# UnitedHealthcare Community Plan of NY Go-Live Support

April 2023

# Agenda

**Provider Information Overview**

**Go-Live Preparedness + Implementation Tasks**

**System Functions**

**FAQs**

**Support Resources**

# Provider Landscape

**Enterprise Providers**

o Providers who have their own Enterprise HHAX portal as their agency management and EVV solution.

o You will be able to continue using HHAeXchange, utilizing the system's enhanced Linked Contract functionality.

**Existing EDI Providers:**

o Providers who have their own HHAX portal which is used to integrate confirmed and billed visit data with their third-party EVV system

o EDI providers may continue to work in their own system, but the data will be sent to HHAX via integration

**Existing Free EVV Providers:**

o 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:**

o Providers who do not have an existing HHAX provider portal. These providers have two options for this implementation:

  o **EDI:** Integrate their existing third-party EVV system with an HHAX portal to send confirmed and billed visits to UnitedHealthcare Community plan of NY

  o **Free EVV:** Use a Free EVV HHAX portal to confirm and bill visits

# In Scope Services

# Services in Scope

## Services Included in the Program

Adult Companion

Home Health Aide

Homemaker

Skilled Nursing

Personal Care

Home Health Care Services

# HHAeXchange System Functions

# Go-Live Preparedness + Implementation Tasks

o Providers are receiving **members and authorizations** on the UnitedHealthcare Community Plan of NY linked contract starting April 3, 2023.
  o If you are missing any members or authorizations by 4/17, please contact United Healthcare Community Plan of NY with specific details.

o Members will be sent as **Confirmed** unless the provider has multiple offices, in which case they will be sent as **Pending**
  o 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.
  o If receiving a **Pending** placement, review the Service Code and Zip Code on the auth to confirm which office the member should be placed.

o Patient Merge
  o Providers are encouraged to merge member records as soon as they are received.
  o After the merge is complete, update the 'Master Week Bill To' to reflect the UnitedHealthcare of NY contract.

# Member Management

o Providers will validate the data received to ensure accuracy and reach out to UnitedHealthcare Community Plan of NY with any discrepancies

o **Members are discharged from their HHAX portal by the payer based off the latest authorization loaded to the system**

    o Members will be discharged on the last day of service **plus an additional 15 days**.
    o Members will be reactivated by receiving a new auth in HHAeXchange.
    o Members will be reactivated by receiving a new authorization sent to HHAX via file

# Authorization Management

o   Providers will use the authorization imported to HHAX to schedule, confirm, and bill visits for members

    o   Providers will validate the data received to ensure accuracy and reach out to UnitedHealthcare Community Plan of NY with any discrepancies

    o   Authorizations will be sent as total hours for the duration of the authorization to HHAX.

o   Authorizations will be transmitted from UnitedHealthcare Community plan of NY. If an authorization needs adjusted/corrected, providers will reach out to the Payer via the communications module

# Visit Confirmation

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

o   Manual visit confirmations require a timesheet to be maintained outside of HHAX for auditing purposes
   o   In HHAX, providers will enter an edit reason and action taken for why the visit was manually edited
   o   For missed visits, providers are required to indicate the OMIG missed visit reason and action taken

o   Plan of Care compliance will not be enforced by UnitedHealthcare Community Plan in HHAX

# Billing Process

For dates of service 04/17/23 and forward, providers can create invoices via the linked contract in HHAX

Providers will complete prebilling and billing review to ensure correct claim formatting.
    Note: Billing is optional and providers are able to continue billing through their existing model.
    However, confirmed visits/EVV must still be submitted via the linked contract in HHAX.

Once the billing steps are completed by the provider, HHAX will automatically generate and export the 837 claim file

Providers will manage their own rates in HHAX, and are responsible for adding rates prior to submitting first invoices
    Three rate regions are configured on the linked contract to account for varying rates by region
- NYC Burroughs
- Outer Counties
- Westchester/ Long Island

# Communications

o The HHAeXchange Communication Module will now be used for UnitedHealthcare Community Plan of NY

o For all HHAX-related communications (system questions/troubleshooting, training requests etc.), providers should contact [support@hhaexchange.com](mailto:support@hhaexchange.com)

o Providers can use the following reasons to communicate via HHAX

- •Existing Auth – Date/Units Correction
- •Missing Member/Auth in HHAX – Needs Upload
- •Care Management – Agency Change
- •Care Management – Change in Condition
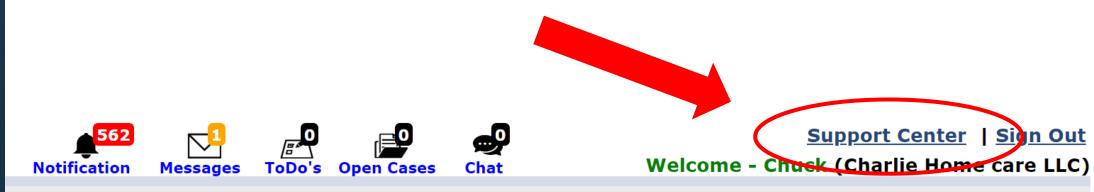- •Care Management – Hospitalization

# FAQs

**Question: Where can I access Training Support and Resources?**

**Answer:**
1) Visit the UnitedHealthcare Community Plan of NY Provider Information Center:  https://www.hhaexchange.com/info-hub/unitedhealthcare-community-plan-of-ny
2) Visit the Support Center once you have logged in to your portal.

**Question: How can an admin user create an additional user?**

**Answer:**
- Users designated with roles to edit permission are granted the ability to add New Users and deactivate User Accounts in the system.
- Navigate to Admin > User Management > New User to access the Add New User page.
- Refer to the Admin Functions Process Guide (pg. 3) for additional information.

## Missing Member & Authorization Information

**Question: What do I do if I am missing a member and/or authorization from the new linked UnitedHealthcare Community Plan of NY contract?**

**Answer:**

- Contact UnitedHealthcare Community Plan of NY using the communication module.  This feature allows both parties to communicate with one another within the HHAX portal. Please refer to the [Communications Process Guide.](#)

**Question: Why can't I change the member demographics on my members profile? How do I do that?**

**Answer:**

- The billing address and primary phone number are controlled by the payer. The Provider can update the additional member demographic fields by editing the member profile. Refer to the [Patient Placement and Management Process Guide (pg. 9)](#)
- If the billing address or primary phone number need to change, please send a communication to UnitedHealthcare Community Plan of NY through the HHAX portal.

**Question: How do I retrieve the mobile ID?**
Answer:  When first setting up the mobile app, the system will create the mobile ID.  Navigate to Settings and User Agreement to find the Mobile ID.

**Question : How do I reset mobile app password for my caregivers?**
Answer:  A caregiver can reset their own password directly from the login screen using the "Forgot Password?" link.

Please refer to the Caregiver Mobile App Process Guide for more information.

## Provider Rates

**Question: Can I update my service code rates on the linked contract?**

Answer:
- Yes.  A provider can add or update rates for service codes on the linked contract.

**Question: How do I update my rates?**

Answer:
- Navigate to the Bill Info Tab for a visit, then go to Contract Setup/Billing Rates to manage rates.

Please refer to the Universal Patient Record (UPR) Guide (pg. 13)

## Travel Time / Over Time (TT/OT)

**Question: How do I document travel time or over time?**

**Answer:**
Travel time and over time is not in scope for this implementation.

## Diagnosis Code Management

**Question: Can I change or update the Dx code for UnitedHealthcare Community Plan of NY members?**

Answer:
- The Dx code will be added/edited by providers. No Dx code will be imported from the payer. Invoices without a Dx code will be held for billing

**Question: How is mutual care authorized by UnitedHealthcare Community Plan of NY?**

Answer:
- Mutual cases are enabled in HHAeXchange
- Authorizations are issued for both mutual member with the full number of hours and providers should schedule both members with overlapping schedules.
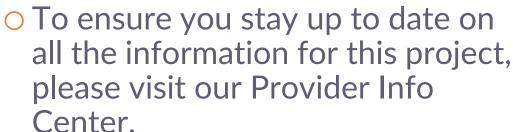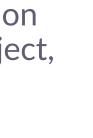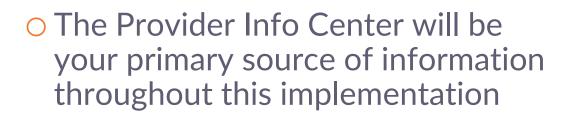
# Support Resources

# Provider Info Center

o To ensure you stay up to date on all the information for this project, please visit our Provider Info Center.

o The Provider Info Center will be your primary source of information throughout this implementation

o The website also contains all documents such as welcome packets and training links

https://www.hhaexchange.com/info-hub/unitedhealthcare-community-plan-of-ny

# Provider Resources

**State Info Hub**
www.hhaexchange.com/info-hub/unitedhealthcare-community-plan-of-ny

**HHAeXchange Support**
Support@hhaexchange.com
EDISupport@hhaexchange.com

**HHAeXchange Support**
1-855-400-4429

**Payer Contact Information:**
**United Healthcare Community Plan of NY provider advocate, at nyhp_hcbspra@uhc.com**