August 31st, September 8th, September 9th, 2021

Nascentia Health Provider Information Session

Agenda

Team Introductions

Information Session Goals

Provider Landscape & Key Implementation Dates

Provider Workflow in HHAeXchange

Next Steps and Questions

Team Introductions

Nascentia

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HHAeXchange

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Information Session Goals

o Distribute key information about the timeline of the HHAeXchange implementation

o Understand the services in scope and benefits of using HHAeXchange

o Review the flow of information in HHAeXchange

o Provide contact information and where to find additional resources

Implementation Overview + Goals

Cures Act Mandated EVV

Section 12006 of the 21st Century Cures Act requires states to implement an 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.

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

- Type of Service Performed
- Individual Receiving the Service
- Date of the Service
- Location of the Service Delivery
- Individual Providing the Service
- Time the Service Begins and Ends

What is HHAeXchange?

HHAeXchange is the premiere 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 Nascentia easy and efficient.

How We're Helping Nascentia 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
- Real-time two-way messaging with Nascentia
- Free EVV solution for time & attendance and duty tracking
- Electronic billing

Services in Scope

Personal Care Aide – 15 Minutes

Personal Care Aide – Live In

CDPA Basic – 15 Minutes

CDPA – Two Consumer

CDPA – Live In

CDPA – Live In Two Consumer

Provider Landscape

o **Enterprise**: Providers who already use HHAeXchange for EVV, member management, and enterprise functions

o **Third-party (EDI):** Providers who have their own EVV system and will integrate with HHAeXchange to get visit data to Nascentia

    o EDI providers may continue to work in their own system for scheduling, confirming visits, and billing, but the data will be sent to HHAeXchange via integration with the third-party EVV vendor. Communications with Nascentia will be done within the HHAeXchange portal

o **Free EVV:** Providers who opt to use the HHAeXchange Free EVV portal to ensure compliance with linked payers
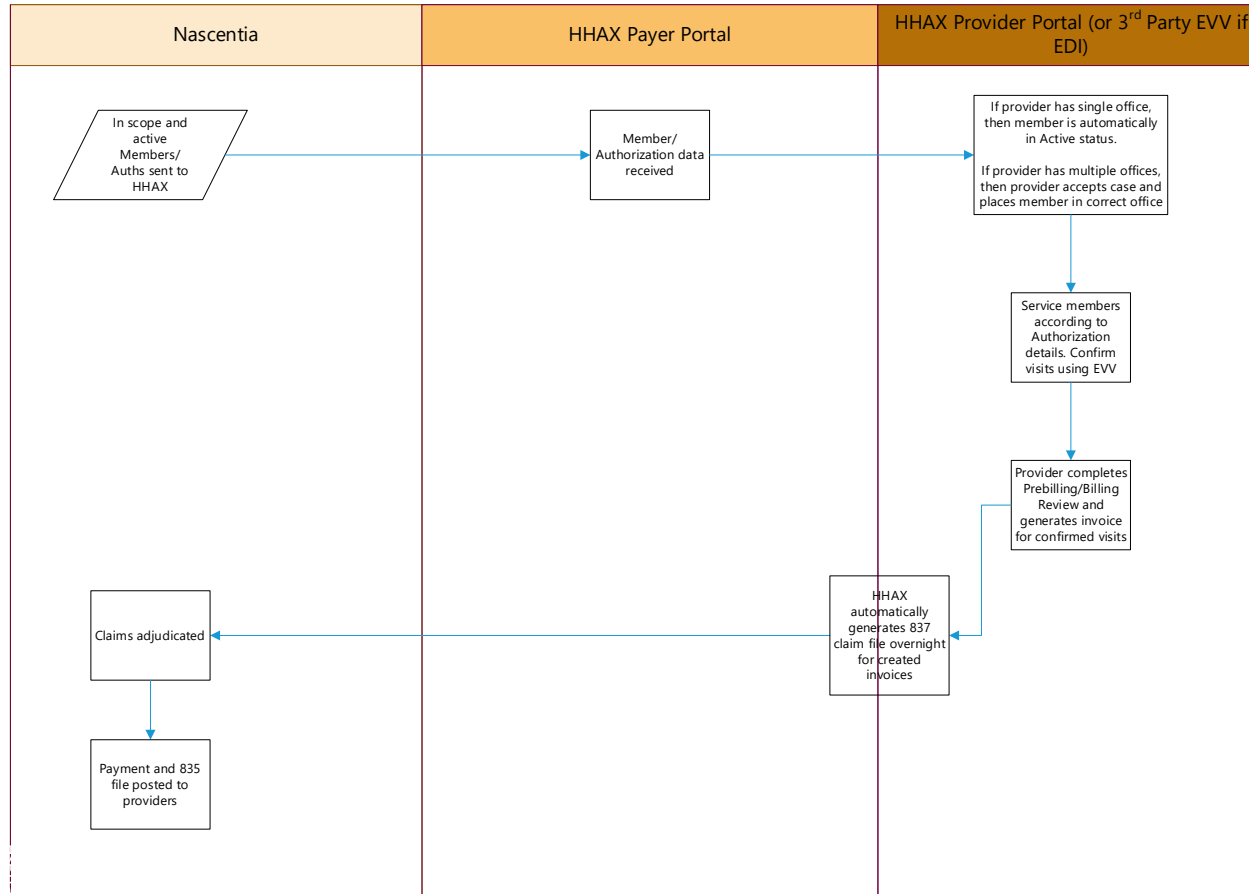
Key Implementation Dates

o Welcome Packet: sent 8/31/21

o Provider Training Sessions: 9/27/21 – 10/1/21
  o Different session depending on provider type

o Linked Nascentia contract loaded to HHAeXchange: 9/29/21

o Member/authorization data loaded to provider portals: 10/4/21

o Provider go-live with linked contract: 10/18/21

Provider Workflow in HHAeXchange

End to End Process Map

Nascentia	HHAX Payer Portal	HHAX Provider Portal (or 3rd Party EVV if EDI)
In scope and active Members/ Auths sent to HHAX	Member/ Authorization data received	If provider has single office, then member is automatically in Active status. If provider has multiple offices, then provider accepts case and places member in correct office
		Service members according to Authorization details. Confirm visits using EVV
		Provider completes Prebilling/Billing Review and generates invoice for confirmed visits
Claims adjudicated	HHAX automatically generates 837 claim file overnight for created invoices	
Payment and 835 file posted to providers		

Member Management

o Initial placements will be sent prior to the 10/18/21 go-live
- o Providers should validate member information to ensure accuracy, and reach out to Nascentia with any exceptions/missing data

o Placements will be sent as confirmed unless the provider has multiple offices, in which case it will be sent as pending
- o Placements will be sent to providers based off the TIN/NPI
- o Providers with multiple offices will accept cases directly in the HHAX provider portal and select which office to place member in

o Members will be discharged based off member eligibility
- o Automatic discharge notification will be sent directly in HHAeXchange once date is loaded

Authorization Management

o Existing authorizations will be sent prior to the 10/18/21 go-live
  o Providers should validate member information to ensure accuracy, and reach out to
    Nascentia with any exceptions/missing data
  o Authorizations will be Weekly in HHAeXchange

o For authorization updates, providers will enter a request utilizing the HHAX
  communication module for the Nascentia team to review
  o If updates are needed, a new authorization will be sent through the system and the provider
    will receive a communication note advising there is a new authorization

o For service interruptions, providers will notify Nascentia using the communication
  module (e.g. hospitalization, member vacation etc…)
  o Nascentia will update the authorizations for the member according to the dates that services
    will not be rendered

Visit Confirmation

o Visits will be confirmed via EVV, either using the HHAeXchange EVV tools or a third-party vendor's EVV tools

    o Missed visits are required to be recorded in HHAexchange, using the OMIG mandated missed visit reasons and action taken

o Timesheets are required for a manual visit confirmation, and should be maintained outside of HHAeXchange

    o During audits, providers will be expected to provide documentation to validate services

Billing Process

o Effective 10/18/21, all claims for in scope services should follow the below steps

1. After clearing all Prebilling exceptions in HHAX, provider creates invoice and claims batch for all billable visits
2. HHAeXchange generates an 837p claim file overnight and sends to Nascentia
3. Claims are adjudicated by Nascentia
4. Provider retrieves remits using existing process

Billing Process

- o Providers are responsible for managing rates in HHAeXchange

- o Providers are requested to bill in weekly increments

- o Rebilling will be completed in HHAeXchange in the event that a correction/adjustment is needed on the claim

- o For denied claims, providers should contact the Nascentia Claims Department for clarification and review

Communications

o The HHAeXchange communication module will be the preferred method of communication between payer and provider

o Providers will use the below note reasons to communicate with Nascentia via the HHAeXchange portal:

- o Authorization Edit
- o Calendar Note
- o Change in Condition
- o Change in Service
- o Change of Schedule
- o Critical Adverse Incident
- o Death
- o Delete Authorization

- o Health/medical crisis
- o Hospital and Other Admissions
- o Hospital Discharge
- o Member family caregiver change due to emergency
- o Member request for provider change
- o Missed service
- o Vacation/Out of Area
- o Other

Next Steps

Next Steps

o Review the Welcome Packet for more details on the implementation

o Register for System Training being held 9/27 – 10/1

o If EDI provider, contact EDIsupport@hhaexchange.com as soon as possible to initiate the integration process with your third-party vendor

o Visit the Provider Information Center for key dates and details: https://hhaexchange.com/nascentia/

o Reach out to HHAeXchange Support with any system questions: support@hhaexchange.com; 855-400-4429