

Frequently Asked Questions

The following are a list of Frequently Asked Questions (FAQs) which can be used by HHAExchange (HHAX) System Users for the Mississippi Division of Medicaid (MS DOM) EVV Implementation. Refer to the [Communications section](#) of this guide. For any additional information regarding this implementation, please visit [Mississippi's State Info Hub](#) for resources, trainings, and communications.

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Program

What is HHAeXchange’s role in Mississippi?

HHAeXchange is contracted with MS DOM as the EVV Solution. Through HHAeXchange, the State is providing you with a Free EVV solution to manage members, schedule, and confirm EVV compliant visits. Each provider will have one portal that will allow them to manage EVV across all members they service in the state.

What steps do I need to take to successfully begin implementing HHAeXchange?

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

- Complete the Mississippi Provider Set Up:
 - [MS DOM Provider Portal Set Up Form](#)
- Follow the directions outlined in the MS DOM Welcome Packet for EVV Providers
 - [MS DOM EVV Welcome Packet](#)
 - [EDI Provider EVV Welcome Packet](#)
- Complete your Learning Management System Coursework
- Successfully log into your EVV Provider Portal with HHAeXchange
- Review our Support Resources for Agencies Communication

Which Providers are in scope for Phase 1 of the implementation?

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

Where can I find additional information from Mississippi on EVV?

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

Administration

I need to add a staff member and 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.

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.

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.

MediKey

How long will providers have access to LTSS/MediKey to enter or modify past shifts?

Providers will have access to MediKey until 7:59PM August 14, 2023, to enter shifts or make corrections/adjustments.

If providers are currently using medikey and evv. What do we have to do to integrate the system?

The HHAX system will be replacing Medikey. As a provider, you will need to complete the survey and be set up in the new HHAX system.

Is this the end of the current LTSS system?

The current EVV system, Medikey, will be closed out on 8/14/2023.

Patient and Placement Info

What do I do if I am missing a member/patient and/or placement?

If there is a missing member or authorization, please use the Note Reason "Missing Member/Auth in HHAX - Needs Upload" to communicate directly with MS DOM. Review the Communications Process Guide for more information: [Communications Process Guide](#)

The member/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 MS DOM to update the required information. Refer the user to the HHAX [Patient Placement and Management Process Guide](#) for further details.

Will we have to accept our current patients when they are uploaded or will that be done automatically as well?

Placement will be driven off the placement import. If the NPI/Tax ID match, the placement will be sent as confirmed to the provider. If we only receive Tax ID (some providers are atypical and will not have an NPI), the provider will need to accept the case and place the member in the correct location.

How do I accept new placements as a provider?

The *Pending Placement* section in the **Home** Module contains new Patient cases sent to an Agency from Mississippi DOM. Providers will have to:

1. Click on the Admission ID link of the Placement
2. The Patient Info page opens containing Patient details such as demographic information and authorizations. Go to the bottom of the page for the Placement options.
3. In the Placement section, either **Accept** or **Deny** the Placement.

Caregiver Management

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

Caregivers can be either manually entered (Caregiver > New Caregiver), or by using the Caregiver Bulk Import. Go to the [Mississippi Provider Information Center](#) and click on the **EDI PROCESS** section link for instructions.

Is there a way to add all my Caregivers by uploading an excel/csv file instead of adding them one by one

Yes, use the [Caregiver Bulk Import Process Guide](#) for instructions on how to import multiple records into HHAX.

Is there a minimum amount of caregivers I can submit in a Caregiver Bulk Import?

Providers are encouraged to manually enter Caregiver information if they have a census of 50 caregivers or less. If your agency has 50+ Caregivers that require entered in the HHAX system, please submit a ticket via our Client Support Portal.

Where can I access Training Support and Resources for my agency and caregivers?

Once you have logged into your HHAX Provider Portal, you will see the Support Center link (located on left side of the webpage). The Support Center tab holds all process guides, videos, and PDFs detailing the functionalities of our system.

When we choose the work type what type do we choose for E&D Waiver PCA & In-Home Respite Care?

You will choose PCA for both Personal Care and In-Home Respite Services.

Will providers be able to assign more than 1 caregiver to a client?

Yes, you can assign multiple caregivers to a member.

What happens to the other credentials captured in LTSS (national cbc, annual training, cpr/first aid, state ID) after Medikey is shut down? Will providers continue to input these credentials in LTSS or is there a place for them in HHAexchange?

Those credentials will still be in the eLTSS system but will not be transferred over to the HHAX system. Credential capturing is not included in Phase 1 of the HHAX implementation but will come later this fall. Providers will no longer need to capture credentials in eLTSS after transitioning to HHAX.

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.

Communications

Can providers communicate via HHAX with MS DOM directly?

Yes. Providers can utilize the Link Communications and Messages functionalities within their HHAX Provider Portal to send MS DOM a message. Please note there are specific reasons to reach out to the state for via the HHAX system.

Will providers 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.

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 API Technical Specifications MS](#)
Visit the [Mississippi EVV Information Center](#)

Do providers have a deadline for sending their EDI date to HHAX?

Yes. Providers must be sending their data to HHAX beginning 8/1/2023.

Once providers enter schedules in their 3rd party system, will it need to be re-entered in HHA or will this crossover automatically once we enter schedule?

If you are using a 3rd party EVV system then you will have to integrate with HHAX's system to send that data over. More information on EDI onboarding can be found on the State Info Hub under EDI Process: <https://www.hhaexchange.com/info-hub/mississippi>

Do providers have a deadline for sending their EDI date to HHAX?

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Scheduling and Visits

Do we have to use the calendar for scheduling?

Scheduling is optional for this Implementation.

What happens if you schedule a visit and an employee does not make it there on time for whatever reason? Do we manually adjust?

You can manually adjust the schedule time if they clocked in or clocked out outside of the window.

Are the members approving the work/tasks completed each day?

MS DOM requires patient signature for tasks completed each visit.

Will the caregiver have to clock in and out for multiple services?

Caregivers would clock in and out for the one service and then would need to clock in and out for the other service.

Does a physical service note still have to be submitted?

Medicaid Administrative Code requires providers to maintain documentation to substantiate the provision of services. For shifts in which the HHAX mobile application is used to capture all of the required elements, a paper timesheet will not be required. If all of the required elements are not gathered (i.e. IVR or FOB is utilized), then a paper timesheet will still be needed. DOM encourages providers to continue the paper timesheet process for a period after go-live to ensure that all required documentation is being gathered and is accessible for audit purposes.

If there is an employee who is not computer or tech savvy are they allowed to use another method to clock in/out ?

There are 3 options for EVV data collection. The mobile app is the preferred method. If the mobile app cannot be used, the member may authorize the DCW to use their home phone or mobile phone to clock in/out using IVR telephony. The third option is utilizing a FOB.

Are timesheets only necessary when a signature is not obtained using the app?

If all of the required information, clock-in/out date/time, tasks completed, notes, and member signature are captured in the application at clock-out then a paper timesheet is not required. Paper timesheets are always required for visits not completed using the mobile application.

Are providers able to print out the visit to use for the paper form?

The system is designed to maintain the visit date electronically. Reports are available to print for audits and documentation as needed.

Will the PCA be able to clock in/out multiple times with it being a split shift for the one client?

The direct care worker is able to call in/out for each shift that are assigned or if they are doing unscheduled they will have the ability to do so when they call in/out.

Would the scheduled time be the time that the beneficiary would want the worker to come into their home? Some beneficiaries times varies from day to day.

The caregiver/worker can clock without or with a schedule. The times of service can be scheduled or clocked unscheduled based on the members agreed upon service time.

If a provider administrator schedules a patient and a PCA is late, does that effect providers or is it consider a miss visit?

A clock in tolerance will be set based on DOM guidelines. A long as the caregiver/worker clocks within that window, no action will be required. Additional information on tolerance windows will be provided at a later date.

How would providers stick with scheduled visits for members who have a lot of doctor's visits, etc.? Is it ok to enter unscheduled visits?

Schedules are not required. Caregivers/workers can perform unscheduled visits as needed.

What is considered an "unscheduled visit"?

An unscheduled visit would be one that has not been created in the provider portal. A direct care worker is able to utilize the mobile app to create an unscheduled visit.

After the go live, if providers are not able to get visits in HHAeXchange as we start the phase-in, what will we need to do with the visits that we don't get in via EVV? Will we have to manually input those visits during phase 1 or how will that process be as we all learn this new system?

Providers who cannot clock-in/out via the app, IVR or using a FOB following go-live will need to have their shifts manually entered in the Provider Portal by an administrator. As a reminder, Medikey is available to providers experiencing technical setup issues in HHAX through 11:59 PM on 8/14/23.

Claims & Billing

Is claims submission optional or mandated through HHAX?

Billing via HHAX will be part of Phase 2. Additional information and training will be provided at a later date.

How long will we have access to LTSS to enter past claims that may be missing after this goes into effect?

Claims will continue to be submitted via the same method you are currently using. More information surrounding updates to claims submission and timelines will be included during Phase 2 later in the year.

When billing, the diagnosis codes were available in LTSS, where will these codes be available?

Providers will be required to obtain and manage diagnosis codes for each member. Diagnosis codes can be obtained from the Case Manager or the client's physician.

Is billing done on HHAeXchange or do providers we still use MESA?

Billing via HHAX will be part of Phase 2. Additional information and training will be provided at a later date.

Currently, if someone misses a visit (ex. for a client getting 2 hours 3X weekly) the employee can make up the shift for the client and work 4 hours the next shift (as long as they do not exceed the monthly unit maximum). Will we still be reimbursed based on the monthly maximums and not by the weekly breakdown?

Each waiver member is authorized to receive a maximum amount of units per month, the PSS gives direction on how to meet the service requirement. Hours missed can be served on a different day, so long as it is done at the request/benefit of the waiver member.

When billing, the diagnosis codes were available in LTSS, now where will these codes be available for each client billing with this new system?

Through Phase 1, billing will continue through MESA and providers will continue to receive diagnosis codes from the case managers via the referral and PSS.

With this transition, will there be any delays in payments?

The EVV system is being implemented using a phased approach which will prevent any negative impacts/delays in claim payments.

Billing using this EVV system will be introduced during Phase 2 for which information will be shared at a later date.

Mobile App, IVR, and FOB

If a caregiver leaves to run an errand for the patient, what do they need to do on the app?

The caregiver will stay clocked in until their shift is over.

Which app am I downloading as a Caregiver/Agency?

The HHAeXchange Mobile App is available on the Apple Store and Google Store for download. Please note, download the app titled "HHAeXchange". It will be the first result you get on your search.

If the caregiver is using the mobile app, what happens when they are in an area where the data does not work? Will the app use their data plan once they are back in a service area?

The HHAX app will not require direct care staff to use their personal data plans. HHAeXchange mobile app has a feature called offline mode which allows caregivers to clock in and out via GPS coordinates for instances like this. Initial Setup must be completed in an area with connection (i.e. free wifi, etc.). Once completed, clock-in and out can be done in offline mode. The clocks will then be loaded successfully once they get back in range for cellular connection or Wifi.

How do I retrieve the mobile ID?

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.

How do I reset mobile app password for my caregivers?

A caregiver can reset their own password directly from the login screen using the “Forgot Password?” link.

What if the caregiver does not have Wi-Fi connection or internet access?

Caregivers can turn on Offline Mode. With this feature enabled, Caregivers can Clock IN/OUT successfully while offline. Review this process with the [Caregiver Mobile App Process Guide](#). (Offline Mode p. 62) Additional information can be found on the Support Center by entering “Offline Mode” on the Search Bar icon.

How do I find my IVR line as a provider?

Once you have logged into your HHAX Provider Portal, click on the “Admin” tab at the Menu Bar and then on “Agency Profile” to view the IVR Line.

Does telephone option require the use of client's landline? What if client does not have a landline?

The call must be made from the member's phone number on file. This can be a landline phone or mobile phone.

If a caregiver is using the phone to clock in and out, how will they record the task performed? Will there be an option on the phone call or will they just state the task on the timesheet?

The caregiver is able to add duties when they clock out using the mobile app or the IVR.

Are employees allowed to clock in using the client's phone? The mobile app is one of the three options for employees to use for clocking in and out. Am I correct?

Yes, direct care workers (DCW) can clock-in/out using the member's phone under the IVR option if the member allows. There are 3 options for EVV data collection. The mobile app is the preferred method. If the mobile app cannot be used, the member may authorize the DCW to use their home phone or mobile phone to clock in/out using IVR telephony. The third option is utilizing a FOB.

How do I request an FOB device as a provider?

1. The Case Manager (CM)/Support Coordinator (SC)/Targeted Case Manager (TCM) will install the FOB with a security tie in the member's home.
2. The CM/SC/TCM will submit a linking form to HHA.

3. Once submitted, a request will be routed directly to HHAX Support to activate the device.
4. The device will be activated within one (1) business day of the request being submitted.

Authorization & PSS Limits

Who will now enter the Authorizations into the system?

For now, providers will continue to receive referrals/authorizations from the case manager or support coordinator. At go live on 8/1/23, all members will have a standard general authorization for all services. Once the data is available, the Plan of Services and Supports data will be imported into HHAX for all members. At that time, the system "authorization" will reflect just the PSS approved services.

How will this system effect those clients who have medical hours?

All of the hours included in the PSS for the service (including CAT hours) will be included in the authorization for the month and will require EVV clock-in/out.

Implementation Scope

When will the HHAX provider setup questionnaire include Occupational Therapy (0431) so we can submit?

DOM is still evaluating the options regarding the inclusion of Occupational Therapy in Phase 2.

On the EVV provider set up form, it did not offer the option for Home and Community Supports. How do we register for the set up form if it's not listed?

Home and Community Supports is coded on the survey under S5125 with the U3 modifier.

Will waiver case managers have to use this system for home visits?

Case Management services do not currently require electronic visit verification in Mississippi.

When will the HHAX provider setup questionnaire include Occupational Therapy (0431) so we can submit?

DOM is still evaluating the options regarding the inclusion of Occupational Therapy in Phase 2.

Are live-in caregivers exempt or required to use EVV?

EVV is required for live-in caregivers.

If a provider has multiple provider numbers, will they need to register each separately?

Only one set up form should be submitted for the agency tax id. When completing the set up form, please use the Add Office option to add addition provider numbers (TIN, NPI, etc). Only provider numbers for services requiring EVV should be noted.

Support

Where can I get support?

For questions or help with HHAExchange, please contact the Client Support Team:

- [HHAExchange Client Support Portal](#)
- Phone: 1-855-400-4429

Visit your Mississippi EVV [Provider Information Center](#) to access all information related to this implementation.

Will the HHAX Support Desk be available 24 hours?

The HHAX Support Desk operates from 7:30 a.m. -7:30 p.m. EST, Monday-Friday. Please submit a request through or [Client Support Portal](#) for all requests.

Is HHA sunsetting the support@hhaexchange.com on 07/01/2023?

Yes, HHAX retired the support email on 07/01/23. Providers can contact the Client Support Team here after that date:

- Client Support Portal
- Phone: 1-855-400-4429

LMS

Where/How can I access the Learning Management System?

The HHAExchange Learning Management System can be accessed through the link below:

[HHAExchange LMS](#)

Please Note, only one username is provided per Agency and provides can share username/passwords across all members of their Agency that require training.