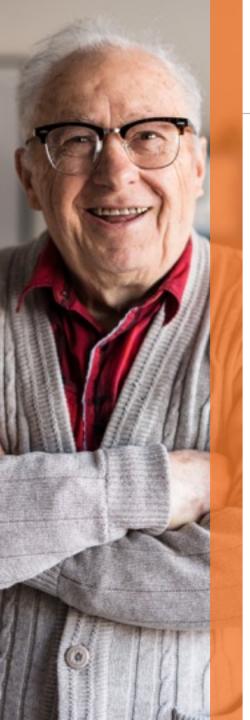




Nascentia Health Provider Information Session September 2020

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# Agenda

- Team Introduction
- Information Session Goals
- What is HHAeXchange?
- Provider Landscape & Key Implementation Dates
- Services in Scope
- Provider Workflow in HHAeXchange
- Questions?
- Contact Information



### **Team Introduction**

- Nascentia Health
  - Janet Billington
- HHAeXchange
  - Marquis Woods
  - Colby Hassfurther
  - > Fatima Abbas
  - > Ariel Jimenez



### **Information Session Goals**

- Distribute key information about the timeline of the HHAeXchange implementation
- Understand the services in scope and benefits of using HHAeXchange
- Preview the flow of information in HHAeXchange
- Provide contact information and where to find additional resources

# 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 Nascentia easy and efficient.

#### How We're Helping Nascentia 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
- Real-time two-way messaging with Nascentia
- Free EVV solution for time & attendance and duty tracking
- Electronic billing



# **Provider Landscape**

- Provider Types:
  - Enterprise: Provider already uses HHAeXchange for EVV and member management.
  - Non-Portal: Provider does not use HHAeXchange and does not already have their own EVV system. Non-Portal providers are able to use HHAeXchange free of charge to manage Nascentia members.
  - ➤ EDI (Electronic Data Interchange): Providers who have their own EVV system, separate from HHAeXchange.
    - ➤ EDI providers may continue to work in their own system for scheduling, recording visits, and billing, but the data will be sent to HHAeXchange via a file from the alternate EVV vendor. Communications with Nascentia will be done within the HHAeXchange portal.
    - ➢ If you have your own EVV system, you can reach out to edisupport@hhaexchange.com at any time for any questions about the integration process and file specifications.



# **HHAeXchange Implementation**

- Nascentia Health provider network will be linked to HHAeXhange Nascentia Professional system as of October 25, 2020
- ➤ Provider onboarding info session: 9/16/2020
- Provider training sessions starting on the week (9/28)
  - ➤ Enterprise Providers: 9/28/2020 10:00am 12:00pm EST
  - ➤ EDI Providers: 9/30/2020 1:00pm 3:00pm EST
- Nascentia Information Center: <a href="https://hhaexchange.com/nascentia/">https://hhaexchange.com/nascentia/</a>



# Services in Scope

CDPA Basic - 15 minutes

CDPA Enhanced

CDPA Two Consumer CDPA Two Consumer Enhanced

CDPA Live In

CDPA Live In Enhanced

CDPA Live in Two Consumer CDPA Live in Two Consumer Enhanced PCS Level I, Homemaker service – 15 Minutes PCS Level I Two Client, Homemaker service - 15 minutes PCS Level I Multiple Client, Homemaker service - 15 minutes PCS Level II Basic, Personal care services – 15 Minutes

PCS Level II Basic Two Client, Personal care services - 15 Minutes PCS Level II Multiple Client, Personal care services - 15 Minutes PCS Level II Hard to Serve, Personal care services - 15 Minutes

ard to Clin

PCS Level IITwo
Client Hard to Serve,
Personal care
services - 15
Minutes

PCS Level II Live in,
Personal care
services - Per Diem
(13 hours)

PCS Level II Live in Two Client, Personal care services - Per Diem (13 hours)

PCS Level II Live in Two Client Hard to Serve, Personal care services -Per Diem (13 hours)

HHA – 15 minutes

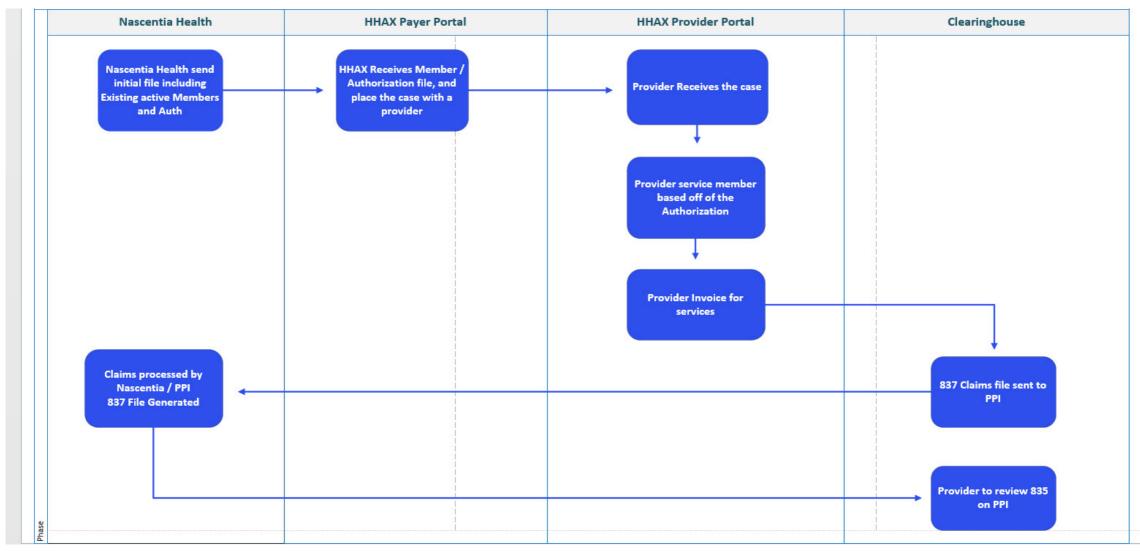
HHA Two Client

HHA – Live in

HHA Live in Two Client Advanced Home Health Aide



# **End to End Process Map**





# Member Management (Placement)

### **Member Placement**

- Providers will be receiving members and authorizations before 10/25 go live
- Placements will be sent as confirmed unless the provider has multiple offices, in which case it will be sent as pending
- Providers with multiple offices will accept or decline cases directly through HHAX provider portal
- If assigned case times out, a provider can request additional time by reaching out to Nascentia via a communication note

# **Updates to Member Profile**

- Nascentia Health will allow providers to manage the member phone 2 & 3 and additional addresses sections of the Member Profile page within HHAeXchange
  - Providers should be reviewing the member's information to add these additional phone numbers and addresses where the member is serviced
- Nascentia will manage the primary phone number and primary/billing address

This will allow for EVV to run smoothly with no exceptions for wrong phone number or address

### **Authorizations**

- Authorizations will be available In HHAeXchange prior to the 10/25 go-live.
- Providers will receive weekly authorization types in HHAeXchange.
- For authorization updates, providers will enter a request utilizing the HHAX communication module. The Nascentia team will respond to the request within the communication module.
- In case of authorization updates (e.g. reduced hours), the Nascentia team will add a new authorization in the system, and the provider will receive a communication note advising there is a new authorization.

### **Member Disenrollment**

- Nascentia Members are discharged from their plan due to cancellation of services, or the member is deceased
- ➤ In case of a member status update, a discharge date will be added directly in HHAeXchange by the Nascentia team
- ➤ Provider will receive the same communication they would today containing details about the end of services, and an automatic discharge notification will be sent directly in HHAeXchange

# **Service Interruption**

- Provider will notify Nascentia using the communication portal about any current or upcoming service interruptions (e.g. hospitalization, member vacation, etc.)
- Nascentia will update the authorizations for the member according to the dates that services will not be performed
- ➤ In the event of a service interruption without a known return date, provider should notify Nascentia using the communication portal when the member's services resume





### Communication

- The HHAeXchange communication module, will be the preferred method of communication between and payer and provider, Fax and phone will be used as back up
- Providers will use communication notes in HHAX to communicate with Nascentia for the below scenarios:
  - Authorization Edit
  - Calendar Note
  - Change in Condition
  - Change in Service
  - Change of Schedule
  - Critical Adverse Incident
  - Death
  - Delete Authorization
  - Health/medical crisis
  - Hospital and Other Admissions
  - Hospital Discharge
  - Member family caregiver change due to emergency
  - Member request for provider change
  - Missed service
  - Vacation/Out of Area
  - Other



### **Cures Act Mandated EVV**

Section 12006 of the 21st Century Cures Act requires states to implement an 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.

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

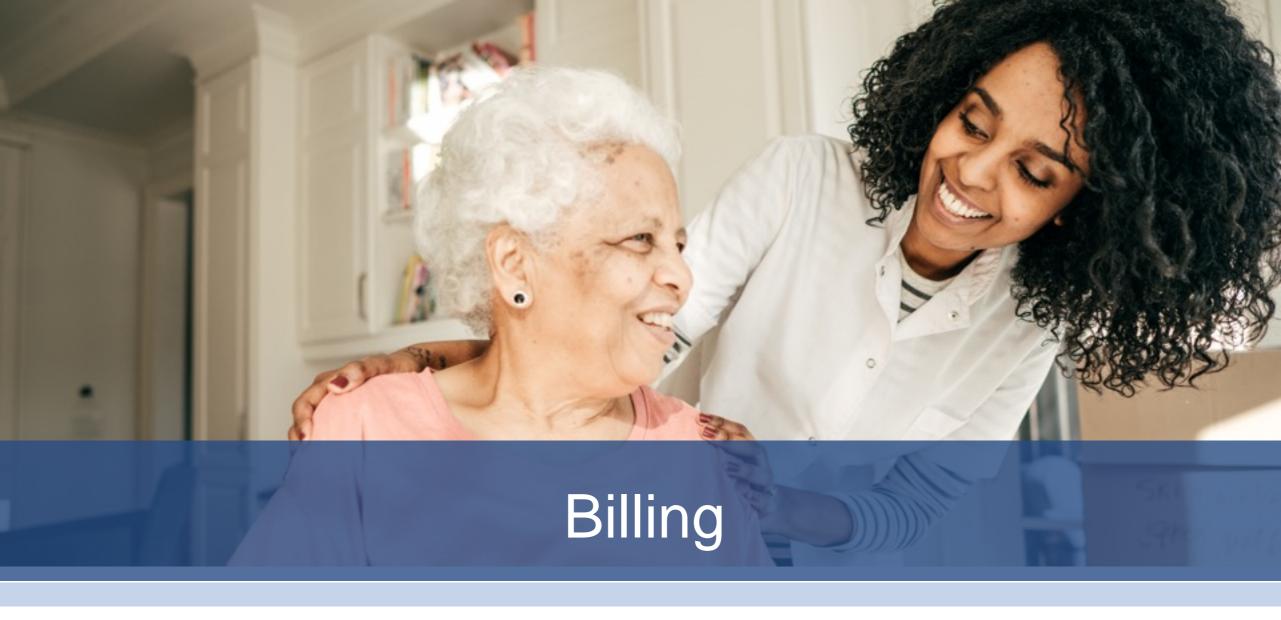


GFE extended deadline to 1/1/2021 for PCS

GFE extended deadline to 1/1/2021 for PCS. Providers are expected to use the system for scheduling, confirming visits, and billing starting (10/25/2020) to be ready for the Jan 1 mandate.

### **Manual Visit Confirmation**

- Timesheets are required during a manual visit confirmation. The provider is required to maintain timesheets outside of HHAeXchange
- Timesheets will be maintained, and updates of timesheets approval will be managed within the HHAeXchange system
- During audits, providers will be expected to provide documentation to validate services
- Providers are required to record missed visit on HHAeXchange and indicate the missed visit reason using OMIG reasons and action taken



# **Submitting Claims**

As of a 10/25 visit date and going forward, the process for invoices and submission of claims will follow the steps below:

- 1. HHAeXchange generates an 837P files
- 2. Claims are sent to PPi
- 3. Claims are adjudicated by Nascentia
- 4. Provider retrieves remits from PPi

# **Submitting Claims**

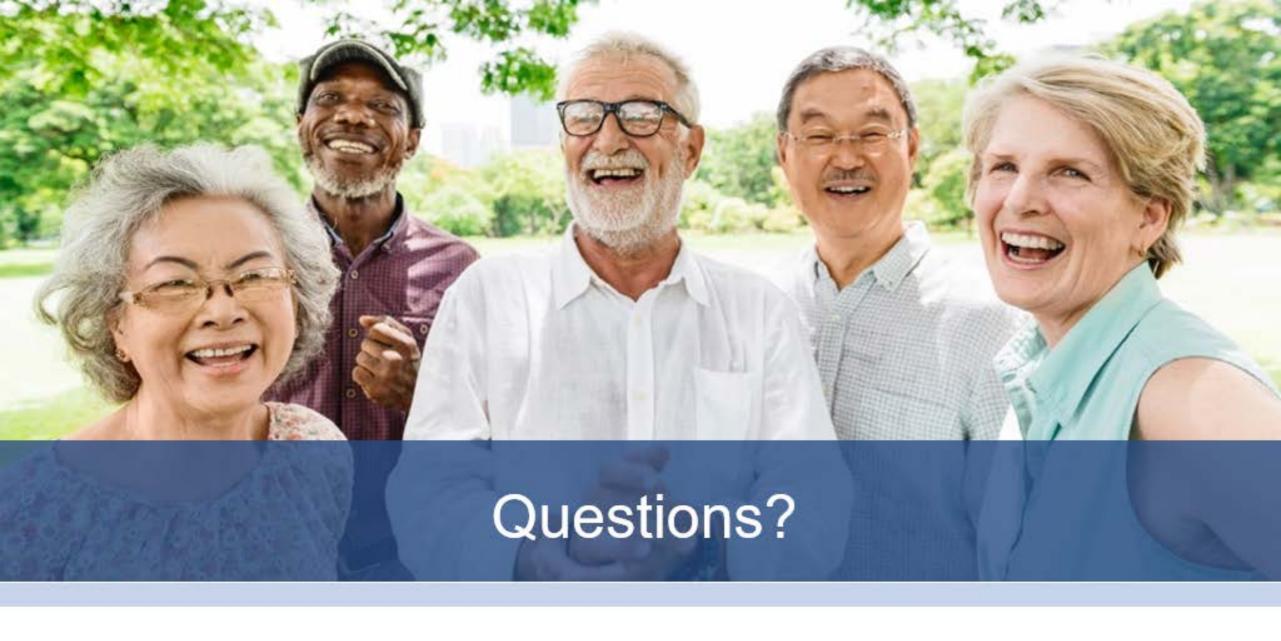
- Authorizations are required for billing
  - Nascentia team will be responsible for adding/editing services codes
  - Provider to use appropriate service codes for scheduling services
- Providers are responsible to manage rates In HHAeXchange
- Providers are requested to bill in weekly increments
- Providers are required to resolve all prebilling issues before billing
  - HHAeXchange runs each invoice through a series of common billing error rules prior to the claim being released
- Re-billing will be done using HHAeXchange in the event anything needs to be corrected on the claim

# **Submitting Claims**

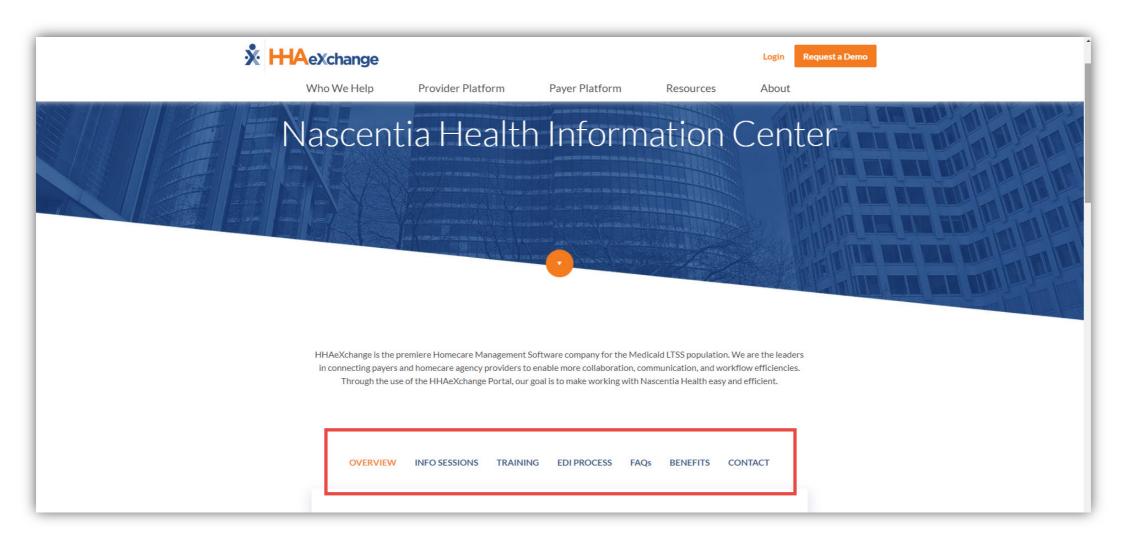
- Remittance advice is still available in PPi
- For denied claims, providers should contact Nascentia claims team for clarification
- > The HHAX provider portal will facilitate any required re-billing and correction to a claim

For claims resolution, please continue to follow the same process by calling the Nascentia Claims Department

For additional system usage assistance, re-billing and correction to claims, please e-mail HHAX at <a href="mailto:support@hhaexchange.com">support@hhaexchange.com</a>



### **Nascentia Health Information Center**



# HHAeXchange Provider Resources

- Provider Information Center: <a href="https://hhaexchange.com/nascentia/">https://hhaexchange.com/nascentia/</a>
- > HHAeXchange Support: <a href="mailto:support@hhaexchange.com">support@hhaexchange.com</a>; 855-400-4429