

Authorizations Process Guide Provider User Guide

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Authorizations

Overview

This category covers the **Authorization** functionality in the HHAeXchange (HHAX) system. For comprehensive guidance and instructions on how to add an Authorization, view Authorization Guardrails, and manage Authorization Blackout Dates, among other features.

Please direct any questions, thoughts, or concerns regarding the content herein to <u>HHAeXchange Cus</u>tomer Support.

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 receiv-
	ing 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.
ННАХ	Acronym for HHAeXchange



Adding Authorizations

Follow the steps outlined below to add a Patient Authorization in the system. *Note: Contracts must be applied to the Patient Profile prior to adding an Authorization.*

Step	Action				
	Navigate to Patient > Authorizations/Orders and click on the Add button.				
1	Enternation and Orders Enternation of the enternation of				
	The Authorization window opens. Complete the required fields (denoted with red asterisk) to				
	include Contract. Discipline, Authorization Number, and From/To Date. Select a Service Code as				
	well as the Period type (<i>Daily</i> for this example) Refer to the Period Types section for further				
	ontions				
	For a <i>Daily Period, set the maximum number of hours for a Visit for each day of the week</i>				
	HHAeXchange - Patient Authorization				
2	Authorization ()				
-	* Contract: Aetna V 1 * Discipline: HHA V 1				
	* Authorization Number: 123456 i Service Code: HHA Hourly V i				
	Specific Date Type:				
	Sat: 4.00 Sun: 4.00 Mon: 8.00 Tue: 4.00 Wed: 8.00 Thu: 4.00 Fri: 8.00 ()				
	Patient Authorization Window				
	Continue to complete additional applicable (optional) fields such as:				
	Document (click icon to attach supporting documentation).				
3	• If the Authorization is tied to a specific ICD Code, enter it using the Billing Diagnosis Code				
-	(s) field. If the Patient, or selected Contract, already has a set Billing Diagnosis Code , the				
	system alerts that one exists. Click the Add button to add other Billing Diagnosis Codes.				
	 Make any further comments under the <i>Notes</i> field. 				



Step	Action
	Size Image: Size Click icon to attach supporting documentation. Document: Image: Size Image: Size Note: File must be 1000 KB in size or smaller.
	Billing Diagnosis Code(s): Image: Code State
	Notes: Enter additional notes regarding the Authorization here. (500 Character Limit)
	Save Cancel If the authorization number is not available, enter TEMP Authorization will be specified in units. 1 hour is 1 unit. 30 minutes is 0.50 units.
	Authorization: Billing Dx Codes Refer the <u>Setting Billing Dx Codes Job Aid</u> for further information regarding Billing Dx Codes.
4	Click <i>Save</i> .
	Review all Authorizations on the Authorizations/Orders page.
5	Authorizations/Orders Deleted Authorization History Deleted Authorization History Contract/Auth. From Date To Date Discipline Svc. Max Type Code units for Auth for
	Review Authorization

Period Types

Period	Description
Daily	Enter the specific allowed hours per day. If the visit is scheduled on a different day, or for more hours on these days is flagged.
Weekly	Enter the allowed hours per week. Visits scheduled after this weekly limit is reached are flagged.
Monthly	Enter the allowed hours per month. Visits scheduled after this monthly limit is reached are flagged.
Entire Period	Enter the allowed hours that are between the Authorization Start and End Dates. Visits scheduled after this limit is reached are flagged. Note: Refer to the <u>Guardrails</u> section for details on controls set by the Payer on Entire Period Type Authorizations.

If the *Weekly, Monthly,* or *Entire Period* value is selected for **Period**, set the **Max Units for Period**. The image below illustrates an *Entire Period* as the authorization period. In this case, the **Additional Rules** checkbox has been selected allowing the user to add rules to the **Period** and specify the rule parameters



using the **Maximum Visits / per / of** fields. Click the **Add Row** button to create more rules (as seen in the second row).

Authorization (i)	
* Contract:	Aetna
* Authorization Number:	569745242 i Service Code:Select (i)
* From Date:	01/01/2019 🖬 🛈 * To Date: 01/31/2019
Туре:	Display: Hours Units 1
Period:	Entire Period 🔽 🛈 Max Units for Entire Auth: N/A (Enter 0 for unlimited)
Max Units per Period:	10.00 ()
Additional Rules:	☑ ①
Maximum Visits:	1 per Weekly v of hours each i Add Row
Maximum Visits:	30 per Entire Period V of hours each (i) X
Document:	

Additional Rules



Limiting Entire Period Authorizations (Guardrails)

DISCLAIMER

This feature is enabled and managed by Payers. Providers must be migrated to the new Authorization environment for this feature.

Tip:Press Ctrl-F on your keyboard to search this topic.

Payers can restrict **Entire Period** type authorizations to prevent Providers from over utilization (over-servicing the Member). Termed as **Guardrails** in the system, these controls govern how the authorization can be allocated by Providers, ensuring that units are available throughout the entire period (lasting to the scheduled End Date).

Note: This functionality only applies to Hourly rate types.

Viewing the Guardrails Breakdown

Once Guardrails are enabled, Providers can view the breakdown by navigating to the Patient's Authorization page (*Patient >Authorization*). On the *Authorizations* page, click on the <u>Breakdown</u> link on the **Guardrail: Monthly** field, as seen in the following image.

HHAeXchange - Authorization		×
Authorization ①		
* Service Category: Home Health	* Service Type: HHA	
* Authorization Number: 10004093	* Service Code: HHA Hourly1	Service Code Type: Hourly (Mutual + Patient Shift Overlap)
* From Date: 01/01/2020	* To Date: 12/31/2020	Authorization Type: Entire Period
Diagnosis Code #1:	Diagnosis Code #2:	Diagnosis Code #3:
Hours Hours per Auth. Period: 1200 Blackout Dates ()	Guardrail: Monthly Breakdown () Addi	tional Rules: 🗍

Patient Authorization Page: Guardrail Monthly Breakdown Link

The *Guardrail Breakdown* window opens. The top section provides a summary of the Authorization and Guardrail details to include the effective date of the Guardrails.



Authorization: Active Dates:		10004093 01/01/2020 - 12/31/2020	Guardrail Type: Monthly	
Guard	ail Switch Or	Date: 03/17/2020	Remaining Hours	1200.00
	Month	Active Dates	Limit (Hours)	Allocated (Hours)
1	January	01/01/2020 - 01/31/2020	103.50	0.00
2	February	02/01/2020 - 02/29/2020	93.25	0.00
3	March	03/01/2020 - 03/31/2020	101.50	0.00
4	April	04/01/2020 - 04/30/2020	98.25	0.00
5	May	05/01/2020 - 05/31/2020	101.50	0.00
6	June	06/01/2020 - 06/30/2020	100.25	0.00
7	July	07/01/2020 - 07/31/2020	101.50	0.00
8	August	08/01/2020 - 08/31/2020	101.75	0.00
9	September	09/01/2020 - 09/30/2020	96.50	0.00
10	October	10/01/2020 - 10/31/2020	101.75	0.00
11	November	11/01/2020 - 11/30/2020	98.50	0.00
12	December	12/01/2020 - 12/31/2020	101.75	0.00
Total:		N	1200.00	0.00

Guardrails Breakdown

The table underneath offers a monthly breakdown of hours (Total Entire Period divided by the period duration). The image illustrates a 12-month authorization period with a total of 1200 hours. The **Limit** (Hours) column indicates the limit for the monthly period. Utilized hours will display under the **Allocated** (Hours) column per month. Any visits created that exceed the Guardrail limits for the month will not be authorized.

Note: Providers can also add Additional Rules to authorizations within the set Guardrails.

Existing Authorizations

In cases where Guardrails are enabled on an existing authorization, the previous months remain with the utilized hours while the remaining period is allocated as per Guardrail settings.

The image below illustrates that the Guardrail is effective mid-March; therefore setting Limit (Hours) from March to December. Hours used in January and February are authorized (not affected) yet factored into the Entire Period.



Authorization:		10004092	Guardrail Type: Mo	onthly	
Active	Dates:	01/01/2020 - 12/31/20	20 Total Hours:	600.00	D
Guard	ail Switch Or	Date: 03/17/2020	Remaining Hours:	532.00	D
	Month	Active Dates	Limit (Hours)	Allocated	(Hours)
1	January	01/01/2020 - 01/31/2020	58.00	58.00	
2	February	02/01/2020 - 02/29/2020	47.50	10.00	
3	March	03/01/2020 - 03/31/2020	50.50	0.00	
4	April	04/01/2020 - 04/30/2020	48.25	0.00	
5	May	05/01/2020 - 05/31/2020	50.00	0.00	
6	June	06/01/2020 - 06/30/2020	48.25	0.00	
7	July	07/01/2020 - 07/31/2020	50.00	0.00	N
8	August	08/01/2020 - 08/31/2020	50.00	0.00	13
9	September	09/01/2020 - 09/30/2020	48.50	0.00	
10	October	10/01/2020 - 10/31/2020	50.25	0.00	
11	November	11/01/2020 - 11/30/2020	48.50	0.00	
12	December	12/01/2020 - 12/31/2020	50.25	0.00	
Total:			600.00	68.00	

Guardrails Breakdown for Existing Authorizations



Guardrails Enabled/Disabled at the Authorization Level

Payers can remove Guardrails for any specific Authorization by disabling the feature at the Authorization level for a specific Patient. The Guardrail feature is selected by default when the feature is enabled and applied for a Provider (as seen in the image below).

HHAeXchange - Authorization		X				
Authorization (1)		<u>History</u>				
* Service Category: Home Health V	* Service Type: RN 🗸 🗸	Provider : Demo Vendor 2 (I 🗸				
* Authorization Number: 10004085	* Service Code: RN SSP Hourly V	Service Code Type: Hourly				
* From Date: 03/01/2020	* To Date: 12/29/2020	Authorization Type: Entire Period V				
Diagnosis Code #1:	Diagnosis Code #2:	Diagnosis Code #3:				
Hours						
* Hours per Auth. Period: 120 (1)	Guardrail: Monthly 🗹 🛛 <u>Breakdown</u> 🕦	Additional Rules: 🗌 🚯				
Blackout Dates 🛈		Add				
	NO DIACKOUL DATE ENTERED.					

Guardrails at an Authorization Level

If deselected by a Payer, then the Guardrail is removed for the Authorization. When removed, the Provider can use the Entire Period Authorization as customary without monthly limits.

Authorization Edit Notes and Provider Email Authorization Edit: Guardrail Limit Edited

When a Payer edits and saves an Authorization with Guardrail Monthly limits, the system automatically generates a Patient Note and a Provider Email alert (if configured) for the Authorization Edit. Patient Notes can be viewed in the Home page and in the Patient General page.

The Authorization Edit Note provides the reason for the edit, as seen in the image below.

thorization	Edit		
From:	Demo ML (India Test Only) (Payer, ML)	Created:	10:32 AM
То:	HHA - Excellence QA - ML	Reason:	Authorization Edit
Priority:	Normal		
	(4000 40 (0))		





If the Provider has email alerts configured for Authorization Edits, then an email is also issued with the edit reason, as seen in the image below.

New Notification: Authorization Edited			
	← Reply	Keply All	→ Forw
			Fri 15/
() Click here to download pictures. To help protect your privacy, Outlook prevented automatic download of some pictures in this message.			
This is an automatically triggered email. You are receiving this email because you are listed as a recipnotification.	pient of the	Authorization	Edited
This action was triggered by the payer Demo			
This action was triggered for the patient with the Admission ID \cdot .			
• Guardrail Limit(Hours) have been edited.			
In order to comply with HIPAA, no patient details can be shared via email.			
Do not reply to this email, if there is a problem please contact your payer.			
Thanks & Regards, HHAeXchange			

Authorization Email Alert: Guardrail Limit Edit

Authorization Edit: Multiple Edits to include Guardrails On/Off

When a Payer turns the Guardrail feature on or off, the system automatically generates a Patient Note and a Provider Email alert (if configured) for the Authorization Edit. As seen in the following image, the Note contains a grid that includes the Guardrails Off under the **New Value** column as well as multiple Authorization Edits.

horization Edit							
		♠ Reply ● Resolve ● Print					
Authorization (10004470) has been edited by Demo . The following fields have been edited: Diagnosis code 1, Diagnosis code 2, Diagnosis code 3, Guardrails Limit. Please review the changes to the Authorization in detail prior to scheduling.							
Edited Fields							
Diagnosis code 1	See Authorization	See Authorization					
Diagnosis code 2	See Authorization	See Authorization					
Diagnosis code 3	See Authorization	See Authorization					
Guardrails Limit	On	Off					

Authorization Edit: Notification





The image below illustrates the email alert including the Guardrail feature turned Off.

New Notification: Aut	thorization Edited					\sim				
Excellence Test M	← Reply	Keply All	→ Fo.							
Το 💻			Thu 1							
(i) If there are problems with how this message is displayed, click here to view it in a web browser.										
Click here to download pictures. To help protect your privacy, Outlook prevented automatic download of some pictures in this message.										
This is an automatically triggered email. You are receiving this email because you are listed as a recipient of the Authorization Edited notification. 📢										
This action was triggered by	the payer Demo ML	wate manager								
This action was triggered for	r the patient with the Admi	ssion ID .								
Edited Fields	Provious Value		New Value							
Guardrails Limit	On		Off							
In order to comply with HIPAA	A, no patient details can k	be shared via email.								
Do not reply to this email, i	if there is a problem pleas	se contact your payer.								
Thanks & Regards, HHAeXchange										

Provider Email Alert: Guardrail Turned Off



Payer Reduced Authorizations

Payers can reduce the number of Authorized Hours (Units) for a previously issued Authorization. Providers who have already billed on the initial Authorization can bill up to the original listed hours, even when the invoiced amount is greater than what the updated Authorization allows.

For example, a Payer initially issues an Authorization for 120 hours and the Provider bills for 60 of those hours. The Payer then edits the Authorization, reducing it to 50 hours. In this case, the Provider has already billed, allowing the claim to go through; however, this Authorization can no longer be used. The balance of 10 units (hours) are displayed as negative in unit allocations.

Once confirmed, the Authorization is saved. Scheduled and Confirmed visits that were previously authorized become unauthorized due to the reduced units (turning pink on the Patient Calendar). Visits that are billed remain authorized; however, Units that are beyond the allowable amount in the updated Authorization are displayed as negative unit allocations. The following image illustrates a Weekly Authorization reduced from 20 to 15 Authorized Units per week.

Authorization: 10004387 Total Units: 75.00 Allocated: 40.00 Max Units For The 15.00 15.00 15.00	
Max Units For The 15.00	
Period:	
From To Auth Units Visit Units Allocated	Units Left
05/01/2020 05/02/2020 15.00 0.00 0.00	15.00
05/03/2020 05/09/2020 15.00 20.00 20.00	-5.00
05/10/2020 05/16/2020 15:00 20:00 20:00	-5.00

Weekly Period Authorization: Negative Allocated Units

Upon editing the Authorization, the system automatically issues a Patient Note and a Provider Email Alert (if configured) with the applied updates in a newly added grid, as seen in the image to the right.

orization Edit			
From: [Pemo ML Payer, ML)	Created:	11:56 AM
To: 1	33 - Excellence QA - ML	Reason:	Authorization Edit
Priority: N	lormal		
		4	Reply 🗢 Resolve 🖶 Pri
Authorization (fields have beer	10004575) has been edited edited: <mark>Hours per Auth. P</mark> e	d by Demo ML <mark>eriod.</mark> Please re	. The following view the changes to the
Authorization i	n detail prior to scheduling.		
Authorization i	n detail prior to scheduling. Is Previous Value	1	lew Value

Authorization Edit: Reduced Hours



Authorization Blackout Dates

DISCLAIMER

This feature is activated by HHAX System Administration. Please contact <u>HHAX Support Team</u> for details, setup, and guidance.

Providers with enabled permissions can add their own Authorization Blackout Dates in addition to Payer assigned Authorization Blackout Dates on a particular Contract. Both Payers and Providers can simultaneously update their own Blackout Date information. In addition, Authorization Blackout Dates can overlap.

Visits cannot be scheduled during an Authorization Blackout Date regardless of who creates the Blackout Date.

Navigate to the *Patient Authorization* page (*Patient > Authorizations/Orders*) to view the Contracts. Click on the <u>Edit</u> link for a selected authorization to access the *Patient Authorization* window (as seen in the image below).

Under the newly added *Blackout Dates* section, click on the *Add* button to add a Blackout Date range or click on the Edit link to update existing information.

K HHAeXchange	Home Patient Caregiver V	/isit Action Billing Report	Dashboard Admin	Notification Hessages To	o open Cases			Welcome -	Support Co Harikaupr (U	enter Sign Or Universal Patie Provider-PRO
Patient Authorizations an	nd Orders									
General	Patient Info - Active									
Referral Patient Info	Name: 061'020'20_1 q Sa	antosh	Admission ID: PSV-900764	Patient ID:			Contr	act: Private Pay,	Jniversal Patie	ent Payer1-PROD
Profile Flightlith: Chock	DOB: 10/10/2006		Primary Alt. Patient ID: 06102020_1_Confirm	Home Phone:			Addre	255: 1111, 11111	NEW YORK,	NY, 10023
Authorizations/Orders	Coordinators: rai		Office: Universal Patient Provi	der- Languages:				64		
Special Requests Master Week		HHAeXchange - Patient Authoriza	tion		5	3				
Calendar	Authorizations/Orders	Type:		Display: Hours Units U		^				
Visits	Authorizations Order Frequency	Period:	Entire Period V 1 Max Units for	or Entire Auth: N/A (Enter 0 for unlimited)	D					
Caregiver HX Others		Max Units per Period:	100					Del	ted Authoria	zation History
Rates Supplies	Contract Au	Additional Rules:				maining Units 1	lotes Add	Visits/ Invoice	5	
<u>Financial</u> Vacation	Private Pay 122	Blackout Dates (1)			Add	0.00	Edit	Update	X	
Family Portal	Universal Patient Payer1-PROD (PSV) oxo	From Date To Date Bla	ackout Date Notes			0.00		Update	X	
Clinical	Universal Patient Payer1-PROD (PSV) Add Universal Patient Payer1-PROD (PSV) 11	03/09/2021 03/09/2021 Tes	st N		Edit 🗙	0.00			X	
Info	Universal Patient Payer1-PROD (PSV) RNA		18 ⁴			0.00		Update		
Certification Med Profile		Document:	Note: File must be 1000 KB in size or smaller.							
MD Orders Interim Order		Billing Diagnosis Code(s):								
Documentation Care Insights			This Patient has been configured with the following defai codes will be used for billing unless specific Diagnosis Co	It Billing Diagnosis Codes. These						
Search			Code Description	Admit. Primary						
First			A01.0 Typhoid fever	Yes						
Last										
Admission										
ID:		Notes:								
Go 🕨			(500 Character Limit)	4						
			Save Cancel			•				

Patient Authorizations: Add/Edit Blackout Dates

On the *Blackout Date Details* window enter or edit the **From/To Date** fields and click *Save*. Ensure to click *Save* on the *Patient Authorization* window to save the changes.





HHAeXchange - Patient Authori	ration
* Contrac	ts UPR Life Care&Demo V () * Discipline: HHA V ()
* Authorization Nur	
Max Hours per Pe Additional R	Notes:
Blackout Dates (i)	Add
Documen	No Blackout Date Entered.

Blackout Date Details Window

In the *Authorization/Orders* page, hover over the **Notes** icon to view the *Blackout Dates* pop-up with information (as seen in the image below).

Au	thorizations/Orders											
	Authorizations Order Frequency											
											Deleted A	uthorization History
	Contract	Auth. #	From Date	To Date	Discipline	Svc. Code	3 Remaining Units	Notes	Add	Visits/ Invoices		
	UPR Life Care&Demo Payer1 (EXQ)	TEMP	09/01/2020	01/31/2021	HHA	HHA Hourly 1	0.	.0 <mark>0 🕑</mark>	<u>Edit</u>	Update	×	
							 Blackout Dates					
								10/01/202	0 - 10/08/20	20 New Blackout Da	te	

Authorizations: Blackout Dates Popup

Authorization Blackout Dates can also be viewed (read-only) in the Patient *Appointments* page (*Visit > Appointments*), under the **Notes** column (as seen in the image below).

Appointme	ents												La	terprise	23.06.	01/TEL	XSFW EB 0	2 [Chronne/S	510,447	S'101) *	hearne 91	(Doc)	Chro
Appointme	ents																						
N	/iew By: 🔘 p	atient O	Caregiver		* Office	e: Silicon Va	lley	۷			* 1	From D	ate: 00	5/01/20	21			Dis	splay E	mpty Ro	ws: 🗹	1	
Las	t Name:				First Name	e: [Sta	tus: A	ctive]		Ad	mission	ID: 660	0356	
Coor	dinator: All		٣		Tean	n: All		٧				Locat	ion: A	H]			Bra	nch: All		
Patient	HHA Exchan	ge - Last 1	Three Author	izations		1																ſ	
Co	Patient: 20	21, BlackO	ut (SVO-6600	356)																			
	Contract	Auth. #	From Date	To Date	Discipline	Svc. Code	Max units for Auth	Туре	Period	Max.	s	м	т	w	т	F	S	Remaining Units	Notes	Add	Visits/ Invoices		z
PATIENT	Universal Patient Payer1- PROD (SVO)	PRO	6/1/2021	6/30/2021	нна		N/A		Daily		2.00	2.00	2.00	2.00	2.00	2.00	2.00	0.00	P	Edit	Update	×	
2021, Black (SVO-66003	Universal Patient Payer1- PROD (SVO)	AuthA2	5/16/2021	5/31/2021	нна	HHA Hourly	N/A	Hourly	Weekly	20.00								0.00		Edit	Update	×s	
	Universal Patient Payer1- PROD (SVO)	AuthA1	5/1/2021	5/15/2021	нна	HHA Hourly	N/A	Hourly	Monthly	20.00					Blac	kout D	ates	0.00	Ŗ	Edit	<u>Update</u>	×	
										Close					05/05	0/2021 - 0/2021 -	05/07/20	021 Added B 021 Added B	y Payer : y Provid	1 er			

Appointments Page: Blackout Dates Popupout



Display Multiple Authorizations on Placement Window

The system can accommodate multiple authorizations (up to 52) from the Patient Placement window. While the main Patient Placement window displays only the first 2 authorizations, a <u>View Additional</u> <u>Authorization</u> link displays in the *Additional Authorizations* section (as seen in the following image) if the Patient has more than 2 authorizations.

Authorization (i)		
* Service Category: Home Health	* Service Type: HHA	~
* Authorization Number: MR 11	* Service Code: MR HHA 2	✓ Service Code Type: Visit
* From Date: 07/15/2021	* To Date: 08/15/2021	Authorization Type: Monthly ¥
Diagnosis Code #1: MR D 1	Diagnosis Code #2:	Diagnosis Code #3:
Hours		
* Hours per Month: 45	Additional Rules:	
Blackout Dates ()		
	Ne Blackout Qa	iteEntered.
Additional Authorization View Additional Authorizations		
Service Category: Home He	* Service Type: RN	*
* Authorization Number: MR 2	* Service Code: MR.RN 1	V Service Code Type: Visit

Patient Placement Window: View Additional Authorizations Link

Click on the <u>View Additional Authorization</u> link to open the *Additional Authorizations* window displaying a list of all authorizations, as seen in the following image. A **Total Authorizations** count shows at the top header. Upon the initial load, a maximum of 10 records are shown. To display all authorizations continue to scroll down the page.

Auth #	From Date	To Date	Service Category	Service Type	Service Code	Authorization Type
10004515	07/15/2021	08/15/2021	Home Health	RN	REDUCED_CHK_SC	Weekly Weekly Hours: 15.00
10004516	07/15/2021	08/15/2021	Home Health	нна	1_UP_HHA	Entire Period Entire Period Hours: 30.00
auth-extra-NB	07/01/2021	08/05/2021	Home Hea <mark>l</mark> th	нна	MR HHA 2	Monthly Monthly Hours: 89.00
auth-extra-PM	07/01/2021	08/05/2021	Home Health	нна	MR HHA 2	Monthly Monthly Hours: 89.00
auth-extra-ND	07/01/2021	08/05/2021	Home Health	нна	MR HHA 2	Monthly Monthly Hours: 89.00
auth-extra-MJ	07/01/2021	08/05/2021	Home Health	нна	MR HHA 2	Monthly Monthly Hours: 89.00

View Additional Authorizations Window



Budget Fields Added to Patient Authorization (Linked Contracts)

For certain Linked Contracts, budget fields, **Program Code** and **Budget Amount(s)**, have been added to the Patient *Authorization* window, as seen in the following image and described in the table underneath. These fields are requested by Payers who support certain programs and are read-only for Providers.

HHAeXchange - Member Authoriz	ation		
Authorization (1)			<u>History</u>
* Contract:	Universal Patient Pay 🗸 🧿	* Discipline: HHA 🗸 🚺	
* Authorization Number:	DEMO	Service Code:Select 🗸 🕻	
* From Date:	11/03/2021	* To Date: 11/30/2021	
Туре:		Display: Hours Units 1	
Banked Hours:		•	
Period:	Daily 🗸 🚺	Max Units for Entire Auth: [Enter 0 for unlimited]	
		Specific Date Type: 🗌 🕕	
Mon:	Tue: Wed:	Thu: Fri: Sat: Sun: 🕦	
Program Code	:i	Budget Amount(\$): 121.00	
Blackout Dates (1)			Add
	No Blac	kout Date Entered.	
Desuments	63		
Document:	Note: File must be 1000 KB in size o	or smaller.	
Billing Diagnosis Code(s):	Code Description	Admit. Primary Add	

Member Authorization: Budget Fields

Note: The budget fields are editable when Providers create the Authorization and read-only when the Authorization comes directly from the Payer.

Field	Description
Program Code	Some Payers use their own Program Codes to identify Members using cer- tain programs. Members can have multiple Authorizations with a different Program Code for each or the same Program Code for all Authorizations.
Budget Amount (\$)	Some program Members are assigned a budget dollar amount (rather than units) to determine the services provided. The Budget Amount (\$) field is used for the total budget dollar amount.