

November 2021

Fidelis Care Provider Information Session

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➤ — **Team Introductions**

➤ — **Information Session Goals and Overview**

➤ — **Provider Landscape + Key Implementation Dates**

➤ — **Provider Workflow in HHAeXchange**

➤ — **Contact Information**



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HH AeXchange Implementation Overview





Information Session Goals

- Distribute key information about the timeline of the HHAeXchange implementation
 - Understand the provider options for using HHAeXchange with Fidelis Care
- Review the future-state provider workflow in HHAeXchange
- Understand the key next steps for providers to be ready for go-live
- Provide contact information and where to find additional resources and support to prepare for go-live

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.

HHAXchange will be implemented for Fidelis on **December 13, 2021**, to ensure compliance with the Cures Act. All EVV-mandated claims will be required to be submitted through HHAX as of **February 14, 2022**.

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



What is HHAeXchange?



HHAeXchange is the premiere Homecare Management Software company for the Medicaid LTSS population. We are the leaders in connecting payers and homecare agencies to enable more collaboration, communication, and workflow efficiencies. Through the use of the HHAeXchange portal, our goal is to make working with Fidelis Care easy and efficient.

How We're Helping Fidelis Care Meet the Cures Act Mandate

- Industry-leading scheduling and billing platform for back-office users and EVV confirmations
- Easy-to-use point-of-care visit confirmation tools for caregivers

What does the HHAeXchange Portal provide to homecare agencies?

- Electronic case placement and authorization transfer
- Efficient schedule and visit management
- Free EVV solution for time & attendance and duty tracking
- Electronic billing



Services in Scope

Personal Care Aide

Level I 15 Minutes

Level I Two Client

Level I Multiple Client

Level II Basic – 15 Minutes

Level II Basic Two Client

Level II Multiple Client

Level II Hard to Serve

Level II Two Client Hard to Serve

Level II Live In

Level II Live in Two Client

Level II Live in Two Client Hard to Serve

Consumer Directed Personal Assistant

Basic – 15 Minutes

Enhanced

Two Consumer

Two Consumer Enhanced

Live in

Live in Enhanced

Live in Two Consumer

Live in Two Consumer Enhanced

Home Health Aide

15 minutes

1 hour

Two Client

Live in

Live in Two Client

Advanced Home Health Aide

Provider Options





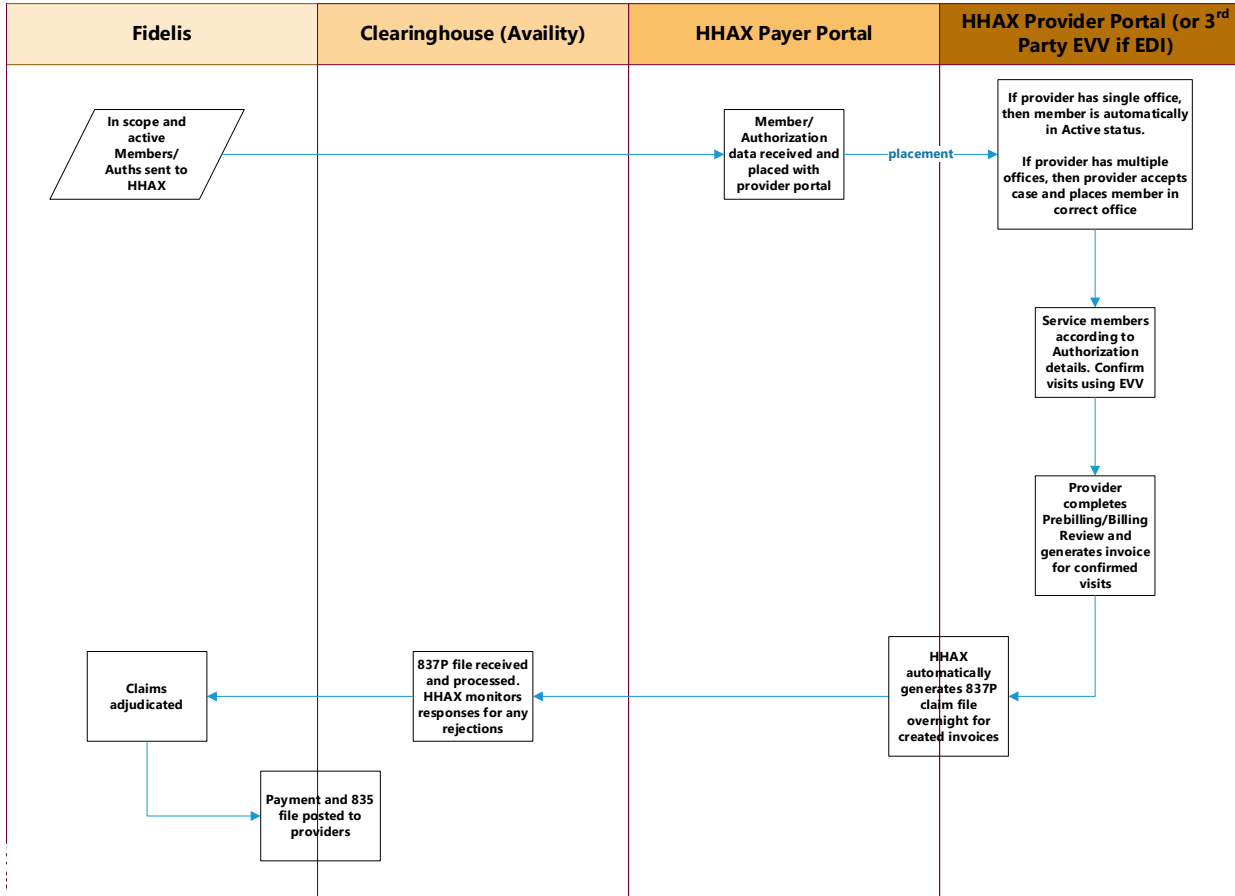
Provider Landscape

- **Existing Enterprise Providers:** Providers who have their own Enterprise HHAX portal as their agency management and EVV solution
- **Existing EDI Providers:** Providers who have their own HHAX portal which is used to integrate confirmed and billed 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 HHAX via integration
- **Existing Free EVV Providers:** Providers who have their own Free EVV HHAX portal which is used to manage EVV and billing to ensure compliance with linked payers
- **New Providers:** Providers who do not have an existing HHAX portal. These providers have two options for this implementation:
 - **EDI:** Integrate their existing third-party EVV system with an HHAX portal to send confirmed and billed visits to Fidelis
 - **Free EVV:** Use a Free EVV HHAX portal to confirm and bill visits

HHAX Provider Workflow Review



End to End Process Map





Member Management

- Members and Authorizations will be sent to your provider portal prior to the 12/13 go-live
 - Providers will validate the data received to ensure accuracy and reach out to Fidelis with any discrepancies
- Providers with multiple HHAX offices (locations), will need to accept the case and assign to the correct office prior to servicing member; providers with a single HHAX office will receive the placement automatically
- 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 last day of the latest auth loaded
 - Members will be reactivated by receiving a new auth in HHAX



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 Fidelis with any discrepancies
 - Authorizations will be sent as Entire Period in HHAX with the recommended weekly breakdown in the notes
 - Mutual cases will be authorized as overlapping in HHAX (e.g. each member receives the full hours of the authorization)
- Authorizations will match the current format (time period, unit breakdown etc...), but will be transmitted via the linked contract in HHAX. The process to request/adjust authorizations will remain the same



Visit Confirmation

- Visits will be confirmed using EVV, either using the HHAeXchange EVV tools or a third-party vendor's EVV tools
- 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 OMIG missed visit reason and action taken
- Plan of Care compliance will not be enforced by the payer in HHAX
 - ENT providers are able to enable a higher compliance level for this contract



Billing Process

- For dates of service **12/13/21** and forward, providers can submit invoices via the linked contract in HHAX
- HHAX will generate the 837P claim file and send to Availity
 - HHAX will monitor clearinghouse responses to ensure successful transmission
- Once the claim is received by Fidelis, standard adjudication and payment process will follow
 - Providers can enroll with Fidelis through Availity to receive 835 remits
 - Any required rebilling will occur in HHAX
- **Starting 2/14/22, any claims for in-scope service codes submitted outside of HHAX will be denied by Fidelis**
 - All EVV-mandated claims will be required to be submitted through HHAX as of this date to ensure the required visit data elements are being captured in accordance with the Cures Act



Billing Process

- Providers will be responsible for resolving all Prebilling and Billing Review issues in HHAX to ensure invoices are compliant and to reduce denials
- Providers will manage their own rates in HHAX, and are responsible for adding rates prior to submitting first invoices
 - Three rate regions will be configured on the linked contract to account for varying rates by region
 - Downstate (NYC 5 boroughs)
 - Collar (Nassau, Suffolk, Westchester)
 - Rest of State (all other counties)



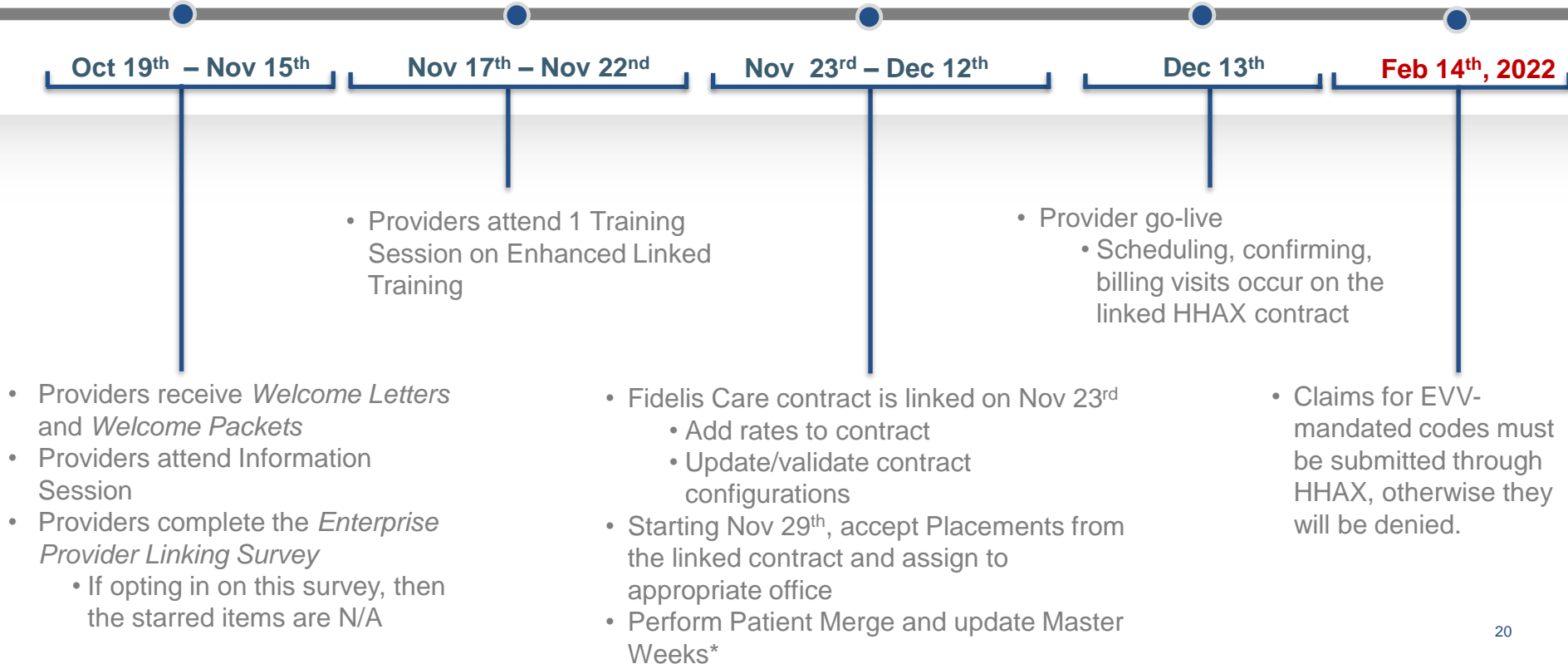
Communications

- The HHAeXchange Communication Module will not be used at go-live for Fidelis
 - The plan is to phase in the use of the Communications module post go-live, and further information and instructions will be provided at that time
- For all Fidelis-related communications (plan specific policies/procedures, authorization requests, claims questions etc...), providers should contact their Fidelis Care Provider Relations Specialist or call the Fidelis Call Center at 1-888-FIDELIS (1-888-343-3547)
- For all HHAX-related communications (system questions/troubleshooting, training requests etc...), providers should contact support@hhaexchange.com
 - If EDI (third-party EVV integration) related, then contact EDIsupport@hhaexchange.com

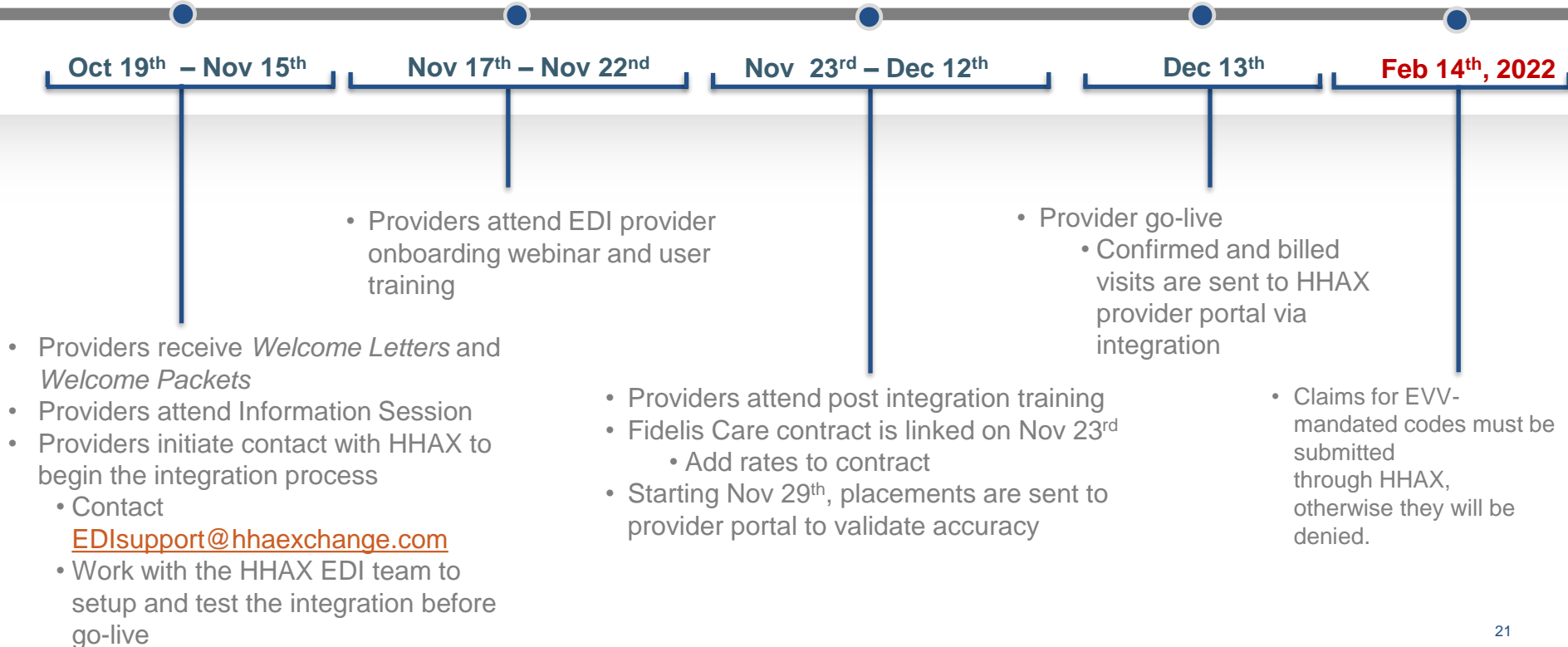
Timeline and Next Steps



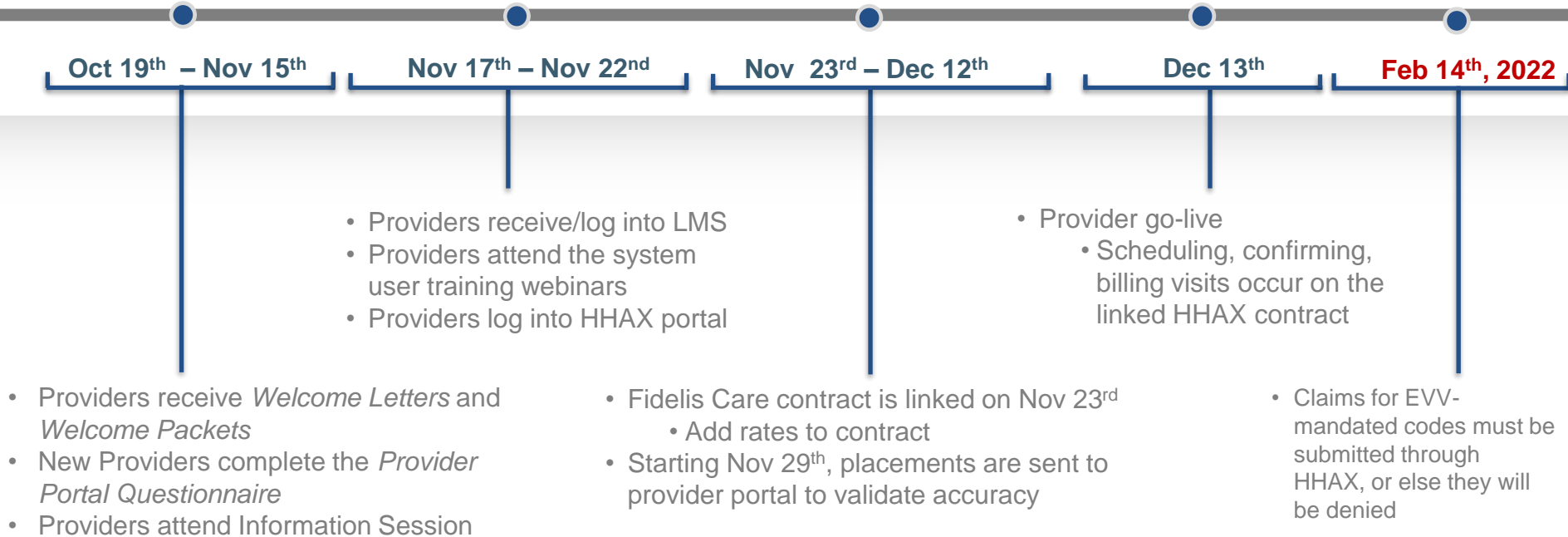
Provider Onboarding Milestones: Enterprise Providers



Provider Onboarding Milestones: EDI Providers



Provider Onboarding Milestones: Free EVV + New Providers





Next Steps

- ENT Providers:
 - Register for *Enhanced Linked Contract* training
 - Nov 17th at 2p; Nov 19th at 12p; Nov 22nd at 10a
 - Complete the *Office Linking Survey* to indicate which offices should be linked to Fidelis
 - If the form is not completed, all offices will be linked
 - Providers with high active Fidelis census can opt in to have internal member records merged with the new linked record, rather than completing this step manually from the front end
- EDI Providers:
 - Contact EDIsupport@hhaexchange.com with the subject line of “Fidelis Care Integration” to initiate the integration process with your third-party EVV vendor
 - Register for the *System User Training Webinar Week*
 - Nov 15th – Nov 19th where each day will be focused on specific functionality within HHAX
- Free EVV Providers:
 - Complete the *Provider Portal Questionnaire*
 - Register for the *System User Training Webinar Week*
 - Nov 15th – Nov 19th where each day will be focused on specific functionality within HHAX

Contact Information





<https://hhaexchange.com/fideliscare/>



HHAeXchange Support

support@hhaexchange.com

Fidelis Care Provider Relations Specialist



HHAeXchange Support

[1-855-400-4429](tel:1-855-400-4429)

Fidelis Provider Call Center

[1-888-FIDELIS \(1-888-343-3547\)](tel:1-888-FIDELIS)