Florida Community Care
Pre Go-Live Support

March 2023

Agenda

> **Provider Information Overview**

> **Go-Live Preparedness + Implementation Tasks**

> **FAQs**

> **Next Steps and 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.

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

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

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 FCC.

   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
Respite

HHAeXchange System Functions

Go-Live Preparedness + Implementation Tasks

- Providers **received members and authorizations** on the Florida Community Care contract starting March 16, 2023.
  - If you are missing any members or authorizations, please contact Florida Community Care 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.
  - After the merge is complete, update the 'Master Week Bill To' to reflect the Florida Community Care contract.

Member Management

- Providers will validate the data received to ensure accuracy and reach out to Florida Community Care with any discrepancies

- 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 authorization end date + 15 days
  - Members will be reactivated by receiving a new auth in HHAX
  - Be sure to regularly review member eligibility for any changes. If a member loses eligibility, they may still be Active since they have an auth loaded to their profile, but their claims would deny

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 Florida Community Care with any discrepancies

  - Authorizations will be sent as total hours for the duration of the authorization in HHAX.

  - Authorizations will be transmitted from Florida Community Care to HHAX. If an authorization needs adjusted/corrected, providers will reach out to the Payer directly.

Scheduling

- Visits should be scheduled based on the authorization provided by Florida Community Care

- Providers can schedule a single visit or can utilize the HHAX master week to create a rolling schedule

- Scheduled services that are not performed should be marked as a Missed Visit.

Visit Confirmation

- Visits will be confirmed using EVV, either using the HHAeXchange EVV told or a third-party vendor's EVV tools (EDI).

- 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 missed visit reason and the action taken.

- Plan of Care compliance will not be enforced by Florida Community Care in HHAX.

Billing Process

- For dates of service **starting April 3, 2023** and forward, providers must bill via HHAX.

- Providers will be responsible for resolving all Prebilling and Billing Review issues in HHAX to ensure correct claim formatting, ensure compliance and reduce denials.

- HHAX will generate the 837-claim file and send to Florida Community Care and will monitor response for any rejections.

- Providers will manage their own rates in HHAX, and are responsible for adding rates prior to submitting first invoices

- Once the claim is received by Florida Community Care, standard adjudication and payment process will follow.

FAQs

Training Support

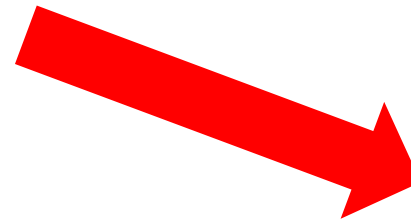**Question: Where can I access Training Support and Resources?**

Answer:

1) Visit the Florida Community Care Information Center:
https://www.hhaexchange.com/info-hub/florida-smmc

2) Visit the Support Center once you have logged in to your portal.

- FAQs section within your Support Center

New User Creation

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 Florida Community Care contract?

Answer:

- Contact Florida Community Care directly at 1-866-962-6186

Member Profile Updates

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 Florida Community Care. 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 contact Florida Community Care directly at 1-866-962-6186

Caregiver Mobile App

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 FCC contract?

Answer:

- Yes. A provider can add or update rates for service codes.

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 are not in scope for the Florida Community Care contract.

Diagnosis Code Management

Question: Can I change or update the Dx code for Florida Community Care members?

Answer:

- Providers are responsible for adding/managing Dx Codes. Invoices without a Dx Code will be held for billing until resolved by the provider.

Mutual Code Management

Question: How is mutual care authorized by Florida Community Care?

Answer:

- Mutual cases are enabled in HHAeXchange

- Authorizations are issued for both mutual members with the full number of hours and providers should schedule both members with overlapping schedules.
    - Example: For 10 total hours per day, each member receives an auth for 10 hrs/day and the schedule is created as overlapping; 12p - 10p for both members.

Provider Resources

State Info Hub
https://www.hhaexchange.com/info-hub/florida-smmc

HHAeXchange Support
FLsupport@hhaexchange.com
EDISupport@hhaexchange.com
Support@hhaexchange.com

HHAeXchange Support
1-855-400-4429

Florida Community Care Provider Relations:
1-866-962-6186

Transition Legacy EVV Services & Claims Contact:
Email: FloridaProviders@ilshealth.com

Claims Call Center: 1-833-322-7526 x 3 for Provider Services

Claims Status Requests : FCC Provider Portal –
www.fcchealthplan.com