Senior Whole Health – Enterprise Provider Training

Enhanced linked Experience with Universal Patient Record

Senior Whole Health – Provider Information Session

- Senior Whole Health has partnered with HHAeXchange to implement the Professional Platform and Linked Contract Functionality by December 5th, 2020
- As part of this partnership, Senior Whole Health and all 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, communications, authorization management, and payment integrity
- This partnership will also prepare Senior Whole Health for the 21st Cures Act and EVV compliance. HHAeXchange will be providing aggregation services for submission of EVV data to eMedNY for the provider network
- HHeXchange 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

Patient Placement

Linked Contract Workflows
Placement Received • Providers may review pending placements on the Home module > Linked Communications tab.
Reviewing Placement Details • Placement details include information basic demographic information, special requests, and authorizations.
Accepting/Denying Placements • Providers may accept, deny, or request more time to make a decision regarding the placement. • Placement may also be sent as "Confirmed" or to an "Unspecified" Office.
Patient Profile Creation • A new Linked Patient profile is made available for the Provider to schedule service.
Reviewing Daily Placement Info • Providers may review daily placement info on the Pending Placement Queue.

Patient Placement

Senior Whole Health Enhanced UPR Contract Workflows

Placement Received

- Providers will continue to review pending placements on the Home module > Linked Communications tab.

Reviewing Placement Details

- Placement details include information basic demographic information and authorizations.

Accepting/Denying Placements

- Master Week schedules set on the Patient Profile post-placement.
- Providers may accept, deny, or request more time to make a decision regarding the placement.
- Placements may also be sent as “Confirmed” or to an “Unspecified” Office.

Patient Profile Creation

- A new Contract for the associated Payer is automatically assigned (whether Accepted by the Provider or sent as a Confirmed placement).
- Any demographic data/patient authorizations entered by the Payer used to populate Internal record.

Reviewing Daily Placement Info

- Providers will continue to review daily placement info on the Pending Placement Queue.

Patient Management

Linked Contract Workflows
Demographic Management • Providers restricted from editing demographics unless permitted to by Payer.
Authorization Management • Providers must wait for Payers to send authorizations. In lieu of a true authorization, Providers may create an Internal Patient record for the patient, assign an Internal version of the Payer Contract, and create an Authorization for scheduling/payroll purposes.
Patient Status Management • Patient status is controlled by the Payer.
Duplicate Records Management • If two (or more) records exist for the same Patient, the “Other Placements" feature allows Providers to link the records together so they may easily jump between profiles. Consolidation of multiple records related to a single patient must be done manually.

Patient Management

Senior Whole Health Enhanced UPR Workflows
Demographic Management • Provider has control over patient demographic information. This includes (but is not limited to) Patient Name, Address, DOB, and Medicaid ID.
Authorization Management • Provider may create a TEMP authorization for Payer Contracts for the patient to schedule/pay caregivers for service. When the Payer authorization is received, the TEMP auth may be removed.
Patient Status Management • Provider can update the status of the Patient to On Hold, Hospitalized, or Discharged.
Duplicate Records Management • If two (or more) records exist for the same Patient, the “Merge” feature may be used to reconcile said records (Visit info, Invoices, demographics, etc.).
Contract Management • Providers may edit the Service Start Date and Discharge Dates for Payer Contracts. Additionally, they may add Payer Contracts manually to Internal records.

Contract Management

Linked Contract Workflows

Billing Rates Management

- Providers may edit billing rates if permitted by the associated Payer.
- Providers may add non-billable rates.

Billing/Collections Management

- Providers may configure general billing/collections setup (including Billing Reference Person, Invoice Type, etc).
- Provider may setup Automated Collection Notes.

Scheduling/Confirmation Management

- Provider has access to a limited number of workflow options related to visit scheduling and confirmation.

Contract Management

Senior Whole Health Enhanced UPR Workflows
Billing Rates Management • Providers may edit billing rates if permitted by the associated Payer. • Providers may add non-billable rates.
Billing/Collections Management • Providers has access to a greater number of general billing/collections setup configurations including (but not limited to) Time Filing Limit, Invoice Organization, and Default Internal Collection Representative. • Provider may setup Automated Collection Notes.
Scheduling/Confirmation Management • Provider has access to a greater number of workflow options related to visit scheduling and confirmation including (but not limited to) requiring clinical documentation for skilled visits, requiring specific fields when editing visits, and validating visit confirmation matches duty minutes.

Scheduling

Senior Whole Health Enhanced UPR Workflows
Visit Creation • Contract Selection • Copy/Paste & Copy and Create
Visit Management • TT/OT • Missed Visit Reason • Travel Time Request • Adjusted Hours • Banked Hours • Secondary Contracts
Visit Rates

Patient Profile

Senior Whole Health Enhanced UPR Workflows
Patient Rates
POC Management

Invoicing/Exporting

Senior Whole Health Enhanced UPR Workflows
Invoicing Visits • Follows Internal Billing workflow
“Save and Send” vs “Save and Export” • Claim does not send at the end of the day
Managing Exported Claims • Check Export Process • Review Claim Batch to ensure all Invoices are Exported

Re-Billing

Senior Whole Health Enhanced UPR Workflows

Re-Billing

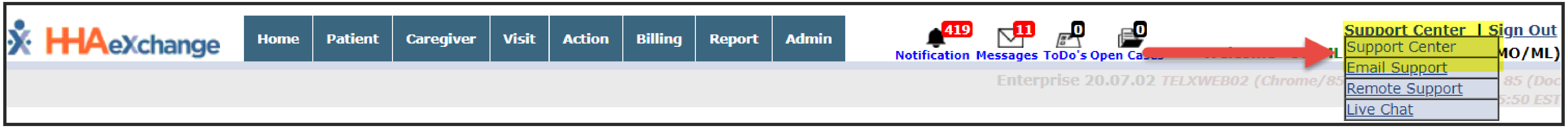
- 3rd Party
- Billing Adj. Hours
- TT Hours (Adjustments/Voids)
- Mandatory TRN

Go Live Preparedness & Implementation Tasks

- Providers will receive members and authorizations on the Senior Whole Health contract 11/24
  - All offices with an address in NY will be linked to this contract. If you'd like to specify which offices should be linked, please provide this info to your Client Success Manager or send an email to djakubovitz@hhaexchange.com
- Members will be sent as Confirmed (Active status), unless the provider has multiple offices, in which case they will be sent as Pending
  - If sent as Pending, please Accept and assign the Member to the correct office promptly
- Providers can merge member records as they are received, and are encouraged to do so prior to the 12/5 go-live
  - Providers will discharge internal members prior to the 12/5 go-live
- Use the HHAX Communication Module if there are any issues/concerns regarding the Member/Auth data received
  - To prevent claim denials, providers should not change the Primary Billing Address or Phone Number 1

Contact Info

- https://hhaexchange.com/senior-whole-health/
- Support@hhaexchange.com
- edisupport@hhaexchange.com (Integration related)
- SWHProviderRelationsNY@magellanhealth.com (SWH related items)
- Support Center (Accessible through the HHAeXchange application):



Questions ?

- Please submit your questions using the Q/A chat option on your control panels for this Zoom Webinar