Quick Visit Entry Process Guide

Provider User Guide

Document Revision History

Date	Description of Revision
10/15/2020	Initial version of the document
01/04/2021	Added Active Authorizations section Added Duties Functionality Updated Caregiver Compliance Validation
03/15/2021	Accessibility standards applied
04/16/2021	Added Non-Payable Default Pay Code
08/22/2022	General updates

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Overview

Not all Providers use HHAeXchange (HHAX) as their primary scheduling and confirmation system. Some Agencies use other methods to track scheduling and confirmation, and only enter visits into HHAX for billing purposes (generating claims to send to a Payer).

The **Quick Visit Entry** page accommodates Agencies that only use the HHAX system to generate claims. On this page, basic and necessary information is entered to create a visit and then have that visit invoiced through HHAX. This process guide provides instructions and guidance when using the Quick Visit Entry page.

Please direct any questions, thoughts, or concerns regarding the content herein to the HHAX Customer Support Team.
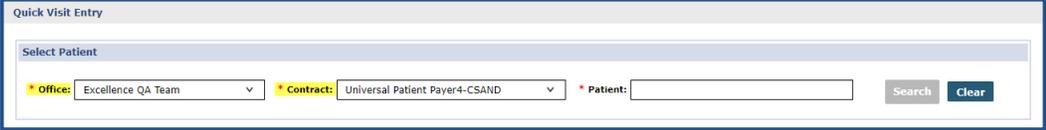
HHAX System Key Terms and Definitions

The following provides basic definition of HHAX System key terms applicable throughout the document.

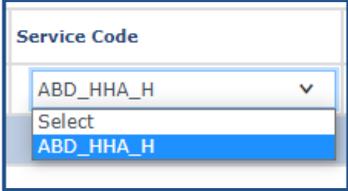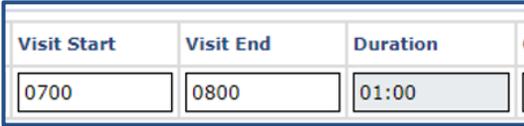| Term	Definition
Patient	Refers to the Member, Consumer, or Recipient. The Patient is the person receiving services.
Caregiver	Refers to the Aide, Homecare Aide, Homecare Worker, or Worker. The Caregiver is the person providing services.
Provider	Refers to the Agency or organization coordinating services.
Payer	Refers to the Managed Care Organization (MCO), Contract, or HHS. The Payer is the organization placing Patients with Providers.
HHAX	Acronym for HHAeXchange

Quick Visit Entry Page

Complete the following steps to select the **Office**, **Contract**, and **Patient** to create a visit via the Quick Visit Entry page.

Step	Action
1	Navigate to **Visit > Quick Visit Entry** to access the *Quick Visit Entry* page.
2	The Quick Visit Entry page opens. Select the required **Office** and **Contract** fields. Once selected the **Patient** field becomes available. **Note:** These three fields are interdependent; meaning only active Contracts and Patients associated to the selected Office are available selections. **Quick Visit Entry** *Note: Throughout the function, the **Clear** button clears any selection and returns to the initial selection screen.*
3	Enter the Patient's *First Name*, *Last Name*, *Patient ID*, *Admission ID*, or *Medicaid Number*. The system auto-generates a list of *active* Patients matching the information as it is entered. Select the applicable **Patient**. Click the *Search* button (enabled when the Patient is selected). **Select a Patient**
4	The *Quick Visit Entry* grid appears below the selected **Office**, **Contract**, and **Patient** (as illustrated in the image below). **Visit Quick Entry Page** *Note: Click the **Clear** button to clear any selection and return to the initial selection screen.*

Creating a Single Visit Quick Entry

Complete the following steps to create a *single* visit entry.

Step	Action
1	To create a single visit, click on the calendar icon to the right of the **Visit Date** field (as indicated on the image below). The month calendar opens to select the visit date. Visits can only be created for past dates or the current date. Selecting Visit Date – Single Visit
2	Select the applicable **Service Code** that is active for the Contract for the selected date. Only Service Codes (for all Patient types) applicable to the Authorization display in the options. Select Service Code
3	Enter the **Visit Start** and **Visit End** times in HHMM, 24-hour format (0000-2359). The **Duration** field auto-fills once the times are entered. Visit Start/End/Duration
4	Enter the *Caregiver Last Name* or *First Name* in the **Caregiver** field. As with the **Patient** field, the **Caregiver** field auto-suggests options based on the first three characters entered. Select the **Caregiver** from the dropdown list or enter the name. *Note: If a Caregiver is selected in error, click the x to the right of the name to clear.*

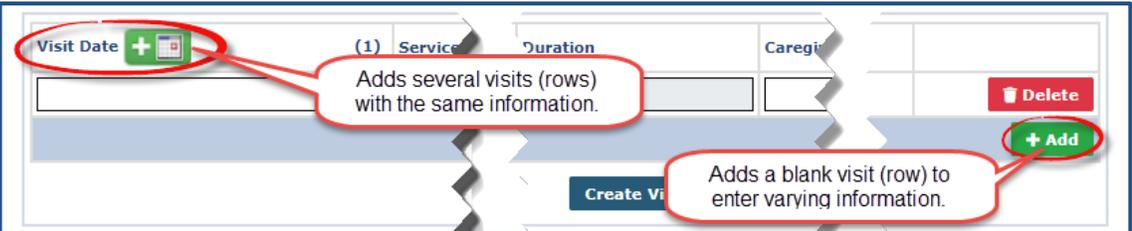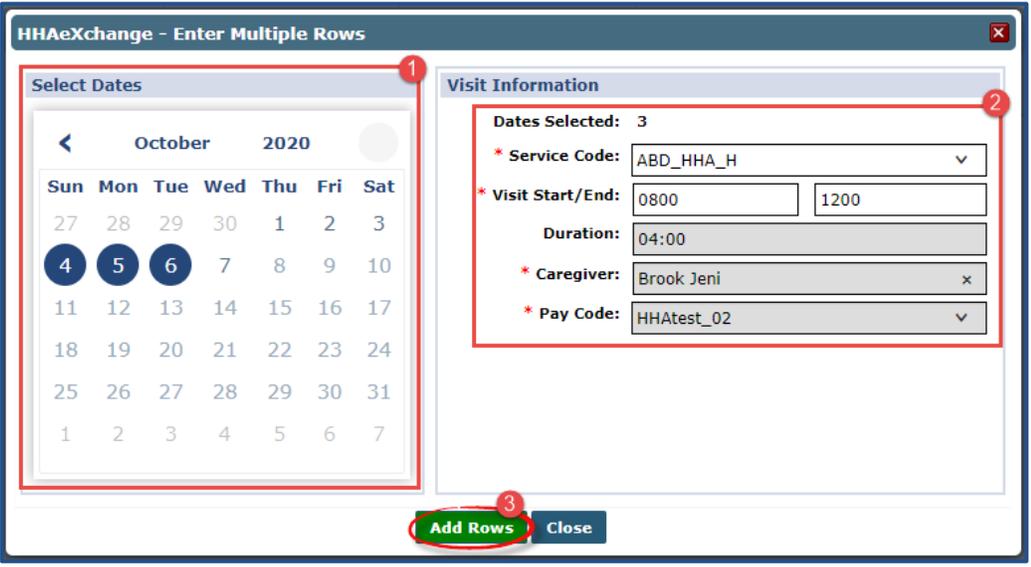| Step	Action
	Select Caregiver
5	The **Pay Code** field is view only and populates by default based on the Service Code configuration. Refer to the Non-Payable Default Pay Code section below for further information. **Default Pay Code**
6	Once all fields are complete, click on the ***Create Visit*** button. **Create Visit**
7	The visit is created and confirmed. The green checkmark status symbol indicates an Authorized visit. Refer to the **Status Definition** table below Click on the ***Clear*** button to clear the screen. **Visit Created**
8	Navigate to the Patient Calendar to view the created and confirmed visit.

Status Definitions

The **Visit Status** and **Authorization** populates based on the information entered when creating a visit.

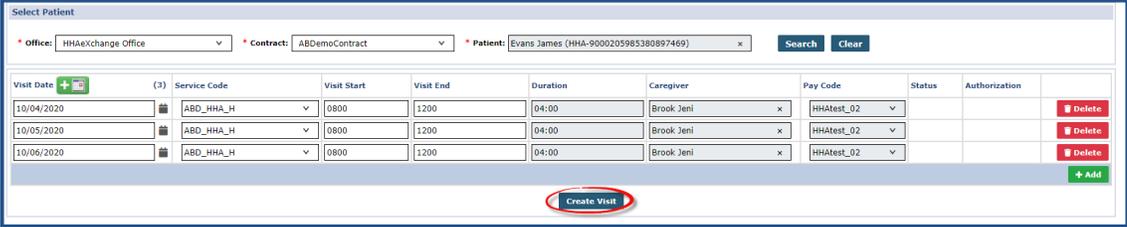This table provides Status Definitions.

Status	Definition
✅	Authorized, visit created
✅	Not Authorized, visit created
❗	Visit not created (with reason info box)

Creating Multi-Visits via Quick Visit Entry

A Multi-Visit Quick Visit Entry is created when the same visit information (**Service Code**, **Start/End Times**, **Caregiver**, **Pay Code**) applies to several visits for the same Patient. Complete the following steps to add more than one visit at a time.

Step	Action
1	To create multiple visits for the Member, click on the green + Calendar icon on top of the **Visit Date** field (as indicated on the image below). **Creating Multi-Visits** *Note: The **+Add button** adds a blank row where to enter an additional visit with different information when creating multi-visits. For example, an RN visit with a different Service Code.*
2	The *Enter Multiple Rows* window opens. On the left, click on the desired visit dates to select (highlighted in blue as selected). On the right side, specify the visit information such as **Service Code**, **Visit Start/End** dates, and **Caregiver**. The **Duration** and **Pay Code** fields auto-populate based on the selections. The screen shows that 3 dates have been selected. Click the ***Add Rows*** button to continue. **Creating Multiple Visits**

Step	Action
	Note: Visits can only be selected for past dates or the current date.
3	The visits populate as entered. Click on the **Create Visit** button to proceed. *Note: Add or Delete visits from this screen by clicking the respective buttons.*
4	The visits are successfully created and the Status displays accordingly. In this example, the three visits are authorized as indicated by the green checkmarks. Click on the **Clear** button to clear screen (and the process is complete). From here, click on the **+Add** button to add another visit.
5	The grid now contains another row with blank fields. Complete the required information. In the image below, a different time and Caregiver have been selected. Click on the **Create Visit** button. **Create an Additional Visit**
6	In this example, the visit is NOT created as indicated by the red warning symbol. Hovering over the symbol displays the reason why the visit cannot be created (as illustrated in the image). From here, click on the x in the **Caregiver** field and change the Caregiver. Once updated, click on the **Create Visit** button.
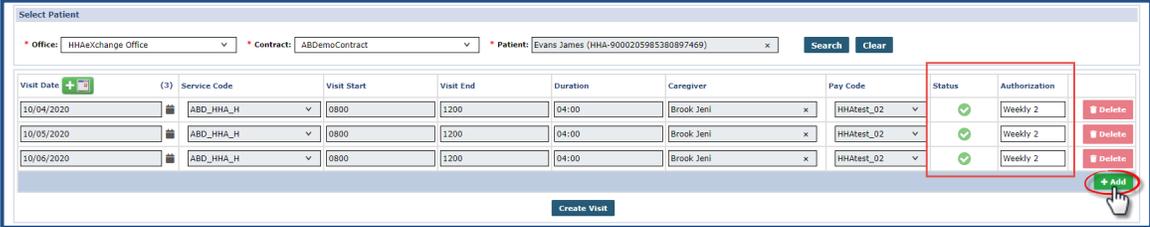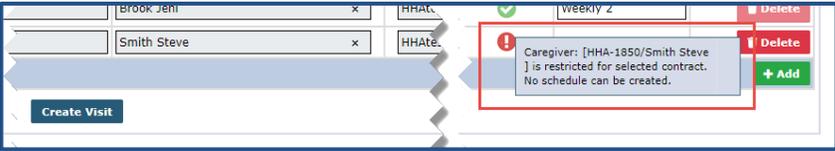
| Step	Action
7	In this case, the visit is created but not Authorized, as denoted by the Status symbol.

Non-Payable Default Pay Code

A default *Non-Payable* value in the **Pay Code** dropdown field allows Providers to save entered visits. This value is selected by default when no **Pay Code** has been identified for the visit and can be edited as needed. The *Non-Payable* value applies to both Single Visit and Multi-Visit entries (as illustrated in the following images).

Note: If an existing Pay Code has been assigned to the visit, then the Pay Code field is unavailable to edit.

**Quick Visit Entry: Single Visit Non-Payable Pay Code Value**
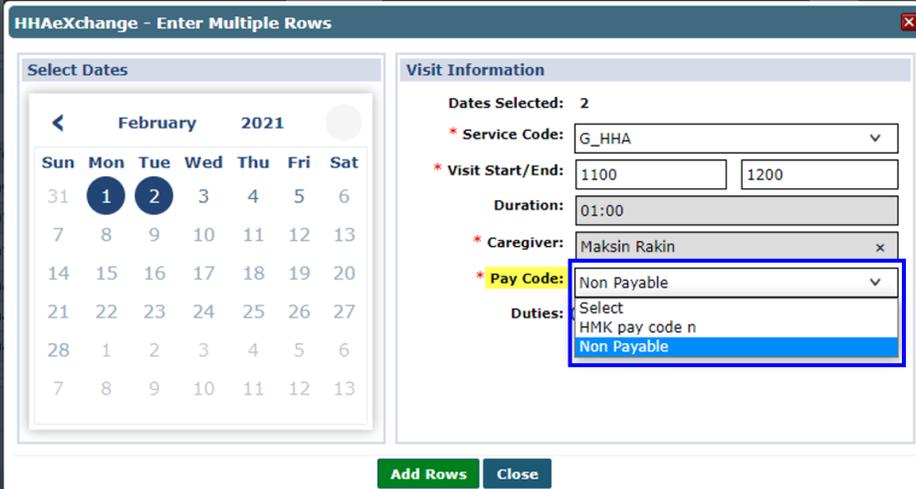
**Quick Visit Entry: Multi-Visit Non-Payable Pay Code Value**

Active Authorization Section

The *Active Authorizations* section on the Quick Visit Entry (**Visit > Quick Visit Entry**) page, displays all authorization details for the Patient entered. This facilitates visibility used to compare visits entered to authorization details, as seen in the following image.

By default, the *Active Authorizations* section displays the Active Authorizations (active within 90 days). If the Patient has multiple authorizations (beyond the 90-day period), click the **Show All** button to view all past authorizations. To view only active authorizations, click the **Show Active** button (visible when All is selected).
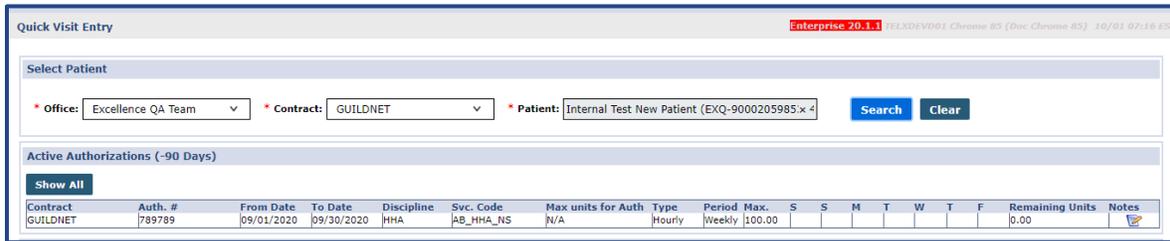
Active Authorizations
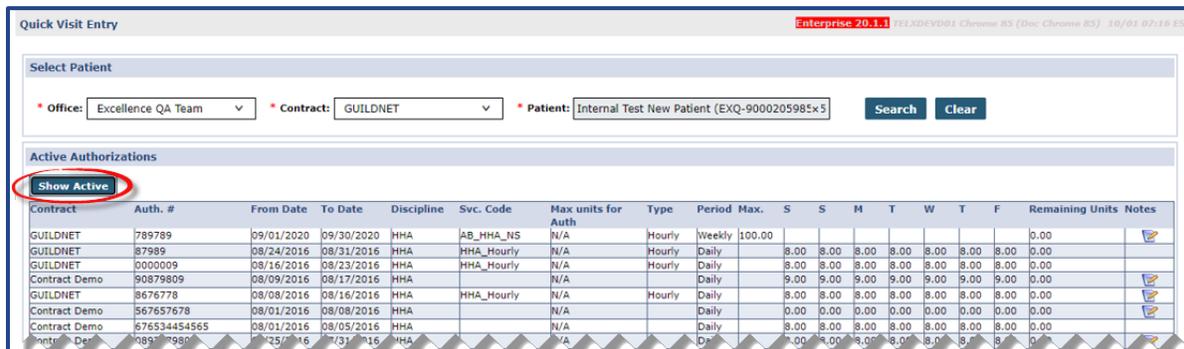
All Authorizations

Linked Contract Authorizations in Quick Visit Entry

For Linked Contracts, the authorization details include various columns such as **Service Category**, **Service Type**, **Authorization Type**, and the **Payer**. Hovering over the Notes icon populates a popup with the Authorization Note (as seen in the image below).

Authorization Notes

Attached Authorization Document

A right-most column has on the Patient Authorization results indicates attached supporting

documentation. To access, click on the green paperclip icon to open/download the attached document.

Attached Authorization Document Column

This column applies to *Internal* and *Linked* Contracts.

Additional Authorization Functions

The **Authorization Rules**, **Blackout Dates**, and **Guardrails** functions have also been implemented into the *Quick Visit Entry* page, *Active Authorization* section; each covered in the following sections.

Additional Authorization Functions

Additional Authorization Rules

To view *Additional Authorization Rules* click on the **Additional Rules** link which displays the *Additional Authorization Rules* popup providing more insight/reasons a visit may not be authorized (as seen in the image below).
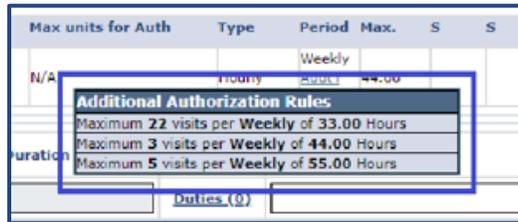
Additional Authorization Rules Popup

Blackout Dates for Linked Contracts

To view Blackout Dates for a Linked Contract Authorization, click on the **Blackout Dates** link, as seen on the image below.

Blackout Dates Link

The *Blackout Dates* window opens displaying applicable details, as seen in the following image.

Blackout Dates Window

Linked Contract Authorization Guardrails

If a Linked Contract Authorization has Guardrails enabled by the Payer, then a Provider can see Guardrail details by clicking on the **Guardrail Breakdown** link on the Authorization row (as seen in the following image).

Quick Visit Entry: Guardrail Breakdown Link

The *Guardrail Breakdown* window opens to review the information. For details on Guardrails, refer to the Authorizations Job Aid.
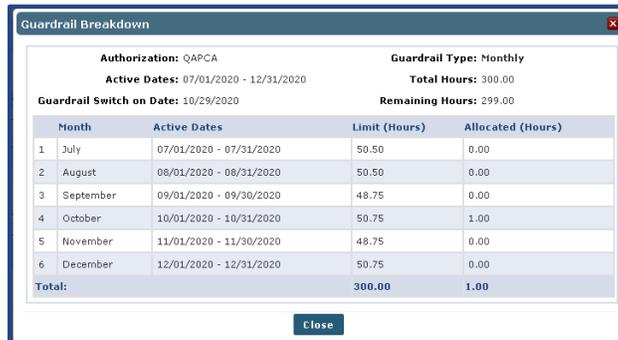
Guardrail Breakdown Window

Duties Functionality in Quick Visit Entry

To enter the applicable duties performed or scheduled during a visit, click on the **Duties** link, as seen in the following image.

Duties Link in Quick Visit Entry Row

The *Enter Duties* window opens, as seen in the image below. Select the performed (green check) or refused (red x) duties. Click the ***+Add*** button to save the duties for the visit.

*Note: Duties are only available for Non-Skilled visits. If a Skilled visit is created, the **Duties** link disappears.*

Enter Duties Window

For multiple visits, click on the number link in the **Duties** field in the *Enter Multiple Rows* window (as seen in the image below) to open the *Enter Duties* window (seen in the image above).
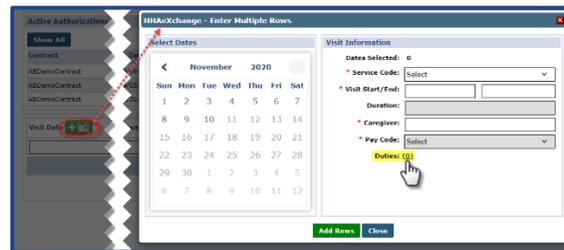
Duties for Multiple Visits

The Duties count is indicated in parenthesis beside the **Duties** field in all respective QVE screens.

Note: When a visit is created, the selected Duties are reflected across the system where visit information is viewed (such as in the Patient Calendar, Caregiver Calendar, Visits, and Appointments).
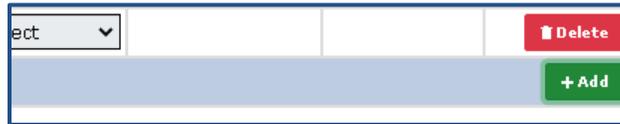
Other Quick Visit Entry Functionality

Deleting a Visit Row

A **Delete** button appears for each row at the far-right. To delete a visit, click on the **Delete** button.

The system prompts for a confirmation. Click **YES** or **NO** to proceed.

*Note: This function applies to visits that are not yet created. Once a visit is created, the **Delete** button is disabled from this screen.*

Visit Counter

A visit counter (at the header of the page) shows the number of visits at any given time for a current visit grid. The counter updates accordingly as visits are added or deleted.


Visit Row Limitation

The visit grid has a 30-visit capacity (at a given time). The system issues a validation when attempting to add a visit beyond the 30 row limit (as seen in the image below).
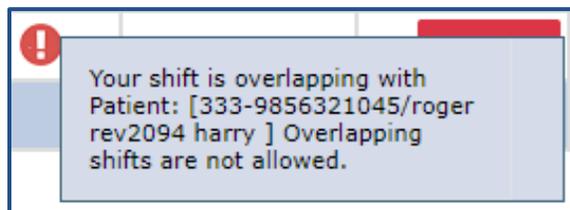
Validations

Required Field Validations

If information is missing for multiple required fields in the visit rows, then the system prompts a single validation window with listed errors, as seen in the image.
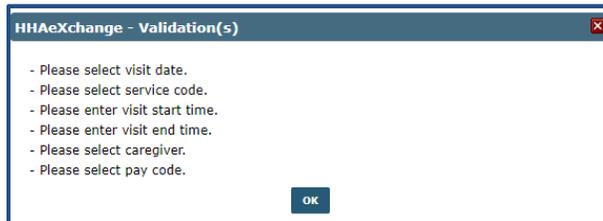
Other Validations

The following are general validations which impede in creating visits via Quick Visit Entry. Hover over the red warning icon to see the reason. These details can be changed directly on the visit grid in respective field.

- Patient Shift Overlap

- Caregiver Overlap

- Restricted Caregiver

- Caregiver Hire Date Validation

- Aide is on vacation

- Service Code Mismatch

Quick Visit Entry Validation

Caregiver Compliance Validation

The following Caregiver Compliance validations are applicable to the Quick Visit Entry feature.

If the validation is set to *Warning*, then the **Status** icon is yellow indicating that the visit has been created, but the Caregiver is not Compliant.

If the validation is set to *Validate*, then the **Status** icon is a red alert indicating that the visit cannot be created because the Caregiver is not Compliant; the popup indicates specific validation reason (as seen in the image below).