

HHAeXchange Provider Training Session Linked Contract 101

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Who is this session for?

This session is specifically designed for Providers who use HHAeXchange and are transitioning to the use of Linked Contracts to capture and report EVV to the State of Minnesota

Note: The use of Linked Contracts to track and report EVV data to the state of Minnesota will be required as of 1/1/2026.





EVV 101 and Review of EVV In Minnesota

Linked Contract Introduction

Linked Contract Placements

Frequently Asked Questions

Helpful Resources



EVV 101 & EVV in MN



6 Required 21st Century Cures Act Data Elements



How Data is Captured using Linked Contracts





Type of Service Performed

Service code associated with the client's authorization imported by Payer





Individual Receiving the Service

Client demographic profile imported by Payer





Location of the Service

Recorded automatically when Caregiver clocks in and clocks out using an EVV tool (client's address or landline telephone number in their profile imported by Payer)



Date of the Service

Recorded automatically when the Caregiver clocks in and clocks out using an EVV tool



Time the Service Begins and Ends

Recorded automatically when the Employee clocks in and clocks out using an EVV tool



Individual Providing the Service

Caregiver profile associated with the Mobile Phone App or IVR Caregiver Code





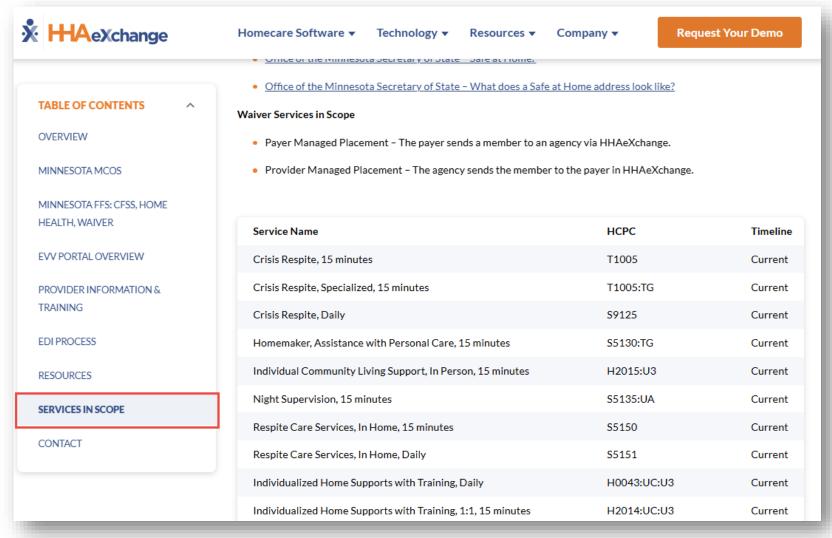
Services in Scope for EVV in Minnesota



 Navigate to the MN State Info Hub

 Click on "Services in Scope"

 Scroll through this page to see services in scope for Waiver, CFSS, FMS, and Home Health

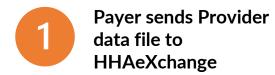




How Members & Authorizations Import to HHAeXchange 🔆



Service Codes Requiring Prior Authorization





Payer sends Member Demographic and Authorization data files to HHAeXchange



Provider can access the member's record and authorization and schedule visits





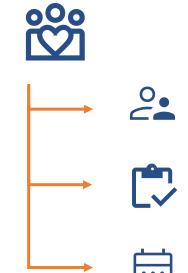
Contains Provider TIN and NPI or UMPI



Contains member demographic information; creates member's record in **HHAeXchange**



Contains authorization data (date range, units, service code), member ID, provider ID (NPI or UMPI)





Payer - Provider Linking



Payer sends Provider data file to HHAeXchange





TIN: 123456789

NPI: 2151255214

Linking Process





Provider Portal



✓ TIN: 123456789

X NPI: _____

X Secondary Identifier: A622333444



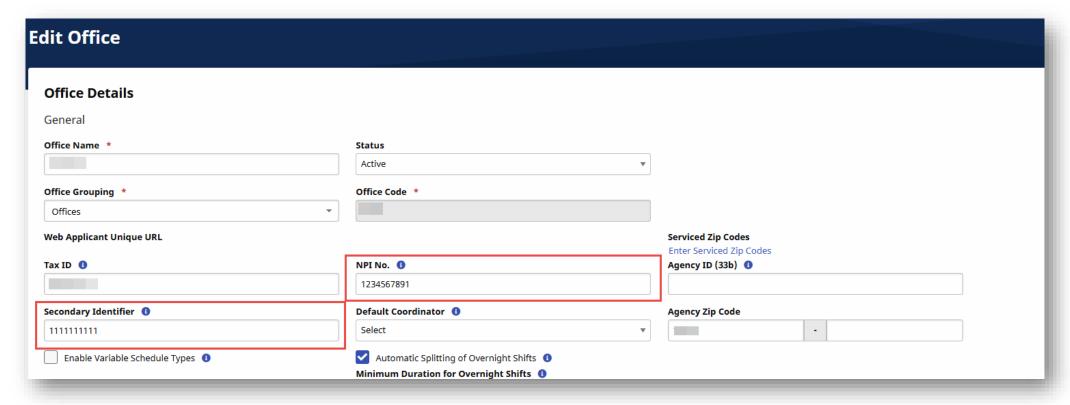
Provider Office Setup



TIN: Tax ID Number associated with your provider agency

NPI: 10-digit numeric value only

Secondary Identifier: MN UMPI





Linked Contracts 101



Linked Contracts 101



- Contract: A Contract in HHAeXchange represents a Payer. Payers authorize services for clients and clients choose the Provider that they want to provide them the authorized service
- Linked Contract: A Linked Contract in HHAeXchange refers to an electronic data transmission of client, authorization, and visit data between the Provider providing the service to the client and the Payer authorizing the service for the client.
- Internal Contract: An Internal Contract in HHAeXchange refers to a provider-generated Payer record. There is no data transmission between Provider and Payer.



Linked Contracts 101



- Linked Contracts: Linked contracts are configured by the Payer. For linked contracts, Payers determine:
 - Service Codes available under the contract
 - Client Placement (for prior authorization services)
 - Authorizations (for prior authorization services)



Linked Client Placements



Prior Authorization Services



Payer-Driven Client Placement

 Most non-Skilled, in-scope services require prior authorization from a Minnesota Payer

 Prior authorization services will have the client record and prior authorization automatically imported to the Provider's Portal from the Payer



Prior Authorization Services



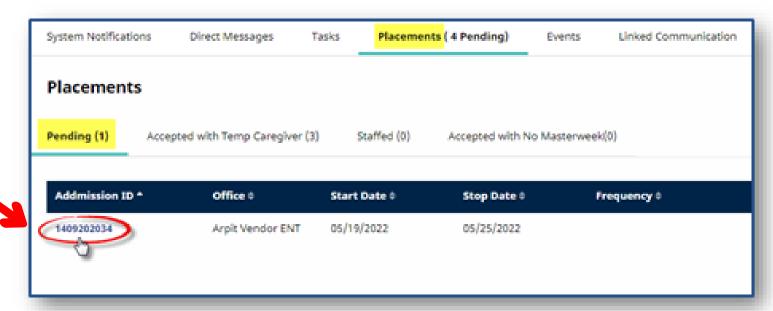
Pending Placements

- **Remember:** Prior authorizations are imported to the Provider's Portal by the Payer using the Provider's NPI or UMPI.
- <u>Pending Placement</u>: If a Provider has the same NPI or UMPI in more than one Office, the Provider will need to manage their Pending Placement queue.

Because the NPI or UMPI is in more than one Office, the authorization 'doesn't know where to go.' The Authorization will stay in the Pending Placement queue until the Provider

- Reviews the Placement by clicking on the Admission ID hyperlink, and
- Chooses the Office from a drop down.

This will import the authorization to the Provider's selected Office.



Pending Placements expire! Review and address Pending Placements in a timely manner!



Auto-Placement Services



Provider-Driven Client Placement

- Most Skilled, in-scope services do not require prior authorization for Minnesota Payers
- Providers will not receive an authorization for services for Auto-Placement Services.
 - If the client is currently active with the Provider for prior authorization services, the Provider does not have to complete the full Auto-Placement process. The Provider may start serving the client for the Auto-Placement service no authorization in HHAeXchange is necessary for Auto-Placement Services.
 - If the client is not already placed or active with the Provider and the Provider is now servicing
 the client with an Auto-Placement service, the Provider must follow the <u>Create an Auto-Placement</u> workflow.
- Providers must use the clients Minnesota Medicaid ID (aka PMI) to complete auto-placement.



Prior Auth or Auto-Placement? How can I tell?

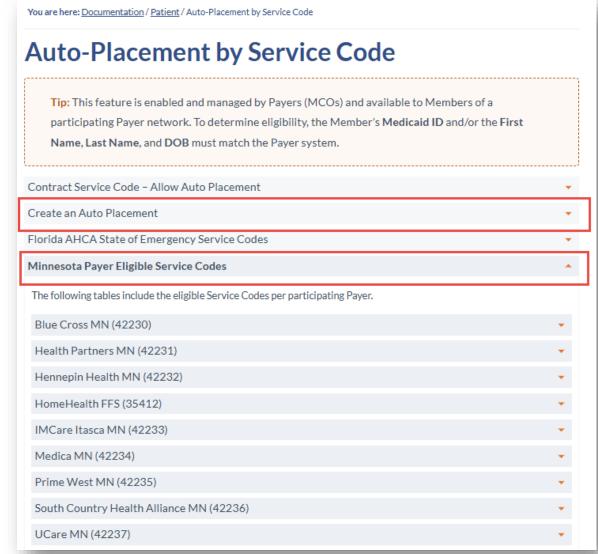


Step 1: Is the service in-scope for EVV in Minnesota?

 Review the list services that require EVV in Minnesota using the Minnesota Info Hub > Services in Scope section.

Step 2: Is the service an Auto- Placement Service for the Payer?

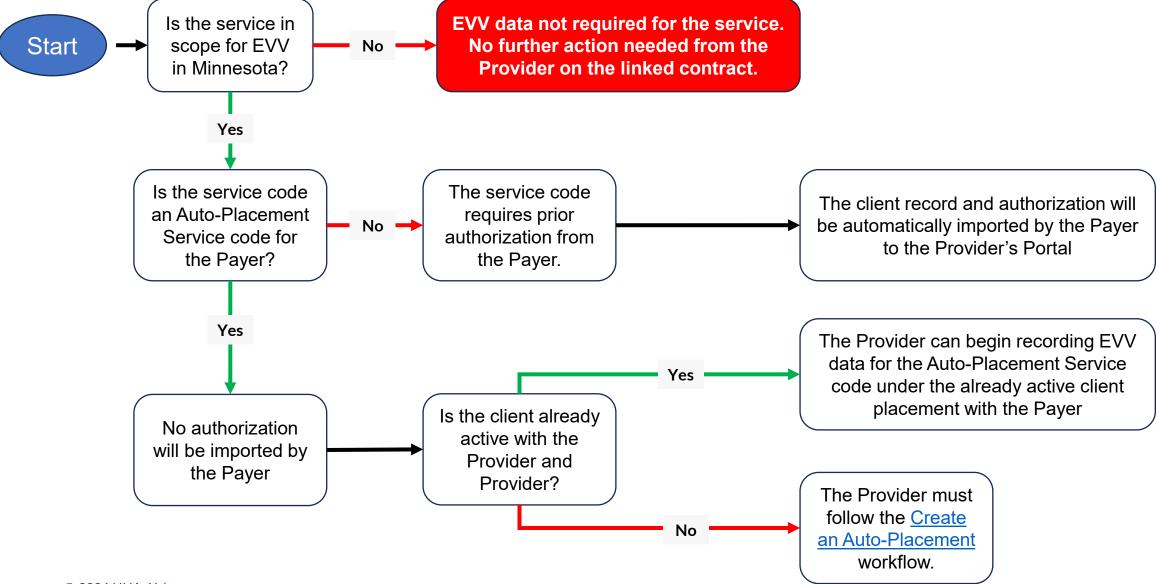
 Review the Auto-Placement by Payer lists available here: <u>Auto-Placement</u> by Service Code





Prior Auth vs. Auto Placement Workflow







Frequently Asked Questions



Frequently Asked Questions



Question: I am missing an authorization or a member for a linked contract, what should I do?

- 1. Ensure the service code is in scope for EVV <u>not</u> an Auto Placement Service Code.
 - If the service code is Auto-Placement, follow the Create an Auto-Placement workflow
- 2. Ensure your agency's identifiers (TIN, NPI/UMPI) are up to date in your portal.
 - If you need to correct your agency's identifiers, please allow for 1 business day for authorizations to reprocess.
- 3. Make sure the Provider Portal user has permissions for all applicable Offices
 - In the user's account settings, review the Office permissions section and add an office that's missing from the user's account if needed
- 4. Contact the Payer:
 - Managed Care Organization points of contact can be found here: MCO contacts for MHCP providers / Minnesota Department of Human Services
 - FFS contracts: Contact the client's County Lead Agency



Frequently Asked Questions



Question: I am providing and tracking EVV for services in- and out-of-scope, what should I do?

- 1. Review the Services in Scope listing on the Minnesota Info Hub
- 2. For services in scope in Minnesota, record EVV data for those services under the client's linked contract profile
- 3. For services out-of-scope for Minnesota, record EVV data for those services under the client's internal contract profile



Resources





- Minnesota Info Hub
 - Services in Scope: See what services require EVV in Minnesota
 - Provider Information and Training: Previously recorded webinars and slide decks for reference
- Managed Care Organization points of contact for EVV questions
- Auto Placement
- Pending Placement
- Linked Contracts



Thank You!