

Texas Electronic Visit Verification (EVV) – Information Session

July 2023

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HH AeXchange System Terminology



- **Member** = Patient = Recipient = CDS Employer = Participant = Client
- **Service Provider** = Caregiver = Attendant = Aide = CDS Employee
- **Provider** = Program Provider = FMISA = Vendor = Agency
- **Payer** = HHSC = MCO = Plan

▶ HHAeXchange Presenters



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Agenda

- HHAeXchange Mission and Purpose
- Texas EVV Overview
- EVV Solution & Benefits of HHAeXchange
- Project Timeline
- HHAeXchange Demonstration
- HHAeXchange Portal Registration Program Provider System User Training (SUT) & CDS Training Registration
- Support Resources
- Q/A



Info Session Takeaways

Preview

➤ Top Takeaways from Today



1. Onboarding with HHAeXchange
2. HHAeXchange Portal features and workflow
3. Integrating your 3rd party system with HHAX
4. EVV Clock In and Clock Out Methods & Visit Confirmation
5. Training Registration
6. Project Timeline
7. Support Resources



An End-to-End Ecosystem **For Better Care**



**Enable the most
effective homecare
ecosystem every day.**

Mission

PURPOSE

We are passionate about helping people who are aging or have disabilities thrive in their homes and communities through the creation of a homecare ecosystem that seamlessly connects states, managed care organizations, providers, service providers, and members.

The 21st Century Cures Act



Passed by Congress in December 2016, the 21st Century Cures Act states to implement an EVV system for Medicaid-funded personal care services (PCS) and for home health care services (HHCS).

Effective January 1, 2021, EVV is required for Medicaid [personal care services](#).

Effective January 1, 2024, EVV is required for Medicaid [home health care services](#).

The six data elements required to be collected to meet the Cures Act EVV requirement:

 Type of Service Performed

 Location of the Service

 Person Receiving the Service

 Person Providing the Service

 Date of the Service

 Time the Service Begins and Ends



Texas Health and Human Services Commission (HHSC) has partnered with Accenture and HHAEExchange to provide a new, single and state-funded EVV vendor system, the HHAEExchange Portal.

Users of the current EVV vendor systems (DataLogic/Vesta or First Data/AuthentiCare) must transition to HHAEExchange or receive approval as an EVV Proprietary System Operator (PSO) by **October 1, 2023**.

Upcoming Deadlines:

- EVV for personal care services should be captured in HHAEExchange starting **October 1, 2023**
- Practice period for home health care services expansion begins **October 1, 2023**
- Home health care services will begin requiring EVV data on **January 1, 2024**

➤ HHAEExchange Portal Features

We are making it easier for you to transition by:

- Migrating up to a year's worth of visit data to your new HHAEExchange Portal and up to 5 years of member, service authorization, and service provider data
- Integrate your existing 3rd Party Management System with HHAEExchange to enable near real time data exchange. Includes the exchange of member, service provider, schedules, and visit data

HHAEExchange Portal

No-cost, state-funded EVV system



Electronic Visit Verification

- Real-Time Clock In and Clock Out Dashboard
- Clock In and Clock Out via Mobile App, Telephone (Landline), or Alternative Device
- Telephony in English & Spanish

Mobile Application

- GPS Clock In and Clock Out
- Multi-Language Support (20+ languages)
- Plan of Care Duty Tracking
- Directions to Next Shift
- Offline Mode for areas with no service

Provider Agency & FMSA Operations

- Dynamic Scheduling Management
- Clock In / Clock Out Call Exception Dashboard
- Authorization Management
- Master Week Creation
- Manual Visit Creation
- Visit Maintenance
- Profile Management
- EVV Standard Reports

3rd Party Management System Integration

- Service Provider (Create, Update, Search, Get)
- Member (Create, Update, Search, Get)
- Schedule (Create, Update, Search, Get)
- Visit (Search, Get)
- Authorization (Create, Update)

Consumer Directed Services Portal

- Approve Time Worked
- Visit Maintenance
- Access EVV Standard Reports

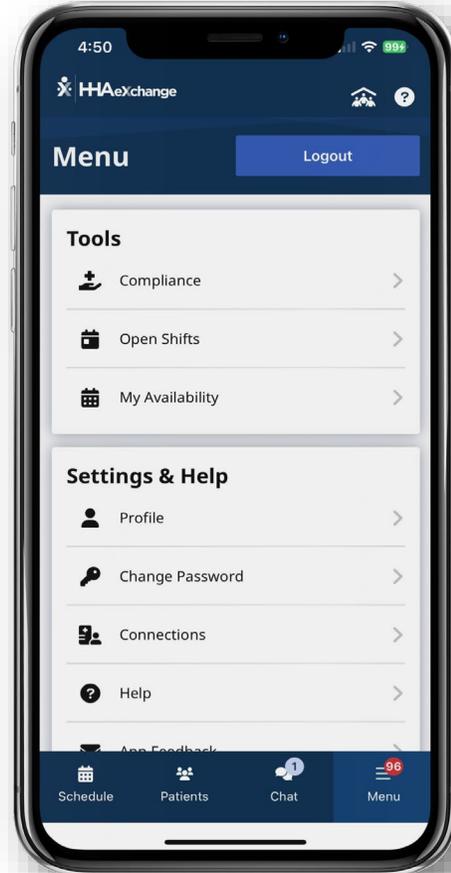
Fiscal/Revenue Cycle

- Pre-Billing Claims Scrubbing
- Direct Claims Submission to TMHP

EVV Clock In and Clock Out Methods



Telephone
(Landline)



Service Provider
Mobile App



Alternative Device



Data integration with HHAeXchange

*3rd Party Management System Integration
Application Programming Interface (API)*

Integrate with HHAeXchange to enable near real-time data exchange with your 3rd Party Management System via API. Data exchange options include:

- Service Provider (Create, Update, Search, Get)
- Member (Create, Update, Search, Get)
- Schedule (Create, Update, Search, Get)
- Visit (Search, Get)
- Authorization (Create, Update)

[HHAeXchange Data Integration Specifications](#)

Get started by submitting a ticket to our ENT Integration Support Desk: [Click Here](#)



Provider Landscape

Your Options

EVV System Change:

- Program providers and FMSAs of the current EVV vendor systems (DataLogic/Vesta or First Data/AuthentiCare) who must transition to HHAeXchange. These program providers/FMSAs will utilize HHAeXchange Portal and have the options to integrate their 3rd party system with HHAX via API.

New Program Providers:

- Program providers who do not have an existing EVV vendor. These program providers will utilize HHAeXchange Portal and have the options to integrate their 3rd party system with HHAX via API.

New Financial Management Services Agencies (FMSA) Entity:

- FMSAs who manage Consumer Directed Service (CDS) employers and CDS employees and do not have an existing EVV vendor will utilize HHAeXchange Portal and have the options to integrate their 3rd party system with HHAX via API.

All Program Providers/FMSAs Will Receive:

- HHAeXchange Portal to confirm visits and create claims
- Option to integrate their existing third-party EMR system with an HHAeXchange portal to send member, authorization and schedule data to HHAX.



CDS Landscape

Your Options

CDS Employers

- CDS employers who manage personal care services provided in the home directly with their CDS employee will receive:
 - Services Portal: schedule, manually add visits, approve and deny visits with a HHAeXchange service portal.

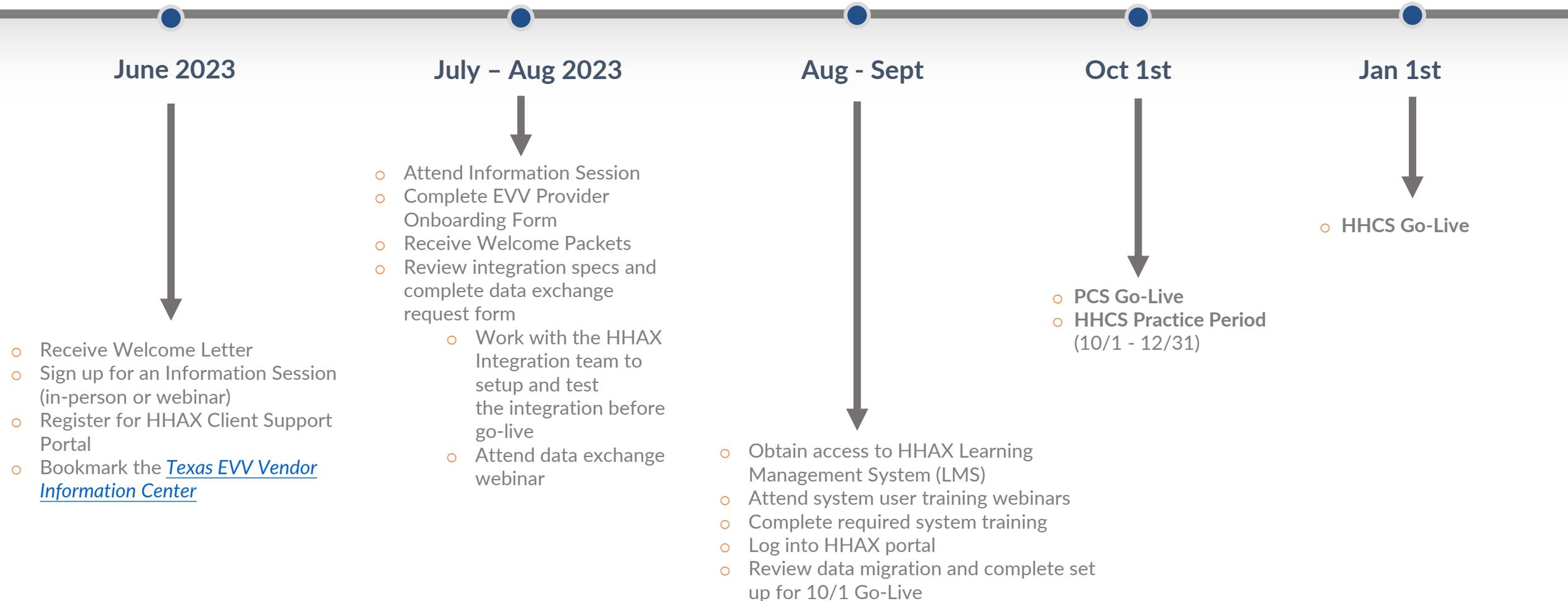
CDS Employees

- CDS employees who service CDS employers (members) will receive:
 - Services Portal: propose and approve shift changes.
 - HHAeXchange Mobile App: mobile app to clock in and clock out, receive newly scheduled visits, document duties, and more.
 - HHAeXchange IVR Access: toll-free number to clock in and clock out, document duties, and more.



Project Timeline

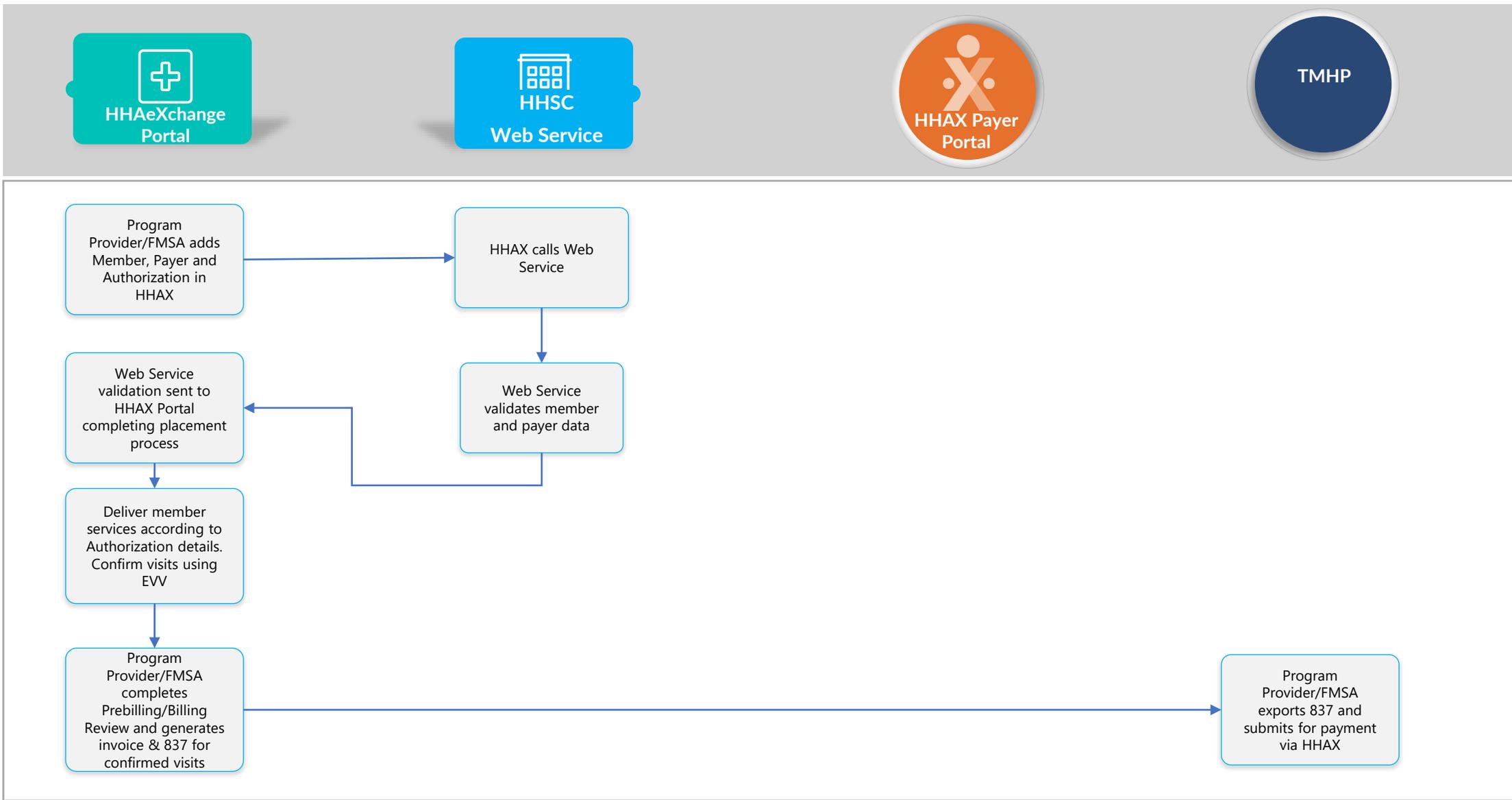
Onboarding Milestones





HHAeXchange System Functions

End to End System Process



Home Screen



- System Notifications
- HHAeXchange Support Center
 - Process Guides
 - Reference Material

The screenshot displays the HHAeXchange Home Screen. At the top, there is a navigation bar with the HHAeXchange logo and several menu items: Home, Member, Service Provider, Visit, Action, Billing, Report, and Admin. Below the navigation bar, a personalized greeting reads "Hello Misty_Trainer". A secondary navigation bar contains tabs for Placements (0 Pending), Events, System Notifications (which is the active tab), Direct Messages, Tasks, and Linked Communication. The main content area is titled "Search System Notifications" and features four search filters: Priority (set to "-All-"), Status (set to "-All-"), From (with a date format "mm/dd/yyyy" and a calendar icon), and To (with a date format "mm/dd/yyyy" and a calendar icon). A blue "Search" button is located below the filters. On the right side of the screen, a user menu is open, showing "Other Alerts" with a sub-menu containing "Message Center" (0) and "System Notifications" (3). Below this, the menu lists "Need Help?", "Support Center", "Email Us", "Remote Support", "Live Chat", "Welcome - Misty_Trainer (UMA healthcare)", "Change Password", and "Logout".

➤ Service Provider Management



HHAX Workflow for Program Providers/FMSAs

- Add service provider to HHAX
- Manage service provider's mobile access
- Web services validate member information and confirm placement
- Assign service provider to member profile

Data Exchange Workflow

- Program providers can import service provider profiles through secure interface

Creating Service Providers



HAeXchange Home Member **Service Provider** Visit Action Billing Report Admin

Add Service Provider

All fields marked with an asterisk (*) are required.

Primary Office *
UMA healthcare

Demographics

First Name * [Redacted] **Last Name *** [Redacted] **Middle Name** [] **Gender** [Select]

Initials * [Redacted] **Date of Birth** [mm/dd/yyyy] **Alt. Service Provider Code** [] **SSN# *** [Redacted]

Ethnicity [Select] **Rehire** **Rehire Date** [mm/dd/yyyy] **Country of Birth** [] **Marital Status** [Select]

Dependents []

Employment Information

Service Provider Type * [Select] **Status *** [Select]

Employment Type
 PCA LPN

- New Service Provider
 - Required Fields
 - Demographics (Employment Type)
 - Address
 - Emergency
- Save
 - Creates Profile

HAeXchange Home Member **Service Provider** Visit Action Billing Report Admin

Hello Misty_Trainer

New Service Provider

Search Service Provider

Creating Service Providers



Profile

Demographics

First Name: Greg
Initials: GM
Alt. Service Provider Code: [Yellow Highlight]
Mobile Application Access: PJ80073 Generate New Code
Mobile Device ID: --
Country of Birth: --
Ethnicity: --
Marital Status: --
Mobile/Portal ID Type: Non-Clinical
Date of Birth: 01/01/1990
Last Name: Martinez
Date of Birth: 01/01/1990
Time & Att. PIN: 100002
Secondary Offices: --
Enable Mobile Chat: N/A
Dependents: --

SSN: 999-91-2345

Service Provider Code: KHC-1002

Employment Information

Service Provider Type: Employee
Status: Active
Employment Type: PCA, HHA, PA

If checked, a code is sent to the Service Provider that enables them to connect to the organization during the mobile app sign up process and gain access to their assigned schedules and other data elements within the application.

- Program Providers/FMSAs must grant access to service providers and CDS employees to utilize mobile application for clocking in and out
- The service providers or CDS employees DOB, and last 4 of SS# must match between the agency profile and the mobile app profile

Creating Service Providers



- Program Providers/FMSAs generate Mobile App access code(s)
 - Code(s) can be sent by email and SMS to the service provider or CDS employee

Middle Name
--

Gender
Male

Mobile Application Access ⓘ
 JG44900 **Active** [Send code](#)
[Generate New Code](#) [Send code via email](#)

Mobile Device ID ⓘ [Send code via SMS](#)

Last Name
Martinez

Date of Birth ⓘ ↻
01/09/1990

Time & Att. PIN
100002

Secondary Offices ⓘ

AUSTIN, TX, 78750

Profile

Demographics

Date of Birth 01/09/1990

Code KHC-1002

Availability Updated 6/2/2023

Provider (Office) UMA healthcare (UMA healthcare)

Team --

Caregiver Hours H 0 | V 0

Profile Log [Edit](#)

HHaExchange - Warning ✕

Are you sure you wish to generate a New Mobile Activation Code for this caregiver?
The old code will become Inactivated.

[Generate New Code](#) [Cancel](#)

➤ Member Management



HHAX Workflow

- Program Providers/FMSA will create Member
- Program Provider/FMSA selects Payer and completes auto-placement
- Web services validates member information and confirms placement
- Program providers/FMSAs will assign service provider to member profile

Data Exchange Workflow

- Import member data through secure interface
- System validates the payer for auto placement
- Web Services validates member information and confirms placement

Adding a New Member



- Select New Member to add a member
- Enter all required fields and save

© 2023 HHAeXchange

Adding a New Member



HHAeXchange Home Member Service Provider Visit Action Billing Report Admin

New Member

All fields marked with an asterisk (*) are required.

Office *
UMA Healthcare

Demographics

First Name *
Date of Birth *
mm/dd/yyyy
Ethnicity
Select
Member ID
Medicaid Number
(e.g. 999999999)
Medicaid Eligibility Date Range
mm/dd/yyyy - mm/dd/yyyy

Last Name
Lee

First Name
Walter

Date of Birth
12/01/1960

Medicare Number
xxxx-xx-xxxx

Managed Care Eligibility Date Range
mm/dd/yyyy - mm/dd/yyyy

Allow Duplicate SSN

Check Medicaid Eligibility

Search with any of the following combination to check patient's Medicaid eligibility.

- Medicaid ID, Last Name
- Medicaid ID, Date of Birth
- Last Name, First Name, Date of Birth

Medicaid ID: 000999000
Last Name: Lee
First Name: Walter
Date of Birth: 12/01/1960

Cancel Check

- Eligibility will be validated based on a combination of:
 - Name
 - DOB
 - Medicaid ID
- Member Demographics can be saved to the New Member profile once returned.

Assigning Payer



- From the member profile select Payers
- Select the correct payer and service start date
- Once saved the system will link the member to the payer contact selected

- General
- Payers** 1
- Profile
- Auth/Orders
- Special Requests
- Master Week
- Calendar
- Visits
- Plan of Care
- Others
- Rates

Payers

Payers Copy Payer Details Add Payer 2

Payer Placements

Add Payer 3

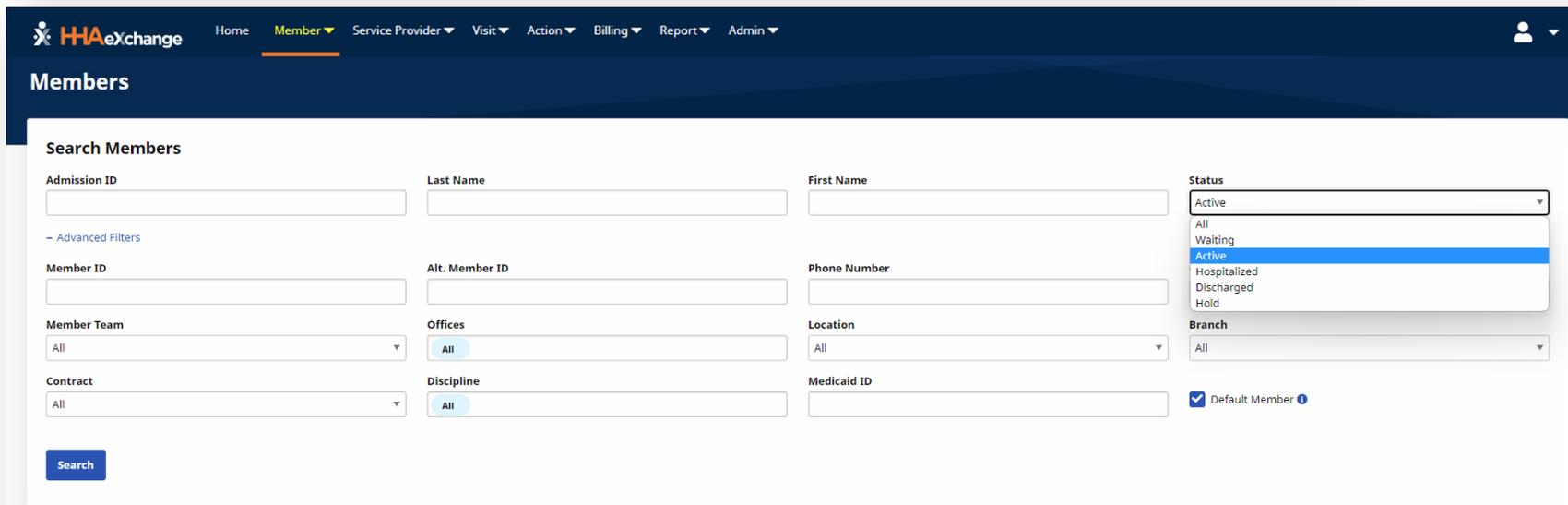
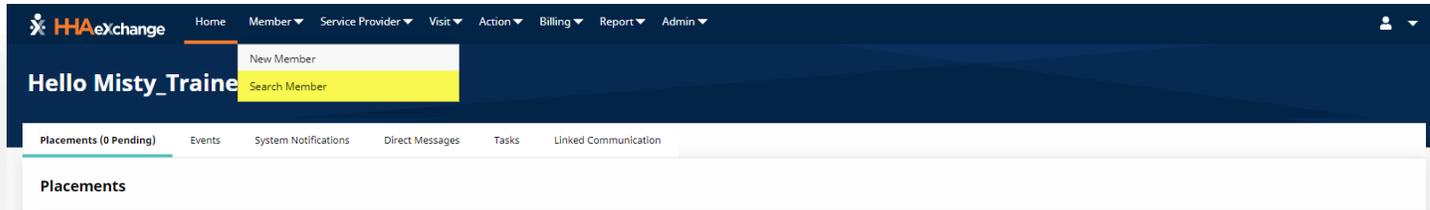
All fields marked with an asterisk (*) are required.

Payer * **Service Start Date ***

Alt. Member ID **Service Code**

File No file chosen Update Master Week ⓘ
File size must not exceed 10 MB

Search Member



- Select *Search Member* to search for a current member
- System defaults to "*Active members*" for the "Status" search criteria
- Multiple search options are available

➤ Authorization Management



Program providers/FMSAs will manage authorizations within HHAExchange

HHAX Workflow

- Payers will authorize based off current process
- Program providers/FMSAs will create new authorizations within HHAX based on payer authorization
- Fee-for-Service (FFS) authorizations are imported/updated nightly
- Authorization should mirror authorization received from payers
 - Total units/hours
 - Date span
 - Service code

Data Exchange Workflow

- Payers will authorize based off current process
- Program provider/FMSA enters authorization in 3rd party system
- Authorization is sent via API to HHAX from 3rd party system
 - Total units/hours
 - Date span
 - Service code

➤ Accepting FFS Authorizations



- Authorization Web Services is called nightly to pull any new or updated Fee For Service (FFS) authorizations
- Program Providers/FMSAs can review and accept these authorizations

Member ▾ **Service Provider** ▾ **Visit** ▾

New Member

Search Member

FFS Authorizations

Authorizations

Search for Authorizations

Auth #
Enter Auth Number

Last Name
Enter Last Name of Member

First Name
Enter First Name of Member

Offices
All ▾

Member Admission ID
Enter Member AdmissionID

+ Advanced Filters

Search **Reset**

Service Code	Actions
T2026	⋮ Accept/Reject Authorization View Member Details
T1003	
T1003	

Creating an Authorization



- From the member's profile select *Auth/Orders*
- Select *Add Authorization*

The screenshot displays the HHAeXchange member profile for Lee Walter. The 'Auth/Orders' section is active, showing a table of authorizations. A dropdown menu is open over the 'Member' dropdown, with 'FFS Authorizations' selected. The 'Add Authorization' button is circled in orange.

Payer	Auth. #	From Date	To Date	Discipline	Service Code	Max units for Auth	Type	Period	Max.	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Remaining Units	Notes	Edit Auth	Visits/Invoices	Delete Auth	Upload Doc
-------	---------	-----------	---------	------------	--------------	--------------------	------	--------	------	-----	-----	-----	-----	-----	-----	-----	-----------------	-------	-----------	-----------------	-------------	------------

Creating an Authorization



Add Authorization ✕

All fields marked with an asterisk (*) are required.

Authorization

Payer *

Discipline *

Authorization # *

If the authorization number is not available, enter TEMP.

Service Code

From Date *

To Date *

Service Code Type

Auth Period

Display

Authorization will be specified in units.
1 hour is 1 unit. 30 minutes is 0.50 units.

Max Units for Entire Auth:

Enter 0 for unlimited

Max Units per Period:

Additional Rules

Attachments and Notes

Notes

Limit to 500 characters

Close Save

- Enter all required fields and any additional service notes

Creating an Authorization



- Diagnosis Codes added to the auth will populate on the claim
- Once all fields have been completed click **Save** to complete the process

Authorization Management



- From the member's profile select *Auth/Orders*
- Select the *Authorization*
- Update as required

The screenshot displays the HHAeXchange member profile for Lee Walter. The profile includes contact information, address, and various identifiers. The 'Authorizations' section is active, showing a table with one authorization entry.

Payer	Auth. #	From Date	To Date	Discipline	Service Code	Max units for Auth	Type	Period	Max.	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Remaining Units	Notes	Edit Auth	Visits/Invoices	Delete Auth	Upload Doc
Life Care Demo Payer (KHC)	3243243	06/01/2023	06/30/2023	PCA	T1019	N/A	Hourly	Entire Period	0								0					

➤ Scheduling



- Program Providers/FMSAs can schedule a single visit or can utilize the HHAX master week to create a rolling schedule.
 - Three types of schedules that HHSC requires: Daily Variable, Daily Fixed and Weekly Variable.
- Scheduled services that are not performed should be marked as a Missed Visit with the appropriate reason and action taken.

Creating a Schedule

Finding the Calendar



- From the members profile select **Calendar**
- From the members calendar you can create schedules by selecting the date or **Add a Visit**
- Complete all required fields and save

- General
- Payers
- Profile
- Auth/Orders
- Special Requests
- Master Week
- Calendar**
- Visits
- Plan of Care
- Others
- Rates
- 69162
- Others
- 69162 of 6916

Calendar

Month: September Year: 2023 Go

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
29	30	31	1	2		
5	6	7	8	9		
12	13	14	15	16		
19	20	21	22	23	24	25
26	27	28	29	30	1	2

Legend: 🚫 Not Authorized ✅ Authorized 👍 No Authorization Needed [View all](#)

History Legend

Add a Visit

Schedule

All fields marked with an asterisk (*) are required.

Schedule Time * 0900 - 2300

Service Provider Code 1000

Service Provider Name Temp Temp

Assignment ID 010101

Temporary Schedule

Pay Code Non Payable

Plan of Care --Select--

Temporary Service Provider

Include in Mileage

Import Reference Number

Visit Type --

Primary Bill To * Life Care Demo Payer (KHC)

Primary Service Code * T1019

Duration * 14 - 00

Primary Bill Type Hourly

Creating a Schedule

Creating a Master Week



- General
- Payers
- Profile
- Auth/Orders
- Special Requests
- Master Week**
- Calendar
- Visits
- Plan of Care
- Others
- Rates
- 69162
- 01962
- Plan of Care

Master Week

Active Authorizations

Payer #	Auth. #	From Date	To Date	Discipline	Service Code	Max units for Auth	Type	Period	Max.	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Remaining Units	Notes	Upload Doc

Master Week History Add Master week

Add/Edit Master Week

All fields marked with an asterisk (*) are required.

1 If you know the Member's permanent schedule will change at a specific date in the future (for example, Member receives 3 days of service a week this month, but only 2 days a week next month), enter the first schedule range here. After saving, create another with the second schedule and second date range. The system will automatically switch the Member to the second Master Week schedule on the configured date.

From Date * To Date Copy Previous Master Week

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Hours	<input type="text"/>						
Service Provider	<input type="text"/>						
Service Provider Name	--	--	--	--	--	--	--
Assignment ID	--Select--						
Pay Code	--Select--						
POC	--Select--						
Primary Bill To	--Select--						
Duration	<input type="text"/>						

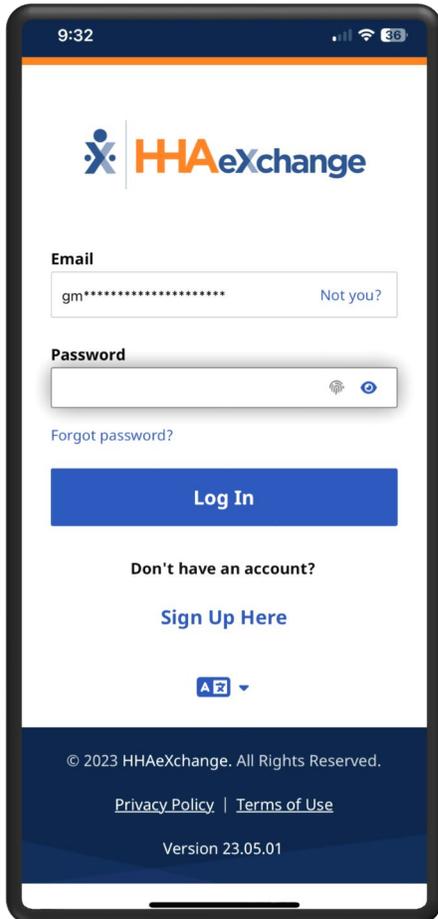
Close Save

- From the member's profile select Master Week
- To add a new Master Week select **Add Master Week**
- Enter the member's schedules by day and save

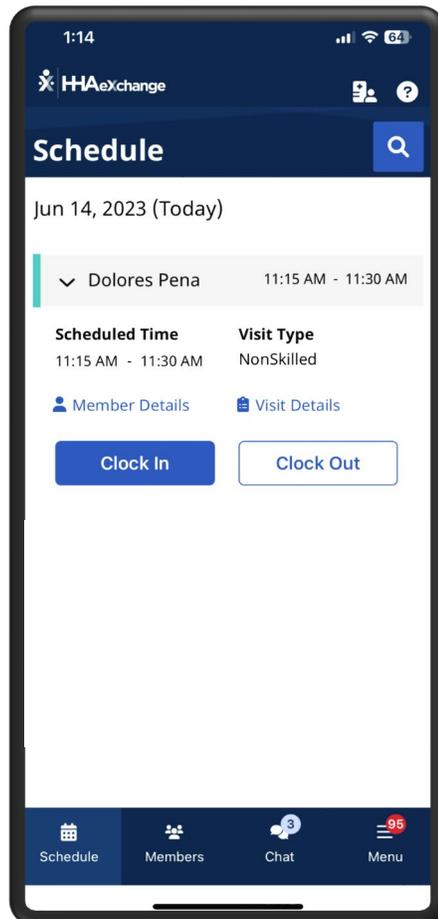
Mobile App



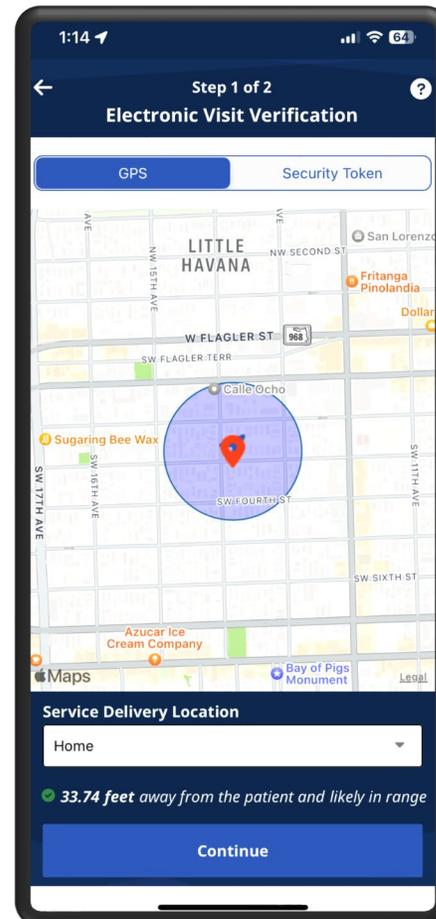
Secure User Login



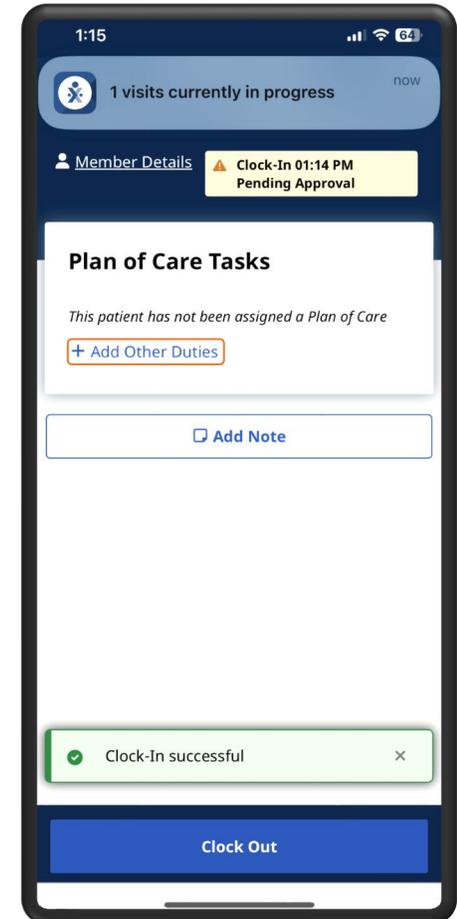
Schedule Page



GPS Validation



Plan of Care Documentation



Mobile User Management



- Mobile User Management allows you to manage your service providers or CDS employees mobile access for EVV clock in and clock out.
- Your agency admins can update any of these fields including helping reset a mobile app password.

The screenshot shows the 'Mobile User Management (+)' page in the HHAeXchange system. The navigation bar includes 'Home', 'Member', 'Service Provider', 'Visit', 'Action', 'Billing', 'Report', and 'Admin'. The main content area features a 'Management Search' section with input fields for 'Office Name' (containing 'health'), 'Last 4 SSN', 'Service Provider Email ID', and 'First Name'. A 'Last Name' field contains 'lopez'. A blue 'Search' button is located below the search fields. Below the search section, the 'Search Results (1)' are displayed in a table with columns for Office Name, Service Provider Name, DOB, Phone Number, Last 4 SSN, Email Address, Status, Edit, and Password. The search results show one entry for 'UMA healthcare' with service provider 'Maria Lopez', DOB '6/1/1980 12:00:00 AM', Last 4 SSN '1234', and Email Address 'mlopezhha@outlook.com'. The status is 'Active', and there are 'Edit' and 'Reset' links for the password.

Office Name	Service Provider Name	DOB	Phone Number	Last 4 SSN	Email Address	Status	Edit	Password
UMA healthcare	Maria Lopez	6/1/1980 12:00:00 AM		1234	mlopezhha@outlook.com	Active	Edit	Reset



Interactive Voice Response (IVR)

HHAeXchange IVR EVV method



- All agencies will receive a toll-free line for clocking in and out of a landline
- Each service provider will have a unique ID for clocking in and out from a landline
- Duties can be captured



Service Provider calls Verification System from Member's Home Phone

Prompt: "Press '1' for Call In, Press '2' for Call Out"

Service Provider enters "2" to indicate a "Call Out"

Prompt: "Enter your Assignment ID"

Service Provider enters Assignment ID (Time/Attendance PIN)

Prompt: "Please Enter the Duty ID"

Service Provider enters the ID for the first Duty performed

Prompt: "Please Enter the Next Duty ID"

Service Provider enters each Duty ID one at a time

Entering Manual Visits

Workflow in the event EVV is not utilized



- Visits will be captured using the HHAX EVV Clock In and Clock Out methods
- Manual visit entries require appropriate service delivery documentation as defined by your program rules and policy, and EVV policies.
 - In HHAX, program providers/FMSAs will select a reason code, description, and action taken for why the visit was manually edited

▶ Entering Manual Visits



Calendar History Legend

Month: June Year: 2023 **Go** **Add a Visit**

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	
29	30	31	1 S: 1100-1200 V: 1100-1200 Billed: Y (01:00) Martinez Greg	2 S: 1100-1200 V: 1100-1200 Billed: Y (01:00) Martinez Greg	3	4
5 S: 1100-1200 V: 1100-1200 Billed: N (01:00) Martinez Greg	6 S: 0700-1000 V: Billed: N Lopez Maria	7 S: 0700-1000	8	9	10	11

Visit Details (Lopez Maria):
S: 0700-1000
V:
Billed: N
Lopez Maria

- From the member's calendar view identify and select the visit that requires a manual entry for start and end time

Entering Manual Visits



Schedule **Visit Info** Billing Info

Visit Information

History

All fields marked with an asterisk (*) are required.

Scheduled Time: 0700-1000

TT/OT (hh:mm) ?: Missed Visit

Visit Start Time:

Visit End Time:

Prebilling Problem(s): Incomplete Confirmation, Service Provider Compliance

New Reason: Action Taken:

6

? S: 0700-1000 T

✓ V:0700-1000

Billed: N (03:00)

👤 Lopez Maria T

- From the members calendar select the visit
- Enter the visit start and end time
- Enter the manual entry reason code and action taken
- Timesheet and duties can also be documented
- Once complete click **Save**



- Program Providers/FMSAs will be responsible for resolving all Prebilling and Billing Review issues within HHAeXchange to ensure invoices are compliant and to reduce denials
- Program Providers/FMSAs will generate the 837-claim file and submit directly to TMHP via HHAeXchange Portal
- Once the claim is received by TMHP, standard adjudication and payment process will follow
- Your current process for receiving an 835 will remain in place
- Rates will be managed by the Program Provider/FMSA in the HHAX system
 - Program Providers/FMSAs must enter their rates for each service prior to billing



Prebilling Review



Pre-Billing Review

Pre-Billing Review Search

Payer: Office(s): From Date: To Date:

Advanced Filters:

Pre-Billing Review Total Search Result: 8 | Total Hourly (18:00) | Total Visit (00:00) | Total Daily (00:00)

Visit Date	AdmissionID	Member	Office	Payer	Service Provider	Service Code	Coordinator	Scheduled Time	Visit Time	Disciplines	TF	Problems	Actions
06/04/2023	KHC-900003	Morris John	UMA healthcare	Life Care Demo Payer (KHC)	Temp Temp Code: 1000	T1019	null	1000-1200	▲	PCA	▲	Incomplete Confirmation, TEMP Service Provider	🔗 🗑️
06/05/2023	KHC-900003	Morris John	UMA healthcare	Life Care Demo Payer (KHC)	Temp Temp Code: 1000	T1019	null	1000-1200	▲	PCA	▲	Incomplete Confirmation, TEMP Service Provider	🔗 🗑️
06/10/2023	KHC-900003	Morris John	UMA healthcare	Life Care Demo Payer (KHC)	Shah R Samir Code: KHC-1004	T1019	null	0800-1200	▲	PCA	▲	Incomplete Confirmation	🔗 🗑️
06/10/2023	KHC-900003	Morris John	UMA healthcare	Life Care Demo Payer (KHC)	Temp Temp Code: 1000	T1019	null	1000-1200	▲	PCA	▲	Incomplete Confirmation, TEMP Service Provider	🔗 🗑️
06/11/2023	KHC-900003	Morris John	UMA healthcare	Life Care Demo Payer (KHC)	Shah R Samir Code: KHC-1004	T1019	null	1000-1200	▲	PCA	▲	Incomplete Confirmation	🔗 🗑️
06/12/2023	KHC-900003	Morris John	UMA healthcare	Life Care Demo Payer (KHC)	Shah R Samir Code: KHC-1004	T1019	null	1000-1200	▲	PCA	▲	Incomplete Confirmation	🔗 🗑️
06/13/2023	KHC-900003	Morris John	UMA healthcare	Life Care Demo Payer (KHC)	Shah R Samir Code: KHC-1004	T1019	null	1000-1200	▲	PCA	▲	Incomplete Confirmation	🔗 🗑️
06/14/2023	KHC-900003	Morris John	UMA healthcare	Life Care Demo Payer (KHC)	Shah R Samir Code: KHC-1004	T1019	null	1000-1200	▲	PCA	▲	Incomplete Confirmation	🔗 🗑️

- Complete *Prebilling Review* to identify and resolve visit compliance issues
- Visits must pass Prebilling Review to qualify for invoicing

➤ Invoicing Visits



Billable Visits Search

From Date: 06/01/2022 To Date: 06/02/2023 Office(s): All

Billable Visits (2)

	Date	Service Provider	Admission ID	Member Name	Office	Payer	Visit	Visit Hrs	Visit Rate	Service Code	Rate Type	Disciplines	Billing Units	TT Hrs	TT Rate	Amount	Secure ID
<input type="checkbox"/>	06/02/2023	Martinez Greg	KHC-900005	Lee Walter	UMA healthcare	Life Care Demo Payer (KHC)	1100-1200	01:00	\$20.00	T1019	Hourly	PCA	4.00			\$20.00	
<input type="checkbox"/>	06/01/2023	Martinez Greg	KHC-900005	Lee Walter	UMA healthcare	Life Care Demo Payer (KHC)	1100-1200	01:00	\$20.00	T1019	Hourly	PCA	4.00			\$20.00	

Generate Batch Invoice Add To Batch Add to Batch & Go to Next Page Add All to Batch Remove All from Batch Cancel

HHAExchange - Message

Your Billing Batch is currently generating. You can see the process of the Billing Batch under Admin --> Process Monitor.

OK

- Visits that pass Prebilling are eligible for invoicing
- Select all visits you want to invoice and **Generate Batch Invoice**

Billing Review



Billing Review Search

View: ⁱ

View Holds For:

On Hold Reason:

Group By:

[+ Advanced Filters](#)

ⁱ

Billing Review

Invoice #	Invoice Date	Admission ID	Office	Member	Payer	Coordinator	Visit Date	Service Code	Units	Amount on Hold	TF	On Hold Reasons
600001	06/14/2023	KHC-900005	UMA healthcare	Lee, Walter	Life Care Demo Payer (KHC)	Default	06/01/2023	T1019	4.00	\$20.00		Missing Patient MR Number , Missing Physician NPI Number, Missing Taxonomy Code, Missing Revenue Code
600001	06/14/2023	KHC-900005	UMA healthcare	Lee, Walter	Life Care Demo Payer (KHC)	Default	06/02/2023	T1019	4.00	\$20.00		Missing Patient MR Number , Missing Physician NPI Number, Missing Taxonomy Code, Missing Revenue Code
Total:									8.00	\$40.00		

- **Billing Review** checks for claim errors
- **Billing Review** edits must be corrected to export your 837



Generating 837

Adding Claims



- 837s are generated from the Electronic Billing Module
- Generate original and adjusted claims
- Regenerate claim batches

< Back to E-Submission Batches

Add Original Claims E-Submission Batch

All fields marked with an asterisk (*) are required.

Payer * **Claim Batch #** **Batch Date** Quick Export

Claims



Generating 837

Searching and Selecting Claims



- Select all claims you want to export
- Save and Export your batch for adjudication.

Add Original Claims E-Submission Batch

All fields marked with an asterisk (*) are required.

Contract * Demo MCO (KHC)

Claim Batch # CLMKHCY69835268600050

Batch Date 07/07/2023

Quick Export

Claims

Export Status	Claim	Invoice #	Invoice Batch #	Admission ID	Alt. Patient ID	Visit Hours	Billed Hours	Billed Units	Bill Type	Billed Amount	3rd Party Amount	Claim Status	ST	TRN	Actions
Original Claim. Never Exported		600092	52686KHCY00050	KHC-900064	9000	00-00	01:00	01:00	4 Hourly	\$20.00	\$0.00	Unpaid			

Page 1 of 1

1 - 1 of 1 50 per page

Delay Reason Code: Select ...

Visits Older Than: 90

Buttons: Save Batch & Send, Save Batch to Export Later, Save Batch to Edit Later, Cancel

Information dialog: Your request for generating export file has been created, Please check Admin -> Process Monitor for status. Close



Services Portal

Applies to FMSAs, CDS employer, designated representatives, and employees



Log in to your HHAeXchange account.

Log In

Forgot Password?

Español | 中文 | AR

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- CDS employers, designated representatives (DR), and CDS employees utilize the Services Portal to manage visits.

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



Services Portal

Applies to FMSAs, CDS employer, designated representatives, and employees



- FMSAs must manage access to the Services Portal for their CDS employers and CDS employees
- FMSAs can also grant access to designated representatives (DR)

The screenshot displays the 'Services Portal User Management' interface. At the top, there is a navigation bar with 'HHAeXchange' and various menu items like Home, Member, Service Provider, Visit, Action, Billing, Report, and Admin. Below this, the main heading is 'Services Portal User Management'. A search bar labeled 'Search Users' is present, with fields for Last Name, First Name, Status (set to 'All'), and Access Type (set to 'All'). A button labeled 'Add Services Portal User' is in the top right corner. A sidebar on the left lists administrative functions such as Mobile User Management, User Management, Change Password, Payer Setup, Coordinator Setup, Physician Setup, Reference Table Management, Provider Profile, Process Monitor, Duty List Setup, Office Setup, Payroll Setup, and File Processing. The 'Services Portal User Management' option is highlighted in yellow. A modal window titled 'Create New Services Portal User' is open in the foreground. It contains the following fields: 'Email Address *' (a single-line text input), 'First Name *' (a single-line text input), 'Last Name *' (a single-line text input), and 'Status' (a dropdown menu with 'Active' selected). Below these is the 'Access Type *' section with three radio button options: 'Member', 'Service Provider', and 'Representative'. At the bottom right of the modal are 'Cancel' and 'Save' buttons. A note at the top of the modal states: 'All fields marked with an asterisk (*) are required.'



Services Portal

Applies to FMSAs, CDS employer, designated representatives, and employees



The screenshot displays the 'Shifts' page in the Services Portal. At the top, there are tabs for 'Shifts' and 'Reports'. Below this is a 'Search Shifts' section with filters for 'Consumer' (Susie Jones, Martha Lopez, Genius West, Tom Jones) and 'PCA' (Sam Hilton, Tim Davis, Florence Nightingale, Molly Green, Luna Lopez). There are also date pickers for 'Starting on or after' and 'Ending on or prior to'. A checkbox 'Show shifts requiring action from me only' is checked. Below the filters, there is a section 'Only display shifts with status' with checkboxes for 'Scheduled', 'Performed', 'Approved Locked', 'Adjustment Proposed', 'Denial Proposed', and 'Denial Locked'. The 'Performed' checkbox is checked. There are 'Search' and 'Reset' buttons. Below this is a table of shifts with columns for Date, Consumer, PCA, Start/End Time, and Status. Two modal windows are overlaid on the table: 'Approve Shift' and 'Deny Shift'. The 'Approve Shift' modal has fields for Date, Start/End Time, Status (set to 'Performed'), Phone Number, and Notes. The 'Deny Shift' modal has fields for Date, Start/End Time, Status (set to 'Performed'), Reason for Denial (with a dropdown menu), Phone Number, and Notes. Both modals have a 'Confirm Denial' button.

- CDS employers and CDS employees utilize the Services Portal to manage visits.
- CDS employers can view schedules, create shifts, approve shifts, and deny shifts.
- CDS employees can propose visits, dispute visits, and acknowledge visit modifications made by the member.



HHAeXchange Portal & Training Registration



HHAeXchange Portal

Complete EVV Provider Onboarding form



Program providers and FMSAs that are transitioning to HHAeXchange or selecting HHAeXchange as their EVV vendor:

- Please ensure all data entered into the Provider Onboarding Form is accurate as it will be used to create and configure your HHAeXchange Portal.
- Ensure you register for your HHAeXchange Portal timely to allow time for complete setup prior to go-live
- User credentials will be issued approximately 2 weeks prior to go-live after you complete training.

<https://hhaexchange.com/txonboardingform>

System User Training

Program Providers and FMSAs

- Open your browser and go to: hhaexchange.com/train-reg
- Select TX as your market and *All Payers as your payer
- Register each of your team members to receive an invite to our System User Training
- Multiple users can be submitted on one form by clicking “Add Additional User”
- Once all users have been added click submit
- Please advise your team members to look for a webinar training invite from HHAeXchange and to register for an upcoming training session once received



Free Portal Provider Training Registration

New Payer Implementation Provider System User Training

Market * Payer *

Past implementations are not available for training.

Agency Tax ID Agency Name * Agency Phone *

*No hyphens or spaces.

System Utilization Type *

Agency User(s)

⊗ User 1

User Name *
First Last

User Email * User Role

+ Add Additional User

Submit



CDS Training

Onsite and Webinar

- HHAeXchange will partner with FMSAs to register CDS employers and CDS employees for training.
- CDS employers and CDS employees will be trained on the HHAeXchange Services Portal and EVV clock in and out methods.
- CDS employers and CDS employees will each receive training to ensure they are prepared for the HHAeXchange 10/1/2023 go-live.



Support Resources

State Info Hub

Program Provider and FMSA Information Center



- To ensure you stay up to date on all the information for this project, please visit our State Info Hub
- The State Info Hub will be your primary source of information throughout this implementation
- The website also contains all documents such as welcome packets and training links

www.hhaexchange.com/info-hub/texas





Client Support Portal

Requests RH

Welcome to the HHAeXchange Client Support Portal

Find help and services

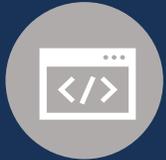
Portals

- Customer Service Desk**
Welcome! You can raise a Customer Service Desk request from the options provided.
- 3rd Party Integration Supp...**
Submit questions or concerns for any EDI related process.
- RCO Service Desk**
Welcome! You can raise a request for RCO Service Desk using the options provided.
- Annkissam Service Desk**
Welcome! You can raise a Annkissam Service Desk request from the options provided.
- Accounts Receivable**
Have a question on a recent invoice from HHAeXchange? Submit your questions here.
- Clinical Support Desk**
Welcome! You can raise a Clinical Support Desk request from the options provided.
- Payer Integration Support**
Submit requests related to the exchange of integration files and data between a Payer portal and Provider portal.
- EW Aggregation Support**
Welcome! You can raise a request for EVV Aggregation Support using the options provided.
- ENT Integration Support Desk**
Welcome! You can raise a request for ENT Integration Support Desk using the options provided.



<https://www.hhaexchange.com/supportrequest>

HHaEXchange Support



Texas Info Hub

<https://www.hhaexchange.com/info-hub/texas>



Support

<https://hhaexchange.com/supportrequest>

EVV Support



EVV web pages

<https://www.tmhp.com/topics/evv>

<https://www.hhs.texas.gov/providers/long-term-care-providers/long-term-care-provider-resources/electronic-visit-verification-evv>



Email

EVV@hhs.texas.gov

EVV@TMHP.com



Register your email address to receive EVV notices by email

https://public.govdelivery.com/accounts/TXHHSC/subscriber/new?topic_id=TXHHSC_247

EVV Resources



State Info Hub



Register for Training

Q&A



EVV Provider Onboarding Form



Client Support Portal



Thank you!



Info Session Survey