

Electronic Data Interchange (EDI) Provider Billing Process

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Required fields for billing

- HHAeXchange EVV API Technical Specifications MS

BILLING		
1	externalInvoiceNumber	<p>When Required: Visit is Billed in the Provider’s third party EVV System If a value is provided in this field, it is considered a Billed Visit in the Provider’s third party EVV System. This invoice number is imported into HHAeXchange, and the Visit is billed in HHAeXchange via the overnight process. If the value is empty, then the existing value of Invoice Number in HHAeXchange is removed.</p>
2	totalBilledAmount	<p>When Required: When Visit is billed; this field should be sent along with externalInvoiceNumber. Total billed amount in third party system.</p>
3	totalUnitsBilled	<p>When Required: When visit is billed; this field should be sent along with externalInvoiceNumber. Total units billed in third party system</p>
4	contractRate	<p>When Required: When visit is billed; this field should be sent along with externalInvoiceNumber. Hourly contract rate.</p>
5	diagnosisCodes	<p>When Required: When visit is billed; this field should be sent along with externalInvoiceNumber. Diagnosis Code Up to 26 of these are allowed.</p>

> Required fields for billing

- JSON excerpt example

```
"Billing": {  
    "ExternalInvoiceNumber": "31159",  
    "TotalBilledAmount": 86.7,  
    "TotalUnitsBilled": 10,  
    "ContractRate": 8.67,  
    "DiagnosisCodes": [  
        "F84.0"  
    ]  
}
```

Next steps – prebilling review

- Once data has successfully imported, HHAX has an overnight job that will pick up billable visits and invoice/export them
 - Providers to check pre-billing for any holds that would prevent visits from invoicing

Prebilling Review Search

Contract: All selected | Office(s): All selected | From Date: 09/09/2023 | To Date: 12/08/2023

Coordinator: All selected | Patient Team: All selected | Patient Location: All selected | Patient Branch: All selected

Discipline: All selected | Caregiver Team: All selected | Caregiver Location: All selected | Caregiver Branch: All selected

Patient Name: | Caregiver Name:

Search by last name or ID. Enter at least 2 characters to search

Check All Validation

- Unbalanced Visits
- Overlapping Shifts
- Authorization
- Incomplete Confirmation
- OT/TT Not Approved
- Clinical Documentation
- With Temp Caregiver
- Restricted Caregivers
- Medicaid Compliance
- Caregiver Compliance
- Timesheet
- Missing Service Portal Approval
- POC Compliance
- Insufficient Duty Minutes
- Custom Validations

Next steps – billing review

- Providers to check billing review for any preadjudication holds
 - Note: This section will contain invoiced visits that were unable to export

The screenshot shows the HHAExchange web application interface. At the top, there is a navigation bar with the HHAExchange logo and menu items: Home, Patient, Caregiver, Visit, Action, Billing, Report, and Admin. The 'Billing' menu is open, showing options: Prebilling, Billing Review (highlighted in yellow), Invoice Search, New Invoice - (Internal), and Electronic Billing. Below the navigation bar, the page title is 'Billing Review'. The main content area is titled 'Billing Review Search' and contains several filter sections:

- View:** Summary (selected) and Detail buttons.
- View Hold:** A dropdown menu currently set to 'E-Billing'.
- On Hold Reason:** A dropdown menu set to 'Select'.
- Office:** A dropdown menu set to 'All selected'.
- Contract:** A dropdown menu set to 'All selected'.
- Patient Last Name:** An empty text input field.
- Coordinator:** A dropdown menu set to 'All selected'.
- Batch Number:** An empty text input field.
- Invoice Number:** An empty text input field.
- Invoice From Date:** A date picker set to '09/08/2023'.
- Invoice To Date:** A date picker set to '12/08/2023'.
- Visit From Date:** A date picker with the placeholder 'mm/dd/yyyy'.

Next steps – claim status report

- Providers to run claim status report to view claim status

The screenshot displays the HHA Exchange Report Center interface. The top navigation bar includes 'Home', 'Patient', 'Caregiver', 'Visit', 'Action', 'Billing', 'Report', and 'Admin'. The 'Report' menu is open, showing options like 'Billing', 'Caregiver', 'Compliance', 'Events', 'Exception Reports', 'Other Reports', 'Patients', and 'Visits'. The 'Billing' option is selected, and the 'Claim Status Report' option is highlighted. Below the navigation bar, there are sections for 'K1', 'Events', 'System Notifications', and 'Direct Messages'. A table header is visible with columns for 'Admission ID', 'Office', 'Start Date', 'Stop Date', and 'Frequency'. The main content area shows the 'Claim Status Report' form with various filters and a 'View Report' button.

Claim Status Report

Form fields and filters:

- *Visit From Date: []
- *Visit To Date: []
- Office(s): All
- Discipline(s): All
- Patient: []
- Invoice Number: []
- Contract(s): All
- Service Code(s): All
- Export Status: All
- Claim Status: All

View Report