

HOSPICE ADMINISTRATOR OVERVIEW TRAINING MANUAL

November 2020

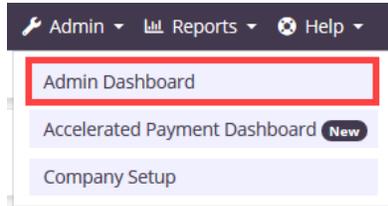
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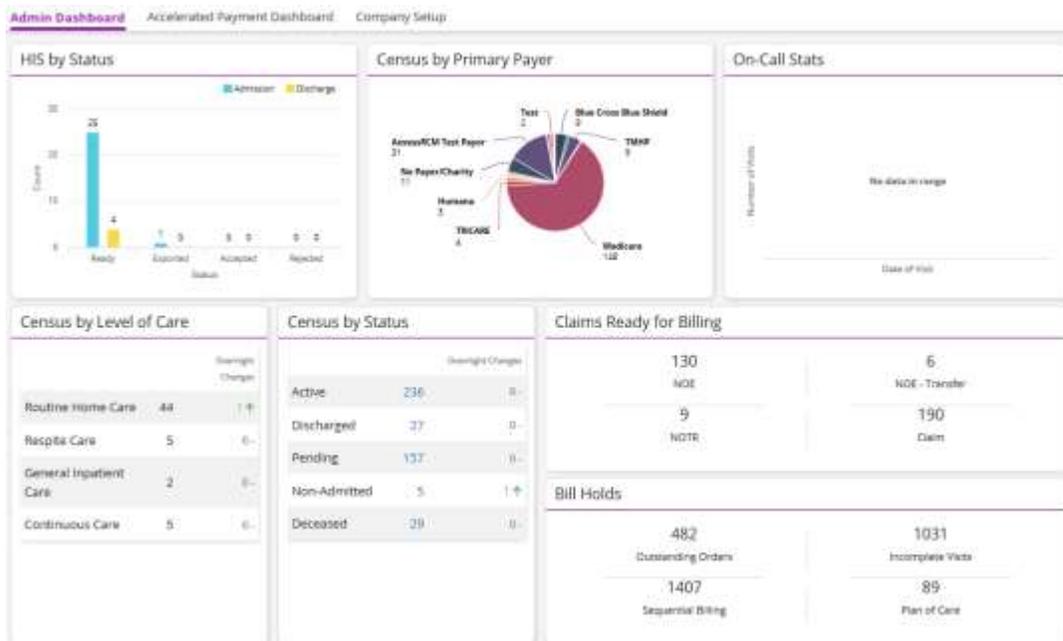
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ADMIN DASHBOARD

Admin/Admin Dashboard



The Administrator Dashboard consists of seven different tiles:



HIS by Status - Bar graph view of HIS differentiated by the number of Admission and Discharge in Ready, Exported, Accepted and Rejected status.

Census by Primary Payer - Pie graph view of how payers are split up between patients.

On-Call Stats - Bar graph view of number of visits that were made per day for the last seven days.

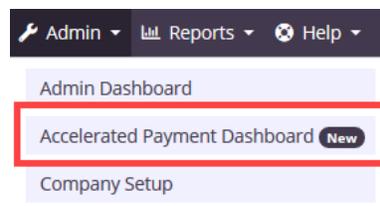
Census by Level of Care - Shows the number of patients by Routine, Continuous, General Inpatient and Respite and the recent changes of each level.

Census by Status - Shows the number of patients by Referrals, Admission, Active, Discharge and Deceased.

Claims Ready for Billing - Shows the number of claims by NOE, NOE-Transfer, NOTR and Claims that are ready for submission.

Bill Holds - Shows the number of bills being held by Outstanding Orders, Incomplete Visits, Sequential Billing and Plan of Care.

ACCELERATED PAYMENT DASHBOARD



The Accelerated Payment Dashboard in Axxess Hospice provides forms, resources and information to help organizations apply for accelerated payment. To access the Accelerated Payment Dashboard, users must have permission to view company setup information.

Branch: United States												
Forms and Resources CMS Accelerated Payment Fact Sheet	Revenue - Past 3 Months View Report <div style="text-align: center; font-size: 24px; font-weight: bold;">\$0.00</div> 07/10/2020 - 10/08/2020	Pre-Application Recommendations Review: COVID-19 Accelerated/Advance Payment Request										
Eligibility Criteria To qualify for advanced/accelerated payments the provider/supplier must: <ol style="list-style-type: none"> 1. Have billed Medicare for claims within 180 days immediately prior to the date of signature on the provider's/supplier's request form 2. Not be in bankruptcy 3. Not be under active medical review or program integrity investigation 4. Not have any outstanding delinquent Medicare over-payments 	Application Resources To apply please fill out the Accelerated Payment Application . The following information can be used to complete the Accelerated Payment form: <table border="0" style="margin-top: 10px;"> <tr> <td>National Provider Identifier (NPI):</td> <td>1234567899</td> </tr> <tr> <td>Provider Number (PTAN):</td> <td>227662</td> </tr> </table>	National Provider Identifier (NPI):	1234567899	Provider Number (PTAN):	227662	Submitting an Application While electronic submission will significantly reduce the processing time, requests can be submitted to the appropriate MAC by fax, email, or mail <table border="0" style="margin-top: 10px;"> <tr> <td>Email:</td> <td>JM.FINANCIALRELIEF@palmettogba.com</td> </tr> <tr> <td>Fax:</td> <td>(803) 462-2574</td> </tr> <tr> <td>Mail:</td> <td>Provider Reimbursement (AG-330) 2300 Springdale Drive, Bldg One Camden, SC 29020</td> </tr> </table>	Email:	JM.FINANCIALRELIEF@palmettogba.com	Fax:	(803) 462-2574	Mail:	Provider Reimbursement (AG-330) 2300 Springdale Drive, Bldg One Camden, SC 29020
National Provider Identifier (NPI):	1234567899											
Provider Number (PTAN):	227662											
Email:	JM.FINANCIALRELIEF@palmettogba.com											
Fax:	(803) 462-2574											
Mail:	Provider Reimbursement (AG-330) 2300 Springdale Drive, Bldg One Camden, SC 29020											

The Accelerated Payment Dashboard provides useful information about accelerated payments that are available under the CARES Act. Information on the dashboard is uniquely customized to each organization based on the

assigned Medicare Administrative Contractor (MAC) and organization-specific data.

On the Accelerated Payment Dashboard, select a branch to apply for accelerated payment. The forms, revenue, and resource sections will automatically update based on the branch's data and Medicare intermediary. The dashboard is broken down into the following sections:

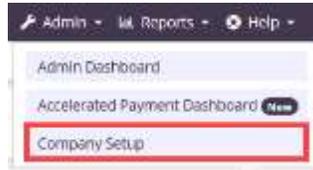
- Forms and Resources - This section provides all forms and resources distributed by CMS related to accelerated payments.
- Revenue - Past 3 Months - This section collects payment postings for the selected location over the past 90 days. This data provides a reference point for deciding how much the organization may want to request in the accelerated payments application.

NOTE: CMS has stated that an organization can request up to 100% of its estimated revenue for the next 90 days. For some organizations, using historical payment information may not be the most accurate way to determine future predicted revenue. This section should only be used as a guideline and is only as accurate as the payment details posted in Axxess Home Health.

- Pre-Application Recommendations - This section provides useful tips and guidance published by the intermediary assigned to the selected location.
- Eligibility Criteria - This section provides all current eligibility guidelines for the provider's eligibility as published by CMS.
- Application Resources - This section provides application forms that correspond to the organization's assigned MAC and includes the organization's National Provider Identifier (NPI) and Provider Number (PTAN), which are required when submitting the application.
- Submitting an Application - This section provides application submission methods accepted by the organization's MAC. Once an application has been completed, users can submit the application using any of the submission methods listed. To submit an application by email, users can click the email address linked in this section to generate an email for application submission.

COMPANY SETUP

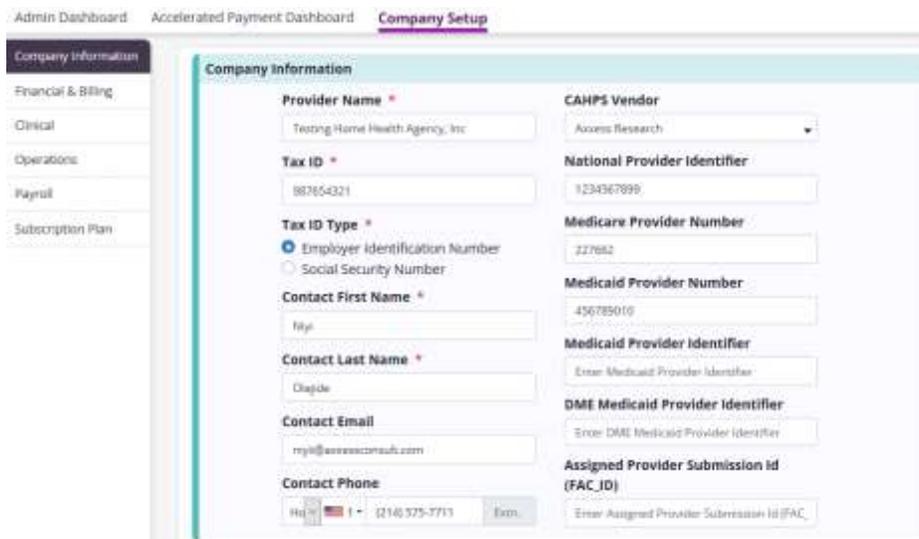
Admin/Company Setup



Company Information is split up into six tabs found on the left side of the window:

1. **Company Information** - Where users enter the organization's information, ID's and Provider Numbers (retrieved outside of Axxess).

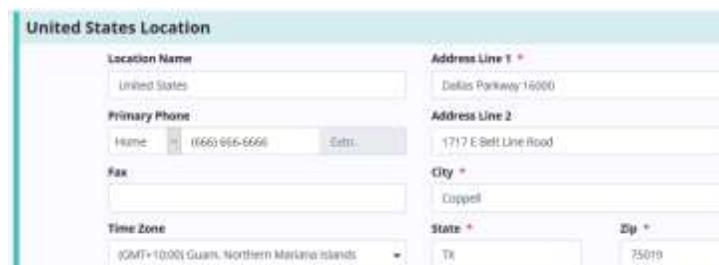
NOTE: Anything with a red asterisk (*) means the information is required to save.



The screenshot shows the 'Company Information' form with the following fields:

- Provider Name ***: Testing Home Health Agency, Inc
- Tax ID ***: 887654321
- Tax ID Type ***: Employer Identification Number, Social Security Number
- Contact First Name ***: Nya
- Contact Last Name ***: Diapide
- Contact Email**: nya@axxess.com.au
- Contact Phone**: (216) 575-7713
- CAHPS Vendor**: Access Research
- National Provider Identifier**: 1234567890
- Medicare Provider Number**: 227682
- Medicaid Provider Number**: 456789010
- Medicaid Provider Identifier**: Enter Medicaid Provider Identifier
- DME Medicaid Provider Identifier**: Enter DME Medicaid Provider Identifier
- Assigned Provider Submission id (FAC_ID)**: Enter Assigned Provider Submission id (FAC_ID)

Organization Location - Enter the organization's Name, Phone & Fax number, Address and Time Zone. Additional branch locations can be added below. Select the **Next** button to continue.



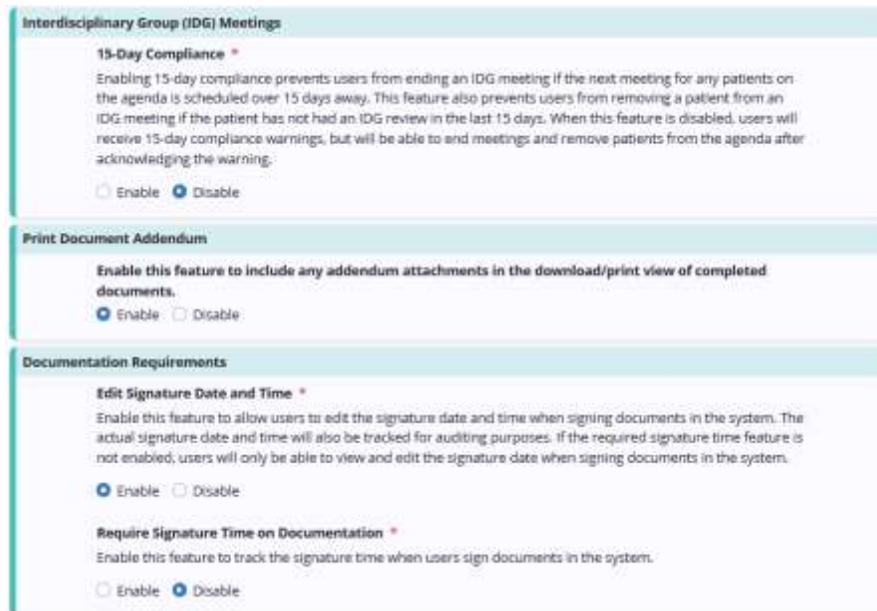
The screenshot shows the 'United States Location' form with the following fields:

- Location Name**: United States
- Primary Phone**: Home (066) 665-6666
- Fax**: [Empty]
- Time Zone**: (GMT+10:00) Guam, Northern Mariana Islands
- Address Line 1 ***: Dallas Parkway 16000
- Address Line 2**: 1717 E Belt Line Road
- City ***: Coppell
- State ***: TX
- Zip ***: 75019

2. **Financial & Billing** - Determine the Date through which books are closed for the organization. Select the **Next** button to continue, **Save** button to keep any changes or **Previous** to see the last page.

The screenshot shows a settings panel titled "Closed Accounting". It includes a "Date through which books are closed:" field with the value "08/31/2020". Below this is a text box stating: "Access will require an electronic signature from authorized personnel when saving a transaction dated on or before the closing date." There is a "Closing Date" field with a calendar icon and the value "08/31/2020". A checkbox labeled "Disable Closing Date" is present and unchecked. A warning message at the bottom reads: "Warning: Disabling this feature will let users edit any records, regardless of closing date."

3. **Clinical** - Decide to Enable or Disable 15-Day Compliance for IDG (Interdisciplinary Group) Meetings. Decide to Enable or Disable the Print Document Addendum. Decide to Enable or Disable the Edit Signature Date and Time and documentation signature time requirement. Select the **Next** button to continue, **Save** button to keep any changes or **Previous** to see the last page.

The screenshot shows three sections of settings for "Interdisciplinary Group (IDG) Meetings". The first section, "15-Day Compliance", has a description and radio buttons for "Enable" and "Disable", with "Disable" selected. The second section, "Print Document Addendum", has a description and radio buttons for "Enable" and "Disable", with "Enable" selected. The third section, "Documentation Requirements", contains two sub-sections: "Edit Signature Date and Time" with "Enable" selected, and "Require Signature Time on Documentation" with "Disable" selected.

4. **Operations** - Choose the seven-day range for the organization's Medicare Week. If no selection is made, the software will default to Sunday - Saturday. An organization's Medicare Week can also be updated to support operational changes that may occur at the

organization. All previous selections and the effective dates can be viewed here. Choose how Social Security Numbers are displayed on patient face sheets.

Medicare Week

Complete the following fields according to your agency's Medicare week. The seven-day range selected as your Medicare week will determine the start and end day for all visit frequencies. Add Medicare Week

Medicare Week	Start Date	End Date	Actions
Sunday-Saturday	06/11/2020	07/05/2020	No Action
Wednesday-Tuesday	05/31/2020	06/05/2020	No Action
Tuesday-Monday	05/25/2020	05/30/2020	No Action

← 1 2 →
4 total results
Show 3 entries

Patient Face Sheets

Social Security Number (SSN) * ⓘ

Select a format for social security numbers to display on patient face sheets. The selected format will apply to all patients entered in the system.

Show Last Four Digits of SSN
 Show Full SSN
 Hide SSN

- Payroll** - Specify company payroll rates based on individual organization practices to ensure accurate payroll cost reporting for activities performed. The Current Payroll Settings section at the top of the tab displays current rates and settings that have been set for the organization. This information is read-only and updates automatically when the company settings are changed. The following information appears in this section:

Effective Dates	Displays effective dates for the company's current payroll settings.
Frequency	Displays the rate at which payroll is run (weekly, biweekly, monthly or semimonthly).
Last Day of Period	Displays the last day of each payroll period
Allowable Reimbursements	Displays which reimbursements the organization will pay.
Mileage Rate/Effective Dates	If enabled, this section displays the mileage reimbursement rate and effective date of the company's set pay rate.
Travel Rate/Effective Dates	If enabled, this section displays the per-hour travel reimbursement rate and effective date of the company's set pay rate.

On-Call Mileage Rate/Effective Dates	If enabled, this section displays the mileage reimbursement rate and effective date of the company's set pay rate.
On-Call Travel Rate/Effective Dates	If enabled, this section displays the per-hour travel reimbursement rate for on-call activity and the effective date of the company's set pay rate.

Current Payroll Settings

Effective Dates 01/01/2020 - Current	Frequency Monthly	Last Day of Period Last Day of the Month	Allowable Reimbursements <input checked="" type="checkbox"/> Mileage <input checked="" type="checkbox"/> Travel <input checked="" type="checkbox"/> On-Call <input checked="" type="checkbox"/> On-Call Mileage <input checked="" type="checkbox"/> On-Call Travel
Mileage Effective Dates 01/01/2020 - Current	Travel Effective Dates 01/01/2020 - Current	On-Call Mileage Effective Dates 01/01/2020 - Current	On-Call Travel Effective Dates <small>Not Applicable</small>
Mileage Rate \$1.00 / mile	Travel Rate \$2.00 / hour	On-Call Mileage Rate \$0.40 / mile	On-Call Travel Rate \$0.00 / hour

Payroll Policy - Select **Add Rate** to enter new company settings, including First Day of Pay Period, Last Day of Pay Period, Payroll Frequency and Allowable Reimbursements. Updating the first day of the pay period will automatically update the end date for any of the company's existing settings. Select the **Add Rate** button to complete.

Add Rate

First Day of Pay Period ⓘ MM/DD/YYYY	Payroll Frequency ⓘ Monthly ▼	Last Day of Pay Period ⓘ Select Day ▼
Allowable Reimbursements ⓘ		
<input type="checkbox"/> Mileage <input type="checkbox"/> Travel Time <input type="checkbox"/> On-Call Mileage <input type="checkbox"/> On-Call Travel Time		
⚠ This update will impact current payroll settings.		
Add Rate		Cancel

To adjust existing payroll settings, select the icon under Actions and update the settings as needed. Select **Save** to save your changes. To remove existing payroll settings, select the icon.

Rates - Comprised of the **Mileage**, **Travel**, **On-Call**, **On-Call Mileage** and **On-Call Travel** rate tabs. This section enables users to enter customized rates and view historical rates for the company. Functionality works the same in each tab by adding a new rate by selecting the **Add Rate** button. To adjust a rate, select the icon under Actions and to remove a rate, select the icon.

Rates

Mileage | Travel | On-Call | On-Call Mileage | On-Call Travel

The information entered below will be used to calculate the mileage rate amount reflected in your company payroll settings. Add Rate

Reimbursement Rate	Start Date	End Date	Actions
Current \$1.00	01/01/2020	Not Applicable	 

1 total results Show 5 entries

Mileage - Add new mileage reimbursement rate and start date. The start date will automatically update the end date for any of the company's existing settings.

Travel - Add new travel reimbursement rate and start date. The start date will automatically update the end date for any of the company's existing settings.

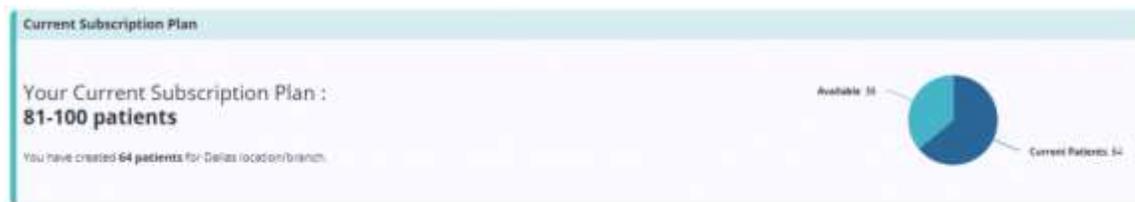
On-Call - When adding a new rate, select the task, payer, branch, rate and effective date. To create the same rate for multiple tasks, payers, or branches, select the desired options from the respective drop-down menus and select **Add Rate**. A row will be added to the rate table for each task, branch and payer specified.

On-Call Mileage - Add new on-call mileage reimbursement rate and start date. The start date will automatically update the end date for any of the company's existing settings.

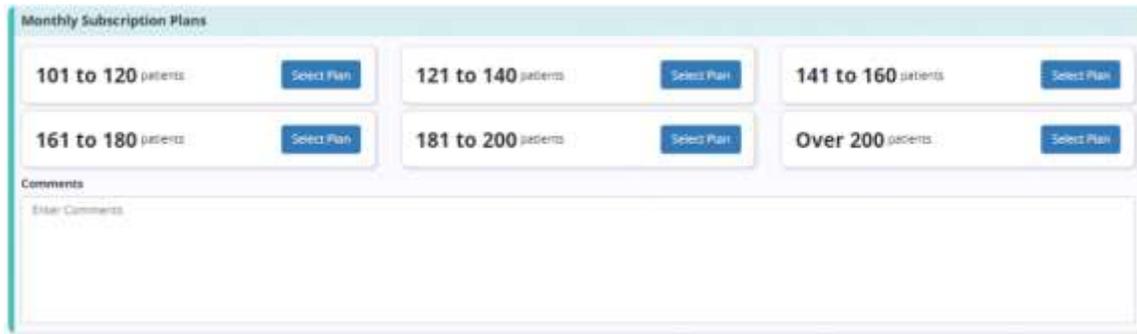
On-Call Travel - Add new on-call travel reimbursement rate and start date. The start date will automatically update the end date for any of the company's existing settings.

- Subscription Plan** - Enables organization leaders to view their subscription plan statuses, request updates and communicate with the Axxess team from within the hospice solution.

The **Current Subscription Plan** section displays your organization's current plan, total number of patients, and how many patients are supported by your current plan.



The **Monthly Subscription Plans** section displays plans that are currently available for your organization. Users can select a new plan and enter any comments in the Comments section. To request a new subscription plan, select **Request** and enter the electronic signature to confirm that the user is authorized to make the request on the organization's behalf.



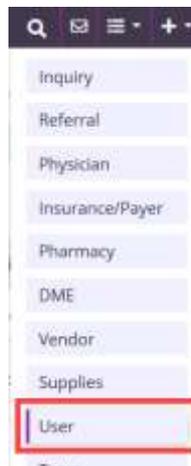
ADD AND LISTS

The top right-hand corner of Axxess Hospice houses the Lists and Add sections.

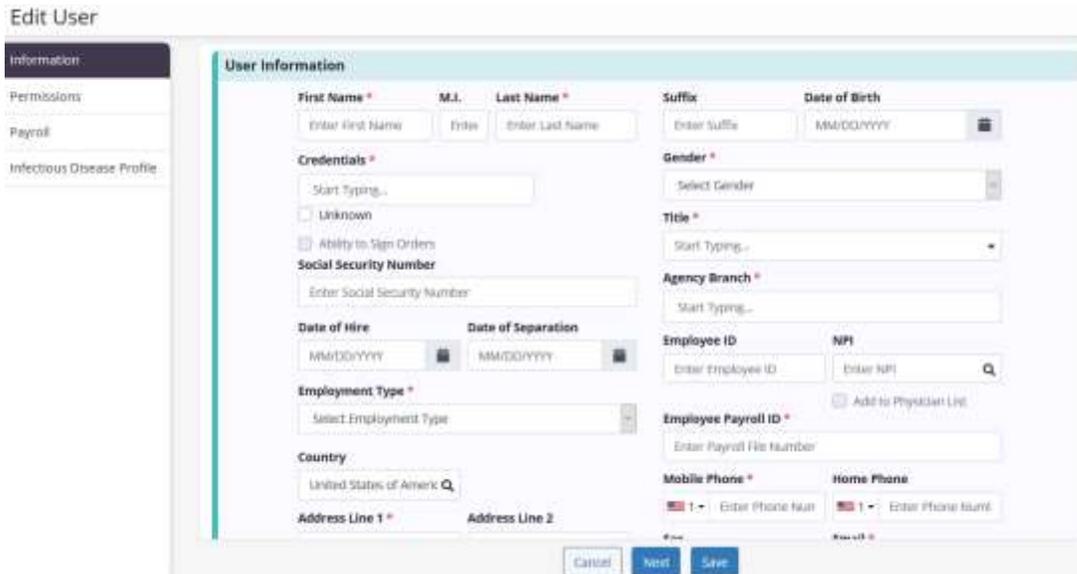
- The List menu is found in the  icon.
- The Add menu is found in the  icon.

ADDING A NEW USER

Add/User



Information - Enter the user's information. All items with an asterisk are required.



The bottom of the page houses System Roles. This allows organizations to limit the times that users can access the software. For example, if the “Allow Weekend Access” box is not checked and a user attempts to log in on a Saturday, the system will not allow entry. Times can also be adjusted for the earliest time a user can login and/or when they are automatically logged out of Axxess Hospice.



Select the **Save** button to leave the section but keep what has been entered so far. Select the **Next** button to move on to the next new user tab.

Permissions - Permissions are important in the software because they determine what a user can do in the Administration, Clinical, Billing and Reports categories.

To save time, select the check box in the top left corner of each category that will check every single permission box in that section. Selecting the checkbox to the left of each permission group will allow all permissions for that selection. Checking the box at the top of each column will add that permission type for each item in a section. Permissions can be individually selected with the following functions:

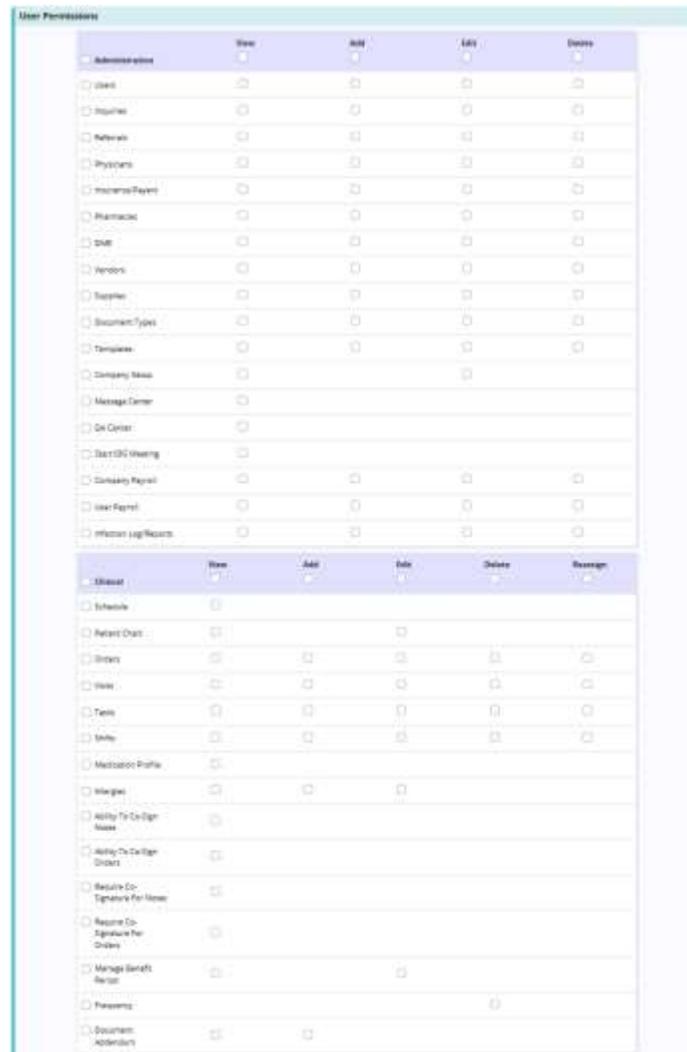
Administration - Users can View, Add, Edit and/or Delete.

Clinical - Users can View, Add, Edit, Delete and/or Reassign.

Billing - Users can View, Add, Edit and/or E-Submission.

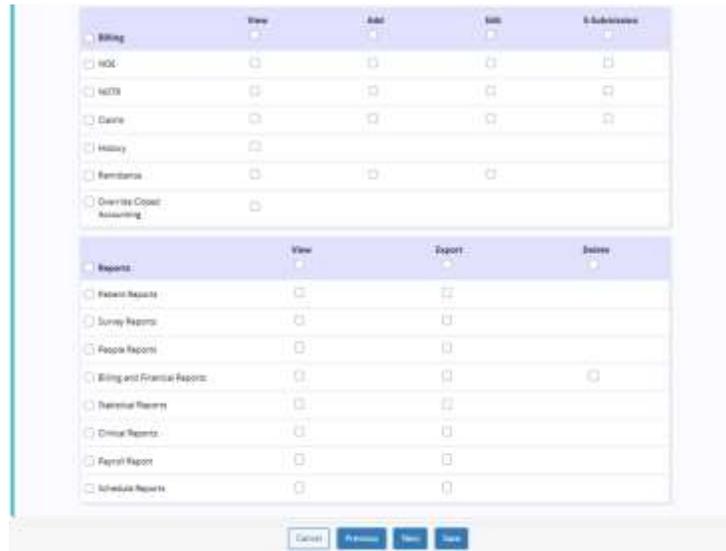
Reports - Users can View, Export and/or Delete.

Select the **Save** button to leave the section but keep what has been entered so far. Select the **Next** button to move on to the next new user tab or Previous to see the last screen.



Administration	View	Add	Edit	Delete
<input type="checkbox"/> Users	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Roles	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Patients	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Physicians	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Insurance/Payers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Pharmacies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> ID#s	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Vendors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Suppliers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Document Types	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Templates	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Company News	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Message Center	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> DR Center	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> User ID# Missing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Consistency Payment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> User Payment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Inpatient Log Records	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Clinical	View	Add	Edit	Delete	Reassign
<input type="checkbox"/> Schedule	<input type="checkbox"/>				
<input type="checkbox"/> Patient Chart	<input type="checkbox"/>				
<input type="checkbox"/> Orders	<input type="checkbox"/>				
<input type="checkbox"/> Notes	<input type="checkbox"/>				
<input type="checkbox"/> Tests	<input type="checkbox"/>				
<input type="checkbox"/> Alerts	<input type="checkbox"/>				
<input type="checkbox"/> Medication Profile	<input type="checkbox"/>				
<input type="checkbox"/> Messages	<input type="checkbox"/>				
<input type="checkbox"/> Ability To Create New	<input type="checkbox"/>				
<input type="checkbox"/> Ability To Create Orders	<input type="checkbox"/>				
<input type="checkbox"/> Require Co-Signature Per User	<input type="checkbox"/>				
<input type="checkbox"/> Require Co-Signature Per Orders	<input type="checkbox"/>				
<input type="checkbox"/> Manage Benefit Ratio	<input type="checkbox"/>				
<input type="checkbox"/> Resending	<input type="checkbox"/>				
<input type="checkbox"/> Document Addendum	<input type="checkbox"/>				



Payroll - Specify user payroll rates based on individual organization practices to ensure accurate payroll cost reporting for activities performed. The Current Payroll Settings section at the top of the tab displays current rates and settings that have been set for the user. This information is read-only and updates automatically when the user's settings are changed. The following information appears in this section:

Effective Dates	Displays effective dates for the user's current payroll settings.
Pay Type	Displays the type of pay the user receives (salary, per hour or per visit).
Pay Rate	Displays the user's base pay rate (based on the user's pay type).
Allowable Reimbursements	Displays which reimbursements the user will receive.
Mileage Rate/Effective Dates	If enabled, this section displays the mileage reimbursement rate and effective date of the user's set pay rate.
Travel Rate/Effective Dates	If enabled, this section displays the per-hour travel reimbursement rate and effective date of the user's set pay rate.
On-Call Mileage Rate/Effective Dates	If enabled, this section displays the mileage reimbursement rate and effective date of the user's set pay rate.

On-Call Travel Rate/Effective Dates	If enabled, this section displays the per-hour travel reimbursement rate for on-call activity and the effective date of the user's set pay rate.
-------------------------------------	--

Current Payroll Settings

Effective Dates <small>Not Applicable</small>	Pay Type <small>Not Applicable</small>	Pay Rate \$0.00	Allowable Reimbursements <input checked="" type="checkbox"/> Mileage <input checked="" type="checkbox"/> Travel <input checked="" type="checkbox"/> Surcharge <input checked="" type="checkbox"/> On-Call <input checked="" type="checkbox"/> On-Call Mileage <input checked="" type="checkbox"/> On-Call Travel
Mileage Effective Dates <small>Not Applicable</small>	Travel Effective Dates <small>Not Applicable</small>	On-Call Mileage Effective Dates <small>Not Applicable</small>	On-Call Travel Effective Dates <small>Not Applicable</small>
Mileage Rate \$0.00 / mile	Travel Rate \$0.00 / hour	On-Call Mileage Rate \$0.00 / mile	On-Call Travel Rate \$0.00 / hour

Pay Type - Select **Add Rate** to enter new user settings, including Pay Type, Pay Rate, Allowable Reimbursements and/or Start Date. Updating the user's start date will automatically update the end date for any of the user's existing settings. Select the **Add Rate** button to complete.

Add Rate

Pay Type * <input type="text" value="Select Play Type"/>	Start Date * <input type="text" value="MM/DD/YYYY"/>
Allowable Reimbursements	
<input type="checkbox"/> Mileage <input type="checkbox"/> Travel Time <input type="checkbox"/> Surcharge <input type="checkbox"/> On-Call <input type="checkbox"/> On-Call Mileage <input type="checkbox"/> On-Call Travel Time	
<input type="button" value="Add Rate"/> <input type="button" value="Cancel"/>	

To adjust existing payroll settings, select the  icon under Actions and update the settings as needed. Select **Save** to save your changes. To remove existing payroll settings, select the  icon.

Rates - Comprised of the **Pay Rates**, **Mileage**, **Travel**, **On-Call**, **On-Call Mileage** and **On-Call Travel** rate tabs. This section enables users to enter customized rates and view historical rates for the company. This functionality works the same in each tab by adding a new rate by selecting the **Add Rate** button. To adjust a rate, select the  icon under Actions and to remove a rate, select the  icon.

Rates

Pay Rates | Mileage | Travel | On-Call | On-Call Mileage | On-Call Travel

Select user pay rates enabled user to generate reports with the data needed to accurately process payroll and monitor operational processes. Rates can be set for individual tasks, payer and branches, or can be set to apply to multiple tasks, payers and branches. These rates will be used to calculate reimbursement for this user.

[Copy Existing Rates](#) [Add Rate](#)

Task	Rate	Rate Type	Effective Date	Payer	Branch	Actions
Volunteer Comprehensive Assessment	\$40.00	Hourly	01/01/2020	Aetna	Deloitte	Edit Delete
Homecare Physician Take-to-Home Visit	\$60.00	Hourly	01/01/2020	Aetna	Deloitte	Edit Delete
Initial Assessment	\$200.00	Hourly	12/01/2019	Aetna	Deloitte	Edit Delete
Spiritual Counselor PRN Visit	\$200.00	Hourly	12/01/2019	Aetna	Deloitte	Edit Delete
PT Assessment	\$40.00	Hourly	01/01/2020	Aetna	Deloitte	Edit Delete
Oral Evaluation LCD Visit	\$90.00	Hourly	01/01/2020	Aetna	Deloitte	Edit Delete
Skilled Nurse PRN Visit	\$60.00	Hourly	01/01/2020	Aetna	Deloitte	Edit Delete
Attending Physician Certification of Terminal Illness	\$200.00	Hourly	12/01/2019	Aetna	Deloitte	Edit Delete
Initial Plan of Care	\$40.00	Hourly	01/01/2020	Aetna	Deloitte	Edit Delete
Spiritual Counselor Comprehensive Assessment	\$40.00	Hourly	01/01/2020	Aetna	Deloitte	Edit Delete

1 2 3 4 5 6 7 8 9 10 1433 total results [Show 10 entries](#)

Pay Rates - Pay rates can be added for per hour and per visit employees. To add a new rate, select **Add Rate** and select the task, payer, branch, rate and effective date. To create the same rate for multiple tasks, payers, or branches, select the desired options from the respective drop-down menus and select **Add Rate**. A row will be added to the rate table for each task, branch and payer specified.

Copy Pay Rates from:

[Apply](#) [Cancel](#)

To copy rates from an existing user, select **Copy Existing Rates** and select the user whose rates you want to copy. Then select the **Apply** button to save.

Mileage - Add new mileage reimbursement rate and start date. The start date will automatically update the end date for any of the user's existing settings.

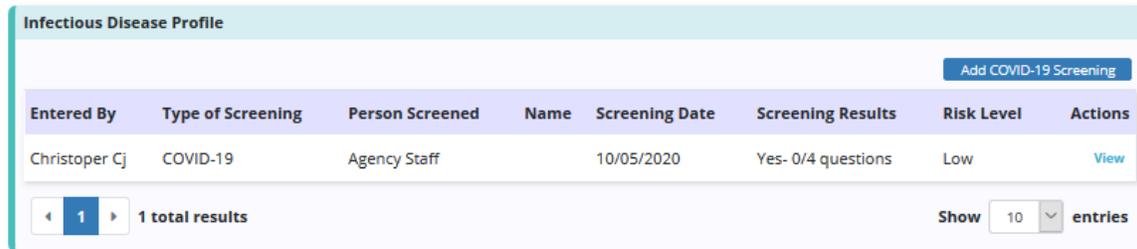
Travel - Add new travel reimbursement rate and start date. The start date will automatically update the end date for any of the user's existing settings.

On-Call - When adding a new rate, select the task, payer, branch, rate and effective date. To create the same rate for multiple tasks, payers, or branches, select the desired options from the respective drop-down menus and select **Add Rate**. A row will be added to the rate table for each task, branch and payer specified. To copy rates from an existing user, select **Copy Existing Rates** and select the user whose rates you want to copy. Then select the **Apply** button to save.

On-Call Mileage - Add new on-call mileage reimbursement rate and start date. The start date will automatically update the end date for any of the company's existing settings.

On-Call Travel - Add new on-call travel reimbursement rate and start date. The start date will automatically update the end date for any of the company's existing settings.

Infectious Disease Profile - This section is where Infectious Disease Screenings are found.



The screenshot shows the 'Infectious Disease Profile' section. At the top right, there is a blue button labeled 'Add COVID-19 Screening'. Below this is a table with the following columns: Entered By, Type of Screening, Person Screened, Name, Screening Date, Screening Results, Risk Level, and Actions. The table contains one row of data: Christopher Cj, COVID-19, Agency Staff, (Name field is empty), 10/05/2020, Yes- 0/4 questions, Low, and a 'View' link. Below the table, there is a pagination control showing '1' in a blue box, '1 total results', and a 'Show 10 entries' dropdown menu.

Entered By	Type of Screening	Person Screened	Name	Screening Date	Screening Results	Risk Level	Actions
Christopher Cj	COVID-19	Agency Staff		10/05/2020	Yes- 0/4 questions	Low	View

Select the **Add COVID-19 Screening** button to add a screening. Complete the screening questions and select a risk level. Select the **Sign Screening** button once complete or select **Sign & Add Another** button to add additional screenings. There is no limit on how many screenings can be completed for each user to ensure alignment with organization infection control policies and procedures.

COVID-19 Screening

Complete the following screening questions and select a risk level for the patient and/or household members based on agency policies and procedures.

Refused Screening

No Yes

 Have you traveled internationally within the last 14 days to a country with sustained community transmission?

No Yes

 Do you have signs or symptoms of COVID-19, such as fever, chills, cough, shortness of breath, difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion, runny nose, nausea, vomiting or diarrhea?

No Yes

No Yes

 In the last 14 days, have you had contact with someone diagnosed with COVID-19, under investigation for COVID-19, or with a respiratory illness?

No Yes

 Do you live in an area where community-based spread of COVID-19 is occurring?

No Yes

Risk Level:

Low High

Screening Acknowledgement: I have screened the above-selected person prior to providing care. Agency policies and procedures were followed to prevent the spread of COVID-19 based on the results of this screening or refusal to complete the screening.

EDITING A USER

People/People Center/Edit

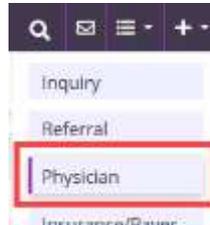


The **People Center** will display a list of users. By default, this will show Active users. Use the filters or the Search feature in the top left to filter for specific employees or scroll down through the list. Selecting the name of the user will show detailed information of that user including their Photo (user can change), Name, Gender, Address, Phone Number, Email Address, Title, Credentials, Team and Date of Hire.

To edit a user, select the **Edit** hyperlink in the top right of the user profile. The same Information, Permissions, Payroll and Screenings tabs while adding a new user will be available to edit. The other buttons include **Send Message**, which is a quick link to send that user a message or **Deactivate User** which will inactivate the user.

ADDING A PHYSICIAN

Add/Physician

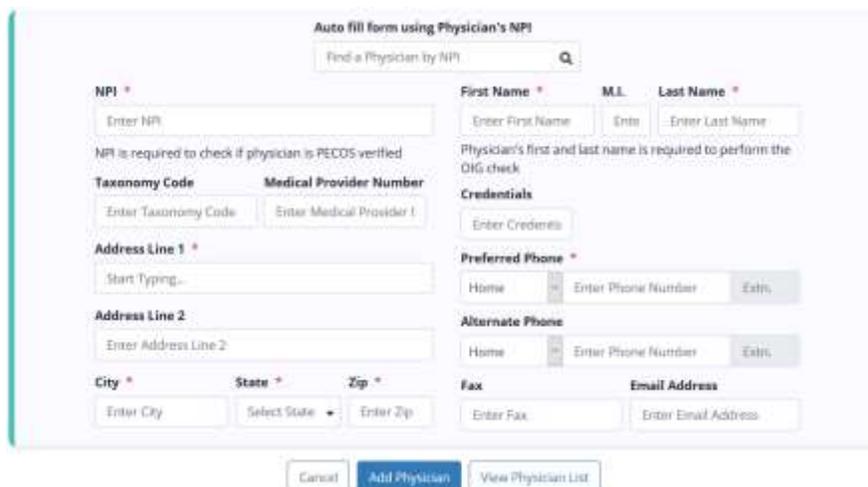


The quickest way to enter a physician is by entering their “NPI number.” As the number is typed, physicians and their corresponding NPI numbers will appear below for selection.



After selecting the physician, the Physician Information and Address will auto-fill based on the information that is in the NPI registry. This can still be edited. Everything with a red asterisk is required.

NOTE: If the NPI number is unknown, use the following website:
<https://npiregistry.cms.hhs.gov/registry/>


 A screenshot of the 'Auto fill form using Physician's NPI' form. At the top, there is a search box labeled 'Find a Physician by NPI'. Below this are several input fields:

- NPI ***: Enter NPI
- Taxonomy Code**: Enter Taxonomy Code
- Medical Provider Number**: Enter Medical Provider I
- Address Line 1 ***: Start Typing...
- Address Line 2**: Enter Address Line 2
- City ***: Enter City
- State ***: Select State
- Zip ***: Enter Zip
- First Name ***: Enter First Name
- M.I.**: Enter
- Last Name ***: Enter Last Name
- Credentials**: Enter Credentials
- Preferred Phone ***: Home (dropdown), Enter Phone Number, Exts.
- Alternate Phone**: Home (dropdown), Enter Phone Number, Exts.
- Fax**: Enter Fax
- Email Address**: Enter Email Address

 At the bottom of the form are three buttons: 'Cancel', 'Add Physician', and 'View Physician List'.

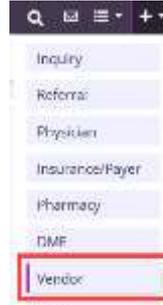
If the physician is already listed in the NPI registry, the system will automatically do a PECOS Verification and OIG check. A green check mark indicates they are PECOS-verified, a red “X” indicates they are not.

NPI * 1396701900 <input type="checkbox"/> The NPI 1396701900 is PECOS Verified.	First Name * CHRISTOPHI <input type="checkbox"/> CHRISTOPHER PIERSON is NOT in the exclusion list.	MI <input type="checkbox"/>	Last Name * PIERSON
Taxonomy Code	Medical Provider		

Once completed, select the **Add Physician** button at the bottom. Also select the **View Physician List** button to view all previous entered physicians.

ADDING A NEW VENDOR

Add/Vendor



A vendor profile can be added for any contracted or non-contracted partner for the organization. Adding a vendor has two tabs; **Vendor Details** and **Room & Board**. Enter the Vendor Information and select the appropriate Vendor Type. Anything with a red asterisk (*) means the information is required to save.

Vendor Information

Vendor Name * <input type="text" value="Enter Vendor Name"/>		Address Line 1 * <input type="text" value="Start Typing..."/>	
Vendor Type * <input type="text" value="Select Vendor type"/>	NPI * <input checked="" type="checkbox"/> Not Applicable <input type="text" value="Enter NPI"/>	Address Line 2 <input type="text" value="Enter Address Line 2"/>	
Medicare Contract Number <input type="text" value="Enter Medicare Contract Numr"/>	Medicaid Contract Number <input type="text" value="Enter Medicaid Contract Numbe"/>	City * <input type="text" value="Enter City"/>	State * <input type="text" value="Select State"/>
Contact First Name * <input type="text" value="Enter Contact First Name"/>	Contact Last Name * <input type="text" value="Enter Contact Last Name"/>	Zip * <input type="text" value="Enter Zip"/>	County <input type="text" value="Enter County"/>
Fax <input type="text" value="Enter Fax"/>	Email <input type="text" value="Enter Email"/>	Comments <div style="border: 1px solid #ccc; height: 50px;"></div>	
Primary Phone Mobile <input type="text" value="Enter Phone Number"/> <input type="text" value="Enter Phone Number"/> <input type="text" value="Enter Phone Number"/> <input type="checkbox"/> After Hours		Contract <input type="button" value="Yes"/> <input type="button" value="No"/>	

[Add New Contact](#)

When finished, select the **Save** button at the bottom or select the **Next** button to move on to the Room & Board tab. Resource Utilization Group (RUG) rates can only be added if Skilled Nursing Facility (SNF) or Long-Term Nursing Facility (NF) was chosen from the Vendor Type drop-down menu. Select the **Add RUG Rate** button.

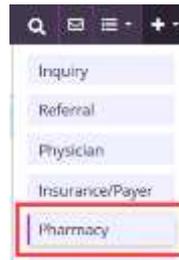


RUG Level	Rate	Effective Date	Actions
Enter RUG Level	Enter Amount	MM/DD/YYYY	Save Cancel

Enter the RUG level, rate and effective date, and select the green **Save** hyperlink on the corresponding row. Once all necessary information has been added to the vendor setup, select the **Save** button at the bottom of the screen to return to the Vendors list.

ADDING A NEW PHARMACY

Add/Pharmacy

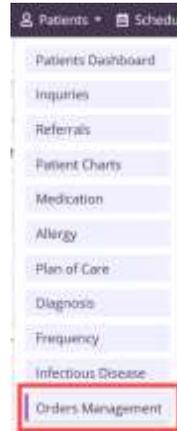


Enter the Pharmacy Name, Address and all other information available. When finished, select the **Add Pharmacy** button at the bottom. Also select the **View Pharmacy List** button to view all previous entered pharmacies.



ORDERS MANAGEMENT

Patients/Orders Management



Use the search bar to find a specific order. Filtering is the same for both pages. Search by Patient Name, Physician, Type, Order Date, Age, Branch or Team.

Orders are split into three tabs:

1. **To Be Sent** - This section shows orders ready to be sent for signature. Orders are displayed by Age of Order, Patient, Team, Physician, Type, Order Date, Date Approved and Order Preview.

To Be Sent									
Pending Signature									
Completed Orders									
<input type="text" value="Search by Patient Name"/> <input type="text" value="Search by Physician"/> <input type="text" value="Type to Filter Type..."/> <input type="text" value="Order Date"/> <input type="text" value="Age: All"/> <input type="text" value="Branch: All"/> <input type="text" value="Team: All"/> <input type="button" value="More Filters"/>									
Age of Order	Patient	Team	Physician	Type	Order Date	Date Approved	Order Preview	Actions	
6 days	Hopkie, Jake	Matt's Testing Team	Matt Abbott	Physician Order	10/01/2020	10/02/2020		Mark as Sent	
8 days	Hopkie, Jake	Matt's Testing Team	Matt Abbott	Physician Order	09/29/2020	10/02/2020		Mark as Sent	
15 days	Access, Patient Two	Avenger	MARIA HANSBERRY	Physician Order	09/22/2020	10/02/2020		Mark as Sent	
15 days	Beicher, Linda	Access Team	MARIA HANSBERRY	Physician Order	09/22/2020	10/02/2020		Mark as Sent	
34 days	Testing, POC	Matt's Testing Team	OWAIS LODHI	Physician Order	09/03/2020	09/03/2020		Mark as Sent	
34 days	Kapitapigan, Ragandiano	Access Team	Ralph Doolittle	Physician Order	09/03/2020	09/04/2020		Mark as Sent	
34 days	Bacon, Chris	Colour	MATTHEW HOERTH	Physician Order	09/03/2020	09/03/2020		Mark as Sent	
47 days	Dunlap, Sherril	Access Team	TIFFANY JACKSON	Physician Order	08/21/2020	08/21/2020		Mark as Sent	
55 days	Lau, Michelle	Access Team	Ralph Doolittle	Initial Plan of Care	08/13/2020			Mark as Sent	
55 days	Lau, Michelle	Access Team	Ralph Doolittle	Physician Order	08/13/2020	08/13/2020		Mark as Sent	

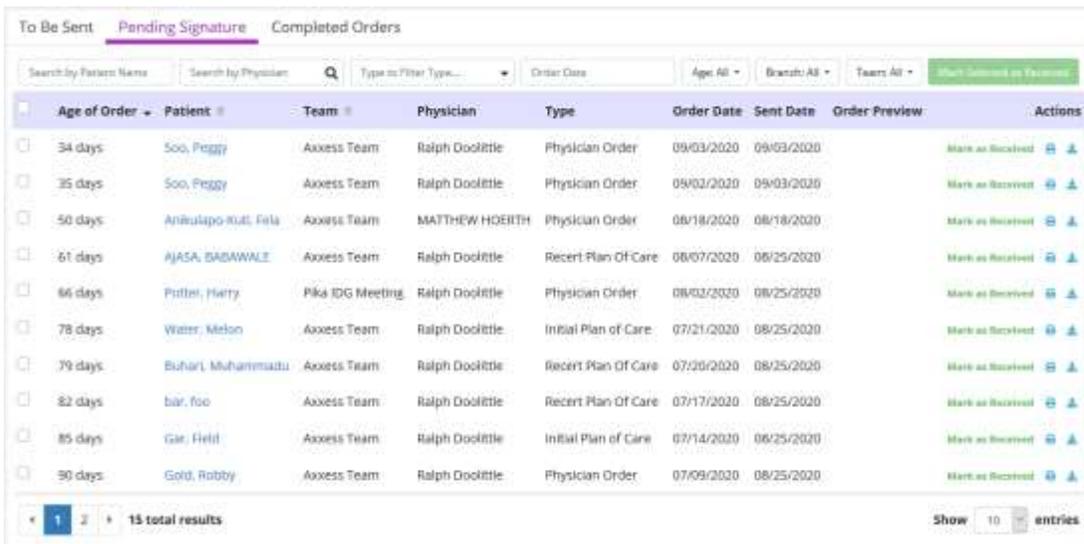
Select the Patient hyperlink to go straight to the Patient Chart. Print orders individually by selecting the  icon under the Action column. Download orders by selecting the  icon.

Mark individual orders as sent by selecting the green **Mark as Sent** hyperlink under the actions column or select checkboxes to the left of orders, then select the **Mark Selected as Sent** button at the top right. The number of orders selected will show on the right side of the button. Select the top-left checkbox in the purple header to select all orders.



Age of Order	Patient	Team	Physician	Type	Order Date	Date Approved	Order Preview	Actions
6 days	Hospice, Jake	Matt's Testing Team	Matt Abbott	Physician Order	10/01/2020	10/02/2020	Mark as Sent	 
8 days	Hospice, Jake	Matt's Testing Team	Matt Abbott	Physician Order	09/29/2020	10/02/2020	Mark as Sent	 
15 days	Axxess, Patient Two	Avenger	MARIA HANSBERRY	Physician Order	09/22/2020	10/02/2020	Mark as Sent	 
15 days	Beicher, Linda	Axxess Team	MARIA HANSBERRY	Physician Order	09/22/2020	10/02/2020	Mark as Sent	 
34 days	Testing, POC	Matt's Testing Team	OWAIS LOGHI	Physician Order	09/03/2020	09/03/2020	Mark as Sent	 
34 days	Kapitaplagan, Raganclano	Axxess Team	Ralph Doolittle	Physician Order	09/03/2020	09/04/2020	Mark as Sent	 

2. **Pending Signature** - This section shows orders that have been sent for signature and are expected back. Orders are displayed by Age of Order, Patient, Team, Physician, Type, Order Date, Sent Date and Order Preview.



Age of Order	Patient	Team	Physician	Type	Order Date	Sent Date	Order Preview	Actions
34 days	Soo, Peggy	Axxess Team	Ralph Doolittle	Physician Order	09/03/2020	09/03/2020	Mark as Received	 
35 days	Soo, Peggy	Axxess Team	Ralph Doolittle	Physician Order	09/02/2020	09/03/2020	Mark as Received	 
50 days	Anikulapo-kuti, Fela	Axxess Team	MATTHEW HOEITH	Physician Order	08/18/2020	08/18/2020	Mark as Received	 
61 days	AJASA, BABAWALE	Axxess Team	Ralph Doolittle	Recert Plan Of Care	08/07/2020	08/25/2020	Mark as Received	 
66 days	Potter, Harry	Pika IDG Meeting	Ralph Doolittle	Physician Order	08/02/2020	08/25/2020	Mark as Received	 
78 days	Water, Nelson	Axxess Team	Ralph Doolittle	Initial Plan of Care	07/21/2020	08/25/2020	Mark as Received	 
79 days	Buhari, Muhammadu	Axxess Team	Ralph Doolittle	Recert Plan Of Care	07/20/2020	08/25/2020	Mark as Received	 
82 days	bar, foo	Axxess Team	Ralph Doolittle	Recert Plan Of Care	07/17/2020	08/25/2020	Mark as Received	 
85 days	Gar, Field	Axxess Team	Ralph Doolittle	Initial Plan of Care	07/14/2020	08/25/2020	Mark as Received	 
90 days	Gold, Robby	Axxess Team	Ralph Doolittle	Physician Order	07/09/2020	08/25/2020	Mark as Received	 

Select the Patient hyperlink to go straight to the Patient Chart. Print orders individually by selecting the  icon under the Action column. Download orders by selecting the  icon.

Mark individual orders as received by selecting the green **Mark as Received** hyperlink under the Actions column. The Received Date populates with the current date. Enter the Signed Date then select the **Mark** button.



To mark multiple orders, select checkboxes to the left of orders then select the **Mark Selected as Received** button at the top-right. The number of orders selected will show on the right side of the button. Select the top left checkbox in the purple header to select all orders.



Age of Order	Patient	Team	Physician	Type	Order Date	Sent Date	Order Preview	Actions
34 days	Soo, Peggy	Access Team	Ralph Doolittle	Physician Order	09/03/2020	09/03/2020		Mark as Received
35 days	Soo, Peggy	Access Team	Ralph Doolittle	Physician Order	09/02/2020	09/03/2020		Mark as Received

3. **Completed Orders** - This section shows orders that are signed and received. Orders are displayed by Patient, Team, Physician, Type, Order Date, Sent Date, Signed Date and Received Date.

To Be Sent Pending Signature **Completed Orders**

Search by Patient Name Search by Physician Type to Filter Type... Order Date Branch: All Team: All

Patient	Team	Physician	Type	Order Date	Sent Date	Signed Date	Received Date	Actions
Hospice, Kyle	Matt's Testing Team	MARIA HANSBERRY	Physician Order	04/10/2019	07/29/2019	11/13/2019	11/13/2019	
Sandal, Lavender	Avenger	MARY HAMMACK	Hospice Physician Certification of Terminal Illness	04/26/2019	04/26/2019	04/26/2019	04/26/2019	
Acosta, Sandra	Access Team	MARIA HANSBERRY	Physician Order	04/30/2019	05/03/2019	05/05/2019	05/08/2019	
Acosta, Sandra	Access Team	MARY HAMMACK	Physician Order	04/30/2019	05/08/2019	11/13/2019	11/13/2019	
Alhambra, Patricia	Test Team	MARIA HANSBERRY	Physician Order	05/08/2019	11/13/2019	11/13/2019	11/13/2019	
Cal, Yellow	Test Team	MARIA HANSBERRY	Physician Order	05/09/2019	05/09/2019	05/07/2019	05/07/2019	
Lisbon, Jake	Access Team	MARIA HANSBERRY	Hospice Physician Certification of Terminal Illness	05/17/2019	05/17/2019	01/01/0001	06/25/2019	
Demo, LiRan	Access Team	MARIA HANSBERRY	Physician Order	05/21/2019	05/21/2019	05/21/2019	05/21/2019	
Acosta, Sandra	Access Team	MARIA HANSBERRY	Hospice Physician Certification of Terminal Illness	06/09/2019	07/09/2019	01/01/0001	06/25/2019	
Torres, Cynthia	Access Team	MARIA HANSBERRY	Hospice Physician Certification of Terminal Illness	06/10/2019	06/11/2019	06/10/2019	06/11/2019	

1 2 3 4 5 6 * 51 total results Show 10 entries

Select the Patient hyperlink to go straight to the Patient Chart. Print orders individually by selecting the icon under the Action column. Download orders by selecting the icon.

ADDING AN INSURANCE/PAYER

Add/Insurance_Payer



Insurance/Payer - Enter the Display Name, Payer Type, Bill Type, Taxonomy, Payer Name, Address, Source of Payment, Payer ID and other fields below. Select the **Save** button to leave the section but keep what has been entered so far. Select the **Save** button to keep what has been entered or select the **Next** button to move on to the Billing Information tab.

Insurance/Payer

Insurance/Payer Details

Billing Information

Fee Schedule

Information

Display Name *

Bill Type *

Agency has a contract with this insurance.

Payer Type *

Taxonomy *

Tax ID

Payer Address

Check here if payment source address is required in claim electronic submission.

Payer Name *

Source of Payment *

Phone Number

Fax Number

Country

Payer ID *

Address Line 1 *

Address Line 2

City * **State *** **Zip ***

Billing Information - Indicate whether payer uses Room & Board. If so, choose the Payer Type from the drop-down menu and enter the Procedure Code. Then choose the Room & Board frequency and the Last Day of Billing Cycle. Indicate whether Payer Requires Custom HCPCS for Levels of Care. If payer has automatic recurring claims, then choose frequency.

Room & Board Settings

Room & Board Payer

Payer Requires Itemized Service Lines

Payer Type **Procedure Code ***

Room & Board Claim Frequency

Continuing Claim Frequency

Payer Settings

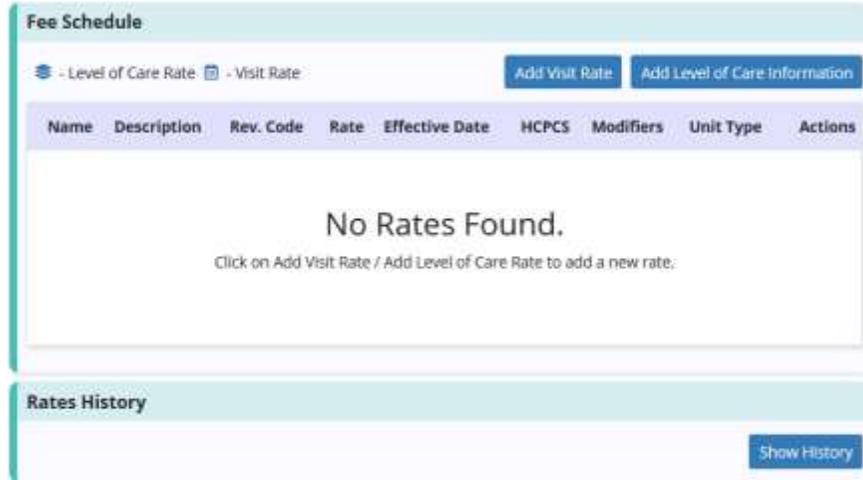
Payer Requires Custom HCPCS for Levels of Care

Automatic Recurring Claims

Hospice Claim Frequency

Continuing Claim Frequency

Fee Schedule - The section to be able to add Level of Care and Visit rates while looking at the history of what has been previously added.



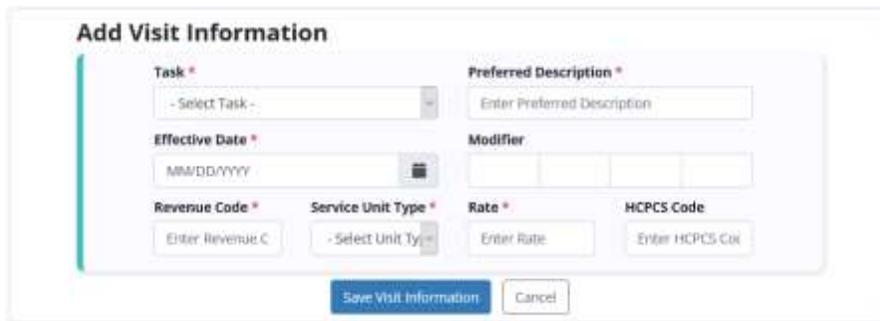
Fee Schedule

- Level of Care Rate - Visit Rate Add Visit Rate Add Level of Care Information

Name	Description	Rev. Code	Rate	Effective Date	HCPCS	Modifiers	Unit Type	Actions
No Rates Found. Click on Add Visit Rate / Add Level of Care Rate to add a new rate.								

Rates History Show History

Select the **Add Visit Rate** button. Choose the Task, Effective Date, Service Unit Type and Enter Preferred Description, Revenue Code & Rate. Select **Save Visit Information** button when finished.



Add Visit Information

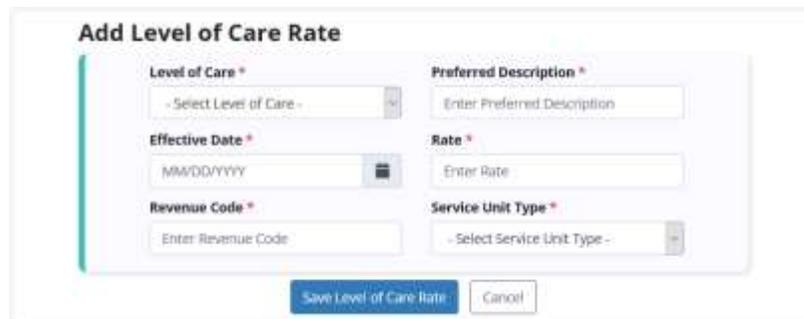
Task * Preferred Description *

Effective Date * Modifier

Revenue Code * Service Unit Type * Rate * HCPCS Code

Save Visit Information Cancel

Select Add Level of Care Rate button. Choose Level of Care, Effective Date, Service Unit Type and Enter Preferred Description, Revenue Code & Rate. Select **Save Level of Care Rate** button when finished.



Add Level of Care Rate

Level of Care * Preferred Description *

Effective Date * Rate *

Revenue Code * Service Unit Type *

Save Level of Care Rate Cancel

EDITING EXISTING INSURANCE/PAYERS

List/Insurance_Payers



Select the **Edit** hyperlink to the far right of the screen under the Action column. This is also where the **Delete** function is found to remove. To search for a payer, start typing any part of the Payer Name, Display Name, Bill Type, Payer Type, Phone or Fax in the white free text space at the top left of the page.

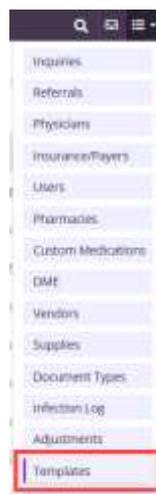
Insurance/Payer

Search for Payers by Name... Add Insurance/Payer

Payer Name	Display Name	Bill Type	Payer Type	Phone	Fax	Actions
Wellpoint Inc	Wellpoint Inc	Institutional (UB-04)	Private Insurance/Medigap		(888) 888-8888	Edit Delete
Unitedhealth Group	Unitedhealth Group	Professional (CMS-1500)	Private managed care	(777) 777-7777	Not Available	Edit Delete
TRICARE	TRICARE	Institutional (UB-04)	Other government (e.g., TRICARE, VA, etc.)	(124) 585-4555	(872) 595-8655	Edit Delete
Tricare	Tricare	Institutional (UB-04)	Other government (e.g., TRICARE, VA, etc.)		Not Available	Edit Delete
Test Bree	test T2	Institutional (UB-04)	Medicare (traditional fee-for-service)	Not Available	Not Available	Edit Delete
Pay me Keshia (no)	Keshia's insurance	Institutional (UB-04)	Medicare (traditional fee-for-service)		Not Available	Edit Delete
Medicare	Default Payer Medicare	Institutional (UB-04)	Medicare (traditional fee-for-service)	Not Available	Not Available	Edit

ADDING TEMPLATES

List/Templates



The window below will appear. Search through the list of current templates by starting to type the Template Name in the search bar in the top left. Select the

1 2 16 total results at the bottom left of the page to navigate if results are more than one page. Select the **Add Template** button to create a new template.

Templates

Search for Templates by Ti Add Template

Template Name	Created By	Created On	Last Modified By	Last Modified On	Actions
Visits for Matt	Matthew Abbott	03/25/2020 03:00 AM	Matthew Abbott	03/25/2020 03:00 AM	Edit Delete
Verbal Order	Jean Santos	02/26/2019 04:58 AM	Jean Santos	02/26/2019 04:58 AM	Edit Delete
Test1	Hendry Gomez	01/12/2019 02:52 AM	Hendry Gomez	01/12/2019 02:52 AM	Edit Delete
Test 1	Hendry Gomez	01/12/2019 02:53 AM	Hendry Gomez	01/12/2019 02:53 AM	Edit Delete
Test	Ananth Subbu	08/18/2018 03:18 AM	Ananth Subbu	08/18/2018 03:18 AM	Edit Delete
Template 365	Hendry Gomez	01/11/2019 04:03 PM	Hendry Gomez	01/11/2019 04:03 PM	Edit Delete

Create a Name for the template. Then write the template inside the Description. Select the **Save Template** button once completed.

Add Template

Template Name *

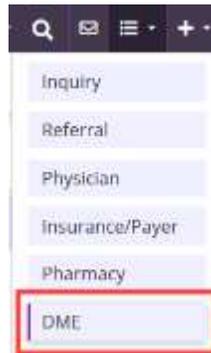
Enter Template Name

Description

NOTE: Templates can be used to save time for writing orders, goals, care plans, physician statements, narratives and other places inside visits.

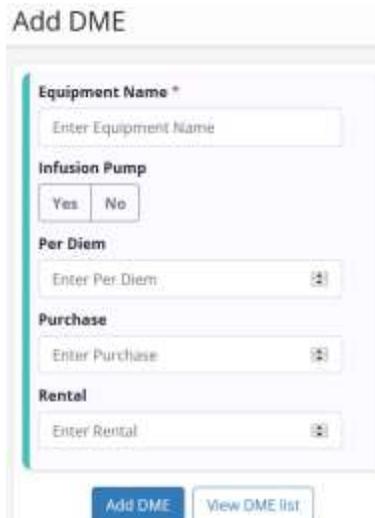
ADDING DME

Add/DME



A new window will appear. Enter the Equipment Name and then decide whether the DME (Durable Medical Equipment) is an Infusion Pump. Then enter the price for Per Diem, Purchase and Rental for the DME. Select the **Add DME** button at the bottom when finished.

Add DME

A screenshot of the 'Add DME' form. The form contains the following fields and controls:

- Equipment Name ***: A text input field with the placeholder text 'Enter Equipment Name'.
- Infusion Pump**: A section with two radio buttons labeled 'Yes' and 'No'.
- Per Diem**: A text input field with the placeholder text 'Enter Per Diem' and a clear button (X).
- Purchase**: A text input field with the placeholder text 'Enter Purchase' and a clear button (X).
- Rental**: A text input field with the placeholder text 'Enter Rental' and a clear button (X).

At the bottom of the form are two buttons: 'Add DME' (in blue) and 'View DME list' (in light blue).

Select the **View DME list** button to see the current list. Search through the list by typing the Equipment Name in the search bar in the top left. **Edit** or **Delete** by selecting the hyperlinks under the Actions column. Users can also add additional DME by selecting the **Add DME** button in the top right.

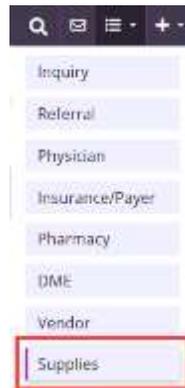
DME

Search for DME... Add DME

Equipment Name	Infusion Pump	Per Diem	Purchase	Rental	Actions
APP Overlay	No	Not Available	Not Available	0.5	Edit Delete
Bathroom Chair	No	Not Available	Not Available	Not Available	Edit Delete
Bed Rail	No	10	10	10	Edit Delete
Bed Rail	Yes	10	10	10	Edit Delete
Bed Rail Left Side	Yes	10	20	10	Edit Delete

ADDING SUPPLIES

Add/Supplies



A new window will appear. Enter the supply Name, indicate whether the supply is formulary and enter Unit Cost. Select the **Add Supply** button at the bottom when finished.

Add Supply

Name *

Enter Name

Formulary Unit Cost

Yes No Enter Unit Cost

Add Supply View Supplies List

Select the **View Supplies List** button to see the current list. Search through the current list by typing the supply name in the search bar in the top left. **Edit** or **Delete** by selecting the hyperlinks under the Actions column. Users can also add additional supplies by selecting the **Add Supply** button in the top right.

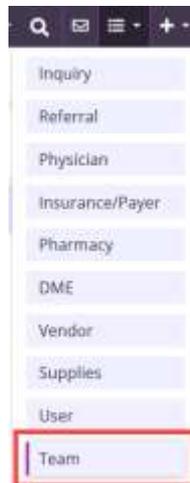
Supplies

Search by Supply Name Add Supply

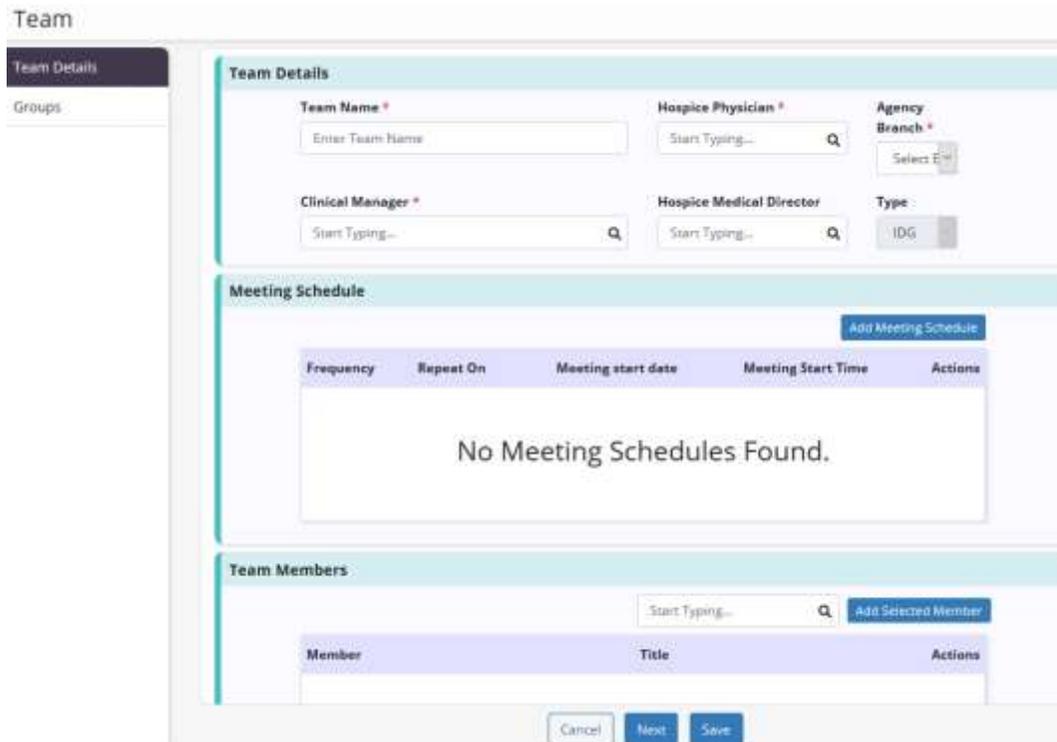
Supply Name	Formulary	Unit Cost	Actions
Aquaphor	No	5.15	Edit Delete
bed sheet	No	2	Edit Delete
body wash, bottle	Yes	1.5	Edit Delete
Chair Cushion	Yes	10	Edit Delete
Cotton Balls	No	0.5	Edit Delete

ADD TEAMS

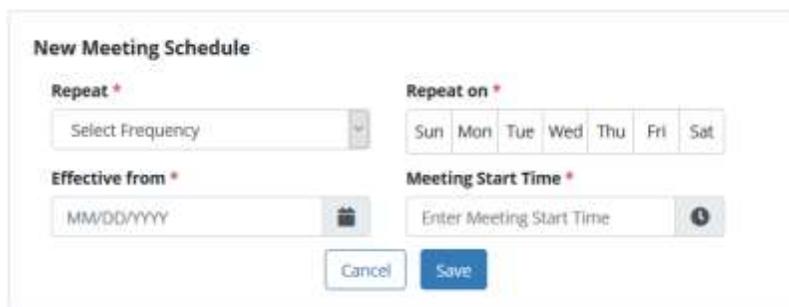
Add/Team



Team Details - Enter Team Details, including a Team Name. Then start typing the name of the Hospice Physician, Clinical Manager, Hospice Medical Director (optional) and choose an Agency Branch. After typing, names will then be available for selection.



Add a Meeting Schedule by selecting the **Add Meeting Schedule** button. Choose the Frequency, which days to Repeat on, an Effective from date and Meeting Start Time. Select the **Save** button once complete.

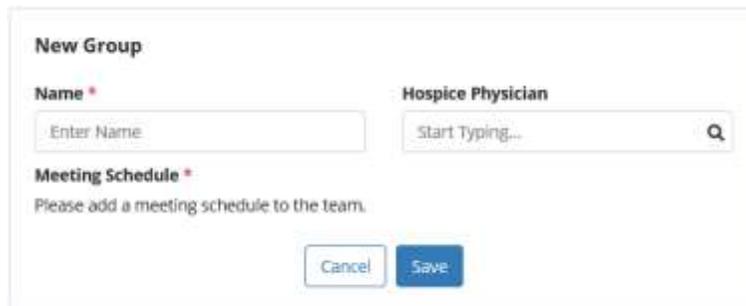


Add Team Members by typing the member name and then select the name. Once found, select **Add Selected Member**. Select the **Save** button to leave the section but keep what has been entered so far. Select the **Next** button to move on to the Groups tab.

Groups - The next tab on the left in the Add Team section is for Groups. Select the **+Add Group** button in the top right to add a group.



Enter a group Name and add an optional Hospice Physician by typing the name then selecting the physician then selecting the **Save** button. After adding groups go back to the Team Details tab to add a Meeting Schedule. After all desired groups have been added, select the **Save** button.



HIS EXPORT

Home/HIS Export Manager



Users can manage the exporting of HIS documents from the **Pending Approval**, **Export Ready** and **Export History** tabs.

Pending Approval Export Ready Export History

Search by Patient Name 07/10/2020 - 10/08/2020 Select HIS Export Type Approve Selected

<input type="checkbox"/>	Days Remaining	Patient	Payer	Type	Admit/Discharge Date	Last Modified On	Actions
<input type="checkbox"/>	● 21 days overdue	Adams, Scarlett	AxxessRCM Test Payor	Admission 4 Inconsistencies	09/03/2020	09/04/2020 02:21 AM	Approve Edit
<input type="checkbox"/>	● 23 days overdue	Again, Cheking	Medicare	Admission 4 Inconsistencies	09/01/2020	10/03/2020 05:52 AM	Approve Edit
<input type="checkbox"/>	● 64 days overdue	Baba, ail	Blue Cross Blue Shield	Discharge 1 Error	07/29/2020	08/08/2020 08:44 AM	Check Errors Edit
<input type="checkbox"/>	● 43 days overdue	Bacon, Chris	AxxessRCM Test Payor	Admission 4 Inconsistencies	08/12/2020	10/06/2020 02:23 AM	Check Errors Edit
<input type="checkbox"/>	● 72 days overdue	Barrhill, Alma	Medicare	Discharge	07/21/2020	07/22/2020 05:36 AM	Approve Edit
<input type="checkbox"/>	● 56 days overdue	Belcher, Bob	AxxessRCM Test Payor	Discharge	08/06/2020	08/08/2020 09:47 AM	Approve Edit
<input type="checkbox"/>	● 56 days overdue	Benson, joel	Medicare	Discharge 1 Error	08/06/2020	08/08/2020 09:37 AM	Check Errors Edit
<input type="checkbox"/>	● 56 days overdue	benson, joel	AxxessRCM Test Payor	Discharge 1 Error	08/06/2020	08/08/2020 10:04 AM	Check Errors Edit
<input type="checkbox"/>	● 56 days overdue	BLAKE, TANYA	AxxessRCM Test Payor	Discharge	08/06/2020	08/08/2020 09:24 AM	Approve Edit

In each tab, search for patients by name in the search bar, change the date range of HIS by selecting the date range bar and/or choose the HIS Export Type.

Search by Patient Name 07/10/2020 - 10/08/2020 Select HIS Export Type

Pending Approval - Where the reviewer will review and make changes to the HIS as needed. Select the **Check Errors** hyperlink to run the HIS scrubber for documents that are pending approval. The reviewer will be able to sign in Z0400 for any changes they make, and be able to approve the HIS and sign in Z0500 that the HIS is completed. After the HIS is approved, it will be moved to the Export Ready tab. Admission HIS will have a countdown for approval of admission date + 14 days, and the Discharge HIS will have a countdown for approval of discharge date + 7 days.

Pending Approval Export Ready Export History

Search by Patient Name 08/28/2020 - 11/26/2020 Select HIS Export Type Approve Selected

<input type="checkbox"/>	Days Remaining	Patient	Payer	Type	Admit/Discharge Date	Last Modified On	Actions
<input type="checkbox"/>	● 15 days overdue	Abao, Chichi	AxxessRCM Test Payor	Admission 7 Inconsistencies	10/28/2020	10/29/2020 09:09 AM	Approve Edit
<input type="checkbox"/>	● 18 days overdue	Abao, Chichi	AxxessRCM Test Payor	Discharge 2 Inconsistencies	11/01/2020	11/20/2020 05:52 PM	Approve Edit
<input type="checkbox"/>	● 70 days overdue	Adams, Scarlett	AxxessRCM Test Payor	Admission 8 Inconsistencies	09/03/2020	09/04/2020 02:21 AM	Approve Edit

The dots next to each line represent timing of when HIS is due. ● ● ●

- **Green** = More than 5 days remaining
- **Orange** = 5 to 1 days remaining
- **Red** = 0 days remaining or overdue

Each line will show the Days Remaining, Patient name (selected will go to patient chart), Payer, Type (selected will go to HIS), Admit/Discharge Date and Last Modified On. The Action column hyperlinks allow users to **Approve** or **Edit** the HIS.

<input type="checkbox"/>	Days Remaining	Patient	Payer	Type	Admit/Discharge Date	Last Modified On	Actions
<input type="checkbox"/>	7 days	Holmes, Mycroft	AxxessRCM Test Payor	Admission	10/01/2020	10/02/2020 03:52 AM	Approve Edit

Approve multiple HIS documents by selecting the check box(es) on the left side of the page and then select the **Approve Selected** button in the top right.

<input type="checkbox"/>	Days Remaining	Patient	Payer	Type	Admit/Discharge Date	Last Modified On	Actions
<input checked="" type="checkbox"/>	6 days overdue	Colour, Blue	Blue Cross Blue Shield	Discharge	09/25/2020	10/01/2020 11:18 AM	Approve Edit
<input checked="" type="checkbox"/>	7 days	Holmes, Mycroft	AxxessRCM Test Payor	Admission	10/01/2020	10/02/2020 03:52 AM	Approve Edit
<input checked="" type="checkbox"/>	7 days	Quinsaas, Maru	AxxessRCM Test Payor	Admission <small>1 Incompleteness</small>	10/01/2020	10/02/2020 03:38 AM	Approve Edit

Export Ready - Where all HIS awaiting export are located. The countdown for submission is 30 days after the admission or discharge date. Users can create export files of individual files or perform a bulk submission. Once the files are downloaded into the appropriate format, they are found in Downloaded Files on the user's computer. From there, submit the HIS per organization guidelines and then return to this page to mark HIS as Submitted.

<input type="checkbox"/>	Days Remaining	Patient	Payer	Type	Admit/Discharge Date	Approved Date	Actions
<input type="checkbox"/>	9 days	aaksajjkas, kusas	Charity	Discharge	09/16/2020	10/06/2020	Mark as Exported Generate HIS File Update Status
<input type="checkbox"/>	32 days overdue	Berry, Mary	Medicare	Discharge	08/06/2020	10/06/2020	Mark as Exported Generate HIS File Update Status
<input type="checkbox"/>	32 days overdue	Bond, James	AxxessRCM Test Payor	Discharge	08/06/2020	10/06/2020	Mark as Exported Generate HIS File Update Status
<input type="checkbox"/>	30 days overdue	Colour, Blue	Blue Cross Blue Shield	Admission	08/08/2020	08/25/2020	Mark as Exported Generate HIS File Update Status
<input type="checkbox"/>	24 days	Esclamado, Inquiry	AxxessRCM Test Payor	Admission	10/01/2020	10/06/2020	Mark as Exported Generate HIS File Update Status
<input type="checkbox"/>	25 days overdue	Lab, Michelle	Medicare	Admission	08/13/2020	08/14/2020	Mark as Exported Generate HIS File Update Status

Each line will show the Days Remaining, Patient name (selected will go to patient chart), Payer, Type, Admit/Discharge Date and Approved Date. The Action column hyperlinks allow users to **Mark as Exported** or **Generate HIS File**.

<input type="checkbox"/>	Days Remaining	Patient	Payer	Type	Admit/Discharge Date	Approved Date	Actions
<input type="checkbox"/>	32 days overdue	Berry, Mary	Medicare	Discharge	08/06/2020	10/06/2020	Mark as Exported Generate HIS File Update Status

Select the **Update Status** hyperlink and choose to update to the following statuses:

- Pending Approval - Select the move the file to Pending Approval where information in the file can be updated. Once ready, the file can then be approved to Export Ready status.
- Export Ready - Select to move the file to Export Ready where an .xml file can be generated for submission to CMS. Once ready, it can be marked as Exported.
- Exported - Select to move the file to Export History in Exported status to indicate that the file has been submitted to CMS.
- Accepted - Select to move the file to Export History in Accepted status to indicate the file has been accepted by CMS.
- Rejected - Select to move the file to Export History in Rejected status to indicate that the file has been rejected by CMS.

Once a status is selected, select the green **Update** button. Confirm the action by selecting Change Status in the confirmation pop-up. Select Cancel if selected by mistake.

		Actions
Status	Pending Approval ▼	<input type="button" value="Update"/> <input type="button" value="Cancel"/>

Mark multiple HIS documents as exported, generate multiple HIS files or their statuses by selecting the check box(es) on the left side of the page and then select the **Mark Selected as Exported**, **Generate HIS File** or **Update Status** button in the top right.

Days Remaining	Patient	Payer	Type	Admit/Discharge Date	Approved Date	Actions
32 days overdue	Berry, Mary	Medicare	Discharge	08/06/2020	10/06/2020	Mark as Exported Generate HIS File Update Status
32 days overdue	Bond, James	AxxessRCM Test Payor	Discharge	08/06/2020	10/06/2020	Mark as Exported Generate HIS File Update Status

Export History - Once the organization receives the file indicating if it was approved or rejected, users can update the status by selecting the **Update Status** hyperlink in the Actions column or by checking the box(es) on the left side of multiple rows and selecting the **Update Status** button to update statuses in bulk. Users can also create correction or cancellation files by selecting **Make a Correction** and **Generate Cancel** hyperlinks in the Actions column.

Patient	Payer	Type	Status	Admit/Discharge Date	Exported Date	Actions
<input type="checkbox"/> AJASA, BABAWALE	AxxessRCM Test Payor	Admission	Exported	06/11/2020	08/11/2020	Generate Cancel Make a Correction Update Status
<input type="checkbox"/> Alvin, de Chipmunk	AxxessRCM Test Payor	Admission	Exported	06/21/2020	09/15/2020	Generate Cancel Make a Correction Update Status
<input type="checkbox"/> Bears, Masha	AxxessRCM Test Payor	Admission	Exported	05/11/2020	08/08/2020	Generate Cancel Make a Correction Update Status
<input type="checkbox"/> Demo, Friday	Medicare	Admission	Rejected	06/26/2020	08/11/2020	Generate Cancel Make a Correction Update Status

HELP CENTER

A great resource that is available 24/7 is our Help Center. It is a place to get answers to frequently asked questions or watch videos on all our Axxess products. Our Help Center can be accessed by selecting *Help/Help Center* or <https://www.axxess.com/help/>

