

# **OFFICE STAFF (INTAKE AND SCHEDULING) TRAINING MANUAL**

July 2020

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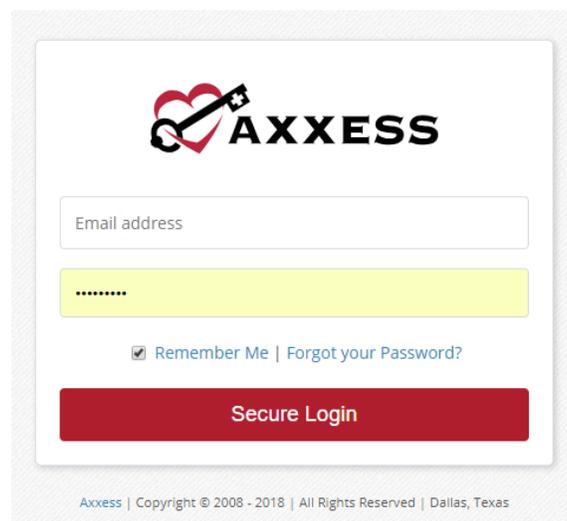
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## LOGGING IN

Go to [www.axxess.com](http://www.axxess.com), and select **LOGIN**, located in the upper right-hand corner.



Enter the username and password then select **Secure Login**.

A screenshot of the AXXESS login form. The form is centered on a white background with a light gray border. At the top is the AXXESS logo. Below it is an input field for 'Email address'. Underneath is a password field with a yellow background and masked characters. There is a checkbox for 'Remember Me' and a link for 'Forgot your Password?'. A large red button labeled 'Secure Login' is at the bottom. At the very bottom, there is a small copyright notice: 'Axxess | Copyright © 2008 - 2018 | All Rights Reserved | Dallas, Texas'.

The username is the email address assigned to the user's account when it was created. The password was created by the user, from a link that was sent to this email address. This password will also be the user's electronic signature.

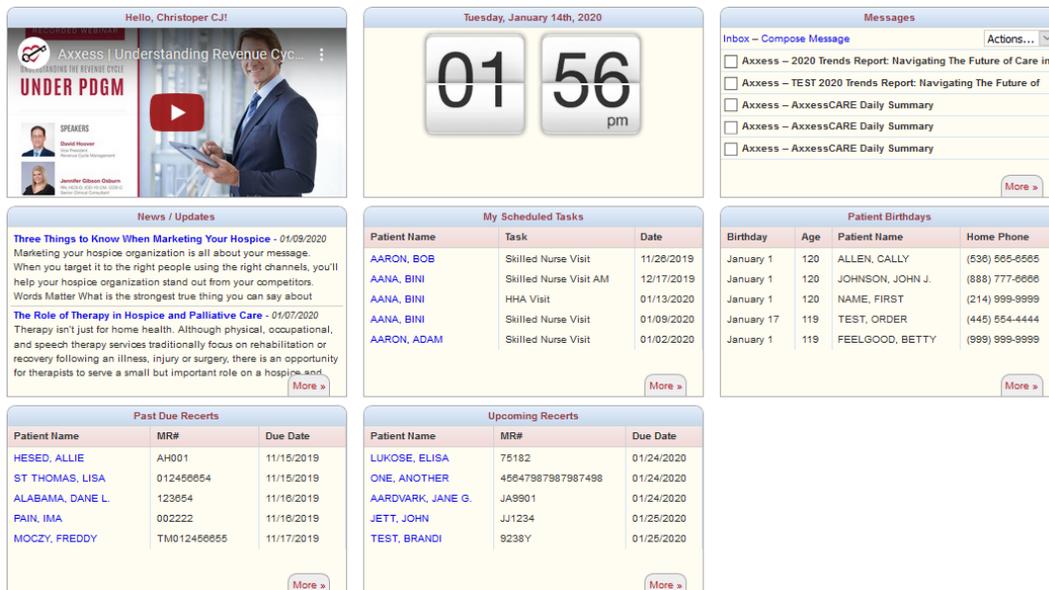
**NOTE:** For resetting the password, see [Overview](#).

If the user forgets their password, select **Forgot your Password?**, and a link will be sent to this email address. Here the user can reset their password, however the electronic signature will remain the same. After the correct username and password are entered, the following message will display:



Select **OK** and the user will see the Axxess Planner. Select the appropriate Axxess application on the left side of the page to perform the Intake and Scheduling process.

## DASHBOARD



News / Updates

**Three Things to Know When Marketing Your Hospice** - 01/09/2020  
Marketing your hospice organization is all about your message. When you target it to the right people using the right channels, you'll help your hospice organization stand out from your competitors. Words Matter What is the strongest true thing you can say about

**The Role of Therapy in Hospice and Palliative Care** - 01/07/2020  
Therapy isn't just for home health. Although physical, occupational, and speech therapy services traditionally focus on rehabilitation or recovery following an illness, injury or surgery, there is an opportunity for therapists to serve a small but important role on a hospice and

More >

My Scheduled Tasks

Patient Name	Task	Date
AARON, BOB	Skilled Nurse Visit	11/26/2019
AANA, BINI	Skilled Nurse Visit AM	12/17/2019
AANA, BINI	HHA Visit	01/13/2020
AANA, BINI	Skilled Nurse Visit	01/09/2020
AARON, ADAM	Skilled Nurse Visit	01/02/2020

More >

Patient Birthdays

Birthday	Age	Patient Name	Home Phone
January 1	120	ALLEN, CALLY	(536) 565-6565
January 1	120	JOHNSON, JOHN J.	(888) 777-6666
January 1	120	NAME, FIRST	(214) 999-9999
January 17	119	TEST, ORDER	(445) 554-4444
January 1	119	FEELGOOD, BETTY	(999) 999-9999

More >

Past Due Recerts

Patient Name	MR#	Due Date
HESED, ALLIE	AH001	11/15/2019
ST THOMAS, LISA	012456654	11/15/2019
ALABAMA, DANE L.	123654	11/16/2019
PAIN, IMA	002222	11/16/2019
MOCZY, FREDDY	TM012456655	11/17/2019

More >

Upcoming Recerts

Patient Name	MR#	Due Date
LUKOSE, ELISA	75182	01/24/2020
ONE, ANOTHER	45647987987987498	01/24/2020
AARDVARK, JANE G.	JA9901	01/24/2020
JETT, JOHN	JJ1234	01/25/2020
TEST, BRANDI	9238Y	01/25/2020

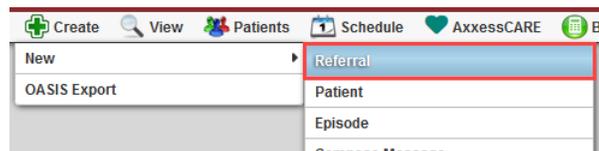
More >

The dashboard can display up to nine tiles. Five of these tiles are default and the remaining four are based on user permissions. The intake/scheduler will usually see the top eight tiles:

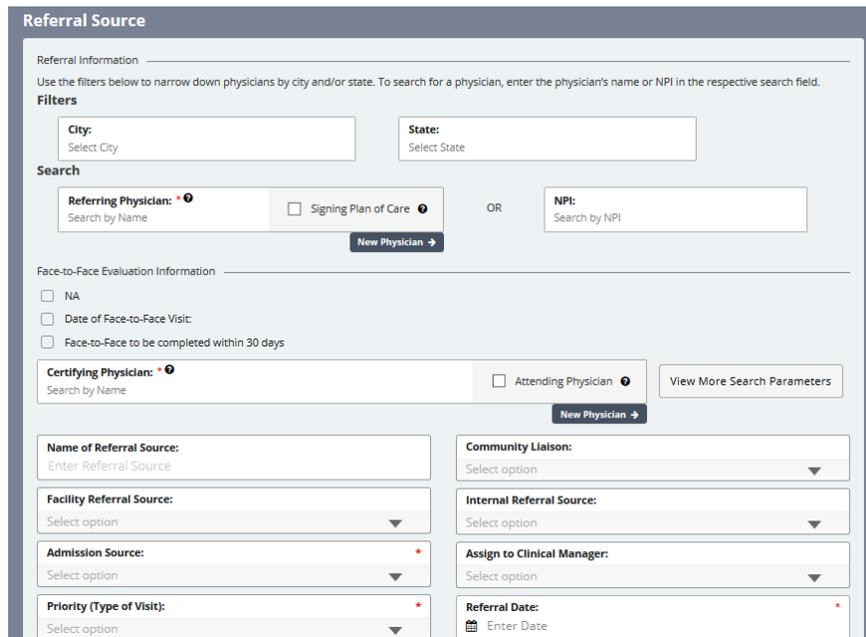
- Welcome Panel – The center of the screen will display items for subscribers to Axxess products. Items will consist of everything from interactive announcements to in-depth training videos.
- Date/Time – This box will display the current date and time for the current location.
- Messages – HIPAA-compliant email messaging center, allowing all agency users to communicate in a secure manner. When the user receives messages, notifications will be sent to the user’s email assigned to their account.
- News/Updates – Links to Axxess-generated blog posts, educational articles, regulatory updates, and other important information.
- My Scheduled Tasks – Electronic “to-do” list. Quickly access a patient chart and tasks. The tile will display the five most recent patients and their tasks.
- Patient Birthdays – This is a quick reminder of the patients who will celebrate birthdays in the upcoming week/month, so that birthday cards can be sent out, optimizing positive patient/provider relationships.
- Past Due Recerts – This allows those with permissions a quick view of recertifications that are past due and need immediate action. Select the hyperlink to access the patient record.
- Upcoming Recerts – To assist in preventing patients from showing up in the overdue recertification panel, Axxess Home Health provides quick access to view Upcoming Recerts with permissions that are due within the next 30 days. Selecting **More** opens the panel which allows you to see the entire list and provides the ability to export the list to an Excel spreadsheet.

## REFERRAL ENTRY

*Create/New/Referral*



The referral entry details page will populate. Sections with a red asterisk\* indicate that the information is required to save the page.



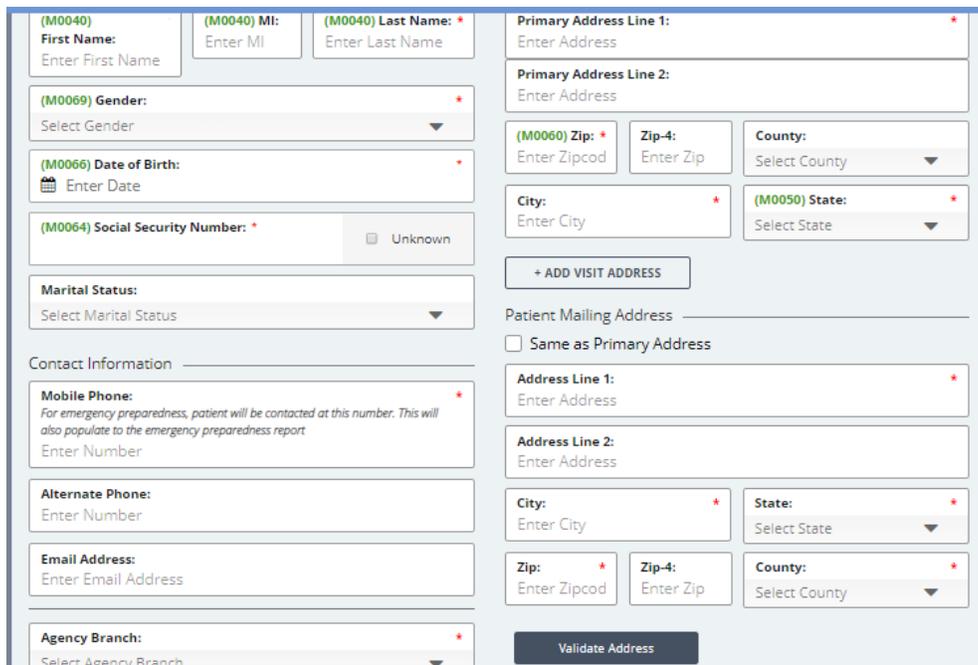
**NOTE:** Select the  icon for further clarity into the section.

**Referral Source** - Contains details of the source involved in referring the patient to the agency.

- Referring Physician - The Referring Physician or allowed non-physician practitioner (NPP) is the person primarily providing the face-to-face information for this admission. Search by City, State and/or NPI.
- Face to Face (F2F) Evaluation - If this is not applicable, mark it as NA.
  - Enter F2F date. If date is not known, check “F2F completed within 30” box; this is a Medicare requirement.
- Certifying Physician - The Certifying Physician is the physician who certifies that a patient is eligible for Medicare home health services. This physician may be the same as the referring and/or attending physician. Select the **View More Search Parameters** button to search by City, State and/or NPI.
- Name of Referral Source - In this section, indicate if a clinic, hospital or person referred the patient.
- Facility Referral Source - Enter this if the agency has a contract with a facility who provides referrals.
- Admission Source - This is a default list to select where the patient was referred.
- Priority (Type of Visit) - This is based on agency policy of how visits are prioritized.

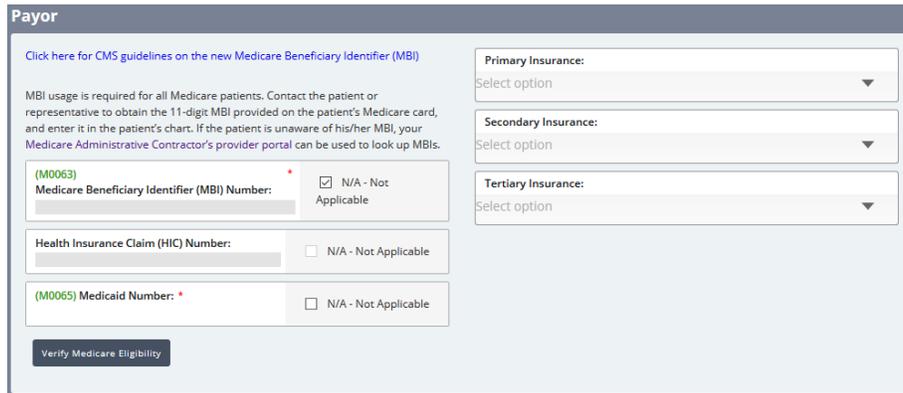
- Community Liaison - This section is to indicate the marketer who promotes agency.
- Internal Referral Source - This is entered if an agency staff member brings on the referral.
- Assign Clinical Manager - Patients must have a clinical manager assigned who oversees patient care.
- Referral Date - This is the date the patient was referred to the agency. It is a required field.

**Demographics** - Patient details, contact information and address will be entered in this section.



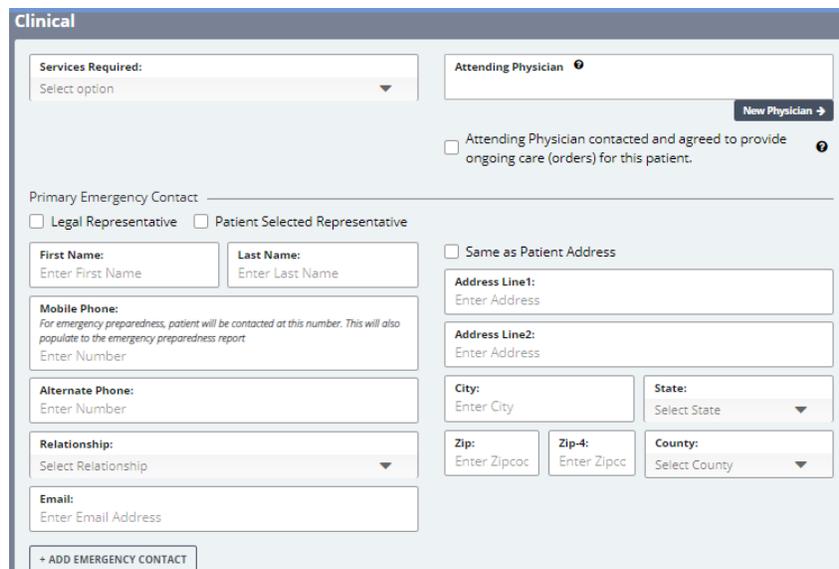
- If the patient has more than one address, the **Add Visit Address** button is available to add an additional address.
- If the patient's mailing address differs from the Physical Address, both must be entered. If the address is the same for both sections, an option to check Same as Primary Address is available.
- Once the patient's address is entered, **Validate Address** can be selected to verify that the details entered are for a valid address.

**Payer** - Encompasses details of how the patient will be billed.



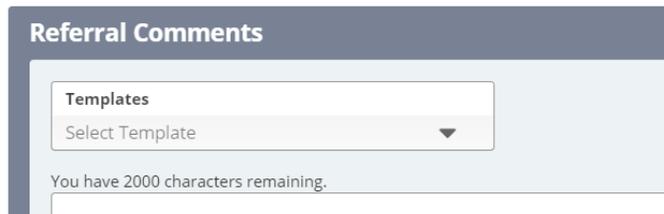
- The Medicare Beneficiary Identifier (MBI) should be entered in this section. If not available, the NA – Not Applicable check box is available.
  - [Click here for CMS guidelines on the new Medicare Beneficiary Identifier](#)
- After entering the Medicare Beneficiary Identifier and possibly the Medicare Number (HIC) or Medicaid Number, the **Verify Medicare Eligibility** button can be selected. Please note, the patient’s name, gender and date of birth sections must also be completed for results to generate the patient’s eligibility details.
- Additional sections for a primary, secondary and tertiary insurance are provided.

**Clinical** - Encompasses patient care information and contact details.



- Services Required - Indicate the disciplines needed to care for the patient.

- One or more disciplines may be selected in this section.
- Attending Physician - The primary physician is the physician that is providing care plan oversight.
  - This physician could be the same as the referring and/or the certifying physician.
  - If the physician is not already in the system, the option to add **New Physician** is available.
  - In the case where the referring physician will not provide ongoing orders, the attending physician must be contacted in advance of care. A check box indicating this has been addressed is available in this section.
- Primary Emergency Contact - Indicate if the patient has a Legal Representative or if the patient selected someone to be their legal representative.
  - An option to add additional contacts is available by selecting + **ADD EMERGENCY CONTACT**.
  - If the individual entered has the same address as the patient, select the Same as Patient Address check box. Otherwise, the legal representative's address will need to be entered.
    - Checking the box will automatically populate the patient's address to this section.
- The final section of the referral process is the Referral Comments section. This free text box is for narratives, teaching, guides, goals and any other details pertaining to the referral.

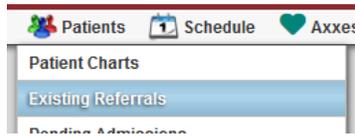


- An option to select a template to complete is available.

After all the referral sections have been entered, select the **ADD REFERRAL** button to save all details entered into the system.

## **VIEWING EXISTING REFERRALS**

*View/Lists/Referrals or Patients/Existing Referrals*



After the patient's referral has been created, the next step is admitting the patient. The Existing Referral List will appear with patient's Referral Date, Name, Referral Source, Date of Birth, Gender, Status and the name of the person who entered the initial referral. Select a column header to sort the list accordingly.

Existing Referral List   Testing Home Health Agency						
New Referral		Start Typing				
Referral Date	Name	Referral Source	Date of Birth	Gender	Status	Created By
01/01/2020	Lukose, Danny	Clinic or Physician's Office	01/05/1960	Male	Pending	1Paul Lukose RN

The option to add a new referral is available in this window by selecting the **New Referral** button. The Printer icon  gives a preview of the referral document. It is the patient's Face Sheet, which is only available in this format prior to admitting the patient. The document can be printed or saved.

Testing Home Health Agency 16000 Dallas Parkway Suite 700 Dallas, TX, 75248 Phone: (214) 575-7711 Fax: (222) 000-2221		<b>Referral</b> Lukose, Danny Date of Referral: 1/1/2020	
<b>Patient Demographics</b>			
<b>Primary Address:</b> 16000 DALLAS PKWY DALLAS, TX, 75248 <b>Phone:</b> (214) 575-7711	<b>Mailing Address:</b> 16000 DALLAS PKWY DALLAS, TX, 75248 <b>Alternate Phone:</b> N/A	<b>DOB:</b> 1/5/1960 <b>Social Security Number:</b> N/A <b>Gender:</b> Male	<b>Email Address:</b> N/A <b>Marital Status:</b> N/A
<b>External Referral Sources</b>		<b>Internal Referral Sources</b>	
<b>External Referral Source:</b> N/A <b>Facility Referral Source:</b> N/A <b>Referral Source Type:</b> Clinic or Physician's Office	<b>Priority Type of Visit:</b> InformationUnavailable <b>Date of Face-to-Face:</b> 01/01/2020	<b>Internal Referral Source:</b> N/A <b>Community Liasion:</b> N/A <b>Assigned to Clinical Manager:</b> 1Paul Lukose	

The Action column contains a variety of action items for the patient's referral.

- **Edit** - Enables the ability to modify referral details prior to admitting the patient.
- **Delete** - Removes the patient from the system completely.

**NOTE:** Deleting the referral means the patient will not be visible in any reports in the database.

- **Admit** - Generates all required information required to admit the patient.

- Non-Admit - This removes the patient from the list of referrals available for admission.



## **ADMITTING A REFERRAL**

In the Existing Referral List, select the **Admit** hyperlink under the Action column to admit the patient. The Admit Patient window will appear with sections on the right side that are pertinent to the admission process.

The Demographics section will contain a lot of information that was entered during the referral process. Below are sections that were not in the referral process and need to be addressed:

- Clinical Manager - This role manages all clinical documentation in the database.
- Case Manager - This role oversees the patient's chart.
- Assign to Clinician - This clinician will complete the Start of Care visit.
- Patient ID - This Medical Record number is specific to the patient within the agency.
- Default Service Location - This is tied to the Q-code which impacts billing.
- Race/Ethnicity - Select the patient's biological trait(s).
- Primary Language - Enter the primary verbal communication source.
- Payment Source - This is where the insurance/payer type is identified.
- Admission Source - Choose from which inpatient facilities patient was discharged from in the past 14 days.
- Episode Timing - Choose between Early, Later, Unknown or N/A.
- Start of Care Date - This date is when the patient officially began services.
- Episode Start Date - This date is when the patient's 60-day episode begins.

Select the **Save & Continue** button to move onto the next section. In addition to the Demographics section, the sections listed below will also need to be completed prior to admitting the patient:

- Payer - This section requires the MBI (Medicare Beneficiary Number), Medicare (HIC) number and/or Medicaid number to be entered, if they were not entered during the New Referral process. Choose to **Verify Medicare Eligibility** by selecting the button. Enter all other available insurance information. Select the **Save & Continue** button.
- Physician(s) - If the certifying physician was identified as the Attending Physician during the New Referral process, the physician's name will automatically populate in this field. If the Attending Physician field is blank or needs to be modified, type in the free text box. Select the **New Physician** button to add a physician to the database (permission based). Select **Add** for additional physicians involved with care. Select the **Save & Continue** button.
- Clinical/Diagnosis - This section encompasses various clinical details, including the anticipated type of services that patient will require. The discipline list will appear to multi-select the services the patient should receive. These details will populate from the New Referral process.
  - Additionally, the OASIS-based diagnosis questions requiring a Primary Diagnosis and Other Diagnoses will be included in this Clinical/Diagnosis section. There are two options for searching for the diagnosis: by the ICD Diagnosis Name or by the ICD-10 Diagnosis code. Add more diagnoses by selecting the **+ Add Diagnosis** button. Select the **Save & Continue** button.



**Patient Diagnosis**

(M1021) Primary Diagnosis

ICD-10-CM Diagnosis   ICD-10-CM Code   Severity

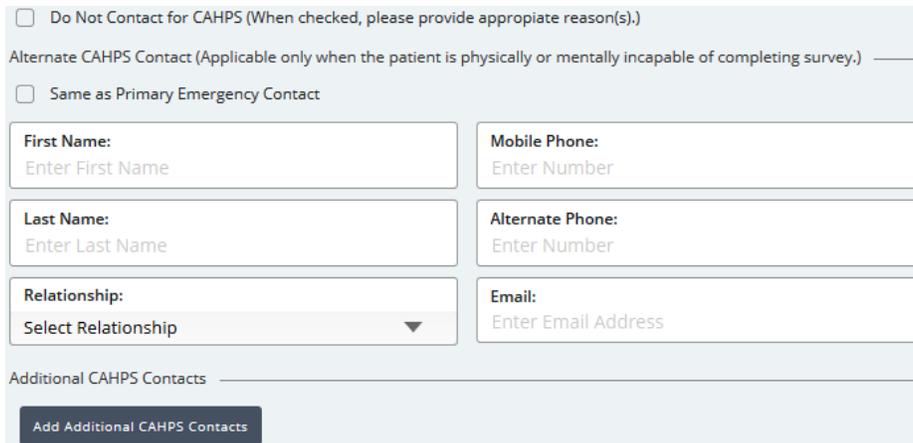
(M1023) Other Diagnoses

ICD-10-CM Diagnosis   ICD-10-CM Code   Severity

- Pharmacy - This section allows the user to add the pharmacy where the patient will be receiving medications. Multiple pharmacies may be entered from this window.



- If the pharmacy is not listed in the system, the option to add a new pharmacy is available by selecting the **New Pharmacy** button. Select the **Save & Continue** button.
- Emergency Contacts - At least one emergency contact must be entered in this section. If an emergency contact was added during the New Referral process, the details of that contact will populate in this window. If not, select the **Add Emergency Contact** button.
  - Also included in Emergency Contact is the CAHPS survey section. If CAHPS services are enabled with Axxess, the user will indicate if this patient should or should not be contacted for CAHPS. If the patient should be contacted for CAHPS, reasons behind this decision must be indicated.



- If the CAHPS services are enabled and the contacted did not deny services, the contact details should be verified. If the contact is the same as the Emergency Contact, a check Same as box.
  - If additional CAHPS contacts need to be added, the **Add Additional CAHPS Contacts** button will be available to select. Select the **Save & Continue** button.

- Emergency Preparedness - Choose patient Emergency Triage, enter Additional Emergency Preparedness Information (can use template), Evacuation details and any additional comments. Select the **Save & Continue** button.
- Advanced Directives - If the patient has an advanced care plan or a surrogate decision maker and can provide legal documentation for the home health medical record, the options are available to enter those details after selecting the **Yes** bullet.
  - If Advanced Care Plan option DNR, Out of Hospital is selected, the patient will have a **DNR** indicator next to the name listed in the Patient Charts window.

Admission

Does this patient have an advanced care plan or a surrogate decision maker AND able to provide legal documentation for the home health medical record? ⓘ

Yes

No

---

Advanced Care Plan

Advanced Care Plan

Living Will

DNR, Out of Hospital

- Enter Comments then select the **Save & Continue** button.
- Referral Information - This section allows the agency to review physician assignments and confirm referral details entered during the New Referral process.
  - If the patient's Face-to-Face Evaluation Information has been obtained, a section is available to enter that information.

Face-to-Face Evaluation Information: \* ⓘ

N/A

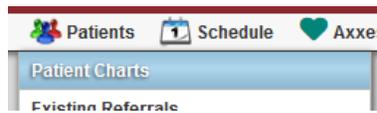
Date of Face-to-Face Visit:

Face-to-Face to be completed within 30 days

Select the **Admit** button to admit or select the **Save & Exit** button to complete later.

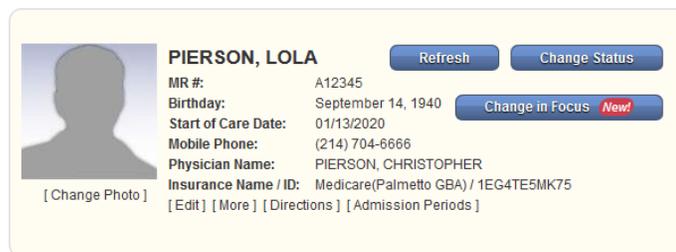
## INTRODUCTION TO PATIENT CHARTS

*Patient/Patient Charts*



The main section of the Patient Charts window will contain a brief synopsis of the patient's details:

- The agency can upload the patient's picture as a form of visual reference. Select the **Change Photo** hyperlink to upload a photo.
- The patient's name is next to the picture. It will be viewed as Last Name, First Name.
- The agency-assigned Medical Record Number (MR#) will be visible below the patient's name.
- The Birthday, Start of Care Date and Mobile Phone number will also be visible in the middle of the Patient Chart so that they may be referenced easily.
- The Attending Physician and Primary Insurance/ID will be listed as well.



- Below the patient's details are hyperlinks:
  - Edit – This link will open the patient's chart, which contains the referral and admission details that were entered.
  - More – This link displays additional patient details at a glance.

<b>Id:</b>	
<b>Name:</b>	
<b>Gender:</b>	
<b>Address:</b>	
<b>City, State, Zip:</b>	
<b>Home Phone:</b>	
<b>Mobile Phone:</b>	
<b>Start of Care Date:</b>	
<b>Date of Birth:</b>	
<b>Medicare #:</b>	
<b>Medicaid #:</b>	
<b>Physician Name:</b>	
<b>Physician Phone:</b>	
<b>Physician Fax:</b>	
<b>DNR:</b>	

- Directions - A map to the patient's house will appear when this link is selected.
- Admission Periods - If the patient was discharged and readmitted, the admission periods will be listed in this window.
  - Selecting the  icon beside the Admission Date will generate more details pertaining to that admission period.



Patient Admission Periods   PIERSON, LOLA				
Add New Period				
Admission Date	Discharge Date	Current Admission Period	Associated Episodes	Action
01/13/2020		Yes	Yes	<a href="#">Edit</a>
Episode Start Date		Episode End Date		Action
01/13/2020		03/12/2020		<a href="#">Edit Episode</a>

- In the Actions column, select **Edit Episode** to generate a window with details for managing the episode (permissions required). For more details, please reference *Managing Episodes* in the *Schedule Center* section within this manual.

## Patient Chart Filters

On the right-hand side of the Patient Charts window, there are some parameters available to further narrow the selection when searching for a patient.

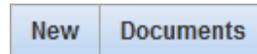
- **Add New Patient** button - This is an alternative route for adding a new patient to the database.
- Branch - This option allows the user to pick the patient's branch.
- View - This option is for filtering by patient status.
- Filter - This option allows the user to narrow down the by the payer.
- Find - Search patient's name and list will appear when typing in letters by first or last name.

Add New Patient

Branch:	<input style="width: 95%; border: 1px solid #ccc;" type="text" value="Location 2"/>
View:	<input style="width: 95%; border: 1px solid #ccc;" type="text" value="Active Patients"/>
Filter:	<input style="width: 95%; border: 1px solid #ccc;" type="text" value="All"/>
Find:	<input style="width: 95%; border: 1px solid #ccc;" type="text"/>

## Patient Chart Top Menu

The Patient Charts window has tabs at the top of the window that can be selected when adding details to the patient's record.



### New

- Order - This section provides the option to add a new order to the patient's chart. An alternative route is *Create/New/Order*.
- Authorization - This section is used for patients with Per Visit insurance payers and authorization is needed to proceed with patient care.
  - The patient's name will automatically appear when inside their patient chart. The authorization options and start and end date ranges will be required, depending on the type of authorization the patient has.

Detail

Patient Name:	<input type="text" value="TEST, TEST"/> *	Authorization Status:	<input type="text" value="Active"/> *
Authorization Type:	<input type="text" value="None"/> *	Insurance:	<input type="text" value="MEDICARE HMO"/> *
Start Date:	<input type="text"/> 📅	Authorization Number:	<input type="text"/> *
<i>Note: the start date can not be changed once the authorization is created.</i>			
End Date:	<input type="text"/> 📅		

- The status of the authorization can be indicated by selecting either Active, Pending, Obtained, Closed or Denied.
- The patient's Insurance and Authorization Number are required fields which must be addressed prior to saving the new authorization.
- Once the top section is completed, the Visits or Hours Authorized section must be addressed by indicating the discipline type, Authorized Units and the Unit Type.

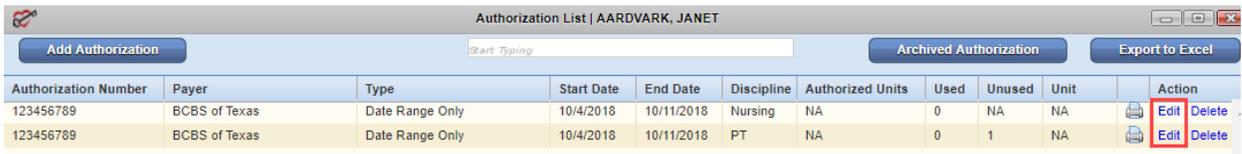
Visits or Hours Authorized

Discipline:	<input type="text" value="-- Select Discipline --"/>	HPC Code:	<input type="text" value="Select options"/>	Authorized Units:	<input type="text"/>	Unit Type:	<input type="text" value="Visits"/>
<input type="button" value="Add More Disciplines"/>		<i>Note: Hourly is for recording authorization only, the system currently doesn't provide tracking for hours.</i>					

**NOTE:** If the patient's insurance does not require authorization, the following notification will display. The insurance should be verified in the patient's profile to proceed.

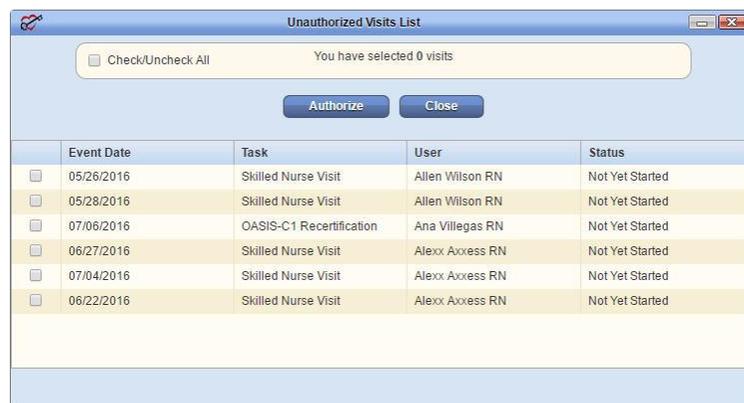
New Insurance Authorization | Testing Home Health Agency, Inc  
**The primary insurance of this patient does not require visit authorizations!**

To authorize multiple tasks at one time, select **Edit** on the right of the appropriate authorization.



Authorization Number	Payer	Type	Start Date	End Date	Discipline	Authorized Units	Used	Unused	Unit	Action
123456789	BCBS of Texas	Date Range Only	10/4/2018	10/11/2018	Nursing	NA	0	NA	NA	
123456789	BCBS of Texas	Date Range Only	10/4/2018	10/11/2018	PT	NA	0	1	NA	

Once in the edit screen, scroll down to the bottom, select **Show Unauthorized Visits**. Select the visits to attach to the authorization and select **Authorize**.



Event Date	Task	User	Status
<input type="checkbox"/> 05/26/2016	Skilled Nurse Visit	Allen Wilson RN	Not Yet Started
<input type="checkbox"/> 05/28/2016	Skilled Nurse Visit	Allen Wilson RN	Not Yet Started
<input type="checkbox"/> 07/06/2016	OASIS-C1 Recertification	Ana Villegas RN	Not Yet Started
<input type="checkbox"/> 06/27/2016	Skilled Nurse Visit	Alexx Axxess RN	Not Yet Started
<input type="checkbox"/> 07/04/2016	Skilled Nurse Visit	Alexx Axxess RN	Not Yet Started
<input type="checkbox"/> 06/22/2016	Skilled Nurse Visit	Alexx Axxess RN	Not Yet Started

Verify all authorized visits are included and select **Save**.

- **Aide Care Plan** - This section is used to create Aide Care Plans for patients. All items are option except for the Electronic Signature.
  - Choose Care Plan Type and Services.
  - Choose Things to Report.
  - Enter Special Considerations.
  - Choose Plan Details.
  - Choose Notifications.
  - Enter the Electronic Signature.
  - Select the **CREATE & COMPLETE** button when finished.

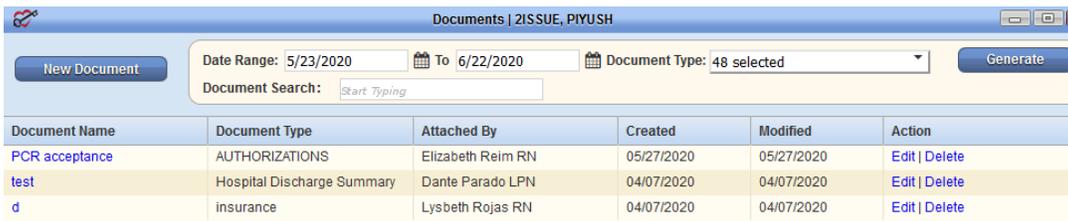
Aide Care Plan		
Choose Care Plan Type <input type="radio"/> HHA <input type="radio"/> PAS <input type="radio"/> Homemaker <input type="radio"/> Other:		
Services in the Home		
<input type="checkbox"/> SN	<input type="checkbox"/> PT	<input type="checkbox"/> OT <input type="checkbox"/> ST <input type="checkbox"/> MSW
Things to Report		
<input type="checkbox"/> Refusal of care	<input type="checkbox"/> No BM greater than 3 days	<input type="checkbox"/> Changes to patient condition
<input type="checkbox"/> Red or broken skin	<input type="checkbox"/> Falls/injury	<input type="checkbox"/> Medication issues
<input type="checkbox"/> Other:		
Special Considerations		
Enter Special Considerations		
Plan Details		
Task	Frequency	Instructions/Comments
	<b>Vital Signs</b>	
	<input type="checkbox"/> Report vital signs outside of parameters	
Temperature	<input type="radio"/> Every visit <input type="radio"/> Weekly	Comments

- **Communication Note** - This section allows a coordination note to be entered into the patient's chart.
  - Choose the Episode Associated.
  - Attach a physician.
  - Confirm the date (auto-generates today's date).
  - Enter Communication Text or use a template.
  - Send the note within the agency by selecting Send Note as Message checkbox.
  - Enter the Electronic Signature.
  - Select the **Save** button to return or select the **Complete** button to finish.

Communication Note	
Patient Name: AARDVARK, JANE G.	Physician: <input type="text"/> <a href="#">New Physician</a>
Episode Associated: -- Select Episode --	
Date: 1/12/2020	
Communication Text: -- Select Template --	
You have 5000 characters remaining	
Send note as Message: <input type="checkbox"/>	
Electronic Signature	
Staff Signature: <input type="text"/>	Signature Date: <input type="text"/> Time: <input type="text"/>
<input type="button" value="Save"/> <input type="button" value="Complete"/> <input type="button" value="Cancel"/>	

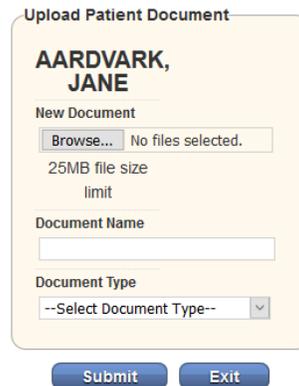
## Documents

To manage documents in the patient's chart, select the **Documents** tab at the top of the patient's chart and the window below will appear. Filter by Date Range, Document Type or search by keyword.



Document Name	Document Type	Attached By	Created	Modified	Action
PCR acceptance	AUTHORIZATIONS	Elizabeth Reim RN	05/27/2020	05/27/2020	<a href="#">Edit</a>   <a href="#">Delete</a>
test	Hospital Discharge Summary	Dante Parado LPN	04/07/2020	04/07/2020	<a href="#">Edit</a>   <a href="#">Delete</a>
d	insurance	Lysbeth Rojas RN	04/07/2020	04/07/2020	<a href="#">Edit</a>   <a href="#">Delete</a>

Select the **New Document** button to add any documents and attachments to the patient's chart.



**Upload Patient Document**

**AARDVARK, JANE**

New Document

No files selected.

25MB file size limit

Document Name

Document Type

--Select Document Type--

Choose files from the computer, give the document a name that will appear in the patient's chart, choose the Document Type and select the **Submit** button when complete. The attached documents will all display with the ability to **Edit** or **Delete** them by selecting the hyperlinks on the far right.

## Patient Chart Quick Reports

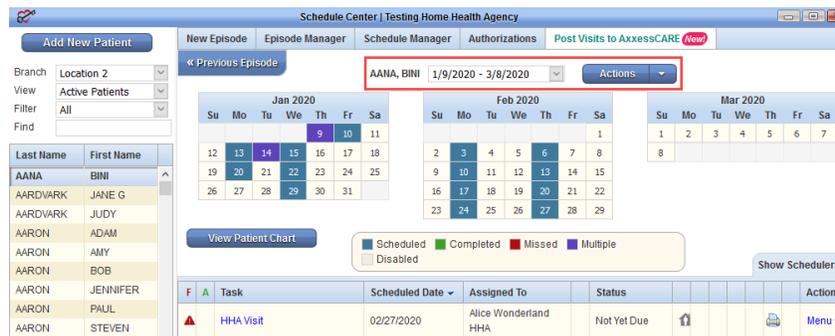
- Patient Profile - This section is the patient's Face Sheet. It is a PDF synopsis of the patient's profile.
- Allergy Profile - This section contains a list of allergies added to the patient's chart.
- Medication Profile - This section contains details of the patient's Medication Profile. New medications can be added, discontinued and drug interactions can be run from this window.
- Immunization Profile - This section contains immunization details inside the patient's chart.
- Infectious Disease Profile - Track infectious diseases and screening tools used to detect them.
- Authorizations Listing - This section houses all authorizations that can be edited, deleted and new authorizations can be added.

- Preadmissions Notes - Document notes in a patient's chart before admitting the patient.
- Communication Notes - This section will house all the communication notes that have been entered in to the patient's chart. New notes can be added by selecting the **New Communication Note** button.
- Orders and Care Plans - This section shows Orders and Care Plans for the desired date range.
- Plan of Care Summary - This section contains details of the evolving Plan of Care Summary for the patient. It will be visible if the system setting is enabled.
- Episode Summaries - This section provides a review of patient's progression when Intra-Episode Summaries are auto-generated and housed here. They can also be created, printed or deleted.
- Vital Signs Charts - This section indicates the changes in patient vitals during the episode, if documented.
- Triage Classification - This section contains information based on answers from patient's profile Emergency Preparedness section.
- Deleted Tasks/Documents - Axxess is a cloud-based software, so most deleted data will remain in the system. Deleted tasks will be found in this section.

The patient's scheduled visits will appear at the bottom of the Patient Charts window. The best way to review patient tasks and schedule further visits is from the Schedule Center.

## INTRODUCTION TO THE SCHEDULE CENTER

The Schedule Center is an episodic view of the patient's calendar. The calendar displayed will match the episode populated in the episode field, located directly above the calendar.



The screenshot displays the 'Schedule Center' interface for 'Testing Home Health Agency'. The main area shows a calendar for the episode 'AANA, BINI' from 1/9/2020 to 3/8/2020. The calendar is split into three months: Jan 2020, Feb 2020, and Mar 2020. A legend indicates task statuses: Scheduled (blue), Disabled (light blue), Completed (green), Missed (red), and Multiple (purple). Below the calendar is a table of tasks:

F	A	Task	Scheduled Date	Assigned To	Status	Action
▲		HHA Visit	02/27/2020	Alice Wonderland HHA	Not Yet Due	Menu

The color legend is located below the calendar for easy reference:

- **Blue** = Scheduled task
- **Green** = Completed task
- **Red** = Missed visit
- **Purple** = Multiple tasks on one day
- **Gray** = Disabled task



If a task exists and is scheduled, that date will be highlighted in blue. It will stay blue until the task status is either updated to Completed (green) or marked as Missed (red). If there are multiple items scheduled on a day, they are highlighted in purple. Dates with multiple tasks are not updated to another color as tasks change in status. They remain purple.

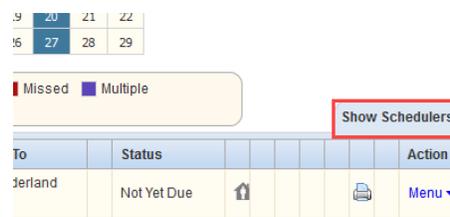
### Schedule Center Filters

The filters on the right-hand side of the Schedule Center provide the opportunity to narrow down the search for patients.

- **Add New Patient** button – Select this button for an alternative route to add a new patient to the database.
- **Branch** - This option allows the user to pick the patient's branch.
- **View** - This option is for filtering by patient status.
- **Filter** - This option allows the user to narrow down the by the payer.
- **Find** – Search by patient's name for a list to generate.

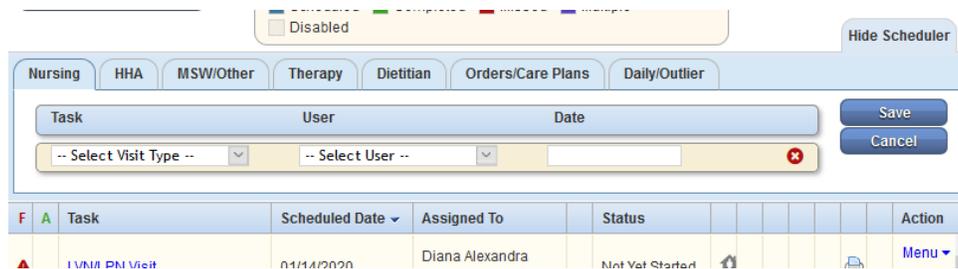
### Scheduling Visits to A Patient

When scheduling individual visits for a patient, use the **Show Schedulers** tab to quickly schedule those single task items through the scheduler. Select a date on the calendar and the scheduler will open.



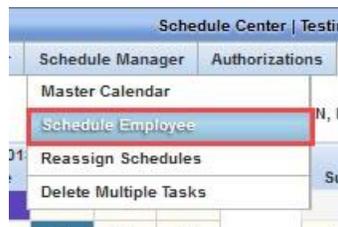
Tabs will appear with discipline categories to select based on the appropriate task. The task list loads according to the discipline selected. Discipline options are as follows:

- Nursing
- HHA
- MSW/Other
- Therapy
- Dietician
- Orders/Care Plans
- Daily/Outlier



The screenshot shows a software interface for scheduling. At the top, there is a "Disabled" checkbox and a "Hide Scheduler" button. Below these are several tabs: "Nursing", "HHA", "MSW/Other", "Therapy", "Dietitian", "Orders/Care Plans", and "Daily/Outlier". Under the "Nursing" tab, there is a form with fields for "Task", "User", and "Date". Below these fields are two dropdown menus: "-- Select Visit Type --" and "-- Select User --", followed by a red "X" icon. To the right of the form are "Save" and "Cancel" buttons. Below the form is a table with columns: "F", "A", "Task", "Scheduled Date", "Assigned To", "Status", and "Action". The first row of data shows a task "I/VNI PN Visit" scheduled for "01/14/2020" assigned to "Diana Alexandra" with a status of "Not Yet Started".

When scheduling multiple tasks to a patient, the **Schedule Employee** feature is the best source for quick episode scheduling. Select Schedule Employee under the Schedule Manager tab to begin multi-date task scheduling.



A new window will appear with options to select a clinician for visit(s) and the list of the visit types. Once the User/Employee and Visit Type have been chosen, select the calendar dates when visits will be scheduled. To deselect the visit date, select the date again and the grey selection box will be white. Ordered frequencies are listed in the top right as a reference while scheduling.

**Quick Employee Scheduler**

User/Employee:	-- Select User --	OR	<input type="checkbox"/> <b>Post to AxxessCARE</b> <small>New!</small>
Visit Type:	-- Select Visit Type --		

Discipline	Frequency	Effective Date
SN	3wk2, 2wk2, 1wk4	1/1/2020
MSW	1m1	1/1/2020
HHA	5wk9	1/1/2020

To schedule visits for the selected user, click on the desired dates in the calendar below:

Jan 2020						
Su	Mo	Tu	We	Th	Fr	Sa
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

Feb 2020						
Su	Mo	Tu	We	Th	Fr	Sa
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29

**NOTE:** Only agencies in specific states will have the option to select the Post to AxxessCARE box. Other states are coming soon.

To reassign just *one* visit to another user, select the **Menu** drop-down on the right-hand side of the visit.

F	A	Task	Scheduled Date	Assigned To	Status						Action
▲		HHA Visit	02/27/2020	Alice Wonderland HHA	Not Yet Due	↑				🖨️	Menu ▾
▲		HHA Visit	02/24/2020	Akhila Polineni RN	Not Yet Due	↑				🖨️	Menu ▾
▲		HHA Visit	02/20/2020	Alice Wonderland HHA	Not Yet Due	↑				🖨️	Menu ▾
▲		HHA Visit	02/17/2020	Alice Wonderland HHA	Not Yet Due	↑				🖨️	Menu ▾
▲		HHA Visit	02/13/2020	Alice Wonderland HHA	Not Yet Due	↑				🖨️	Menu ▾

After selecting Menu, select **Reassign** and the box below will appear.

**Reassign Task**

Task: HHA Visit

Patient: AANA, BINI

Scheduled Date/Time: 2/27/2020

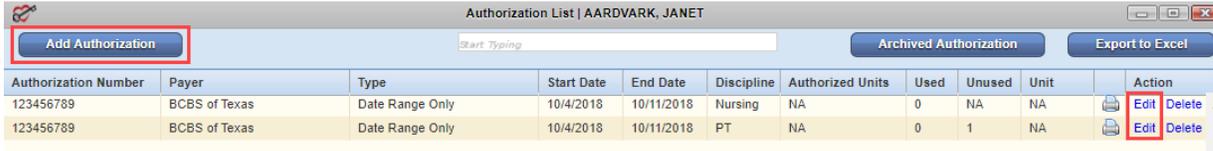
Existing User/Employee: Alice Wonderland HHA

New User/Employee: -- Select User --

Select the user to reassign the visit to, select **Reassign** and the new user will appear.

## Authorizations

Select the **Authorizations** tab and a new window will open. To add a new authorization, select **Add Authorization** in the top left. To edit an existing authorization, select **Edit** on the right under the Action column.



Authorization Number	Payer	Type	Start Date	End Date	Discipline	Authorized Units	Used	Unused	Unit	Action
123456789	BCBS of Texas	Date Range Only	10/4/2018	10/11/2018	Nursing	NA	0	NA	NA	Edit Delete
123456789	BCBS of Texas	Date Range Only	10/4/2018	10/11/2018	PT	NA	0	1	NA	Edit Delete

After adding or updating the authorization, the visit can now be linked to the appropriate authorization. Select the Warning symbol to view and attach to a new authorization.

F	A	Task	Scheduled Date	Assigned To	Status
	▲▲	HHA Visit	01/25/2019	Alice Wonderland HHA	Not Yet Started

**Grant Authorization**

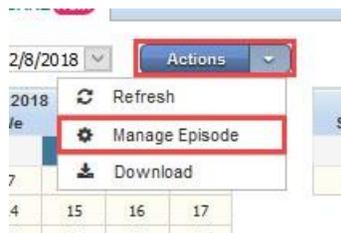
Select Authorization:

Note: Only authorizations with available units are presented in the drop down list

After the visits have been attached to an authorization, the warning will go away. To keep track of authorizations, go to *Reports/Report Center*. Scroll down to the Schedule Reports, located in the middle column at the bottom. Choose **Authorization Utilization**.

## Managing Episodes

The **Manage Episode** feature allows users with permission the ability to update the episode information.



A window will appear with options to modify the following sections:

- Start of Care date

- Episode End date
- Case Manager
- Primary Insurance
- Secondary Insurance
- Primary Physician

Users can also inactivate the episode. When inactive, the episode does not show up in the episode list for the patient. Possible reasons to inactivate the episode include:

- Episode was entered in error.
- Patient is discharged prior to a first billable visit in the episode.

View all inactive episodes for a patient by selecting the **Episode Manager** tab on top of the patient's calendar. Then select **Inactive Episode(s)** and the list below will appear.

List of In-active episodes		
Episode Range	Inactive Episode(s)	Action
08/28/2018 - 10/26/2018		<a href="#">Activate</a>   <a href="#">Edit</a>
04/05/2017 - 06/03/2017		<a href="#">Activate</a>   <a href="#">Edit</a>

**Activate** or **Edit** these episodes by selecting the hyperlink on the right-hand side. Once activated, the episode will then appear on the patient's schedule.

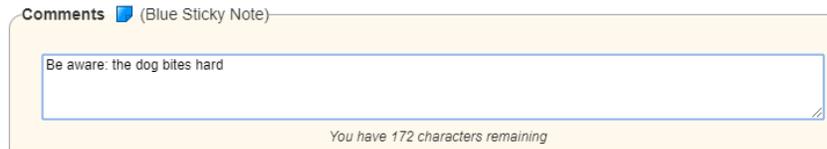
**NOTE:** For date selections, select the calendar icon to view the dates in a calendar format.

#### Edit Episode: TESTER, TESTING

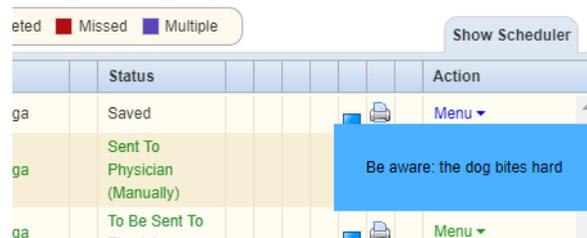
**Details**

Start Of Care Date: <input type="text" value="10/08/2018"/>	Inactivate Episode: <input type="checkbox"/>	
Episode Start Date: <input type="text" value="10/6/2018"/>	Episode End Date: <input type="text" value="12/4/2018"/>	
Case Manager: <input type="text" value="Aannette Tester RN"/>	Primary Insurance: <input type="text" value="Medicare(Palmetto GBA)"/>	Secondary Insurance: <input type="text" value="-- Select Insurance --"/>
Primary Physician: <input type="text" value="Moghissi, Jasmine M.D."/>	Visit Authorization Required? <input type="radio"/> Yes <input checked="" type="radio"/> No	

Additionally, there is a Comments section found on the Manage Episode page. Information entered in this section will attach to each scheduled task item as a blue sticky note. This is a useful tool to notify staff of important information for the duration of the episode, such as: gate codes, animals in the home, any vital pre-visit patient needs, etc.



Hovering over the sticky note from the Schedule Center will show its contents.



Select the sticky note to enlarge.



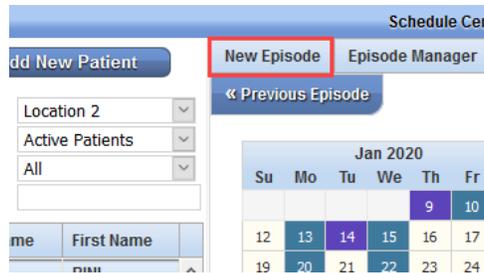
At the bottom of the Manage Episode window will be the **Activity Log** button. This button is permission-based and will contain details of changes made inside the episode.



The **Activity Logs** button will be visible throughout different sections of the database and will provide audit trail data.

Schedule Event Logs		
User Name	Status Name	Date
Denenga, Tanaka	Created	10/06/2018 07:52 PM
Denenga, Tanaka	Saved	10/06/2018 11:38 PM
Denenga, Tanaka	Saved	10/06/2018 11:59 PM

## New Episode



The window below will appear:

**New Episode: AANA, BINI** \*Required Field

**Patient**

Patient: AANA, BINI Start Of Care Date: 11/08/2019

Tip: Last Episode end date is - 03/08/2020

**Details**

Episode Start Date: 3/9/2020 Primary Physician: Darko, Donnie

Episode End Date: 5/7/2020 Primary Insurance: BLUECROSS BLUESHIELD (BCBS)

Case Manager: Lysbeth Rojas RN Secondary Insurance: -- Select Insurance --

Visit Authorization Required?  Yes  No

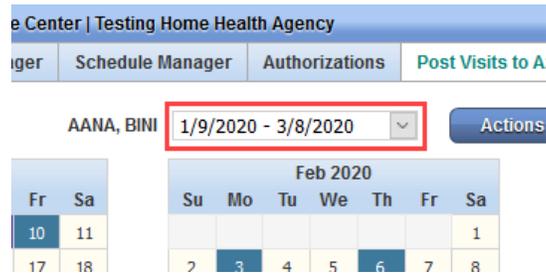
**Comments** (Blue Sticky Note)

This window will default the following information (updates can still be made):

- Start of Care Date - The Start of Care from the OASIS for this admission period.
- Episode Start Date – Autogenerates with the day immediately following the past episode.
- Episode End Date - Autogenerates date to 60 days after the episode start date.
- Primary Physician - Autogenerates the physician in the chart.
- Primary Insurance - Autogenerates the primary insurance in the chart.
- Secondary Insurance - Autogenerates the secondary insurance in the chart.
- Case Manager - Autogenerates the Case Manager from the chart.

- Visit Authorization Required - Autogenerates based on the answer in the payer setup.
- Comments - Free text space available to enter information for this episode that needs to display on all visits in the episode.

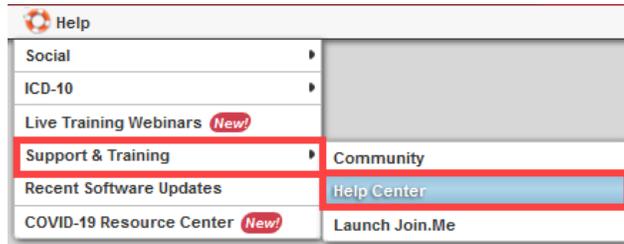
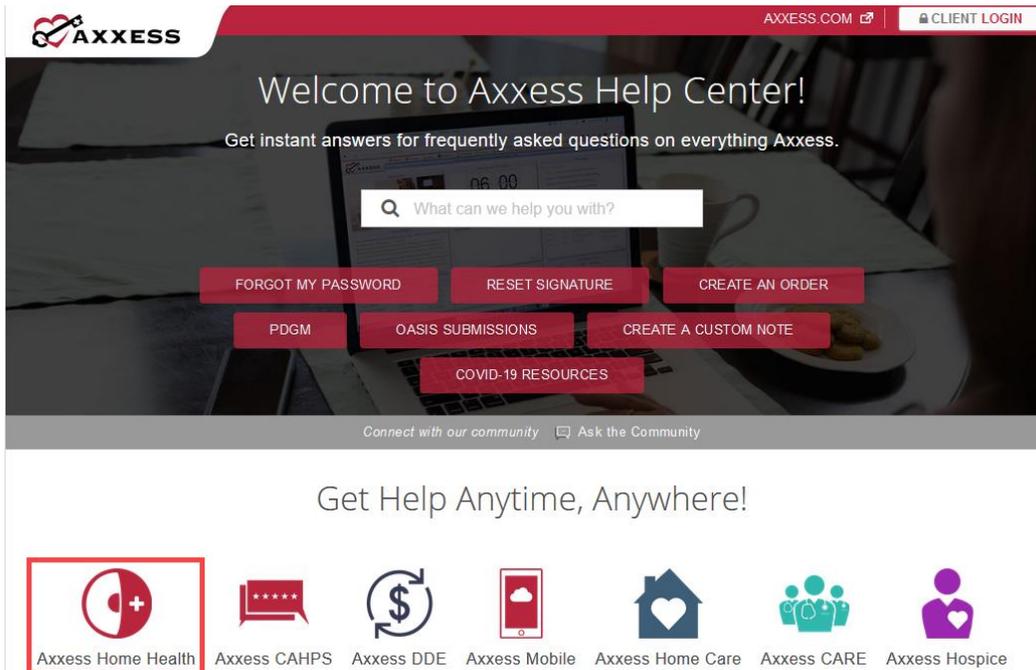
Once a new episode has been created, or if there is more than one episode for a patient, they will display at the top of the calendar. Select the specific episode to schedule by selecting the drop-down menu.



The screenshot shows the AXXESS interface for a Home Health Agency. At the top, there are tabs for "Schedule Manager", "Authorizations", and "Post Visits to A:". Below the tabs, there is a patient identifier "AANA, BINI" and a drop-down menu showing "1/9/2020 - 3/8/2020". To the right of the drop-down menu is an "Actions" button. Below the patient information, there are two calendar views. The first is a small calendar for the current month, and the second is a larger calendar for February 2020. The February 2020 calendar shows dates from 1 to 8, with the 3rd and 6th highlighted in blue.

## HELP CENTER

A great resource available any time, any day is our Help Center. Get answers to frequently asked questions and watch tutorial videos on all our Axxess products. Our Help Center can be accessed by going to *Help/Support & Training/Help Center* or <https://www.axxess.com/help/>

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# Welcome to Axxess Help Center!

Get instant answers for frequently asked questions on everything Axxess.

What can we help you with?

FORGOT MY PASSWORD    RESET SIGNATURE    CREATE AN ORDER

PDGM    OASIS SUBMISSIONS    CREATE A CUSTOM NOTE

COVID-19 RESOURCES

Connect with our community    Ask the Community

## Get Help Anytime, Anywhere!

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  Axxess CAHPS  
  Axxess DDE  
  Axxess Mobile  
  Axxess Home Care  
  Axxess CARE  
  Axxess Hospice