

Michigan Home Health - Fee For Service (FFS) Informational Sessions

February 2024

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Agenda

➤ MDHHS Welcome and Meeting Overview

➤ Info Session Takeaways

➤ HHAeXchange Purpose and Framework

➤ Services in Scope

➤ HHAeXchange Provider Portal Functions and Workflow

➤ Project Timeline

➤ Register Team Members for Training

➤ Support Resources

➤ Q&A

Team Introductions



Michigan Introductions

Alisha Webster
Provider Liaison

HHAeXchange Introductions



Sarah Murphy
Manager, Provider Experience



George Marquez
Senior Trainer, Provider Experience



MDHHS Welcome and Meeting Overview



- EVV is a federal requirement and implementing will bring Michigan into compliance.
 - The State is currently experiencing federal financial penalties for noncompliance.
- This presentation is intended for Home Health Agencies providing EVV services in the home (PT, OT, ST, HHA, RN, LPN) who are paid through Medicaid FFS (CHAMPS)
- Phases of Implementation:
 - April 1, 2024 – Medicaid FFS Home Health Care Services
 - July 1, 2024 – Home Help Program (Personal Care Services)
 - September 3, 2024 – Behavioral Health, MI Health Link, MI Choice and Community Transition Services (Personal Care Services) and Medicaid Managed Care Home Health Care Services.

HHAeXchange System Terminology



The following is a list of terms used in the HHAeXchange system and training materials. We have compiled a list of MDHHS program terms and their corresponding terms in the HHAeXchange system, as the terms vary across MDHHS programs.

MDHHS Program Term	HHAeXchange System Term
Beneficiary	Member
Client	
Participant	
Recipient	
Consumer	
Caregiver	Service Provider
Attendant	
Aide	
Direct Care Worker	

MDHHS Program Term	HHAeXchange System Term
Program Provider	Provider
FMSA	
Vendor	
Agency	
Managed Care Organization (MCO)	Payer
Plan	
Medicaid Fee for Service (FFS)	



Info Session Takeaways

Preview

➤ Top 5 Takeaways from Today



1. In Scope Service
2. HHAeXchange Provider Portal Functions and Workflow
 - Member & Authorization Management
 - Schedule & Visit Confirmation
 - Billing
 - Communications
3. Project Timeline
4. Training Registration & Learning Management System (LMS)
5. Support Resources

➤ What applies to me?

As we walk through this presentation, you will see an indicator next to the HHAeXchange logo in the upper right-hand corner of your screen. This indicator will identify if that workflow applies to an HHAeXchange user, an EDI user or both.

HHAeXchange

- The HHAeXchange indicator applies to Home Health Fee for Service (FFS) providers who will be using the state offered HHAeXchange EVV solution

EDI

- The EDI indicator applies to Home Health Fee for Service (FFS) providers who have an existing EVV solution or plan to use a vendor other than HHAeXchange to submit EVV data to the state of Michigan.



An End-to-End Ecosystem

Purpose and Framework



Enable the most effective homecare ecosystem every day.

Mission

PURPOSE

We are passionate about **helping people** who are aging or have disabilities thrive in their homes and communities through the creation of a homecare ecosystem that **seamlessly connects** states, managed care organizations, providers, caregivers, and clients.

HHAeXchange's National Footprint



153
PAYERS SERVED



8
STATE EVV CLIENTS



12,000+
HOMECARE AGENCIES



1M+
MEMBERS SERVICED



216M
ANNUAL VISIT CONFIRMATIONS



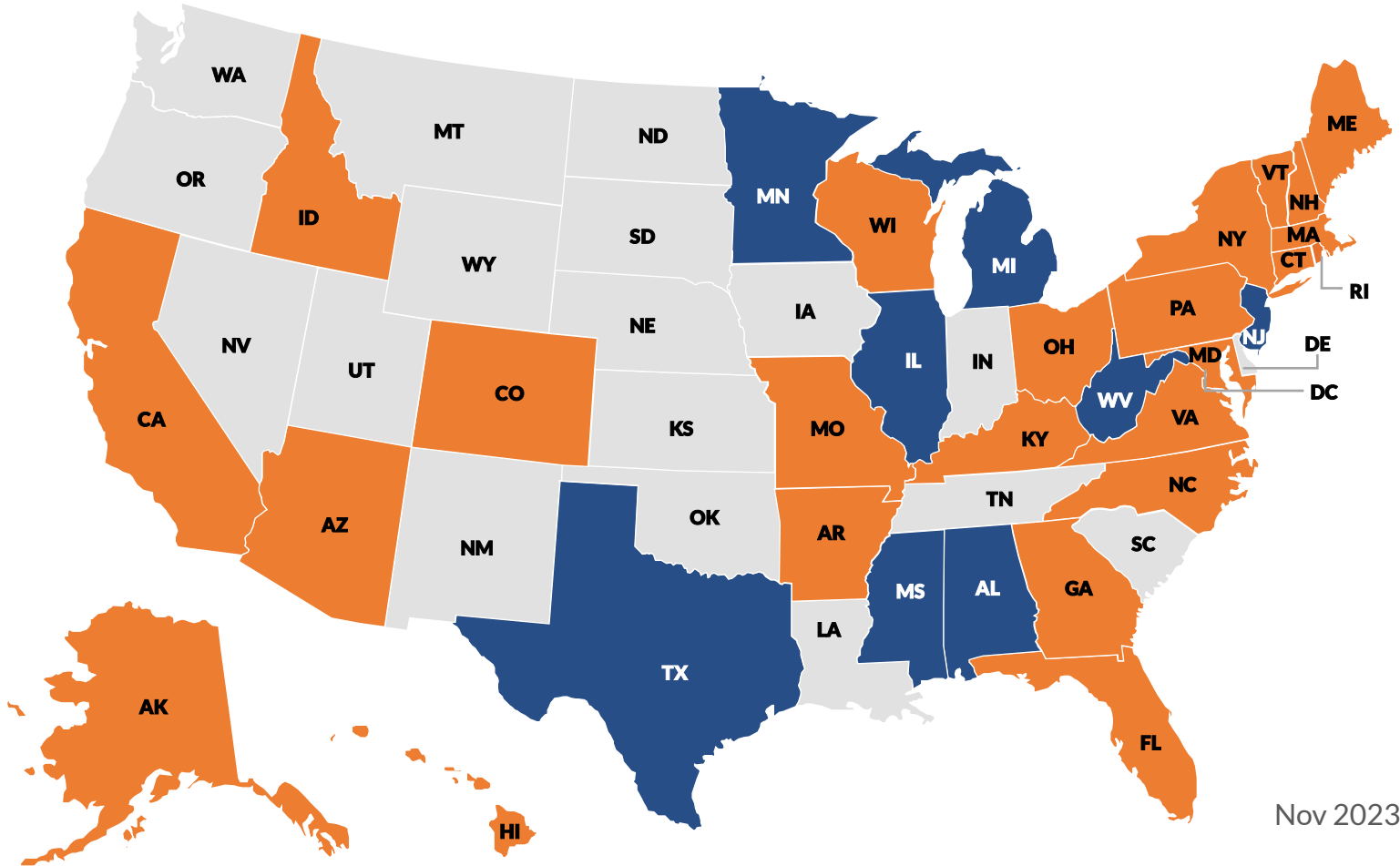
\$25.3B
ANNUAL PAYMENTS MANAGED



1M+
CAREGIVERS WORKING



96,000+
BACK-OFFICE USERS

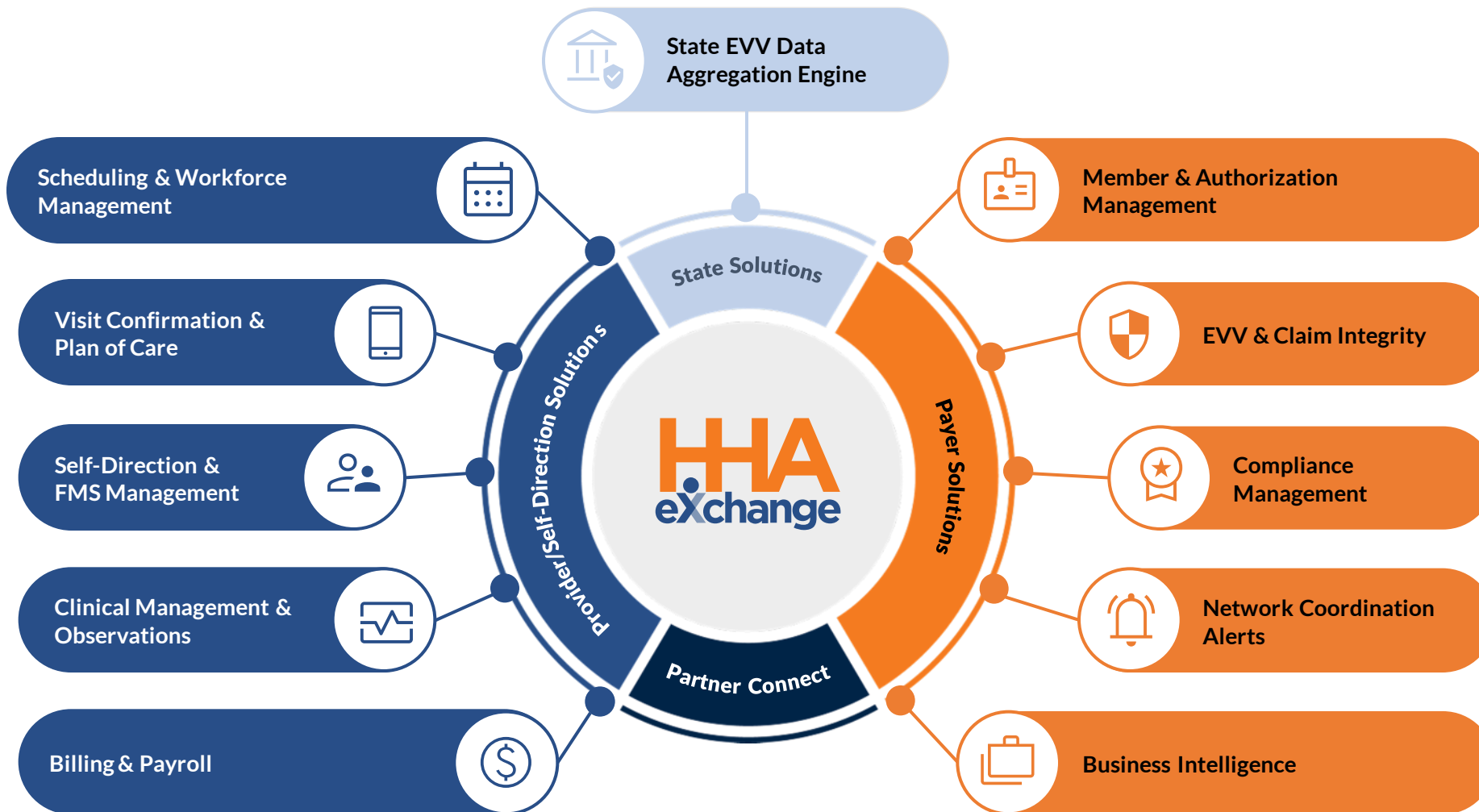


Nov 2023

- HHAeXchange Footprint
- HHAeXchange State EVV Contracts



HHAeXchange's Strategic Framework



Cures Act Mandated EVV



Section 12006 of the 21st Century Cures Act requires states to implement an Electronic Visit Verification (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.

HHAeXchange will be implemented for Michigan Home Health - Fee For Service (FFS) on April 1, 2024, to ensure compliance with the Cures Act.

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





Provider Landscape

Your Options

New Agency Providers:

- Providers who do not have an existing HHAeXchange portal have two options for implementation:
 - **EDI:** Integrate their existing third-party EVV system with the HHAeXchange portal to send confirmed and billed visits to MDHHS.
 - **State provided EVV:** Use the State provided EVV HHAeXchange portal to confirm and bill visits.

Existing EDI Providers:

- Providers who have their own HHAX portal which is used to integrate confirmed visit data with their third-party EVV system.
- EDI providers may continue to work in their own system, but the data will be sent to HHAeXchange via integration.

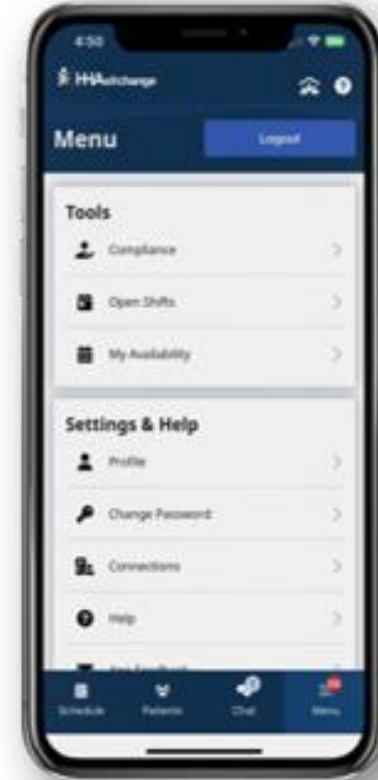
Current HHAeXchange Portal Providers:

- HHAeXchange provider portal users, both free and enterprise access, will be able to continue to use their access to meet the MDHHS requirements.
- Additional linking steps will be required to link to MDHHS.

➤ HHAeXchange EVV Methods



Telephony/IVR



Caregiver Mobile App



In Scope Services

Services in Scope



Procedure Code OR Procedure Code and Modifier Combination			Description
G0151	OR	G0151 : TS	Physical Therapy , per 15 minutes; Services delivered under an outpatient physical therapy plan of care
G0152	OR	G0152 : TS	Occupational Therapy , per 15 minutes; Services delivered under an outpatient occupational therapy plan of care
G0153	OR	G0153 : TS	Speech/Language Therapy , per 15 minutes; Services delivered under an outpatient speech-language pathology plan of care
G0156			Home Health Aide , per 15 minutes
G0299			Skilled Nursing Services , per 15 minutes - RN
G0300			Skilled Nursing Services , per 15 minutes - LPN



HHAeXchange Provider Portal Functions and Workflow

HHAeXchange Providers

- Providers will create member/customer in the provider portal
- Provider selects payer contract and completes auto placement
- Michigan Home Health FFS validates member information and confirms placement
- After Auto Placement, members will need to be placed in the appropriate office based on your HHAeXchange office configuration.
 - Multiple HHAeXchange offices (locations) – Providers must assign placement to the desired office.
 - Single HHAeXchange office – Cases will be placed with no additional action required.
- Providers are responsible for adding valid diagnosis code information in the HHAeXchange system for a beneficiary, to ensure proper processing of claims when received by CHAMPS.

EDI Providers

- Provider sends through interface file from third party vendor
- System validates contract for auto-placement
- Michigan Home Health FFS validates member information and confirms placement with the agency

Authorization Management

- Providers will still be required to request prior authorization from MDHHS for services. Once approved the prior authorization details will need to be entered in the HHaEXchange system. Providers are responsible for maintaining accurate authorization data in HHA.

HHaEXchange Providers

- Michigan Home Health will authorize based off current process
- Providers will create new authorizations within HHaEXchange based on MDHHS approved prior authorization
- Provider created authorization information must mirror prior authorization data submitted and approved by MDHHS
 - Total units/hours
 - Dates of Service(s)
 - Procedure Code/HCPCS/Service Code

EDI Providers

- MDHHS will authorize based on the current process
- Provider enters authorization in third-party EVV system
- Authorization is sent via API to HHaEXchange from third-party party system
 - Total units/hours
 - Dates of Service(s)
 - Procedure Code/HCPCS/Service Code

- Visits should be scheduled based on the authorization received from Michigan Home Health - Fee For Service (FFS) outside of HHAeXchange.
- Providers can schedule a single visit or can utilize the HHAeXchange master week to create a rolling schedule.
- Scheduled services that are not performed should be marked as a Missed Visit with the appropriate reason and action taken.

Visit Confirmation

- Visits will be confirmed using the Free HHAEExchange EVV tools or a third-party EVV system.
- In HHAEExchange, if a visit is manually entered, providers will need to enter an edit reason and action taken.
 - For manual clock in and out, caregivers will need to show their provider agency timesheet or proof of the visit.

- Providers will be responsible for resolving all Prebilling and Billing Review issues within HHAEExchange to ensure invoices are compliant and to reduce denials.
 - Claims flagged for prebilling editing will not be sent to CHAMPS for adjudication.
- HHAEExchange will generate the 837I-claim file and send the file to CHAMPS.
 - HHAEExchange will monitor file processing responses to ensure successful transmission.
 - Claims flagged for prebilling editing will not be sent to CHAMPS for adjudication.
- Once the 837I claim file is received by CHAMPS, the standard claim adjudication process will be applied, and the payment process will follow.
 - Claims processed through CHAMPS are edited for many parameters, including provider and beneficiary eligibility, procedure validity, claim duplication, frequency limitations for services, and a combination of service edits.
- In the HHAEExchange system providers can manage rates. However, reimbursement of HCPCS reported on a claim will be made using the established MDHHS-approved rates on file in CHAMPS. For current MDHHS rates visit the [provider fee screens](#).

Mobile User Management

- Mobile User Management allows you to manage your caregivers mobile access for EVV clocking

Mobile User Management (+)

Management Search

Office Name	Last 4 SSN	Caregiver Email ID	First Name
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Last Name			
<input type="text"/>			

Search Results (1)

Communications

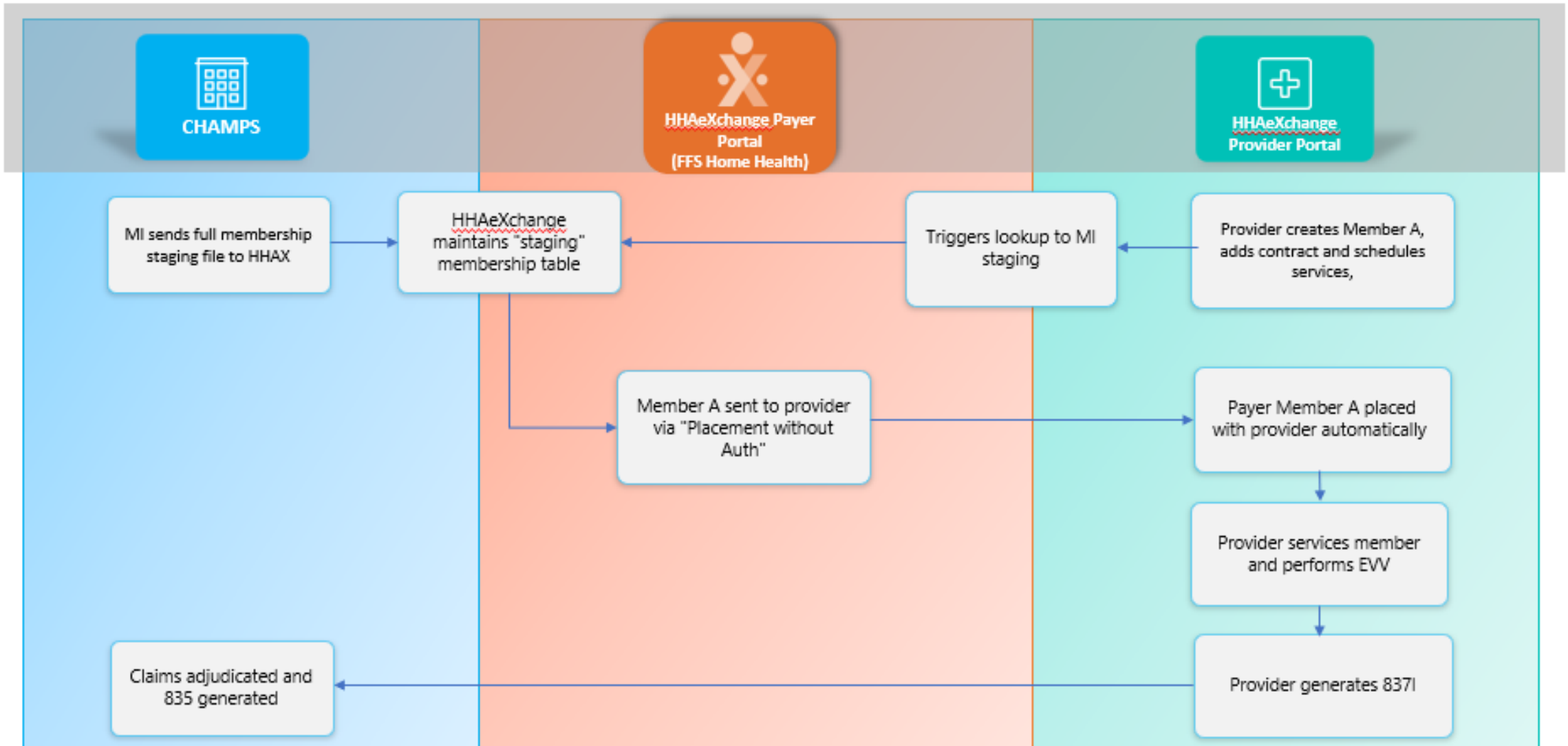
Member & Payer Communications

Michigan will utilize the HHAEExchange Communication Module for assistance related to authorizations, payment and member eligibility.



Workflow

End-to-end process for Home Health Fee for Service providers





System Demonstration



Project Timeline

Provider Onboarding Milestones 2024

EVV Home Health Fee for Service Agency Providers
EDI Providers
All Providers

Jan. 11 – Feb. 7



- Providers receive *Welcome Letter*
- New Providers complete the *Provider Portal Questionnaire*
- Providers attend Informational Session
- Providers receive *Welcome Packets*
- **Providers initiate contact with HHAEExchange to begin the integration process**
 - Work with the HHAEExchange EDI team to setup and test the integration before go-live

Feb. 21 – Mar. 6



- Providers receive/log into LMS
- Providers attend the system user training webinars
- **Providers attend EDI provider onboarding webinar and user training**

Mar. 6 – Mar. 25



- Review and Update rates to contract, as needed
- MiLogin System User Training Webinar
- **Providers log into HHAEExchange portal**
- Pre-Go Live Support Webinar Available

Apr. 1



- **Provider go-live**
 - Scheduling, confirming, billing visits occur on the linked HHAEExchange contract
 - **Confirmed and billed visits are sent to HHAEExchange provider portal via integration**



Register Team Members for Training

System User Training

Register Now

- How Do I Register?
 - Use the QR code on this slide
 - Complete the Registration Form.
 - Receive an email confirmation link to join the zoom meeting.
- Who Should Attend System User Training?
 - Home Health FFS Agency Administration
 - Biller
 - Coordinator
- What if I'm unable to Attend?
 - Learning Management System
 - Additional Webinars



**Michigan Department of Health and Human Services
System User Training**

Description 

Welcome to the System User Training for the HHAExchange Provider Portal !

These training will be held on Tuesday and Thursday with a live Q/A chat option available to you for any questions or concerns. There will be an additional session held on Wednesday for EDI providers ONLY!



Support Resources

State Info Hub

Provider Information Center

- To ensure you stay up to date on all the information for this project, visit our State Info Hub.
- The State Info Hub will be your primary source of information throughout this implementation.
- The website also contains all documents such as welcome packets and training links.

www.hhaexchange.com/info-hub/michigan

HHAEExchange Solutions Partner Connect Resources State Info Hub Company Login Request Your Demo

Provider Info Center

Homecare providers: here is your go-to source for the most up-to-date training, forms, EDI processes, FAQs, and contact information.

Search by Title Filter by State

ALABAMA
Alabama Provider
Go to Info Hub →

ARKANSAS
Arkansas State Medicaid PASSE
Go to Info Hub →

FLORIDA
Florida SMMC Information Center
Go to Info Hub →

HAWAII
Ohana HP Provider Information Center
Go to Info Hub →

MICHIGAN
Michigan Information Center
Go to Info Hub →

NEW JERSEY
New Jersey CSOC Information Center
Go to Info Hub →

Electronic Data Interchange Help

Provider Information Center



- If you are an Integrating provider, please review documents on the state info hub under the EDI process tab.
- Please review the Business Requirements and Technical Specification documents.
- Providers will need to complete the attestation form noting your ability to integrate.



www.hhaexchange.com/info-hub/michigan

The screenshot shows the HHAeXchange website's Michigan Information Center. The header includes the HHAeXchange logo and navigation links for Solutions, Partner Connect, Resources, State Info Hub, and Company, along with Login and Request Your Demo buttons. The main content area features a 'Michigan Information Center' title and a 'Provider Onboarding Form' button. A table of contents on the left lists: OVERVIEW, TRAINING, ELECTRONIC DATA INTERCHANGE (EDI) PROCESS (highlighted with a red box), FREQUENTLY ASKED QUESTIONS, and CONTACT. Below this is an 'IMPORTANT DATES' section for 'HOME HEALTH - FEE FOR SERVICE (FFS) GO LIVE' on April 1, 2024. The main text provides an overview of EDI integration with a 3rd Party Agency Management System, including a list of steps and a disclaimer.

TABLE OF CONTENTS

- OVERVIEW
- TRAINING
- ELECTRONIC DATA INTERCHANGE (EDI) PROCESS**
- FREQUENTLY ASKED QUESTIONS
- CONTACT

IMPORTANT DATES

HOME HEALTH - FEE FOR SERVICE (FFS) GO LIVE
April 1, 2024

Electronic Data Interchange (EDI) Overview (Integrating with a 3rd Party Agency Management System)

This overview is geared towards providers who will be using their own EVV solution and not the MDHHS EVV solution. The information below lists the general requirements and steps to successfully integrate a 3rd Party Agency Management System with HHAeXchange. Electronic Data Interchange (EDI) Providers will be required to comply with both the HHAeXchange Technical Specifications and Business Requirements listed below. After reviewing the specifications and requirements resources, please initiate contact HHAeXchange to begin the integration process.

1. Please click here for the Technical Specification document: [EDI Technical Specifications](#)
2. Please click here for the Business Requirements document: [Business Requirements](#)
3. Submit a ticket to HHAX EDI via the Client Support Portal: <https://www.hhaexchange.com/supportrequest>

Disclaimer: The information on this page is subject to change. As new information becomes available, the page will be updated. Check back often for updates. Last updated January 8, 2024.

Importing Caregivers into HHAeXchange

(Note: This action is not required for agency providers using an EDI Import file to integrate with their 3rd Party

HHaEXchange Support



Phone
1-855-400-4429

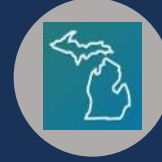


State Info Hub
<https://hhaexchange.com/info-hub/Michigan-information-center>



Client Support Portal
<https://hhaexchange.com/supportrequest>

MDHHS Provider Resources



MDHHS EVV Website
www.Michigan.gov/EVV

Provider Resources



Q&A



State Info Hub



Register for Training



**Register for EDI
Onboarding**