

A background image showing a smiling man in a wheelchair in the foreground, with a smiling woman standing behind him. The image is overlaid with a blue-to-orange gradient.

Healthfirst Enterprise Provider Training

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- — **Provider Information Overview**
- — **Enhanced Linked Patient Functionality + Demo**
- — **Go-Live Preparedness + Implementation Tasks**
- — **Provider Reminders**
- — **Timeline, Next Steps, and Resources**



Provider Overview: Enterprise Providers

- Healthfirst will implement the HHAeXchange enhanced linked contract functionality on **Monday, November 14, 2022.**
- As part of this partnership, Providers within their network will be implemented on a new and improved linked ecosystem: the **Universal Patient Record**. The “UPR” experience vastly improves upon core workflows including (but not limited to) patient management, authorization management, and payment integrity.
- HHAeXchange is fully committed to your success as an agency within this ecosystem. With that in mind, we have made several enhancements that allow for more flexibility and ease of use with linked payers.

Demo





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

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



Go-Live Preparedness + Implementation Tasks

- Providers will receive members and authorizations on the linked Healthfirst payer contract by **October 17, 2022**
 - If you are missing any members or authorizations, please contact Healthfirst with specific details
- Members will be sent as **Confirmed** unless the provider has multiple offices, in which case they will be sent as **Pending**
 - If sent as Pending, please accept the placement from the *Pending Placement Queue* and assign the member to the correct office as soon as possible.
 - If receiving a **Pending** placement, review the Service Code and Zip Code on the auth to confirm which office the member should be placed in
- Patient Merge
 - Providers are encouraged to merge member records as soon as they are received on the UPR contract



Member Management

- Members and Authorizations will be sent to your provider portal prior to the go-live date
 - 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 must be confirmed using EVV
- 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



Visit Confirmation Continued

- Rounding Rules:
 - 15 minute service codes will be rounded to the nearest 15 minutes if 7 or more minutes are complete (Example: 1 hour 37 minutes rounds up to 1 hour 45 minutes.
 - If 6 minutes or less, it will be rounded down
 - For hourly codes, EVV confirmation times between 0 and 52 minutes amount to 0 units so need at least 53 minutes to get credit for the full hour
- Plan of Care compliance will not be enforced by Healthfirst in HHAX
- Any caregiver restrictions will need to be handled by the provider (Healthfirst will not be tracking or maintaining caregiver restrictions)
- TT/OT will also not be in scope for Healthfirst in HHAX



Billing Process

- On or before dates of service **11/14/2022** 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 Continued

- 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 11/14 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 will be provided on this.
- Healthfirst has specific note reasons configured in the application.
 - Authorization edit
 - Member expired
 - Missed initial visit (Start of Care)
 - Vacation/Out of Area
 - Hospital Discharge
 - Demographic Updates (anything other than billing information)
 - Other
- Please continue to follow the CURRENT process for anything outside the above areas.

Timeline and Next Steps



Provider Onboarding Milestones: Enterprise Providers





Patient Merge & Contract Set Up

- If you completed the [Enterprise Provider Office Linking Survey](#), the offices you designated will be linked beginning Oct 17th.
- If you do not complete the survey, then *all* NY offices will be linked.

Patient Merge	<ol style="list-style-type: none">1. Accept the placements from the linked contract ASAP.2. Perform Patient Merge from internal to linked with existing Patient record in same office (to ensure all Members for Healthfirst are transferred over)3. After merging, Providers can update the Bill To field on MasterWeeks and Calendar for dates of service (go-live date) and forward on the linked contract
Contract Configuration Copy	<ol style="list-style-type: none">1. Review the editable configurations on the linked contract. Please review the contracted service codes added on the HHAeXchange Portal (Admin > Contract Setup > Search Contract (Contract Name: Healthfirst) > Billing Rates Tab).2. Providers can add rates to the new contract based on their current contract amount.3. Providers are given the flexibility of managing and editing their rates as needed.



Provider Onboarding Next Steps

Step	Date
Enhanced Linked Contract Training	Tuesday, October 4 Thursday, October 6 Friday, October 7
UPR Contract Linking	Starting Monday, October 17
Member + Auth Data load to linked contract	<i>Once linked to Healthfirst Member and Auth data will begin to load to your provider portal</i>
Provider Go-Live Support Webinar	Monday, November 7 <u>Register Here</u>
Provider Go-Live	Monday, November 14



<https://hhaexchange.com/healthfirst/>

HHAeXchange Support



Live Chat | support@hhaexchange.com

- Providers with an existing HHAeXchange portal please use the **HHAeXchange Live Chat** within your Support Center to receive assistance from a Live Agent.
- *The Live Chat option is recommended for quicker response times.*



Healthfirst Support: 1-888-801-1660

HHAeXchange Support: 1-855-400-4429