

# Frequently Asked Questions

The following are a list of Frequently Asked Questions (FAQs) which can be used by HHAExchange (HHAX) System Users. Please note that any inquiry should first verify that the caller is one of the designated Super Users of the HHAX system before giving the caller information on contacting HHAX Customer Support directly. Refer to the [Communications section](#) of this guide.

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## Program

### What is HHAeXchange’s role in West Virginia?

HHAeXchange is contracted with WV DHHR as the EVV Aggregator Solution. Through HHAeXchange, the State provides you with a free EVV solution to manage members, view authorizations, schedule, confirm, and bill EVV compliant visits. Each Provider has one Portal allowing them to manage EVV across all members they service in the state.

### What steps do I need to take to be compliant with the EVV Mandate?

All information regarding EVV compliance is published on the [WV EVV Information Center](#). As a Provider in WV, take the following steps:

- Complete the Provider Portal Survey found at [Provider Portal Questionnaire](#)
- Follow the directions outlined in the EVV welcome packet
  - [HHAeXchange Provider EVV Welcome Packet](#)
  - [HHAeXchange Provider EDI Welcome Packet](#)
- Attend a Provider Information Session – recordings are on the WV EVV Information Center
- Complete System User Training
- Start using or reporting EVV visit data to HHAeXchange

### Which Providers does EVV impact?

The EVV mandate applies to any agencies who provide the service codes listed on the [WV EVV Information Center](#) under “Services in Scope”.

### Does EVV apply to services provided in the community?

All services requiring an in-home visit are subject to the EVV mandate. EVV applies to visits that start and end in the home.

### Where can I find additional information from WV DHHR on EVV?

WV DHHR maintains a EVV-specific webpage that Providers can review for updated program information ([WV DHHR EVV](#)). Visit the [HHAeXchange WV EVV Information Center](#) to access all WV EVV project information.

## Administration

### I need a new user ID. Who should I contact?

Users with the ADMIN Role at your Agency can create New Users in the HHAeXchange system. Refer to the [Creating New HHAeXchange Users Job Aid](#) for instructions.

**I need to deactivate a User. What should I do?**

Users with the ADMIN Role at your Agency can deactivate HHAeXchange Users in the system. Refer to the [Creating New HHAeXchange Users Job Aid](#) (**Deactivate User Account** section) for instructions.

**What should I do if my password doesn't work?**

To troubleshoot common password issues, request the user to check the following:

- Is the Login name entered correct?
- Is [Caps Lock] selected?

If these troubleshooting tips do not work, the Super User can reset passwords for other users as follows:

1. Locate the user (**Admin > User Management > User Search**)
2. Edit the user, and select **Change Password** on the *Update User Account* Page

Refer the Super User to the HHAX [Admin Functions Process Guide](#) for further details.

**If I forget my password will I get locked out after too many attempts?**

The system allows up to 4 attempts at login. Thereafter, the User needs to contact the Agency Administrator (Super User) to unlock or reset their password.

**How can I enable or disable permissions?**

Only a Super User has the rights to enable/disable permissions for a role. To change permissions, the Super User is to follow the steps below:

1. Locate the user (**Admin > User Management > Edit Role**)
2. Select the **Section** (and optionally the user's **Role**) for the permission, then click **Search**.
3. Grant or remove individual permissions using the checkboxes and **Save**.

Refer the Super User to the HHAX [Admin Functions Process Guide](#) for further details.

**I enabled or disabled a permission(s), but nothing happened?**

If a permission has been changed, instruct the user to exit their active session and log in again to the system to see the effect of the permission change.

**What are the different user Roles in HHAX?**

There are several roles to which a User can be assigned to including **Admin**, **Coordinator**, and **Billing**. Each role is equipped to access the corresponding functionalities in the system. To learn about the different roles and how to assign, click [Creating new users](#) to view process guide.

**How can I set up EDI?**

Please refer to the EDI Process Section in the [WV EVV Information Center](#) to obtain the most updated details of this process.

**System**

**Do we have to use military time? Can it be changed?**

Yes, the system is designed to operate on military time and cannot be changed.

**What are the system requirements? Is there a preferred web browser?**

HHAX is a web-based solution requiring internet connection. The system works best with Internet Explorer.

**Are all the names and information used in training fictitious? If not, how do you protect client's info?**

Yes, a training environment containing fictitious data is used to facilitate demos and webinars.

**Patient Placement**

**Will the State send all Authorizations through HHAX where Agencies can bid before accepting a Patient? Can a Patient request or choose a preferred Agency?**

Typically, Patients inform the State of their preferred Agency. The State, in turn, places the Patient with that Agency. Patient cases are presented by the State as Placements in HHAX as **Confirmed**.

- **Confirmed Placements** go directly from the Payer to the Provider without the need for Provider to accept.

**Is the auto-email also used to inform Providers of new referrals?**

An automated email notification (Common Notifications) for new Placements can be set up by the Agency Admin (Super User). The Placement email is for notification purposes only; a new Placement can only be accepted by a user that is logged into the HHAX system.

**We wish to remain with our current electronic medical records (EMR) system. How can we connect to the HHAX system to obtain referrals?**

Remaining with your EMR system is not an issue, however, some functionalities (such as Placement Acceptance, Payer Communications, and Billing the Payer) are managed via HHAX. In this case, please sign up for the portal by completing the survey and selecting the EDI Process as your EVV choice. Click [WV EVV Information Center Overview](#) to access details and guidance.

## Patient and Authorization Info

### I'm using the HHAExchange EVV Tool. What Patient and Authorization data will be provided from the State?

HHAExchange is the contracted EVV Aggregator for the State of West Virginia. As the EVV solution, all Patients and Authorizations that fall under the EVV mandate are provided by the State and connected automatically to the Provider Portal for scheduling, confirming, and billing EVV compliant visits.

### My Patients is not in the system. What should I do?

Troubleshooting tips:

1. When searching for Patient via **Patient > Search Patient**, select "All" from the **Status** filter to ensure Patient Status has not changed from ACTIVE.
2. When searching for a Patient via **Patient > Search Patient**, select "All" from the **Coordinator** filter to ensure the search returns all Patients.

If the Patient still cannot be located, please contact your State Provider Relations Team. If they cannot locate the Patient, then they will contact HHAExchange directly to ensure there are no interface issues.

### I cannot find my *discharged* Patient in the HHAExchange system.

To find *discharged* Patient, navigate to **Patient > Search Patient**. Note that the default value for Status is "Active". To find a *discharged* Patient, select "Discharged" from the **Status** filter which provides Search Results for Patients who are no longer active.



### I can't see the Authorization. Why?

Check the **Patient > Authorization** page. If there is no record on the Authorization page, then check back periodically over the next 1 to 2 days, as it may take up to 24 hours for a new Authorization to appear in the HHAX system.

If not available within 48 hours of receiving the Authorization letter, please contact your State Provider Relations Team to ensure the Authorization has been processed. If they cannot locate the Patient, then the Payer will contact HHAExchange directly to ensure there are no interface issues.

**The Patient information is incorrect. What should I do?**

If the Patient's Name, Gender, Date of Birth, Phone Number or Address is incorrect, please contact your State Provider Relations Team to update the required information. Refer the user to the [HHAX Patient Placement and Management Process Guide](#) for further details.

**The Authorization is incorrect. What should I do?**

Review the Authorization letter. If the Authorization letter received conflicts with what is in the HHAX system, please contact your State Provider Relations Team.

**Are Authorizations sent by the Payers in hours or in units?**

Authorizations are sent in Units (which includes hours).

**Will all past Patient Authorizations appear in the system?**

The system stores all authorizations, which can be viewed in the Patient's Authorization page. The last three authorizations are shown on the Patient's Calendar page and Master Week.

## Caregiver Management

**Do we have to enter in our Caregivers or do they get loaded by the State?**

Whether using HHAX EVV or an EDI integration, Caregivers are sent by the State from Gainwell. Please ensure your Caregivers are first enrolled with Gainwell. Once the enrollment is complete, the Caregivers are loaded into HHAExchange for agency use for scheduling, confirming visits, and billing.

## EVV Issues

**Patient refused to let Caregiver use the phone. What should I do?**

The Caregiver should use a Timesheet to manually record the Start and End Times for their visit and submit the completed form to their Administrator. Timesheet information can then be entered manually on the visit from the calendar view.

**How do I create a permanent schedule for the future?**

If you are an HHAX EVV Agency, you can create a Master Week as a template for your weekly scheduled Visits.



**Patient refuses use of the landline and the Caregiver does not have a smart phone. How do I request a FOB device?**

If you are an HHAX EVV Agency, you can request a FOB device by contacting WV DHHR.

**EVV Exceptions**

**The Caregiver clocked OUT instead of clocking IN. Can this be corrected?**

If the Caregiver accidentally recorded an IN Call as an OUT call (or vice versa), this can be corrected as listed below:

1. Navigate to **Visit > Call Dashboard > Call Maintenance**.
2. Search for the call using the status *Potential In/Out Mistake*.
3. When the call is located, click the desired link (Out or In) the “Call Type” field.
4. Click the **OK** button to confirm the action.

**Can I link a call that was previously rejected?**

Calls that have been **Rejected** can no longer be linked to a scheduled Visit. When rejecting a call, be sure that it cannot be linked to a Visit.

**I fixed a call exception and I still see the same call on the Call Maintenance page. What should I do?**

If a fixed Call Exception does not clear, click the **Search** button to refresh the Call Maintenance page. The exception should no longer be listed once corrected.

**How soon are newly added Phone Numbers (Phone 2 and/or Phone 3) available the on a Patient’s Profile?**

A newly added number is saved immediately in the Patient’s Profile and available for use in any subsequent calls. However, calls in the Call Dashboard require overnight reprocessing to link to the visits.

**Many residents are moving away from landlines. Can the phone number entered be a cell phone number?**

The phone number should be associated with a landline.

**How I can fix the calendar when a shift is covered by a different Caregiver?**

If you have TWO Caregivers rendering services, you can create TWO different shifts on the same day directly in the calendar. If the shift was covered by another worker, and the calls did not automatically link, this can be fixed via the **Call Dashboard** by updating the scheduled caregiver.

## Billing-Related Items

For Prebilling and Billing related questions, contact HHAeXchange Customer Support at [wvsupport@hhaexchange.com](mailto:wvsupport@hhaexchange.com).

### What Payers can I bill through HHAeXchange?

HHAeXchange is the EVV solution for WV DHHR. All claims will be created through the HHAeXchange Portal and sent electronically via an 837 eBilling file. Creating and submitting the 837 through HHAeXchange is the process being implemented by WV DHHR to ensure that all EVV mandated services submitted and paid are EVV compliant. Billing for the CSED program will continue to go directly to Aetna, not through HHAeXchange. However, all EVV visits for CSED members must be recorded in HHAeXchange prior to billing.

Agencies will continue to have the ability to receive an 835 eRemittance file from their Gainwell portal.

### If HHAX is creating the 837, the Provider has no knowledge of the claim number. Without knowledge of the claim number, how do Providers apply the payment?

Third Party Providers, Providers with their own EVV solution, will import the claim number for us to pass along. If Providers use our system to create the invoice, then we provide that number for their records. Providers can apply payments using their third-party invoice number or the number issued by HHAX.

### Who maintains synchronicity of the records to produce clean claims?

HHAeXchange works with WV DHHR to maintain accurate member, Provider, and authorization data through automated file interfaces. WV DHHR allows Providers to manage their own billing rates. Refer to the [Rate Management Job Aid](#) for details on how to complete the set-up prior to billing.

### If the NPI is wrong, the Provider may be unaware, and the claim will “Black Hole”. What do we do?

The HHAX RCO Team proactively monitors and provides mitigation or communication to Providers. Within the HHAX platform you will have full visibility into the lifecycle of a visit from scheduling, confirming, claim submission, and status (999 responses).

### How do we handle rebills, adjustments, and voids?

Providers can handle any rebills, adjustments, and voids directly through the HHAX platform. A Claim Number or TRN is needed to adjust a claim which is provided in the 835. Specific instructions on how to rebill can be found in the Provider Portal Support Center. Detailed training is also available through LMS.

**I cannot find a visit for invoicing. What do I do?**

If a visit cannot be found, it may be caught by the Prebilling process. Refer to the steps below to locate the visit and address the issue that is preventing it from being invoiced.

**Prebilling Review**

Visits that have been confirmed, but do not meet all validation requirements, are held in the Prebilling Page in HHAX. Follow the steps below to review visits held in Prebilling:

1. Navigate to the **Billing > Prebilling Review** screen.
2. Enter the desired search parameters to locate visits.
3. Review the reason(s) the visit did not pass the validation in the **Problem** column.

Refer to the [Prebilling Process Guide](#) for details and best practices to correct each validation reason listed in the Problem column.

**Billing**

Visits that have passed the Prebilling Review process and have been invoiced, but do not meet all requirements for submission, are held in the Billing Review Page in HHAX. Follow the steps below to review visits held in Billing Review.

1. Navigate to the **Billing > Billing Review** screen.
2. Enter the desired search parameters to locate visits.
3. Select the **Detail View** to review the **Hold Reason(s)** for the visit that cannot be billed.

Refer to the [Billing Process Guide](#) for further details regarding the Billing Review process.

**Help, I am being held up in Prebilling for Caregiver Compliance.**

Although Caregiver Compliance appears as a warning in the Prebilling stage, this validation does not stop you from billing. Once all other pre-billing validations are cleared, the visit will be available for invoicing.

**Where is Employee Time verified before Prebilling?**

If you are referring to Confirmation times, then refer to the Patient or Caregiver Calendars to find this information.

**How do I print an invoice?**

Follow the steps below to print an invoice for further processing:

1. Navigate to the **Billing > Print Invoices** screen
2. Select the desired **Contract** (Payer) and click **Search**
3. Select the checkbox(es) to the left of the invoice(s) to be printed, and click **Print Invoice**

Refer to the [Billing Process Guide](#) for further details regarding invoices.

**Does HHAX automatically send our invoice batches to the State, or are we required to do that?**

HHAX sends out 837s directly to the State in an overnight process.

**We have some clients that get TWO visits per day. How would we submit that?**

The system can accommodate multiple visits for a Patient in the same day within the same invoice, as long as the Service Code is the same.

**How do we know all claims were accepted by the State? Do we get 999 files back from either HHAX or the State?**

Providers receive an 835 file in their Gainwell portal. 999 files normally come from a clearinghouse providing information on issues with the formatting of the 837 files. Because HHAX is the sender and receiver of your files, no 999 files are needed to be received by Providers directly. The status of the claim is displayed in your Provider Portal so you have visibility, but the HHAX RCO Team monitors for any 999 rejections.

**If multiple visits are billed for one day for one client, do these visits roll into one claim?**

Yes, the Nightly Process merges multiple shifts in a day into one invoice number to prevent duplicate billing. If there is more than one caregiver in a day, the shifts will be split to accommodate the Caregivers' NPI.

**After we successfully submit a bill, we receive an email notification about 837s. Can we do to anything about that?**

You can either disregard the automatic email notification or you can disable it via **Admin > Office Setup** in the Automatic Notification section. Select **E-billing Batch Notification** and remove the existing emails from that area and/or select "Inactive" to stop notifications.

**Can I bill before my Caregivers are enrolled with Gainwell?**

No, all Caregivers must be enrolled with Gainwell prior to attempting to bill through HHAExchange. If your Caregivers are not enrolled, your claims may deny at some point.




**Can I use the re-submission module for Original Claims submitted directly to Gainwell?**

The re-submission module in HHAExchange can only be used for Original Claims submitted through HHAExchange. If you have submitted claims outside of HHAX prior to the billing go-live, you must do re-submissions outside of HHAX as well for those claims.

**How do I bill live-in shifts?**

Live-in service codes are not included in the scope of EVV, therefore, they are not required through HHAExchange. Authorizations will not be sent for these services by WV DHHR through the HHAX system.

**Communications**

<b>HHAExchange End User Inquiry Contact</b>			
<b>Agency Super User</b>	 <ul style="list-style-type: none"> <li>User Name or Password Inquiry</li> <li>How to search/view information in the HHAX system (e.g., Placements, Authorizations, Patient, etc.)</li> <li>Rate for Patient is incorrect</li> </ul>	<b>HHAX Customer Support</b>	 <p><a href="mailto:support@hhaexchange.com">support@hhaexchange.com</a></p> <ul style="list-style-type: none"> <li>Cannot locate EDI Visit or Billing files in the system</li> <li>System not functioning as expected (e.g., system slowness, page not appearing, etc.)</li> <li>Cannot clear Visit from Pre-billing</li> </ul>
		<b>Payer (via HHAX Note Function)</b>	 <ul style="list-style-type: none"> <li>Inquiry regarding a specific Patient</li> <li>Inquiry regarding Payer contract</li> </ul>

**Will the HHAX Support Desk be available 24 hours? Is it only by email?**

The HHAX Support Desk operates from 7:30 a.m. -7:30 p.m. EST, Monday-Friday. Email is the preferred method at [support@hhaexchange.com](mailto:support@hhaexchange.com).

**Will all Notes always be available in your system?**

Yes, all Notes are archived in the system. Refer to the [Communications Process Guide](#) for full details.

**Seems the EDI doesn't cover items such as Notes (Patient and Payer Communications). Is there an exception when a Provider needs to log in to send notes to Payer?**

Agencies using EDI must still connect via HHAX to send/receive Notes from the Payers.

**Will we be able to communicate with staff through the system via email or text message?**

Use the system to enter any related notes to Patients or in general. Email and text messages are not recorded in the system.

**What types of documents can be attached in Notes? (PDF, excel, CSV, etc.)?**

The system supports the attachment of common files to include PDF, Word, Excel, and CSV among others.

**Will the system "alert" us via email when there is a referral or notes? How would Providers be alerted when not currently logged in to the HHAX system (during non-business hours)?**

Common Notifications can be activated by the Payer to include Placement alerts via email. Alerts are intended for awareness purposes only, and can be enabled through **Admin > Office Setup**. Users must login to the system to perform needed steps (e.g., reviewing and accepting a Patient Placement).

## EDI/Import

**If I have my own EVV solution, what steps do I need to complete to be ready for the EVV mandate?**

To integrate between your 3rd Party Agency Management System and HHAX, Providers using a third party EVV system are required to comply with both the business requirements and technical specifications listed below; also accessed via the HHAX website. The first step is to review the content of the packet and initiate contact with HHAX to begin the integration process.

Technical Specification document: [HHAeXchange EVV EDI Technical Specifications WV](#)  
HHAX Website: <https://hhaexchange.com/wv/>

**Do EDI Users ever use HHAX System for Pre-Billing? When is the EDI file compared to the HHAX system? Where do Users see alerts and warnings against HHAX data?**

EDI Providers receive a file with all Prebilling Exceptions for each billing file sent to HHAX. From this file, Providers can fix the Prebilling issues in their system.