to initiate the integration process with your third-party EVV vendor
 - [Register](#) for the *System User Training Webinar Week*
- New Providers + Free EVV Providers:
 - [Complete](#) the *Provider Portal Questionnaire*
 - [Register](#) for the *System User Training Webinar Week*

Contact Information





<https://hhaexchange.com/healthfirst>



HHAeXchange Support
support@hhaexchange.com



HHAeXchange Support
1-855-400-4429

Healthfirst Provider Call Center:1-888-801-1660