

HOME CARE ADMINISTRATOR OVERVIEW TRAINING MANUAL

January 2022

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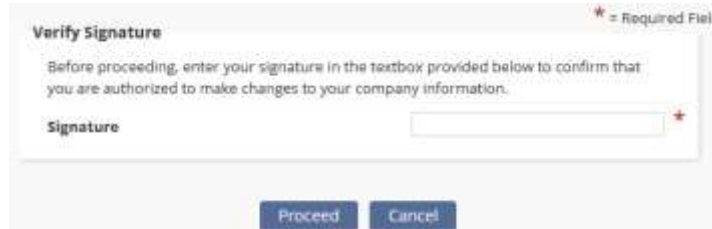
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COMPANY SETUP

Admin/Company Setup

The following window opens and requires the Signature of someone with a specific permission (found in *Edit User/Permissions/Administration/Agency*) in their user profile. After entering the Signature, select the **Proceed** button.



Verify Signature * = Required Field

Before proceeding, enter your signature in the textbox provided below to confirm that you are authorized to make changes to your company information.

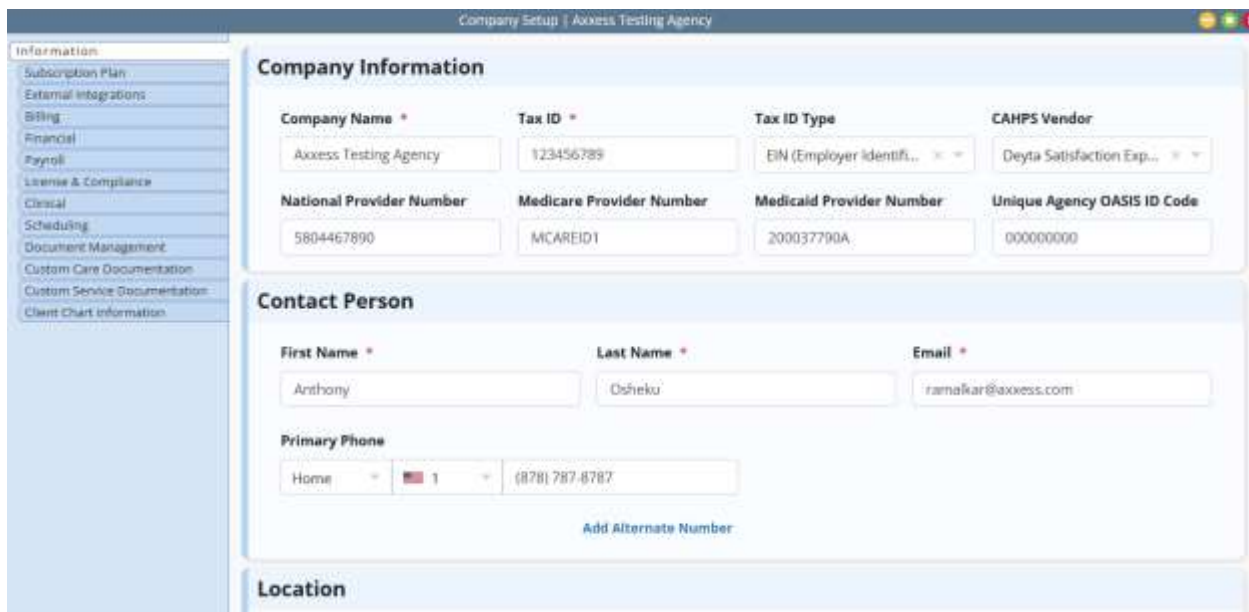
Signature

NOTE: For updating the Signature, see [Office Overview](#).

Manage Company Information is split into sixteen tabs found on the left side of the window.

Information - Where users enter the agency's information. ID's and Provider Numbers are retrieved outside of Axxess.

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



Company Setup | Axxess Testing Agency

Information

Subscription Plan
External Integrations
Billing
Financial
Payroll
License & Compliance
Clinical
Scheduling
Document Management
Custom Care Documentation
Custom Service Documentation
Client Chart Information

Company Information

Company Name * Axxess Testing Agency	Tax ID * 123456789	Tax ID Type EIN (Employer Identifi...	CAHPS Vendor Deyta Satisfaction Exp...
National Provider Number 5804467890	Medicare Provider Number MCAREID1	Medicaid Provider Number 200037790A	Unique Agency OASIS ID Code 000000000

Contact Person

First Name * Anthony	Last Name * Oshetu	Email * rana@kar@axxess.com
Primary Phone		
Home	1	(878) 787-8787
Add Alternate Number		

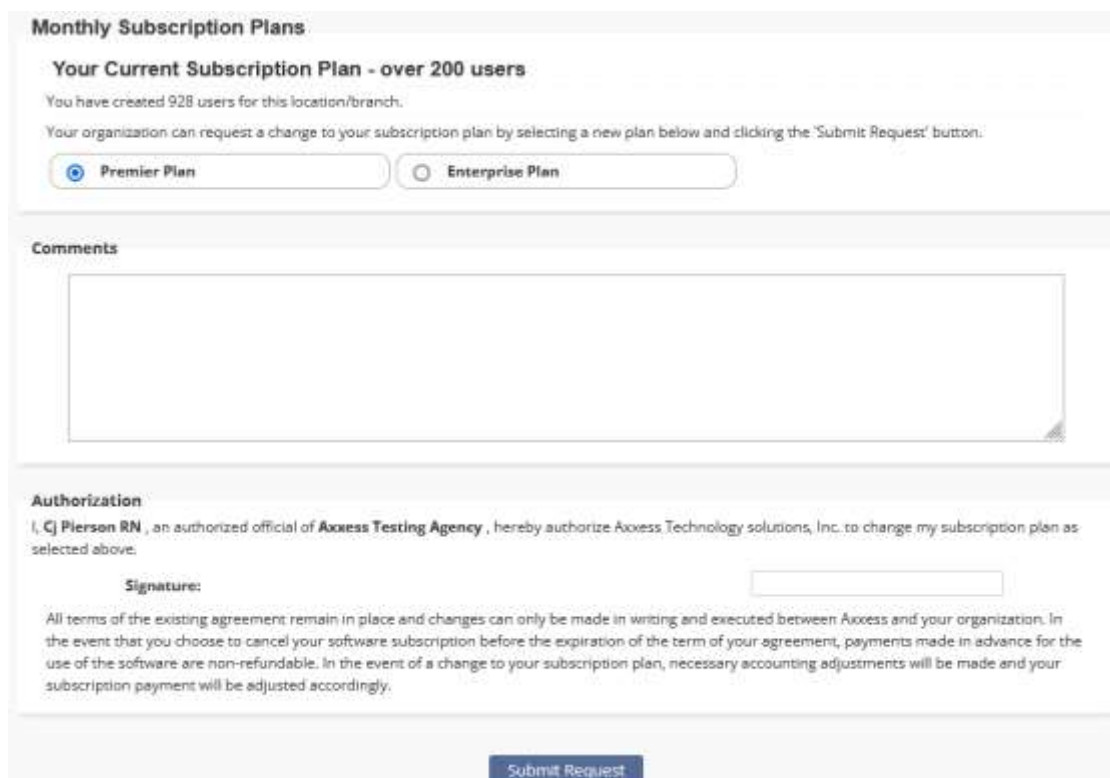
Location

Select the following buttons to toggle through the Manage Company Information window.



Selecting **Save** will keep the information entered in the current page. Selecting **Save & Next** will keep the current page information and move on to the next tab. **Next** will move to the next tab without saving any information. **Close** will shut down the Manage Company Information window.

Subscription Plan - In this section, the current Monthly Subscription plan is shown. This plan is based on the Number of Users and/or Active Census and can be adjusted by submitting a written request in the Comments section. Enter the user's electronic Signature and select the **Submit Request** button. Upgrade the plan can only be done through the request form here, if users wish to downgrade their plan, enter a Ticket in the Support Ticketing Center.



Monthly Subscription Plans

Your Current Subscription Plan - over 200 users

You have created 928 users for this location/branch.

Your organization can request a change to your subscription plan by selecting a new plan below and clicking the 'Submit Request' button.

☒ Premier Plan ☐ Enterprise Plan

Comments

Authorization

I, **Cj Pierson RN**, an authorized official of **Axxess Testing Agency**, hereby authorize Axxess Technology solutions, Inc. to change my subscription plan as selected above.

Signature:

All terms of the existing agreement remain in place and changes can only be made in writing and executed between Axxess and your organization. In the event that you choose to cancel your software subscription before the expiration of the term of your agreement, payments made in advance for the use of the software are non-refundable. In the event of a change to your subscription plan, necessary accounting adjustments will be made and your subscription payment will be adjusted accordingly.

Submit Request

External Integrations - The organization can connect their Home Care application to select outside vendors for services like Electronic Visit Verification

(EVV). Enter required information such as the Provider, Branches, State and Payment Source to connect (required information changes with integration).

Electronic Visit Verification

Remove Provider

Provider

Utah Medicaid

Branches

Add-on Branch Location * Dates *

State

Utah

Payment Source

Integrated * Test GA Insurance - RA *

Note: This provider setup enables users to populate specific branches and payers in the Utah Medicaid report under Electronic Visit Verification Reports.

Remove Provider

Provider

Tellus Solutions, LLC

Branches

Dallas *

State

Florida

Payment Source

Sunshine FL *

Non Insurance *

MEDICAID *

Medicaid FL *

Medicaid Test *

Effective Date

11/04/2020

☒ Submit visits to Tellus in Completed status. *i*
☐ Submit visits to Tellus in Completed-Hold status. *i*

Billing - This window enables users to decide Billing settings. Indicate the weekly billing cycle, enable alternate remittance addresses and then fill in the address. Hover over the information *i* icon to get insight into questions.

Billing

Billing Week

Sunday-Saturday

Alternate Remittance Addresses

* Remember to save at the bottom of the form after adding or changing addresses

☒ Enable
 ☐ Disable

Address Type

☐ Claim
 ☐ Invoice
 ☒ Both

Name

Dallas2

Country *

United States

Address Line 1 *

16800 LBJ NW

Address Line 2

SITE 600

City/Town *

DALLAS


State *

TX

Postal Code *

75215 - 7521

axxess.com


/Axxess

Insert Modifiable Invoice columns and choose the number sequence. Add Invoice Comments by selecting the **Add New** button. Edit, remove or make default comments that have been previously added by selecting the corresponding icons. If the organization wants to have a personal invoice message, check the box and fill out the Subject and Body of the message

Invoice

Modifiable Invoice Columns ⓘ

Line Number *
Description *
Date *
Hours *
and 1 more

Invoice Number Sequence ⓘ

4837

Invoice Comments ⓘ

Add New

Name	Comment	Actions
Standard	Thank you for trusting your care to the team of Axxess Testing Agency. We appreciate your business.	
Past Due	Your account is past due. Please remit payment immediately.	Make Default
test	test test	Make Default
Tianny's Invoice	For testing purposes.	Make Default

☒ Email Message ⓘ

Subject Line *

Axxess Healthcare Invoice

Body *

Please submit payment to Axxess:
16000 Dallas Pkwy #700n, Dallas, TX 75248

You have 426 characters remaining

Enable Remittance Posting to manage remittance and electronic fund transfer payments in a central location and then selecting the date to begin use.

Remittance Posting

Remittance posting enables users to manage remittance and electronic fund transfer payments in a central location. Once enabled, users can post line item payments and adjustments from the Remittance Advice screen under the Billing tab. ⓘ


☒ Enable
 ☐ Disable

Claims and selected invoices billed on or after this date must be processed through the Remittance Advice screen.

Use remittance posting for claims billed on or after:

11/01/2021

axxess.com

 /Axxess

Enter new Payer Categories by selecting the **Add Payer Category** button. Once added, select the corresponding **Edit** and **Delete** hyperlinks to update.

Payer Categories

Add Payer Category

NOTE: You can perform 'Edit' and 'Delete' actions on only one row at a time.

Payer Category Name	Payer Types	Actions
Contract/Staffing	Staffing, Contract	Edit Delete
Self-pay	Self-pay	Edit Delete
Medicare	Medicare (HMO/managed care), Medicare (traditional fee-for-service)	Edit Delete
medicaid	Medicaid (traditional fee-for-service), Medicaid (HMO/managed care)	Edit Delete
LTC Payer	LTC Insurance	Edit Delete
Other	Unknown, Other government, None, Title programs, Other(specify)	Edit Delete
Commercial Insurance	Workers compensation, Private/Commercial insurance, Private/Commercial HMO/managed care	Edit Delete

Determine EVV Time Management settings. Decide how long the First and Second Alert will be for Late Arrivals and Departures (in minutes) and who will be notified. Then determine whether the Axxess Home Care mobile app will allow for manual time entry or whether EVV will be the actual visit time.

EVV Time Management

Late Arrival Alerts (Alert Center)

☒ First Alert ⓘ
 *

☒ Second Alert ⓘ
 *

Late Departure Alerts (Alert Center)

☒ First Alert ⓘ
 *

☒ Second Alert ⓘ
 *

User Notification Manager ⓘ

Karithik Pemmaraju RN ✕
 Jean Santos RN ✕

Eric Stone RN ✕
 and 731 more

Mobile App Visit Time

☐ Allow manual entry of actual visit time. ⓘ

☒ Use EVV times as actual visit time. ⓘ

Financial - Choose a Date through which accounts are closed. Axxess will require an electronic signature from authorized personnel when saving a transaction date on or before the closing date. Select the Disable Closing Date checkbox to let users edit any records regardless of the closing date.

Closed Accounting

Date through which books are closed: Date not set

Axxess will require an electronic signature from authorized personnel when saving a transaction dated on or before the closing date.

Closing Date:

MM/DD/YYYY

☒ **Disable Closing Date**

Warning: Disabling this feature will let users edit any records, regardless of closing date.

The Chart of Accounts Mapping enables users to assign account numbers based on the organization's accounting system which flow to the General Ledger report.

Chart of Accounts Mapping

10010	Cash	40100	Revenue - Self-pay	60060	Wages - Medicaid (traditional fee-for-service)
11110	Accounts Receivable - Trade	40130	Revenue - Other(specify)	60080	Wages - Title programs
11140	Unbilled AR	40170	Revenue - Unknown	60090	Wages - Other government
21030	Accrued Payroll	40110	Revenue - Contract	60010	Wages - Private/Commercial insurance
40160	Revenue - None	40122	Revenue - Workers compensation	60180	Wages - Private/Commercial HMO/managed care
40050	Revenue - Medicare (HMO/managed care)	40140	Revenue - Staffing	60100	Wages - Self-pay
40040	Revenue - Medicare (traditional fee-for-service)	40150	Revenue - LTC Insurance	60130	Wages - Other(specify)

Payroll

Payroll Policy - Determine how employees will be paid when it comes to mileage, travel time, payroll date and cycle. Also, determine what will be listed as the three base shifts of the day.

Payroll Policy Pay Rates Holidays Required Fields

Payroll Policy

Company's mileage reimbursement rate? /mile

Company's travel time reimbursement rate? /hour

First Day of Payroll

How often do you pay your employees?

☐ Weekly

☒ Bi-Weekly

☐ Monthly

☐ Bi-Monthly

Last day of the pay cycle

Enter the three base shifts used by your agency below. These shifts will help with scheduling, assigning pay rates and setting up employees' available times.

Shift 1 -

Shift 2 -

Shift 3 -

Enable payroll shift differentials to calculate task pay based on company shifts. When disabled, task pay will calculate based on task start times.

☒ Enable Payroll Shift Differentials

☐ Disable Payroll Shift Differentials

Rounding Policies

Start Time Rounding

Round to the immediately previous or subsequent 15-minute increment, whichever is closest.

End Time Rounding

Round to the immediately previous or subsequent 15-minute increment, whichever is closest.

Round by Shift Time (hourly pay) ☒

Task Duration Time

Enable Unpaid Meal Breaks ☒

The unpaid meal break feature is for use in facility staffing services. Once enabled it can be associated to payment sources with a staffing payer type and use is restricted to the staffing note.

Meal Break Length

Determine if the organization will Round Start or End Time for shifts (selecting 'none' is available). Enable unpaid meal breaks and set up Shift Duration Requirements

Enter the Maximum/Defaults if the organization pays overtime. Add Municipalities if employees are paid a certain rate per region. After they have been added, they can be edited or removed by selecting the **Edit** and **Delete** hyperlinks.

Maximum Time/Overtime Defaults

Maximum Daily Limit: Hours

Maximum Weekly Limit: Hours

☒ None ☐ Warning Message ☐ Error & Stop Scheduling

Time-and-a-Half Daily Limit: Hours

Time-and-a-Half Weekly Limit: Hours

☒ None ☐ Warning Message ☐ Error & Stop Scheduling

Double Time Daily Limit: Hours

Double Time Weekly Limit: Hours

☒ None ☐ Warning Message ☐ Error & Stop Scheduling

Manage Municipalities

Filter by Text

Name	Code	Pay Rate	Actions
75418-Dallas	01	\$25.00	Edit Delete
Addison Branch	12	\$27.00	Edit Delete
Dade	Dad	\$15.00	Edit Delete
Delaware Municipality	000	\$20.00	Edit Delete

Pay Rates – Set up organization pay rates for all employees/users. Individual pay rates can be added under the **Employee Center**. Use the section at the top of the page to filter for specific Employee, Payment Source, Client and/or Task status by selecting one or multiple drop-down menus. Then select **Generate**. The legend below the filter explains that in the main section of the tab, the Default Rate will be shaded blue, the Specific Rate will show as green. The orange exclamation point will indicate “A rate will override this in the future” and the green exclamation point indicates that a “Future rate has been applied.”

Branch * Dallas Employee -- Default -- Generate
Payment Source -- Default -- Client -- Default --
Task status -- Default --
☐ Default Rate ☐ Specific Rate ! A rate will override this in the future ! Future rate has been applied

The main stage of the tab displays how a Task is paid per day, showing each day of the week.

Task	Sun	Mon	Tue	Wed	Thu	Fri	Sat
AV-HHA visit	\$15.00/hour	\$15.00/hour	\$15.00/hour	\$15.00/hour	\$15.00/hour	\$15.00/hour	\$15.00/hour
CG1 Standard Visit	\$4.00/15 min 7:00 am-3:00 pm				\$3.00/15 min 7:00 am-11:00 pm	\$3.00/15 min 7:00 am-11:00 pm	\$4.00/15 min 7:00 am-3:00 pm
	\$5.00/15 min 3:00 pm-11:00 pm						\$5.00/15 min 3:00 pm-11:00 pm
	\$6.00/15 min 11:00 pm-7:00 am						\$6.00/15 min 11:00 pm-7:00 am
Coordination Of Care	\$17.00/visit	\$35.00/visit 7:00 am-3:00 pm	\$35.00/visit 7:00 am-3:00 pm	\$35.00/visit 7:00 am-3:00 pm	\$35.00/visit 7:00 am-3:00 pm	\$35.00/visit 7:00 am-3:00 pm	\$17.00/visit



Hovering over a rate will give you more specifics about the rate and select the **Edit** or **Delete** hyperlinks to make updates.

am-3:00 pm
am-11:00 pm
am-11:00 pm
am-3:00 pm

RATE HISTORY					
Rate	Mileage Rate	Travel Rate	Shift	Effective Date	Actions
\$3.00	\$0.42(Default)	\$7.00(Default)	7:00 am-11:00 pm		Edit Delete

\$5.00/15
\$5.00/15

Select the **New** button in the top right to add a rate. Choose the Branch (if more than one) and Task from the drop-down, enter the dollar amount, choose the

time type, and enter the Effective Date or select the calendar icon. Then select the box to determine which Employee, Payment Source and/or Client for which the rate is applicable. To search for a specific Employee, Payment Source and/or Client, enter keywords for search. Select the All checkbox(es) if the rate applies to all Employees, Payment Sources and/or Clients. Then decide if the rate applies to a specific Shift or Days of the Week. Select the green check mark  icon if the rate applies to all shifts and/or days. Select the red X  icon to uncheck all boxes. Determine if the pay rate should include Mileage and/or Travel Time. If either box is selected, enter the rate. If they are not checked, the default Payroll Policy rate will be applied for mileage and travel time. Select **Save & Close** to complete. Select **Save & Add Another** to enter additional rates.

New Pay Rate

Branch *

Select Branches

Task *

Select...

Rate *

Select...

Effective Date


Type or Select

Employee

☒ All

Payment Source

☒ All

Client 

☒ All

Shifts *

Select...

Days of the Week *

Select...

☐ Mileage Rate - If not selected, the agency's default rate of 0.55/mile will be used.

☐ Travel Time Rate - If not selected, the agency's default rate of 7/hr will be used.

Save & Close

Save & Add Another

Cancel

Holidays – Users can enter default holidays or create their own organization-specific holidays. Holidays can be edited, deleted and/or deactivated by selecting any of the hyperlinks. Select **Add Default Holidays** to choose from the following list:

- Inauguration Day
- Washington's Birthday
- Easter Sunday
- Independence Day
- Labor Day

- Columbus Day
- Veterans Day
- Thanksgiving Day
- Christmas Eve

Choose Time and Rules then select **Add Holidays** to add to the rest of the list. Select **New** to add an organization-specific holiday.

Payroll Policy Pay Rates Holidays					
Status: ACTIVE		Filter by Text: <input type="text" value="Start Typing"/>		<input type="button" value="Refresh"/>	<input type="button" value="New"/>
				<input type="button" value="Add Default Holidays"/>	
Name	Shifts	Occurrence Rule	Next Date	Travel Time	Actions
Christmas Day	One, Two, Three	Every December 25	12/25/2022	✖	Edit Delete Deactivate
Christmas Eve	One, Two, Three	Every December 24	12/24/2022	✖	Edit Delete Deactivate
Test Holiday	One	Every December 24	12/24/2022	✖	Edit Delete Deactivate
Day After Thanksgiving (Black Friday)	One, Two, Three	The Fourth Thursday in November, 1 Day Offset	11/25/2022	✖	Edit Delete Deactivate
Thanksgiving Day	One, Two, Three	The Fourth Thursday in November	11/24/2022	✖	Edit Delete Deactivate
Veterans Day	One, Two, Three	Every November 11	11/11/2022	✖	Edit Delete Deactivate

Enter the Payroll Holiday Name, then decide how often the holiday will occur and the time. Then determine whether the holiday follows specific rules. Select **Save** once completed.

Create Payroll Holiday

Name:

Occurrence:

☐ Fixed
☐ Floating
☐ Easter

Time:

☐ Use Shifts
☐ Use Custom Time

Rules

☐ Pay rules apply to travel time

Applies to All Tasks and Travel Time

☐ Multiplier

Applies to All Except Per Visit Tasks

☐ Additional Per Hour

Applies to Per Visit Tasks

☐ Additional Per Visit

For Hourly and Per-15-Minute tasks, rules apply to fractional hours (e.g. 1.25 hours).

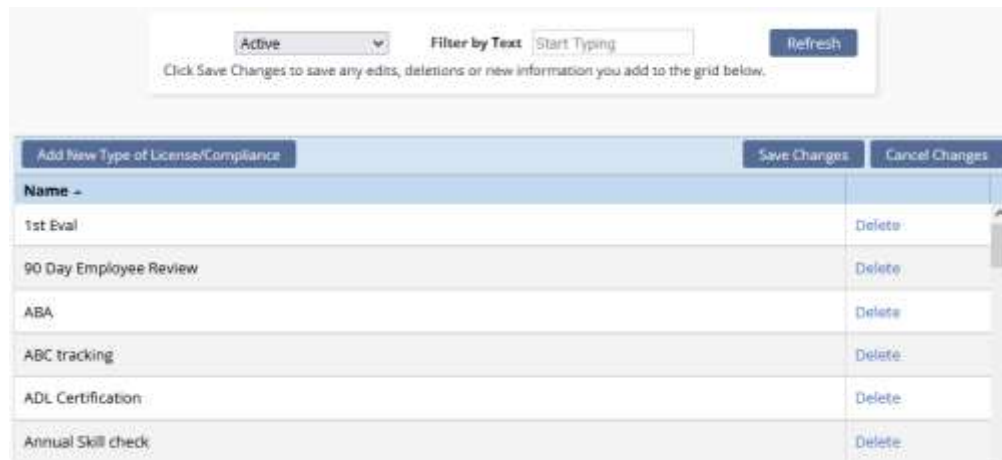
NOTE: The License, Scheduling, Document Management, Custom Care Documentation and Custom Service Documentation tabs have search functionality at the top of the screen to narrow down results. There are also options in some tabs to filter between active or inactive entries.



Active Filter by Text Start Typing Refresh

Click Save Changes to save any edits, deletions or new information you add to the grid below.

License & Compliance - Enables organizations to manage licenses or compliance items that must be completed/updated. Select **Add New Type of License/Compliance** and a free text space will open below. Enter the name, then select **Save changes**. If any licenses were added in error, select the **Delete** hyperlink to the right.



Active Filter by Text Start Typing Refresh

Click Save Changes to save any edits, deletions or new information you add to the grid below.

Add New Type of License/Compliance Save Changes Cancel Changes

Name -	
1st Eval	Delete
90 Day Employee Review	Delete
ABA	Delete
ABC tracking	Delete
ADL Certification	Delete
Annual Skill check	Delete

Clinical - Determine the Print PDF format for the Plan of Care. **Add New, Edit, Make Default** or **Delete** Physician Certification Statements. Enable or disable requiring clinicians to enter a time next to the date within clinical documents to indicate the time an activity was completed. Enable or disable Conditions of Participation items from transferring to Plan of Care. Enable or disable caregivers from viewing or editing documentation on a task until the date of the scheduled task. Also, determine whether to enable or disable Custom Service Documentation.

Plan of Care

Select Print PDF Format

☒ Revised Plan of Care ⓘ

Physician Certification Statement Add New

Name	Statement	Actions
Medicaid Statement	I certify the patient is under my care, and I have authorized services on this plan of care and will periodically review the plan.	Edit
CMS Homebound with F2F	I certify/reconfirm that this patient is confined to his/her home (as outlined in section 30.1.1 in Chapter 7 of the Medicare Benefit Policy Manual) and needs intermittent skilled nursing care, physical therapy and/or speech therapy or continues to need occupational therapy. The patient is under my care, and I have authorized services on this plan of care and will periodically review the plan. The patient had a face-to-face encounter with an allowed provider type on MM/DD/YYYY and the encounter was related to the primary reason for home healthcare.	Edit Delete Make Default

Additional Regulatory Requirements

Require Time Entry for Documentation ⓘ

Enabling this option will require clinician to enter a time next to the date field within clinical documents to indicate the time an activity was completed in the medical record.

☒ Enabled

Conditions of Participation Items

Enabling this option will transfer the following items to the Plan of Care to comply with the CMS Conditions of Participation.

- Psychosocial Status
- Caregiver Status
- Emergency Preparedness
- Advance Directives
- Hospitalization Risk
- Required Time Entry
- Revised Plan of Care PDF

☒ Enabled ☐ Disabled

Documentation Requirements

Prevent Future Documentation ⓘ

Enabling this feature will prevent caregivers from viewing or editing documentation on a task until the date of the scheduled task.

☐ Enabled ☒ Disabled

Custom Service Documentation

Custom Service Documentation ⓘ

Enabling this option activates the following set of features in the application.

- Client Services in the Quick Reports menu of Client Charts
- Service Plans in Admin Lists
- Service Plan and Service Task documents on the Document Management tab of Company Setup
- Service Scoring Lists on the Visit-Care Plan Relationships tab of Company Setup
- Service Plan/Task Association on the Visit-Care Plan Relationships tab of Company Setup
- Service Plan Reports in the Report Center under Client Reports

☒ Enabled ☐ Disabled

Scheduling - Organizations must determine if they will allow users to schedule billable tasks without an authorization and what the crossover time limit will be. Then decide to enable Scheduling Conflict Filtering and/or Fee-Based Scheduling.

Scheduling

When scheduling how should billable tasks with no authorizations found affect the process?

☐ Warn the scheduler, and provide an option to continue scheduling tasks outside of authorization parameters.

☐ Alert the scheduler and prevent scheduling outside of authorizations.

Crossover time limit for visits to appear as a multi-day visit? 05:00 AM

☒ Enable Scheduling Conflict Filtering

☐ Enable Fee-Based Scheduling

The Family Care settings must be selected. Choose whether to turn on the Client Advocate Role, Family Provider Limits and Prevent Scheduling features. Specific branches can also be added to have custom limits.

Family Care

☐ **Client Advocate Role**
 Selecting this feature activates the Client Advocate role in the employee file and the ability to designate advocates in the client file.

☒ **Family Provider Limits**
 This feature enables limits to be set on the number of weekly hours select caregivers can provide care. The limit will not apply to caregivers that you do not identify in the Family Providers section of the client chart.

Default Limit
 -40

☒ **Prevent Scheduling**
 Select to restrict scheduling beyond the default limit. A warning message will display when prevent scheduling is not selected.

Custom Provider Limits
 Select branches to add custom limits...

Add New, Edit and Deactivate visit types in Visit Management.

Visit Management

Active Inactive Add New

Category	Type	Reason	Created	Modified	Actions
Missed Visit	Employee	Availability	09/24/2013	09/24/2013	Edit Deactivate
Missed Visit	Employee	Bereavement	09/24/2013	09/24/2013	Edit Deactivate
Reassign	Employee	Bereavement	09/24/2013	09/24/2013	Edit Deactivate
Missed Visit	Client	Cancellation of Care	09/24/2013	09/24/2013	Edit Deactivate
Missed Visit	Client	Caregiver Able To Assist Client	09/24/2013	09/24/2013	Edit Deactivate
Missed Visit	Client	Client Reason CE	02/10/2021	02/10/2021	Edit Deactivate
Reassign	Employee	Client Compatibility	09/24/2013	09/24/2013	Edit Deactivate
Missed Visit	Employee	Client Compatibility	09/24/2013	09/24/2013	Edit Deactivate
Missed Visit	Client	Client Hospitalized	09/24/2013	09/24/2013	Edit Deactivate
Missed Visit	Client	Client Reason RA 1	02/10/2021	02/10/2021	Edit Deactivate

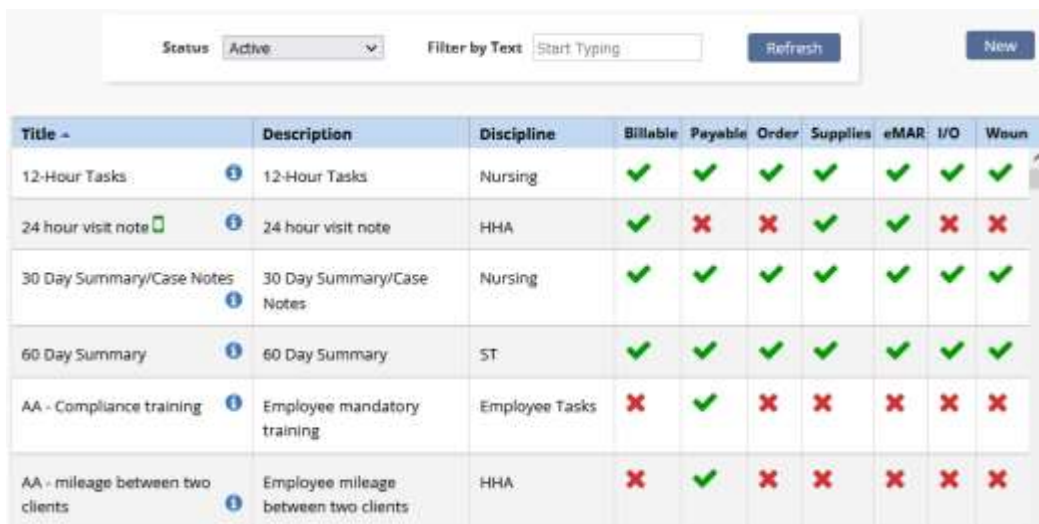
1 2 3 4 5 48 total results Show 10 entries

Select **Add Custom Criteria** to limit scheduling to only those employees' meeting criteria, i.e., language, smoker and pet friendly. A free text space will open right below. Choose a Category from the drop-down menu and then enter the Client & Employee Matching Criteria. Select **Save Changes** to keep the changes. If any criteria were added in error, select the **Delete** hyperlink to the right.




Category	Client Matching Criteria	Employee Matching Criteria	Active for Matching
General	Sign Language	Signs	Yes (Delete)
General	Speaks Filipino	Fluent in Filipino	Yes (Delete)
General	likes island food	can cook island food	Yes (Delete)
General	enjoys eating durian	is okay being around durian	Yes (Delete)
General	Miami County	Miami County	Yes (Delete)
General	Sign Language	Signs Language	Yes (Delete)

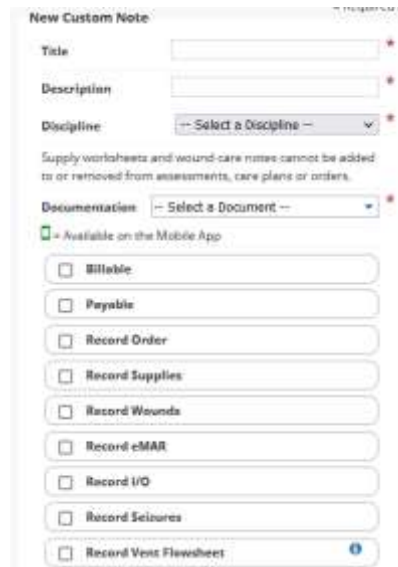
Document Management - The organization can create custom notes. Select **New** in the top right to add a custom note. Notes created here will appear in the Schedule Center, allowing staff to schedule visits.




Title	Description	Discipline	Billable	Payable	Order	Supplies	eMAR	I/O	Woun
12-Hour Tasks	12-Hour Tasks	Nursing	✓	✓	✓	✓	✓	✓	✓
24 hour visit note	24 hour visit note	HHA	✓	✗	✗	✓	✓	✗	✗
30 Day Summary/Case Notes	30 Day Summary/Case Notes	Nursing	✓	✓	✓	✓	✓	✓	✓
60 Day Summary	60 Day Summary	ST	✓	✓	✓	✓	✓	✓	✓
AA - Compliance training	Employee mandatory training	Employee Tasks	✗	✓	✗	✗	✗	✗	✗
AA - mileage between two clients	Employee mileage between two clients	HHA	✗	✓	✗	✗	✗	✗	✗

Give the note a Title, Description and then choose the Discipline and what type of assessment will be in the note. Any documentation choice with an  icon is

available on the mobile app. Then indicate whether the note will be Billable or Payable, whether users can record an Order, Supplies used, wounds, eMAR, I/O, Seizure Record, Vent Flow Sheet, a Narrative, Oxygen Risk Assessment and/or a Fall Risk Assessment. Select **Save** when completed. If custom notes need to be edited or no longer apply, select the **Edit** and **Deactivate** hyperlinks to make updates.



Custom Care Documentation

Daily Living Tasks - Organizations can determine what daily living tasks that their employees can be asked to perform. Select **Add New Category** to add to the list. A free text space will appear, and a Title and Description must be entered. Select **Save Changes**. Select the plus sign  icon to expand the Category and then select **Add New Task**. Enter the Title and Instructions of the Task, then select **Save Changes**. Change the order by selecting either up or down arrows for Tasks or Categories. If any Tasks/Categories were added in error, select the **Delete** hyperlink to remove. The changes made in Daily Living tasks will appear on the personalized aide Note/Custom Visit Note.



Care Plan/Note Associations - Organizations can add relationships between custom visit notes and custom care plans. The **Care Plan/Note Associations** tab is automatically filtered to show Active associations. Search by name by entering in Filter by Text. Select **Add New** to add and link one of the combinations.

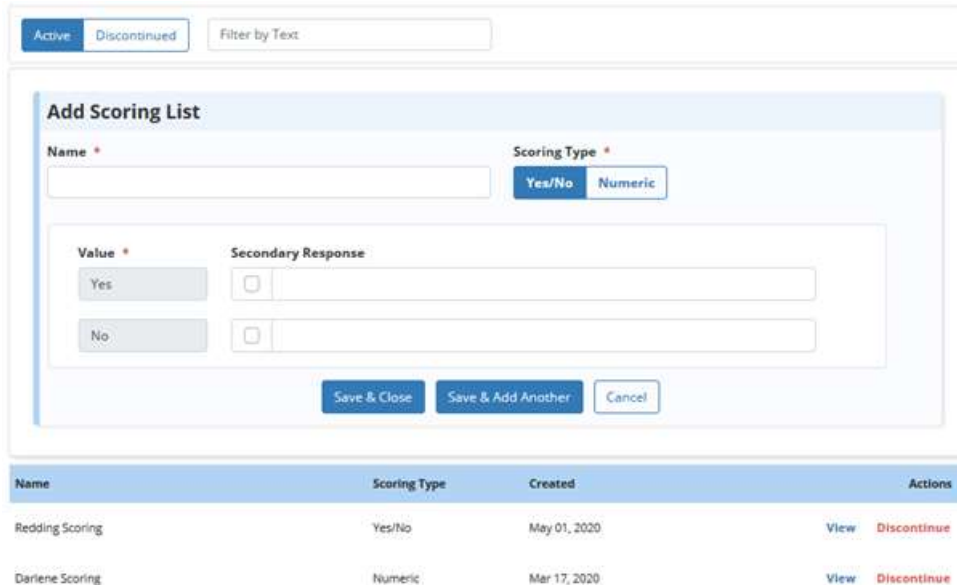
<div> <div>Active</div> <div>Discontinued</div> <div>Filter by Text</div> <div>Add New</div> </div>		
Visit Note	Care Plan	Actions
ASAP HHA visit note	ASAP CARE PLAN	Discontinue
daily living HHA	daily POC custom	Discontinue
TX HHA visit	TX HHA Care Plan	Discontinue
Companion	Companion Care Plan	Discontinue

Choose from the drop-down menu for Visit Note and Care Plan, then select **Save & Close** or select **Save & Add Another** for additional associations. Select the **Discontinue** hyperlink if the relationship needs to be removed.



Custom Service Documentation – Select the **Scoring List** tab to enforce score entry when a caregiver indicates the completion of a client's goal. Select **Add New** to set up a scoring list. On the Add Scoring List window, name the list and select a scoring type. The scoring type defaults to **Yes/No**. Select **Numeric**

to create a numbered scoring list. For each value, choose whether to require secondary responses. Check the box next to **Secondary Response** to require additional information from a caregiver when the respective response is selected.



The screenshot shows the 'Add Scoring List' form and a table of existing scoring lists.

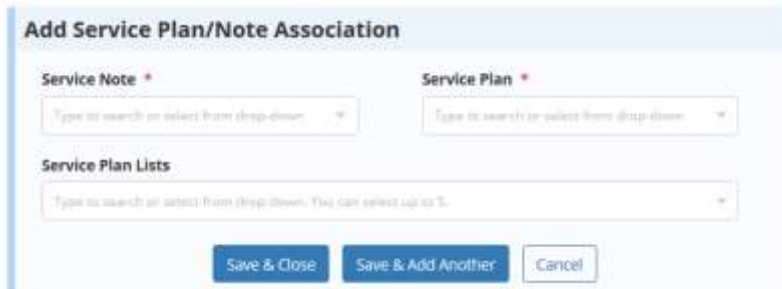
Add Scoring List Form:

- Active** (selected) | **Discontinued** | Filter by Text
- Name *** (text input)
- Scoring Type *** (radio buttons): **Yes/No** (selected) | **Numeric**
- Value *** (radio buttons): **Yes** | **No**
- Secondary Response** (checkboxes): ☐ (next to Yes) | ☐ (next to No)
- Buttons: **Save & Close**, **Save & Add Another**, **Cancel**

Table of Existing Scoring Lists:

Name	Scoring Type	Created	Actions
Redding Scoring	Yes/No	May 01, 2020	View Discontinue
Darlene Scoring	Numeric	Mar 17, 2020	View Discontinue

Click **Save & Close** or **Save & Add Another**. Once a scoring list is created, caregivers will be required to enter a score when documenting completion of a client goal. The scoring lists will be available to link to client goals in service plans. Select **View** in the Actions column to review existing values for a particular scoring list.



The screenshot shows the 'Add Service Plan/Note Association' form.

Add Service Plan/Note Association Form:

- Service Note *** (text input: "Type to search or select from drop-down")
- Service Plan *** (text input: "Type to search or select from drop-down")
- Service Plan Lists** (text input: "Type to search or select from drop-down. You can select up to 5.")
- Buttons: **Save & Close**, **Save & Add Another**, **Cancel**

Select the **Service Plan/Note Associations** tab to make links following the same process as Care Plan/Note Associations but for Service Plans instead of Care Plans. The same filters and search apply. Select **Add New** to add and link one of the combinations. Choose from the drop-down menu for Service Note, Service Plan and Service Plan Lists (up to five may be selected), then select **Save & Close** or select **Save & Add Another** for additional associations. Select the **Discontinue** hyperlink if the relationship needs to be removed.

Client Chart Information

Emergency Triage Levels - The organization can choose from either default triage levels or add ones of their own. Select the **Add Default Triage Levels** to add a preset triage level. Select the **Edit** or **Delete** hyperlinks to make updates. The Default Triage Levels are:

Priority 1 - Life threatening (or potential).

Priority 2 - Not life threatening but would suffer severe adverse effects.

Priority 3 - Visits could be postponed 24-48 hours without adverse effects.

Priority 4 - Visits could be postponed 72-96 hours without adverse effects.

Priority 5 - Not Serious.

Select **New** to add an organization specific level.

New Add Default Triage Levels Refresh		
Priority	Short Description	Actions
1	Life-threatening (or potential) and requires ongoing medical treatment. When necessary, appropriate arrangements for evacuation to an acute care facility will be made.	Edit Delete
2	Not life-threatening but would suffer severe adverse effects from interruption of services (e.g., daily insulin, IV medications, sterile wound care of a wound with a large amount of drainage).	Edit Delete
3	Visits could be postponed 24-48 hours without adverse effects (e.g., new insulin-dependent diabetic able to self-inject, sterile wound care with a minimal amount to no drainage).	Edit Delete
4	Visits could be postponed 72-96 hours without adverse effects (e.g., post-op with no open wound, anticipated discharge within the next 10-14 days, routine catheter changes)	Edit Delete
5	Not Serious Nothing to worry about	Edit Delete

The Priority level will default to the next number and cannot be edited. Enter a Title, Short and Long Description and select **Save**.

New Triage Level

Priority
6

Title

Short Description

A title that continues into a short, descriptive sentence. Perhaps two if needed.

Long Description

Save Close

Services Required - Organizations can add default services and/or create new services. Select **Add Default Services Required** to fill the table with typical default services found in home care. Select **New** to add an organization specific service.

New Add Default Services Required Refresh

Name	Description	Client Type ~
Speech Therapy	Speech Therapy	Medical
Skilled Nurse	Skilled Nurse	Medical
Physical Therapy	Physical Therapy	Medical
Occupational Therapy	Occupational Therapy	Medical
Medical Social Worker	Medical Social Worker	Medical
Personal Care Aide	Personal Care Aide	Non-Medical
Companion	Companion	Non-Medical
Sitter	Sitter	Non-Medical

Enter the Name, choose the Client Type from the drop-down menu and enter a Description. Then select **Save** when complete.



New Service Required

Name

Client Type

Description

[Save](#) [Close](#)

Durable Medical Equipment - Organizations can add default Durable Medical Equipment (DME) and/or create new DME. Select the **Edit** or **Delete** hyperlinks to make updates to the DME list. Select **New** to add an organization specific DME.

[New](#)
[Add Default DMEs](#)
[Refresh](#)

Name	Description	Actions
Bedside Commode	Bedside Commode	Edit Delete
Cane	Cane	Edit Delete
Elevated Toilet Seat	Elevated Toilet Seat	Edit Delete
Grab Bars	Grab Bars	Edit Delete
Hospital Bed	Hospital Bed	Edit Delete
Nebulizer	Nebulizer	Edit Delete
Oxygen	Oxygen	Edit Delete
Tub/Shower Bench	Tub/Shower Bench	Edit Delete

Enter the Name and Description, then select **Save**.



New Durable Medical Equipment

Name

Description

[Save](#) [Close](#)

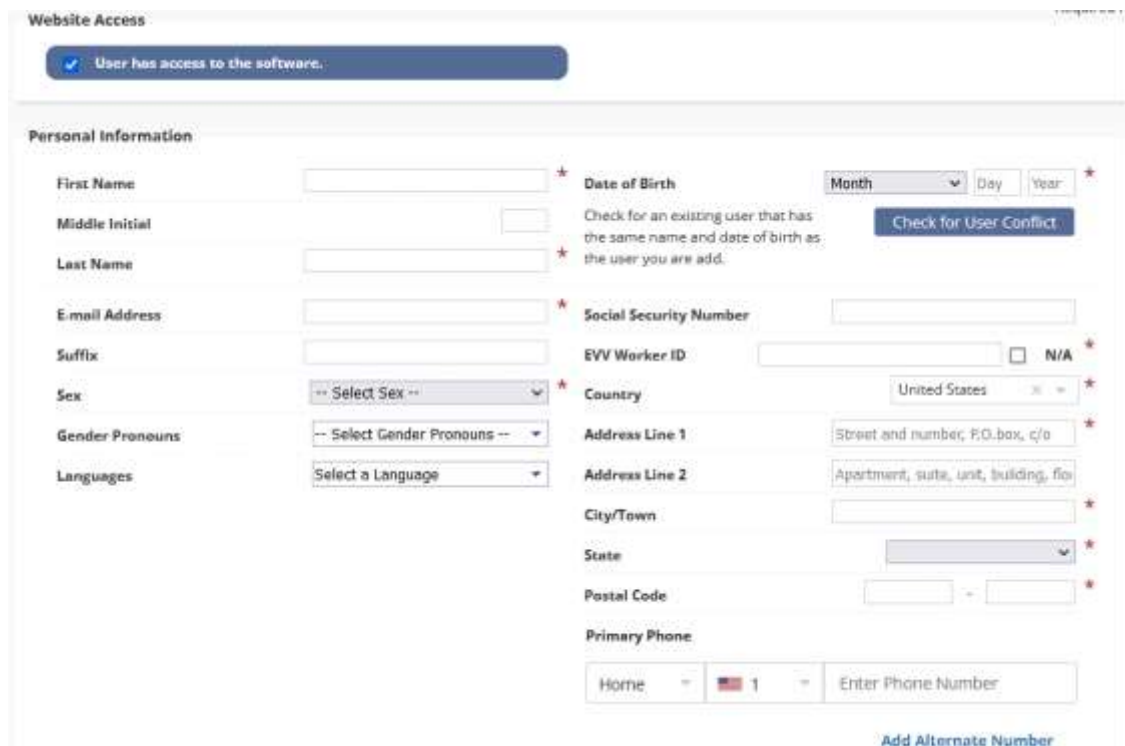
ADDING A NEW USER

Employees/New User

A window will open, and the user's information must be entered. All asterisked items are required. The new user window is divided into seven tabs:

Information - Fill out the demographics of the user. The Permissions tab and the email address will no longer be required if the "User has access to the software" option is unchecked. Fill in all available information.

Select the **Check for User Conflict** button to prevent adding duplicate users, which will check for the user's name and date of birth.

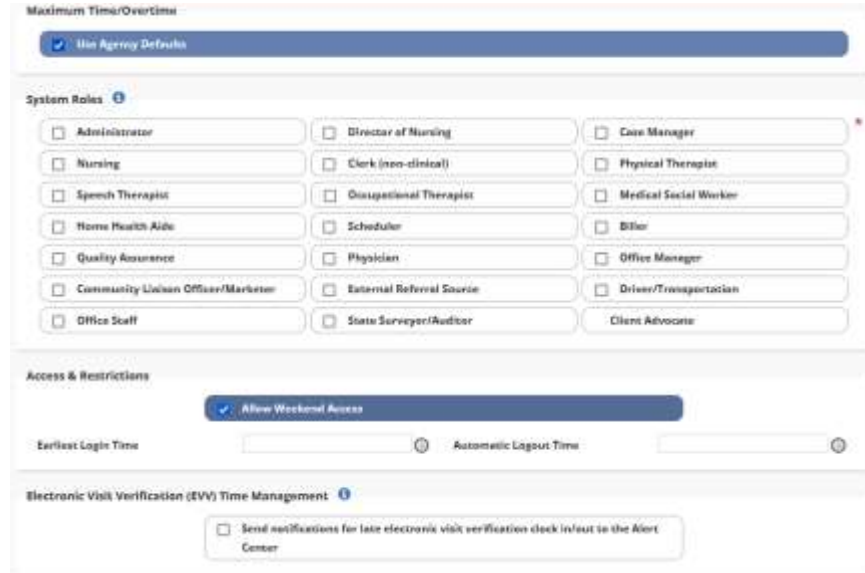


Choose Credentials and Title. Select additional boxes by selecting the Agency Branch drop-down menu if the user works at more than one branch. Check the box for agency defaults for Maximum Time/Overtime, which was created in the previous section of the manual. Roles are important in the software because they determine what a user can or cannot see, select, delete or undo.

There is also a restriction function that will allow organizations to limit the times that users can use 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 log in and/or when they are automatically logged out of the Home Care application.

Select the checkbox if the user should be notified for late EVV clock in/out to the Alert Center. (Not shown) Enter optional Comments with a 500-character limit. Select **Create & Next** to save progress and go to the next tab.



Maximum Time/OverTime

☒ Use Agency Defaults

System Roles

<input type="checkbox"/> Administrator	<input type="checkbox"/> Director of Nursing	<input type="checkbox"/> Case Manager
<input type="checkbox"/> Nursing	<input type="checkbox"/> Clerk (non-clinical)	<input type="checkbox"/> Physical Therapist
<input type="checkbox"/> Speech Therapist	<input type="checkbox"/> Occupational Therapist	<input type="checkbox"/> Medical Social Worker
<input type="checkbox"/> Home Health Aide	<input type="checkbox"/> Scheduler	<input type="checkbox"/> Billing
<input type="checkbox"/> Quality Assurance	<input type="checkbox"/> Physician	<input type="checkbox"/> Office Manager
<input type="checkbox"/> Community Liaison Officer/Marketer	<input type="checkbox"/> External Referral Source	<input type="checkbox"/> Driver/Transportation
<input type="checkbox"/> Office Staff	<input type="checkbox"/> State Surveyor/Auditor	<input type="checkbox"/> Client Advocate

Access & Restrictions

☒ Allow Weekend Access

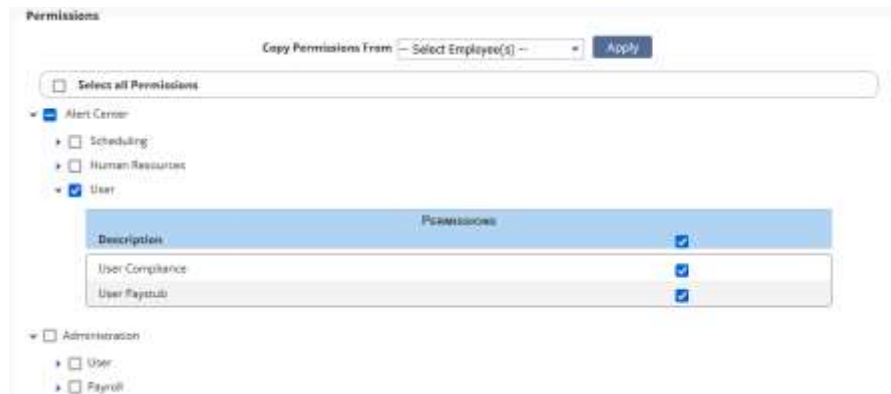
Earliest Login Time Automatic Logout Time

Electronic Visit Verification (EVV) Time Management

☐ Send notifications for late electronic visit verification clock in/out to the Alert Center

A green disappearing notification will display that confirms, “User has been created.”

Permissions - The Permissions can be copied from a previously entered user using the “Copy Permissions From” drop-down menu. For example, if the organization is entering a new RN, a current on staff RN can be selected that will have the same software access. Select the **Apply** button to finish the copy. To save time, there is a “Select all Permissions” check box that will check every single permission box below. There are categories, sub-categories and individual permissions. In the example below, Alert Center is the category, User is the sub-category and User Compliance is the individual permission. The Categories are Alert Center, Administration, Billing Clerical, Clinical, QA and Reports.



At the bottom of the window are five buttons that can navigate through the New User window.

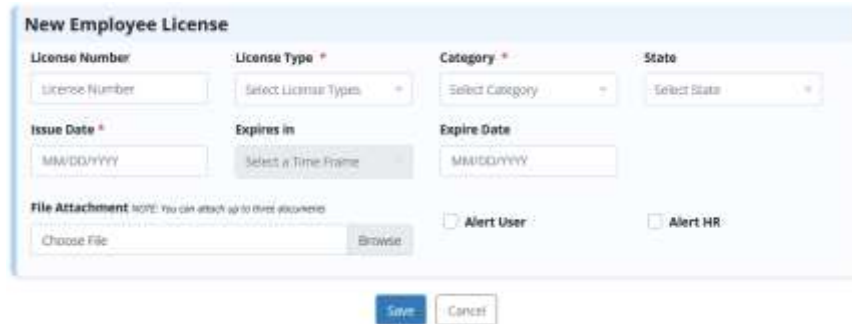


NOTE: Users with non-administrative permissions in Axxess Home Care are restricted from adding employees with administrator roles to the system.

License & Compliance - Organizations can keep track of a user's licenses and compliance in this section. Select the **Edit** or **Delete** hyperlink to make updates. Select **New License/Compliance** to add licenses.



Enter the License Number and choose the Type, Category and State from the corresponding drop-down menus. Choose or enter the Issue Date. Then choose the Timeframe of when the Expire Date Occurs in the drop-down menu. Enter the Expire Date and add any scanned documents by selecting the **Browse** button and finding the file on the computer. Select the Alert User and/or Alert HR to set a reminder in the system to follow up on the user's license or compliance. Select **Save** when complete.



New Employee License

License Number:

License Type:

Category:

State:

Issue Date:


Expires in:

Expire Date:

File Attachment: NOTE: You can attach up to three documents

☐ Alert User ☐ Alert HR

Pay Rates - See *Admin/Company Setup/Pay Rates* for the functionality of sorting, viewing and updating rates. Select the **Copy Existing Rates** button to duplicate rates from another user.



Branch: Payment Source:

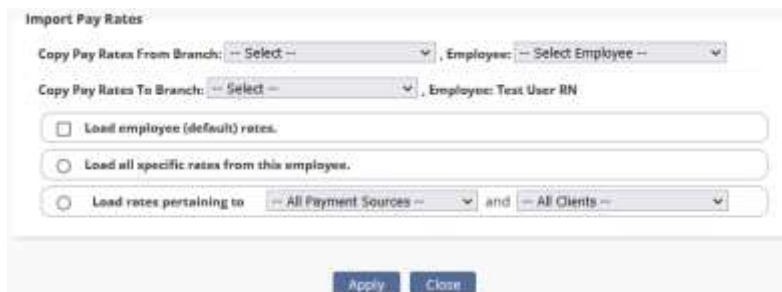
Client:

☐ Default Rate ☐ Specific Rate ☐ A rate will override this in the future

☐ Future rate has been applied

Task	Sun	Mon	Tue	Wed	Thu	Fri	Sat
PT Discharge							
12-Hour Tasks							
24 hour visit note							
30 Day Summary/Case Notes							
60 Day							
60 Day							
60 Day Summary							
789							
AA - Compliance training							
AA - mileage between two clients							
AA- Assessment							

Choose an employee from the Copy Pay Rates from the drop-down menu. Check the box to load employee (default) rates or select the bullets to load specific rates and/or Load rates about specific payment sources or clients. Select **Apply** when complete.



Import Pay Rates

Copy Pay Rates From Branch: Employee:

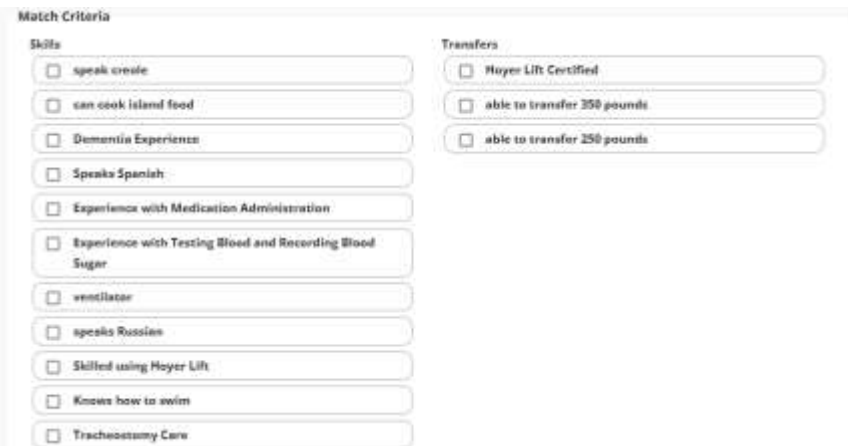
Copy Pay Rates To Branch: Employee:

☐ Load employee (default) rates.

☐ Load all specific rates from this employee.

☐ Load rates pertaining to and

Match Criteria - Organizations can determine how users are matched with clients. Select the one or more boxes next to a user's Skills, Transfers, Personality Traits, Pets and/or General criteria.



Match Criteria

Skills

- ☐ speak creole
- ☐ can cook island food
- ☐ Dementia Experience
- ☐ Speaks Spanish
- ☐ Experience with Medication Administration
- ☐ Experience with Testing Blood and Recording Blood Sugar
- ☐ ventilator
- ☐ speaks Russian
- ☐ Skilled using Hoyer Lift
- ☐ Knows how to swim
- ☐ Tracheostomy Care

Transfers

- ☐ Hoyer Lift Certified
- ☐ able to transfer 350 pounds
- ☐ able to transfer 250 pounds

Availability - Enter the user's availability to work in the following grid. Select squares in the grid using the plus icon. After selecting, the square will turn green. Choose an Employee from the Load another employee's availability drop-down menu then select **Load** to copy availability from another user. Select the **All** button to select every square in the grid or select **Clear** to remove all green squares.



Employee Availabilities

Legend: Available

Load another employee's availabilities:
 -- Select Employee -- Load

Buttons: All Clear

		Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Shift 3 11 PM - 7 AM	12 AM (Midnight)							
	1 AM							
	2 AM							
	3 AM							
	4 AM							
	5 AM							
Shift 1 7 AM - 3 PM	6 AM							
	7 AM							
	8 AM							
	9 AM							
	10 AM							
	11 AM							
	12 PM							

Immunization - User immunizations are tracked in this section. Immunization lists can be exported to an Excel spreadsheet by selecting the **Export to Excel**

button in the top right. To add an immunization, select the **Add Immunization** button in the top left.

Add Immunization
Decline/Contraindicate Immunization
Export to Excel

ACTIVE IMMUNIZATIONS						
Immunization	Administered?	Date Administered / Documented	Administered By	Lot #	Reason	Action
Influenza	Yes	12/22/2021	Clinic			Delete Deactivate

INACTIVE IMMUNIZATIONS						
Immunization	Administered?	Date Administered / Documented	Administered By	Lot #	Reason	Action
COVID-19, Single Dose	Declined	12/23/2021				Delete Reactivate

Back
Refresh Immunizations
Exit

A new window will open in which organizations must choose the Type of immunization and who it was Administered By from their corresponding drop-down menus. Then select the Administration Date by writing or selecting the date in the calendar. Users can select **Save & Close**, or if there is more than one immunization to add, select **Save & Add Another** to continue with another blank “Immunization Log Information” window.

Immunization Log Information

Type
Administration Date
Administered By

Save & Close
Save & Add Another
Cancel

It will then show up under the Active Immunizations section. If a user declines an immunization, it can also be added by selecting the **Decline/Contraindicate Immunization** button at the top of the page. It will open another log information window where the Type of Immunization must be chosen again. Either write in or select the date from the calendar. Select whether comorbid condition is present. Then, mark whether the immunization was Declined or Contraindication. Users can **Save** this, or if there is more than one declined immunization to add, select the **Save & Add Another** to continue with another blank “Immunization Log Information” window.



Immunization Log Information

Type of Immunization:

Date Documented:

Comorbid Condition Present: ☐ Yes ☐ No

☐ Declined

☐ Contraindication

Save Save & Add Another Cancel

There is also an option to **Delete** or **Inactivate** an immunization by selecting the hyperlinks in the far right under Action. Once an immunization is inactivated, it falls under the Inactive Immunizations section, where it then can also be Deleted or Reactivated.

NOTE: The Activity Log  icon will show who and when a user made an edit in any window provided.

Select the **Exit** button at the bottom to leave the New User window. The following prompt will show. Select **Yes** to add another worker or select **No** to move on.

EDITING A USER

Admin/Lists/Users

A window will open that will show a list of all current users. To filter for users, choose the Status from the drop-down menu and start typing any user information in the Filter by Text space. A new user can also be added from here, selecting the **New User** button in the top right.

Organizations can export the list of all users to an Excel spreadsheet by selecting the **Excel Export** button in the top right. The organization can **Delete** users by selecting the hyperlink to the far right under the Action column. To edit a user, select the **Edit** hyperlink under the action column. The total number of Active users will show at the bottom of the window.

List Users Axxess Testing Agency							
Status: Active		Filter by Text: <input type="text" value="Start Typing"/>		<input checked="" type="checkbox"/> User can login to website.		New User Excel Export Refresh	
Name	Title	Email	Phone	Mobile	Employment Type	Sex	Action
Aayush Kumar RN	Alternate Administrator	akumar@axxess.com	+1 939-327-28	(858) 603-3869	Employee	Male	Edit Delete
Abby St Thomas HHA	Home Care Aide	Atby.St.Thomas@aol.com		(407) 591-0365	Employee	Female	Edit Delete
Abdul Baute RN	Alternate Administrator	abaute@axxess.com		(123) 455-2333		Male	Edit Delete

The edit user window is split into eight tabs. The only tab that was not previously shown in the new user steps (above) is the Emergency Contacts tab.

Emergency Contacts - Where user emergency contacts are managed. To add a contact, select the **Add Contact** button in the top right. In the **New Contact** window, enter the emergency contact's information. To make the contact the employee's primary emergency contact, check the box next to **Make Primary**. Only one emergency contact can be marked as the primary contact.

New Contact

First Name *

M.I.

Last Name *

Relationship *

Primary Phone *

Home Enter Phone Number

Email

Add Alternate Number

Country *

United States

Address Line 1 *

Street and number, P.O. box, c/o

Address Line 2

Apartment, suite, unit, building, floor, etc.

City/Town *

State *

- Select State -

Postal Code *

Save

Cancel

In the Actions column, users can edit, delete and mark emergency contacts as primary.

Emergency Contacts

Add Contact

First Name	Last Name	Primary Phone	Relationship to Employee	Email Address	Actions
Ivy	Pierson	(214) 704-0935	Spouse		Mark as Primary  

ADDING A PHYSICIAN

Admin/New/Physician or Admin/Lists/Physicians/New Physician

A new window will open. The quickest way to enter a physician is to begin entering their NPI number. As the number is typed, physicians and their corresponding NPI numbers will appear below for selection. After selecting the physician and hitting the tab key, 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.

Search Physician

NPI Number Lookup

1395701900

1395701900 -- CHRISTOPHER PIERSON

Physician Information

First Name

Middle Initial

Last Name

Taxonomy Code

Credentials

NPI Number

Other Provider ID

PECOS Verification

Physician Address

Country

Address Line 1

Address Line 2

City/Town

State

Postal Code

Specialty

Order Delivery Method

Primary Phone

Work

Fax Number

Email

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

Notice if the physician is already listed in the NPI registry, then the system will automatically do a PECOS Verification. A green check mark indicates they are PECOS verified; a red "X" indicates they are not.

Select the **Add License** button to add any licenses tied to the physician. Enter the License Number, choose the State, enter the Issue and Expiration Date with the option to add Attachments (only after a physician is saved). Select **Save** to finish.



The 'New License' form contains the following fields:

- License Number:** Text input field.
- State:** Dropdown menu with 'Select State' as the placeholder.
- Issue Date:** Date picker field.
- Expiration Date:** Date picker field.
- Attachments:** Section with a note: '* Note: Upload fields will be shown only after the physician is saved.'

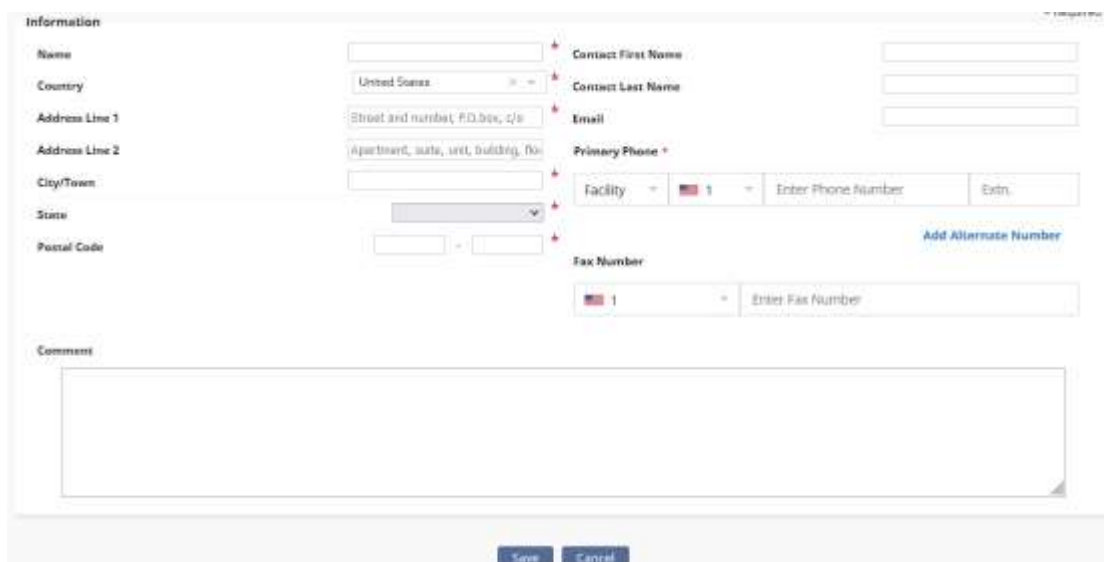
At the bottom are three buttons: **Save**, **Save & Add Another**, and **Close**.

Select **Save** to complete the new physician addition.

ADDING A NEW FACILITY

Admin/New/Facility or Admin/Lists/Facility/New Facility

A new window will open. Enter the Name, Address and Primary Phone. The more information entered, the better. When finished, select the **Save** button at the bottom.



The 'New Facility' form is divided into two main sections:

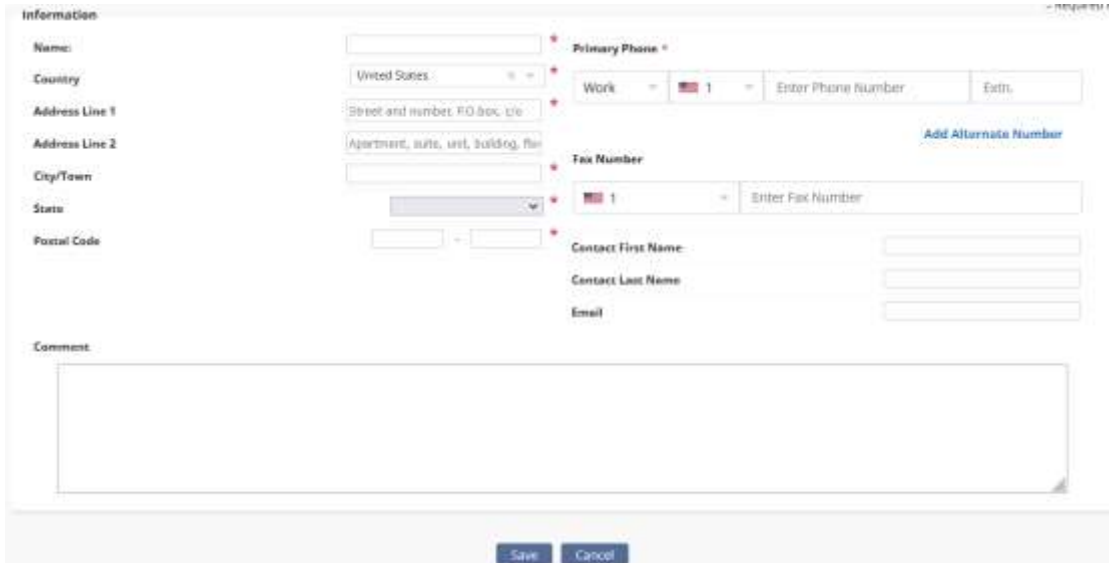
- Information:**
 - Name:** Text input field.
 - Country:** Dropdown menu (pre-set to 'United States').
 - Address Line 1:** Text input field (placeholder: 'Street and number, P.O.Box, c/o').
 - Address Line 2:** Text input field (placeholder: 'Apartment, suite, unit, building, floor').
 - City/Town:** Text input field.
 - State:** Dropdown menu.
 - Postal Code:** Text input field.
- Contact Information:**
 - Contact First Name:** Text input field.
 - Contact Last Name:** Text input field.
 - Email:** Text input field.
 - Primary Phone:** Includes a dropdown for 'Facility', a country code dropdown (pre-set to '1'), and a text input for 'Enter Phone Number'.
 - Fax Number:** Includes a country code dropdown (pre-set to '1') and a text input for 'Enter Fax Number'.

At the bottom are **Save** and **Cancel** buttons. A large text area for 'Comments' is located below the 'Information' section.

ADDING A NEW PHARMACY

Admin/New/Pharmacy or Admin/Lists/Pharmacies/New Pharmacy

A new window will open. Enter the Name, Address and Primary Phone. When finished, select the **Save** button at the bottom.



OASIS TRANSMISSION

View/OASIS Management/OASIS Ready for Export

A new window will open. Filter for OASIS by choosing the Branch (if more than one) from the drop-down menu. Then select **Refresh**. The client OASIS visits that meet the criteria will appear below.



#	Client Name	Assessment Type	Assessment Date	Care Period	Payment Source	Correction #
1	ROSSY, BARBIE	OASIS-D1 Recertification	11/28/2021	12/01/2021 - 01/29/2022	FR Claims	00 (Edit)
2	ROSSY, SOC	OASIS-D1 Start of Care	11/14/2021	11/08/2021 - 12/07/2021	FR Claims	00 (Edit)
3	ROSSY, CARE PERIOD	OASIS-D1 Start of Care	11/11/2021	11/09/2021 - 12/10/2021	FR Claims	00 (Edit)
4	ROSSY, F2F	OASIS-D1 Recertification	10/29/2021	10/31/2021 - 12/29/2021	FR Claims	00 (Edit)
5	SCOTT, JOAN	OASIS-D1 Start of Care	10/04/2021	10/04/2021 - 12/02/2021	Human	00 (Edit)

Displaying items 1 - 17 of 17

Generate OASIS File Mark Selected As Exported Mark Selected As Completed (Not Exported)

There are checkboxes to the left of every client name listed. Select one or multiple then choose one of the buttons down below. If **Generate OASIS File** is chosen, the system will download the raw OASIS file on the computer to be uploaded to the Center for Medicare and Medicaid Services (CMS).

NOTE: Create a folder on the computer where OASIS files can be stored for easy access.

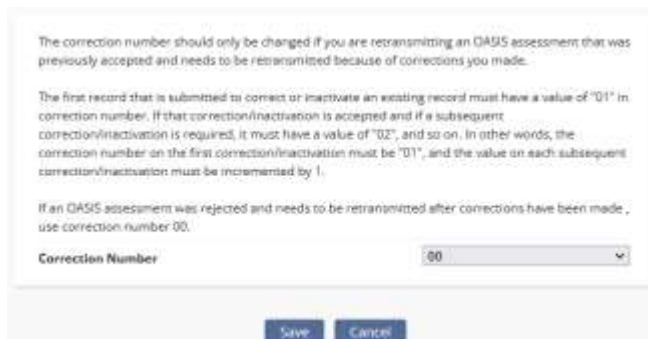
Once OASIS file(s) have been sent to CMS and accepted per the Final Validation report, go back inside the window, check the OASIS boxes that were submitted again (far left) and select the **Mark Selected as Exported** button at the bottom. A new window will open confirming that the OASIS file(s) have been accepted by CMS. To confirm, select **Yes**.



Similarly, if an OASIS needs to be marked as completed, but was not exported, check the box next to the Client Name and then select the **Mark Selected as Completed (Not Exported)** button at the bottom of the page. A confirmation window will open, select the **Yes** button.




The OASIS list can be exported to an Excel Spreadsheet by selecting the **Excel Export** in the top right of the window. If submissions have been rejected and a corrected OASIS is being resubmitted, users can change the Correction # by selecting the **Edit** hyperlink on the far right of each OASIS line. A new window will open, and a warning will appear. Change the Correction Number by selecting from the drop-down menu and then selecting the **Save** button.



ORDERS MANAGEMENT

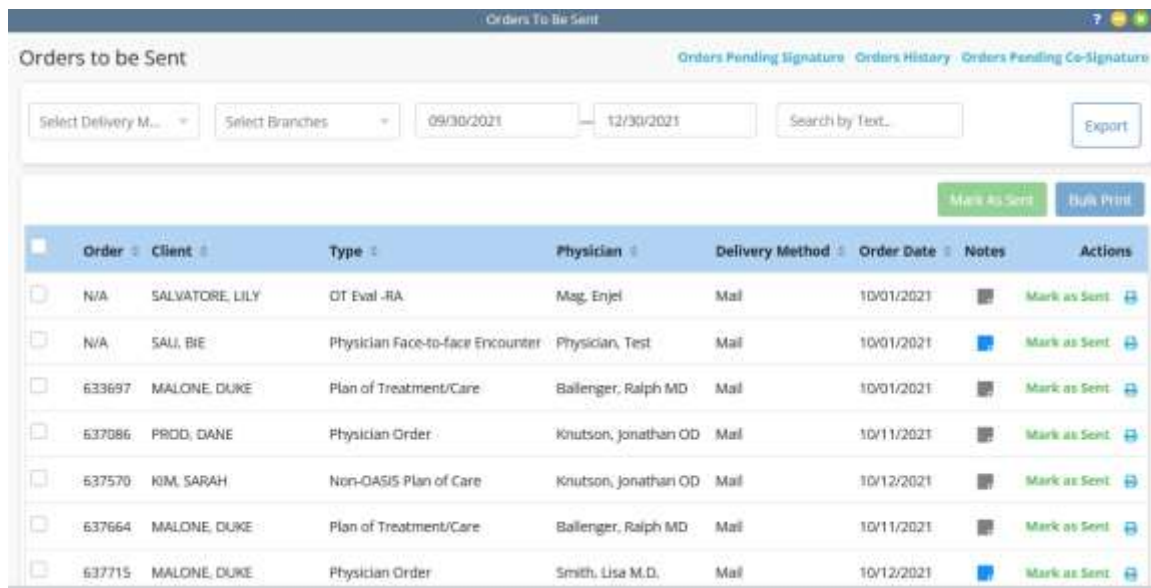
View/Orders Management








Orders Management is split into four sections. Navigate between the sections by selecting the desired section in the top right of each window.


To view or enter order notes, select the note icon  in the Notes column to enter comments for the corresponding order. The note icon turns blue once a note has been entered. Hover over the blue note icon to view the notes entered. Up to three notes can be viewed when hovering over the icon. To view additional notes, select the note icon.

To enter a new note, select **Add Note**. To update a note, click on the edit  icon. To remove a note, select the **Resolve** hyperlink.

Orders To Be Sent - This window houses orders that are ready to be sent to the physician for signature. Filtering for orders begins with the Delivery Method and the Branch (if more than one) from the drop-down menu. Choose the Date Range of the orders planning to be sent. Start typing any Order (number), Client, Type or Physician name in the free text space to narrow down the order list even further.



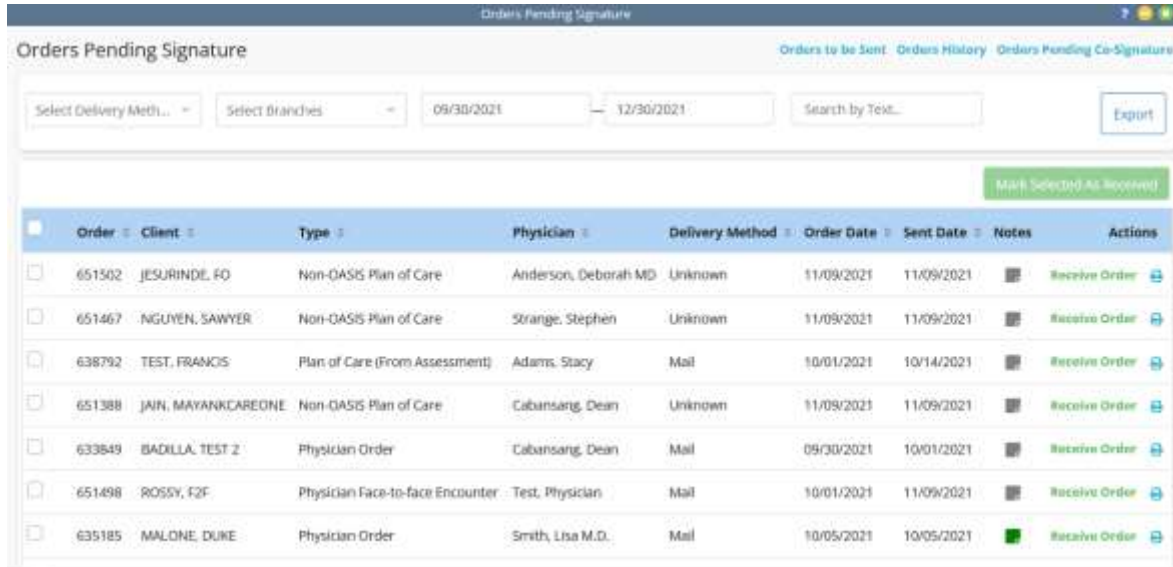
Order	Client	Type	Physician	Delivery Method	Order Date	Notes	Actions
<input type="checkbox"/>	N/A	SALVATORE, LILY	OT Eval -RA	Mag, Enjel	Mail	10/01/2021	 Mark as Sent
<input type="checkbox"/>	N/A	SALI, BIE	Physician Face-to-face Encounter	Physician, Test	Mail	10/01/2021	 Mark as Sent
<input type="checkbox"/>	633697	MALONE, DUKE	Plan of Treatment/Care	Ballenger, Ralph MD	Mail	10/01/2021	 Mark as Sent
<input type="checkbox"/>	637086	PRODD, DANE	Physician Order	Knutson, Jonathan OD	Mail	10/11/2021	 Mark as Sent
<input type="checkbox"/>	637570	KIM, SARAH	Non-OASIS Plan of Care	Knutson, Jonathan OD	Mail	10/12/2021	 Mark as Sent
<input type="checkbox"/>	637664	MALONE, DUKE	Plan of Treatment/Care	Ballenger, Ralph MD	Mail	10/11/2021	 Mark as Sent
<input type="checkbox"/>	637715	MALONE, DUKE	Physician Order	Smith, Lisa M.D.	Mail	10/12/2021	 Mark as Sent

To print an order, select the printer icon  on the far right of the order. Once printed, check the boxes to the left of the order and select the green **Mark as Sent** button for multiple orders. Select the green **Mark as Sent** hyperlink for

individual orders. They will then be marked as sent to the physician, and a green disappearing notification will confirm.

Select more than one checkbox and then select the **Bulk Print** button to print more than one order at once. To export the list of orders that meet the search parameters, select the **Export** button in the top right.

Orders Pending Signature - This window houses orders that need to be “marked as signed” by the physician. Filtering for orders begins with the Delivery Method and the Branch (if more than one) from the drop-down menu. Choose the Date Range of the orders planning to be signed. Start typing any Order (number), Client, Type or Physician name in the free text space to narrow down the order list even further.



Order	Client	Type	Physician	Delivery Method	Order Date	Sent Date	Notes	Actions
<input type="checkbox"/> 651502	JESURINDE, FO	Non-OASIS Plan of Care	Anderson, Deborah MD	Unknown	11/09/2021	11/09/2021		Receive Order
<input type="checkbox"/> 651467	NGUYEN, SAWYER	Non-OASIS Plan of Care	Strange, Stephen	Unknown	11/09/2021	11/09/2021		Receive Order
<input type="checkbox"/> 638792	TEST, FRANCOIS	Plan of Care (From Assessment)	Adams, Stacy	Mail	10/01/2021	10/14/2021		Receive Order
<input type="checkbox"/> 651388	JAIN, MAYANKCAREONE	Non-OASIS Plan of Care	Cabansang, Dean	Unknown	11/09/2021	11/09/2021		Receive Order
<input type="checkbox"/> 633849	BADILLA, TEST 2	Physician Order	Cabansang, Dean	Mail	09/30/2021	10/01/2021		Receive Order
<input type="checkbox"/> 651498	ROSSY, F2F	Physician Face-to-face Encounter	Test, Physician	Mail	10/01/2021	11/09/2021		Receive Order
<input type="checkbox"/> 635185	MALONE, DUKE	Physician Order	Smith, Lisa M.D.	Mail	10/05/2021	10/05/2021		Receive Order

To mark a single order as signed, select the green **Receiver Order** hyperlink to the right of the printer icon. Multiple orders can be marked as signed by checking the boxes to the left of the order then select the **Mark Selected as Received** button.

Mark Selected As Received									
<input type="checkbox"/>	Order	Client	Type	Physician	Delivery Method	Order Date	Sent Date	Notes	Actions
<input checked="" type="checkbox"/>	651502	JESURINDE, FO	Non-OASIS Plan of Care	Anderson, Deborah MD	Unknown	11/09/2021	11/09/2021		
<input checked="" type="checkbox"/>	651467	NGUYEN, SAWYER	Non-OASIS Plan of Care	Strange, Stephen	Unknown	11/09/2021	11/09/2021		
<input type="checkbox"/>	638792	TEST, FRANCIS	Plan of Care (From Assessment)	Adams, Stacy	Mail	10/01/2021	10/14/2021		Receive Order

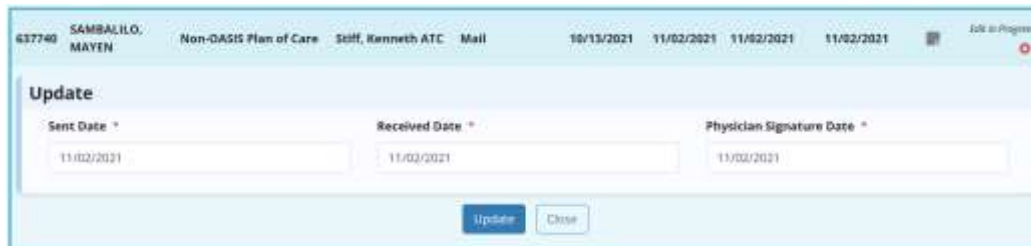
A new window will open to confirm/enter the Received and Physician Signature Date, then select the **Mark** button. The date auto-populates with today's date. Once marked as signed, they will disappear from the Orders Pending Signature window and be in the Orders History section.

Received Date *	Physician Signature Date *
<input type="text" value="12/30/2021"/>	<input type="text" value="12/30/2021"/>
<input type="button" value="Mark"/>	<input type="button" value="Cancel"/>

Orders History - This is where all orders in every status are housed. Filtering for orders begins with the Branch (if more than one) from the drop-down menu and choosing the Date Range. The results can be sorted by nine different columns by selecting the column heading: Order number, Client, Type, Physician, Delivery Method, Order Date, Sent Date, Received Date and MD Sign Date.

Orders History									
<input type="text" value="Select Delivery Method"/> <input type="text" value="Select Branches"/> <input type="text" value="10/06/2021"/> <input type="text" value="01/06/2022"/> <input type="button" value="Export"/>									
Order	Client	Type	Physician	Delivery Method	Order Date	Sent Date	Received Date	MD Sign Date	Notes
0	JOHNSON, NEWA	Physician Face-to-Face Encounter	Kumar, Ramesh MD	Unknown	11/01/2021	11/03/2021	11/04/2021	11/04/2021	
0	BOSS, EIGHT	Physician Face-to-Face Encounter	Test, Physician	Unknown	11/01/2021	12/21/2021	12/21/2021	12/21/2021	
635463	MALONE, DUKE	Physician Order	Smith, Lisa MD	Mail	10/06/2021	N/A	N/A	N/A	
637725	MONK, WESLEY	Non-OASIS Plan of Care		Mail	10/12/2021	N/A	N/A	N/A	
637748	SAWBAULD, MAYEN	Non-OASIS Plan of Care	SOB, Kenneth ATC	Mail	10/13/2021	11/02/2021	11/02/2021	11/02/2021	

Select the edit icon to make updates. The line will expand, type in the date or select the calendar icon to adjust the order's Sent, Received and/or Physician Signature Date. Select **Update** to save.



Select the **Export** button in the top right to create an Excel spreadsheet of all orders in the window (based off search parameters).

Orders Pending Co-Signature - This is where orders are housed that need a co-signature because the user who signed the order requires a co-signature (per their permissions). To find a specific order, choose the Branch (if more than one) from the drop-down menu, then select a Date Range. Start typing any Order (number), Date, Client, MRN, Type, Physician, Clinician and/or Sign Date in the free text space to narrow down the order list even further.

The list of orders can also be exported to an Excel Spreadsheet by selecting on the **Excel Export** spreadsheet button in the top right of the window.



Order	Order Date	Client	MRN	Type	Physician	Clinician	Sign Date
677783	01/04/2022	SALVATORE, IAN	ALMPROD_002	Kim's Physician Order	Mag. Angel	Angel Magdugo RN	01/04/2022
678565	12/31/2021	SALVATORE, CANDICE	ALM111	Physician Order	Mag. Gel	Angel Magdugo RN	01/01/2022
675261	12/29/2021	ODL, MESUT H.	MER4	Physician Order	Taylor, Jeffrey DO	Abdulmumin Shehu RN	12/29/2021

Total: 3

Selecting the Client name hyperlink will take the user to the client's chart. To co-sign an order, select the hyperlink under the column **Type**. A new window will open, showing the printed version of the order. There are five options/buttons of what to do with the order (depending on permissions). The **Return** button works identically to a QA clinician returning a task to the submitter. **Download** will download a PDF version of the order on the computer. Select **Co-Sign**.

Axxess Testing Agency 18000 Dallas Parkway Suite 7000 DALLAS, TX, 75248-1234 Phone: (214) 577-7719 Fax: (780) 797-7978		PHYSICIAN ORDER	
Client Name: Ozil, Mesut H. 54 Ashburton grove Dallas, TX, 00000-0000 1871771234		Physician: Taylor, Jeffrey 1819 S Shiloh Rd Ste 210 Garland, TX, 75042-8211 Phone: (972) 864-2022 Fax: (972) 271-3437 NPI: 1780695031	
MRN: MER4 DOB: 10/31/1990			
Order Date: 12/29/2021 12:00 AM Order #: 675261		Care Period: 10/27/2020 -	
Allergies: Summary: ozil order			
P HR Resp Temp Weight Greater Than Less Than Vital Signs Respiration Weight Height (in inches)			
<div> <input type="button" value="Co-Sign"/> <input type="button" value="Return"/> <input type="button" value="Download"/> <input type="button" value="Print"/> <input type="button" value="Close"/> </div>			

The co-signature window will open (shown below). After entering the co-signature, the user can either choose to **Co-Sign** the order or **Co-Sign And Approve**. After co-signing, the order will disappear from the Orders Pending RN Co-Signature window.

Co-Signature	
Order Number:	675261
Client Name:	OZIL, MESUT H.
Created Date:	12/29/2021
Clinician Co-Signature:	
Clinician Co-Signature Date:	12/29/2021
Clinician Co-Signature Time:	09:38 PM
<div> <input type="button" value="Co-Sign"/> <input type="button" value="Co-Sign And Approve"/> <input type="button" value="Exit"/> </div>	

ADDING A PAYMENT SOURCE

Admin/New/Payment Source

A new window will appear. The new payer window is split up into five tabs:

Information - Enter the Display Name and select the Invoice Type. Whichever type is chosen will dictate which tabs will be available on the left.

Choose the Payer & Bill Type from the drop-down menus. Enter the Taxonomy, Tax ID and select the Agency NPI. Select whether the payment source requires a Secondary Provider ID or the organization has a contact with the insurance.

If UB-04 or HCFA 1500 were chosen, a Clearinghouse will have to be chosen. Indicate if the payer will split overnight shifts into two billing lines. Then the organization must decide who is doing the billing (organization, Axxess or vendor). Then enter the Payer Information.

New Payment Source | Axxess Testing Agency

* = Required Field

Information

Display Name

Invoice Type

☐ UB-04

☐ HCFA 1500

☐ Invoice

Payer Type

Bill Type

Facility Type

Taxonomy

Tax ID

Agency NPI

☐ This payment source requires a Secondary Provider ID

☐ This payment source includes family care provider limits

☐ Agency has a contract with this insurance


Billing Requirements

Rounding Policies

Select a rounding policy to calculate bill rates. If no rounding rules are selected, bill rates will calculate based on actual task duration. Rounding policies do not apply to visit and base rate types.

☒ Round by Time

☐ Round by Task Duration

NOTE: The information  icon is a reference. Hover over the icon for more insight about that question or section.

Enter the person used to communicate at the Payment Source and then decide on how authorizations will be setup. Select **Save & Close** if the new payment source is complete or **Save** to continue to the next tab (depending on Invoice Type).

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

Payer Name

Source of Payment

09 - Self-pay

Payer ID

Submitter ID

Interchange Receiver ID

Interchange Submitter Qualifier

Mutually Defined (ZZ)

Interchange Payer Qualifier

Mutually Defined (ZZ)

Primary Phone

Wo...

1

Enter Phone Number

Extn.

Add Alternate Number

Fax Number

1

Enter Fax Number

Country

-- Select Country --

Address Line 1

Address Line 2

City/Town

Postal Code


Contact at Payment Source

First Name


Last Name

Email

NOTE: If all required information is not entered, the following disappearing notification will appear:




The required sections that are missing information will be highlighted in red:



UB-04 - Depending on how the insurance pays out, whether episodic or per visit, will determine if this tab is active. The payer being added in the screenshot below is for the UB-04. Fill out the Locator sections 31a through 81CCd on the form and their corresponding dates.

axxess.com


/Axxess

UB-04 Print Specification

☐ Check here if you want to print it on a pre-print form.

UB-04 Locator Specification

☐ Locator 13 — Check here if the payor requires the admission hour

Locator 31a	<input type="text"/>	<input type="text"/>	<input type="text"/>	Locator 34a	<input type="text"/>	<input type="text"/>	<input type="text"/>
Locator 31b	<input type="text"/>	<input type="text"/>	<input type="text"/>	Locator 34b	<input type="text"/>	<input type="text"/>	<input type="text"/>
Locator 32a	<input type="text"/>	<input type="text"/>	<input type="text"/>	Locator 35a	<input type="text"/>	<input type="text"/>	<input type="text"/>
Locator 32b	<input type="text"/>	<input type="text"/>	<input type="text"/>	Locator 35b	<input type="text"/>	<input type="text"/>	<input type="text"/>
Locator 33a	<input type="text"/>	<input type="text"/>	<input type="text"/>	Locator 36a	<input type="text"/>	<input type="text"/>	<input type="text"/>
Locator 33b	<input type="text"/>	<input type="text"/>	<input type="text"/>	Locator 36b	<input type="text"/>	<input type="text"/>	<input type="text"/>

☐ Locator 38—Change Payor Name? (Print Only)


Locator 38a	<input type="text"/>	<input type="text"/>	<input type="text"/>	Locator 50a	<input type="text"/>
Locator 38b	<input type="text"/>	<input type="text"/>	<input type="text"/>	Locator 50b	<input type="text"/>
Locator 38c	<input type="text"/>	<input type="text"/>	<input type="text"/>	Locator 50c	<input type="text"/>
Locator 38d	<input type="text"/>	<input type="text"/>	<input type="text"/>	Locator 64a	<input type="text"/>

☐ Locator 44 — Check here if the payor requires HIPP code

Locator 64b	<input type="text"/>	<input type="text"/>	<input type="text"/>
Locator 64c	<input type="text"/>	<input type="text"/>	<input type="text"/>

Locator 81CCa

Locator 81CCb

Below are the Additional Providers and Bill Rates sections. Selecting the **Add Provider** button to enter an additional provider. A line will appear in the Provider section, choose the Qualifier, Locator Field and Value Source drop-down menus. If Providers need to be removed, select the red  icon. Then select the **Add Bill Rate** button.

Additional Providers

Qualifier	Locator Field	Value Source	Other ID Qualifier	NPI	Other ID	Taxonomy Code	First Name	Last Name
-- Select Pnt --	-- Select Loc --	-- Select Val --	-- Select Qtr --					

☐ Check here to map service providers at line item level in ANSI file.

☐ Check here to create separate claims by rendering clinician.

Billable Items

Billable Mileage/Kilometers

☐ Yes ☒ No

Bill Rates

Task	Description	Rev. Code HCPCS	Rate	Unit Type	Modifiers	Time Limit	Action
------	-------------	-----------------	------	-----------	-----------	------------	--------

A new window will open. Fill out the Add Visit Information form and select **Save & Exit** or select **Save & Add Another** for additional entries.



Add Visit Information

Task:

Preferred Description:

Revenue Code:

HCPCS Code:

Rate:

Modifier:

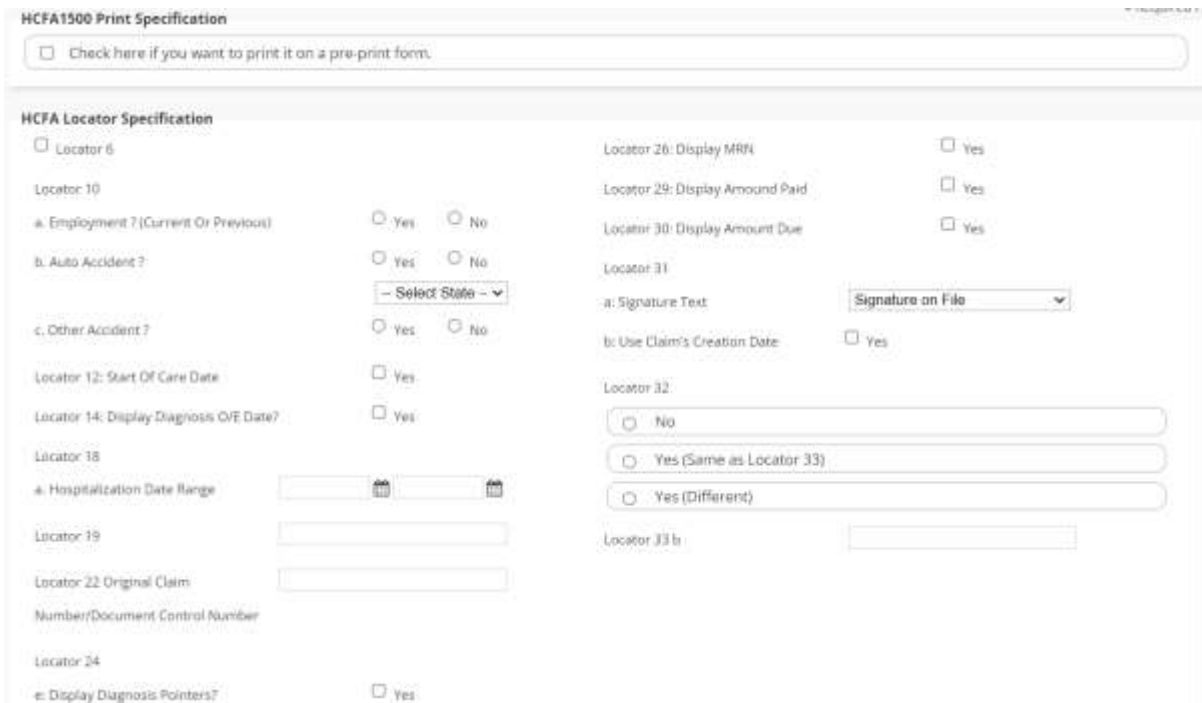
Service Unit Type:

☐ Check if the units of this visit type are totaled per day on a single line.

☐ Check if travel time is covered by this payer.

Select the **Previous** button to get back to the Information tab or tap on the **Save & Close** button at the bottom to complete the Payment Source.

HCFA - In this step, the organization will need to decide if they want HCFA 1500 printed on a pre-print form. After that, the HCFA Locators must be entered and chosen.



HCFA1500 Print Specification

☐ Check here if you want to print it on a pre-print form.

HCFA Locator Specification

☐ Locator 6

Locator 10

a. Employment ? (Current Or Previous) ☐ Yes ☐ No

b. Auto Accident ? ☐ Yes ☐ No

c. Other Accident ? ☐ Yes ☐ No

Locator 12: Start Of Care Date ☐ Yes

Locator 14: Display Diagnosis O/E Date? ☐ Yes

Locator 18

a. Hospitalization Date Range

Locator 19

Locator 22 Original Claim Number/Document Control Number

Locator 24

e. Display Diagnosis Pointers? ☐ Yes

Locator 26: Display MRN ☐ Yes

Locator 29: Display Amount Paid ☐ Yes

Locator 30: Display Amount Due ☐ Yes

Locator 31

a: Signature Text

b: Use Claim's Creation Date ☐ Yes


Locator 32

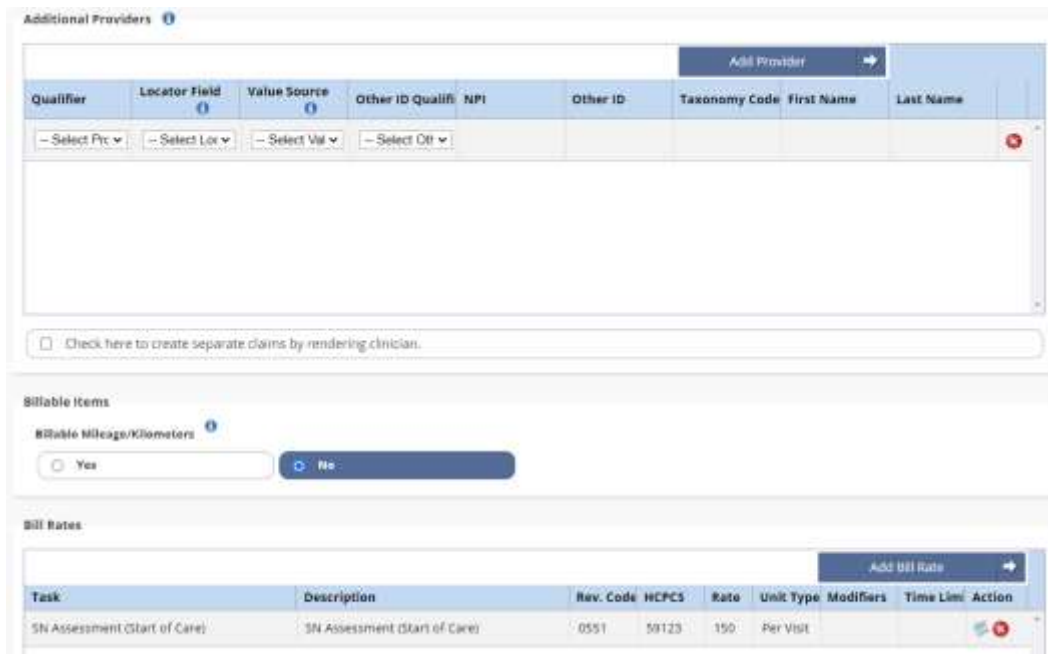
☐ No

☐ Yes (Same as Locator 33)


☐ Yes (Different)

Locator 33 Is


Below the locators are the additional providers and bill rates. Selecting the **Add Provider** button to enter an additional provider. A line will appear in the Provider section, choose the Qualifier, Locator Field and Value Source drop-down menus. If providers need to be removed, select the red  icon. Then select the **Add Bill Rate** button.






The screenshot shows two main sections: 'Additional Providers' and 'Bill Rates'.

Additional Providers: This section has a table with columns: Qualifier, Locator Field, Value Source, Other ID Qualif, NPI, Other ID, Taxonomy Code, First Name, and Last Name. Below the table are four drop-down menus: '-- Select Ptc --', '-- Select Loc --', '-- Select Val --', and '-- Select Oth --'. There is a red  icon in the top right corner of the table area. Below the table is a checkbox labeled 'Check here to create separate claims by rendering clinician.'.

Billable Items: This section has a label 'Billable Mileage/Kilometers' and two radio buttons: 'Yes' and 'No'.

Bill Rates: This section has a table with columns: Task, Description, Rev. Code, HCPCS, Rate, Unit Type, Modifiers, Time Lim, and Action. The first row shows 'SN Assessment (Start of Care)' for both Task and Description, with Rev. Code '0551', HCPCS '59123', Rate '150', and Unit Type 'Per Visit'. There is a red  icon in the top right corner of the table area.

A new window will open. Fill out the Add Visit Information form and select **Save & Exit** or select **Save & Add Another** for additional entries. To edit previously entered bill rates, select the edit  icon or if they need to be removed, select the red  icon.



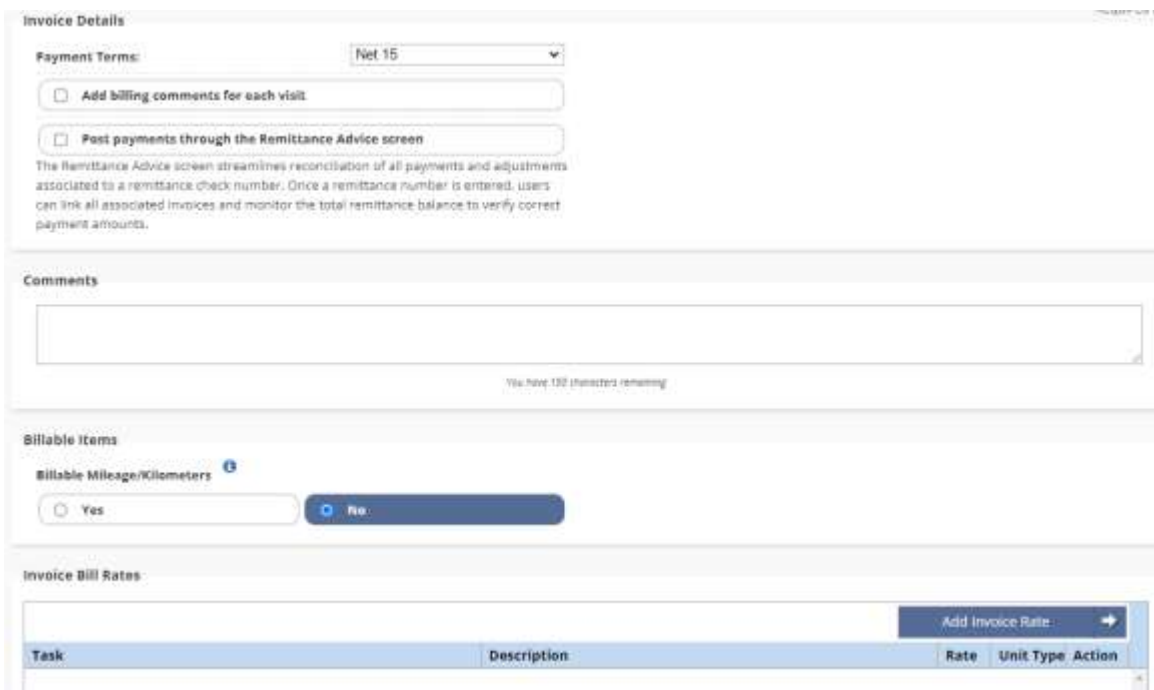
The 'Add Visit Information' form contains the following fields and options:

- Task: -- Select Task --
- Preferred Description: [Text Field]
- Revenue Code: [Text Field]
- HCPCS Code: [Text Field]
- Rate: 50
- Modifier: [Text Field]
- Service Unit Type: -- Select Unit Type --
- Check if the units of this visit type are totaled per day on a single line. ☐
- Check if the tasks with the same HCPCS code are rolled up for the entirety of a claim. ☐
- Check if travel time is covered by this payer. ☐



At the bottom are three buttons: 'Save & Exit', 'Save & Add Another', and 'Exit'.

Select the **Previous** button to get back to the **Information** tab or tap on the **Save & Close** button at the bottom to complete the Payment Source.

Invoice - The last step tab allows for organizations to set up Payment Sources that require an Invoice. First, decide the Payment Terms. Select the checkbox(es) if the organization needs to add billing comments for each visit or post payments through the Remittance Advice screen. There is space for Comments and decide if mileage is billable. Select **Add Invoice Rate** to add a new invoice rate.



The screenshot shows the 'Invoice Details' form. It includes a 'Payment Terms' dropdown set to 'Net 15'. There are two checkboxes: 'Add billing comments for each visit' and 'Post payments through the Remittance Advice screen'. Below these is a text area for 'Comments' with a character count 'You have 100 characters remaining'. The 'Billable Items' section has a 'Billable Mileage/Kilometers' dropdown set to 'No'. The 'Invoice Bill Rates' section shows a table with columns 'Task', 'Description', 'Rate', 'Unit Type', and 'Action'. An 'Add Invoice Rate' button is in the top right of the table area.

Choose the Task and Service Unit Type then enter the Preferred Description, Rate and Service Units per Visit. Select **Save & Exit** to finish or select **Save & Add Another** for additional entries. To edit previously entered invoice rates, select the edit  icon or if they need to be removed, select the red  icon.



The screenshot shows the 'New Visit Information' form. It has four fields: 'Task' (dropdown), 'Preferred Description' (text), 'Rate' (text with currency symbol), and 'Service Unit Type' (dropdown). At the bottom are three buttons: 'Save & Exit', 'Save & Add Another', and 'Close'.

EDITING AN EXISTING PAYMENT SOURCE

Admin/Lists/Payment Sources

Select the **Edit** hyperlink to the far right of the screen under the Action column. To search for a payment source, start typing any part of the Name, Payer Type, Payer Category, Payer ID, Invoice Type, Phone or Contact Person in the white free text space at the very top of the page.

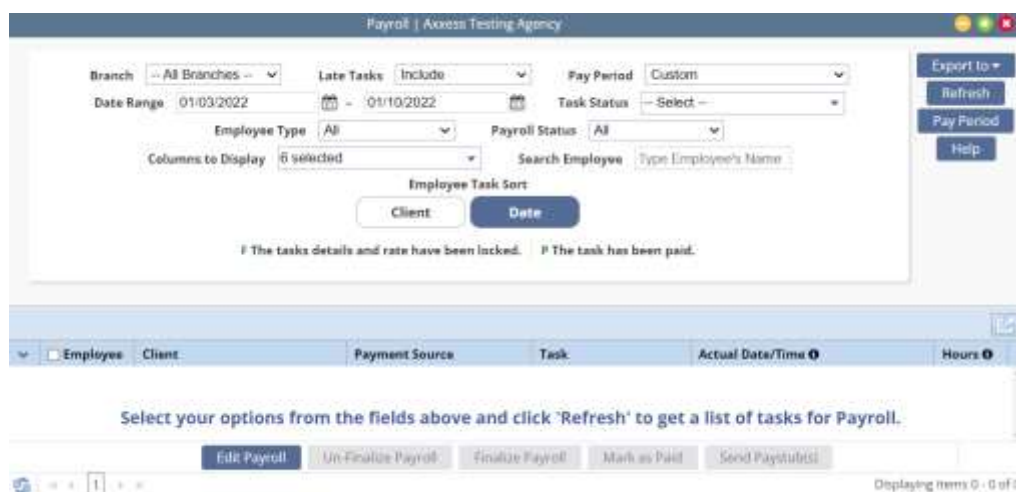


Name	Payer Type	Payer Category	Payer ID	Invoice Type	Phone	Contact Person	EVV Integration	Action
Private (Self Pay)	Self-pay	Self-pay		Invoice				Edit
AA Insurance - ALM	Self-pay	Self-pay	60054	HCFR 1500	(456) 555-5555			Edit
aetna	Medicaid (HMO/managed care)	medicaid	112343	HCFR 1500		CONTACT FIRST NAME CONTACT LAST NAME	Sandata	Edit
Aetna HCFR	Medicaid (HMO/managed care)	medicaid	60054	HCFR 1500	(456) 464-7387		Sandata	Edit
Aetna omrepid	Private/Commercial HMO/managed care	Commercial Insurance	60054	HCFR 1500	(587) 687-6876		Sandata	Edit
Aetna omrepid	Private/Commercial HMO/managed care	Commercial Insurance	60054	HCFR 1500	(587) 687-6876		Sandata	Edit
Aetna AP	Private/Commercial HMO/managed care	Commercial Insurance	555555	HCFR 1500				Edit
Aflac	Self-pay	Self-pay		Invoice				Edit

PAYROLL

Employees/Payroll

The following window will open with only search criteria at the top. Select the branch from the drop-down menu (if there is more than one). Choose to show Late Tasks, the Pay Period, Task Status, Employee Type and Payroll Status.



Payroll | Axxess Testing Agency

Branch: -- All Branches -- Late Tasks: Include Pay Period: Custom

Date Range: 01/03/2022 - 01/10/2022 Task Status: -- Select --

Employee Type: All Payroll Status: All

Columns to Display: 6 selected Search Employee: Type Employee's Name

Employee Task Sort: Client Date

If The tasks details and rate have been locked. If The task has been paid.

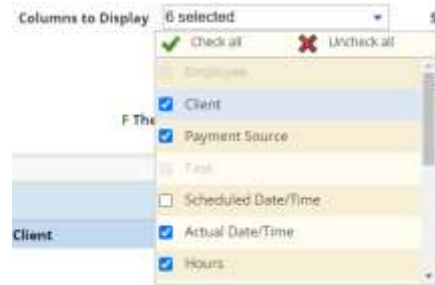
Export to Refresh Pay Period Help


Select your options from the fields above and click 'Refresh' to get a list of tasks for Payroll.

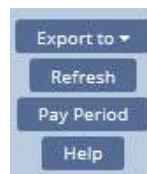
Edit Payroll Un-Finalize Payroll Finalize Payroll Mark as Paid Send Payroll(s)

Displaying items 0 - 0 of 0

Select which Columns to display by checking the corresponding boxes. Selecting the green check mark will select all statuses and selecting the red X will uncheck all choices. Search for Employees by Name and then decide whether to sort Employee tasks by Client or Date. Then select the **Refresh** button to see the results.



To minimize the search window to see more employees, select the collapse  icon. Employees will be grouped by their name with a check box next to them. Selecting the > icon to the left of their name will expand their list of payable items. They are organized in the following columns: Client, Payment Source, Task, Actual Date/Time and Hours. For the top-right menu items, export the payroll list by selecting the **Export to** button and select Excel. Select the **Pay Period** button to create a new Pay Period.



The dates auto-generate to after the newest created pay period. Select the **Create** button.



Select the **Help** button to get more insight on how to setup Payroll.

Payroll Help

- Initial Payroll SetUp**
- Payroll Parameters
- Processing Payroll
- Send PayStubs
- Edit Payroll

Initial Payroll SetUp

The first step in using the payroll module is to complete the payroll tab in Admin-Manage Company Information. Once the Payroll Tab has been completed Pay Periods can be created in the payroll module.

Payroll Parameters

Branch

Select the location you are processing payroll for.

Late Tasks

Are defined as, unpaid tasks whose service date is prior to the start of the selected pay period. This parameter provides the ability to include/exclude/show only tasks that fall within this category. If selected to include, late tasks are highlighted in yellow to assist in the identification.

Pay Period

This contains a drop down list of the agency created pay periods. To create a pay period select Pay Period

Select the **Refresh** button to see the search results below based on the parameters.

<input type="checkbox"/> Employee	Client	Payment Source	Task	Actual Date/Time ⓘ	Hours ⓘ
<input type="checkbox"/> Badilla, Charlene RN					
<input checked="" type="checkbox"/> Baute, Abdul RN					
<input checked="" type="checkbox"/> AKHTAR, PALISHA		Invoice CE	Skilled nurse visit	11/21/2021 12:00 AM - 01:00 AM	1.00
<input checked="" type="checkbox"/> AKHTAR, PALISHA		Invoice CE	Skilled nurse visit	11/22/2021 12:00 AM - 01:00 AM	1.00
					2.00
					Hours
<input type="checkbox"/> Bhardwaj, Pranav RN					
BHARDWAJ, PRANAV					
06/14/2021 12:00 AM - 12:00 AM ⓘ					
Total: 2 of 88 Checked					
<div><div>Edit Payroll</div><div>Un-Finalize Payroll</div><div>Finalize Payroll</div><div>Mark as Paid</div><div>Send Paystub(s)</div></div>					

Displaying Employees 1 - 19 of 19

Select the **Employee** checkbox to check all employee boxes and again to deselect all. After selecting all employees in a previous pay period, the blue buttons at the bottom become active. To make payroll edits, select the box(es) next to the client name and select the **Edit Payroll** button.

<input checked="" type="checkbox"/>	AKHTAR, PALISHA	Invoice CE
<input checked="" type="checkbox"/>	AKHTAR, PALISHA	Invoice CE
88 Checked		
<input type="button" value="Edit Payroll"/> <input type="button" value="Un-Finalize Payroll"/>		

The Actual Date/Time becomes editable. Enter to select different days and times for tasks. When done editing, select the **Save** button.



Invoice CE	Skilled nurse visit	11/22/2021 12:00 AM	1.00
		11/22/2021 01:00 AM	
			2.00 Hours
<input type="button" value="Save"/> <input type="button" value="Cancel"/>			

Select an Employee and then the **Finalize Payroll** button.



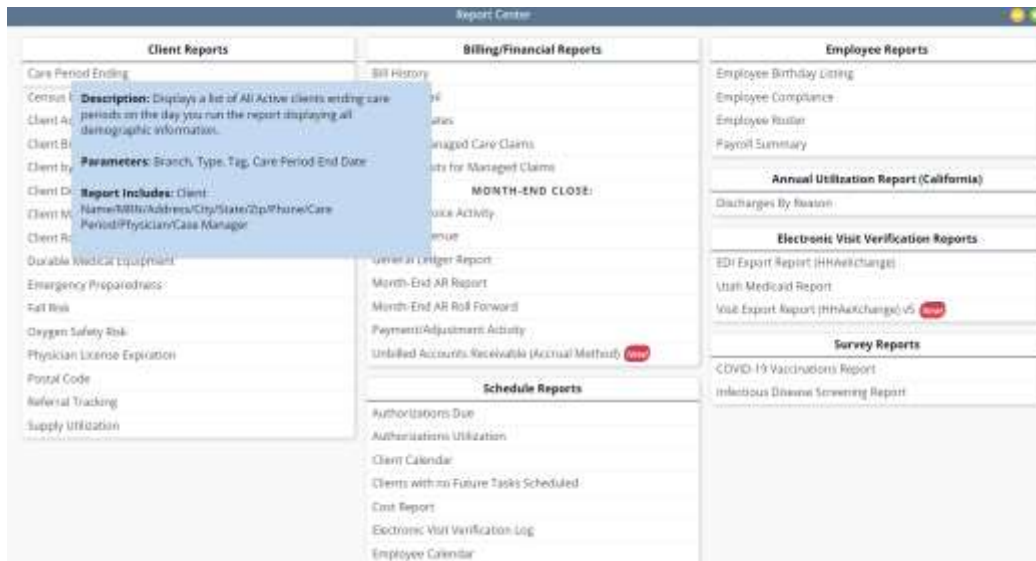
<input checked="" type="checkbox"/> laute, Abdul RN		
<input checked="" type="checkbox"/> AKHTAR, PALISHA	Invoice CE	Skilled ni
<input checked="" type="checkbox"/> AKHTAR, PALISHA	Invoice CE	Skilled ni
Total: 2 of 88 Checked		<input type="button" value="Edit Payroll"/> <input type="button" value="Un-Finalize Payroll"/> <input type="button" value="Finalize Payroll"/>

The task updates with a green **F** next to the checkbox meaning the task details and rate have been locked. If an employee was marked as Finalized but should not have been, select the box next to their name and then select the **Un-Finalize Payroll** button, and the green **F** will be removed. If you select the same employee checkbox and then select the **Mark as Paid** button, the task then updates with a green **P** next to the checkbox meaning the task has been paid.

REPORT CENTER

Reports/Report Center

This is where all Home Care reports are found. They are split up into five categories. The categories are Client, Billing/Financial, Employee, Annual Utilization Report and Schedule Reports. Hovering over the report will show what the report entails, its Description, Parameters and what the Report Includes.



Report Center

Client Reports	Billing/Financial Reports	Employee Reports
<p>Care Period Ending</p> <p>Census</p> <p>Client Ac</p> <p>Client B</p> <p>Client By</p> <p>Client D</p> <p>Client H</p> <p>Client R</p> <p>Durable Medical Equipment</p> <p>Emergency Preparedness</p> <p>Fall Risk</p> <p>Oxygen Safety Risk</p> <p>Physician License Expiration</p> <p>Postal Code</p> <p>Referral Tracking</p> <p>Supply Utilization</p>	<p>Bill History</p> <p>Claims</p> <p>Managed Care Claims</p> <p>Units for Managed Claims</p> <p>MONTH-END CLOSE:</p> <p>Choice Activity</p> <p>Revenue</p> <p>Revenue by Center Report</p> <p>Month-End AR Report</p> <p>Month-End AR Roll Forward</p> <p>Payment/Adjustment Activity</p> <p>Unbilled Accounts Receivable (Actual Method)</p> <p>Schedule Reports</p> <p>Authorizations Due</p> <p>Authorizations Utilization</p> <p>Client Calendar</p> <p>Clients with no Future Tags Scheduled</p> <p>Cost Report</p> <p>Electronic Visit Verification Log</p> <p>Employee Calendar</p>	<p>Employee Birthday Listing</p> <p>Employee Compliance</p> <p>Employee Roster</p> <p>Payroll Summary</p> <p>Annual Utilization Report (California)</p> <p>Discharges By Reason</p> <p>Electronic Visit Verification Reports</p> <p>EDI Export Report (HHAExchange)</p> <p>Utah Medicaid Report</p> <p>Vue Export Report (HHAExchange) v5</p> <p>Survey Reports</p> <p>COVID-19 Vaccinations Report</p> <p>Infectious Disease Screening Report</p>

Description: Displays a list of All Active clients ending care periods on the day you run the report displaying all demographic information.

Parameters: Branch, Type, Tag, Care-Period End Date

Report Includes: Client Name/MRN/Address/City/State/Zip/Phone/Care-Period/Physician/Care Manager

Most of the reports function the same way. In the example report below, Client Roster, parameters must be chosen, then select the **Generate** button to the right to display the results below.

Selecting the **Excel Export** will put the information into an Excel spreadsheet. Selecting the **Reports Home** button will go back to the list of all reports.



Client Roster - Report Center

Branch: Dallas | Status: Active | Generate | Excel Export | Reports Home

Tag: -- Select -- | Payment Source: -- Select --

Type: All | Columns to Display: 8 selected

Matching Criteria: -- Select --

MRN	Client	Type	Address	Email Address	Status	SOC	DOB
GD511192030	ABABA, JESS L.	Non-Medical	16000 Dallas Parkway, Suite 700N Dallas, TX 75248		Active	07/22/2021	03/12/1980
AA74809	ABEL, AMY	Medical	2001 Custer Rd		Active	09/01/2020	02/01/1955
QA071421	ABJO, TOFUNMI	Medical	1717 E Belt Line Road		Active	07/14/2021	03/17/1980
11222	ABRAMS, JUANITA	Non-Medical	2101 Laurel St		Active	10/17/2017	12/14/2001
low123	ADAM, BLODAD	Medical	200 Majestic Eagle Dr	issobush@axxess.com	Active	01/04/2018	01/01/1920
00003	ADAM, MARCE	Medical	2101 Laurel St		Active	05/16/2017	03/12/1990
KE082721	ADAMS, JACK	Non-Medical	352 N Hwy 67		Active	04/05/2021	09/01/1955


Some reports do not generate instantaneously; they must be requested. To do this, select the parameters then select the **Request Report** button to the right of the parameters. The request then goes to a different window. It can be found in *Reports/Completed Reports*.

Here, users can retrieve a copy of the finished report and see who ran the report and when. Search through the completed reports by typing the Name, Format, Status, Requested By, Started and Completed date in the free text space at the top of the screen.

To view the report, select the hyperlink text listed under the **Name** column. To remove the report, select the **Delete** hyperlink to the far right under the Action column or to remove multiple, check the box(es) next to the report and then select the **Delete** button.



<input type="checkbox"/>	Name	Format	Status	Requested By	Started	Completed	Action
<input checked="" type="checkbox"/>	Schedule Summary	Excel	Completed	Cj Pierson RN	1/11/2022 04:14:35 PM	1/11/2022 04:14:36 PM	Delete
<input type="checkbox"/>	Schedule Summary	Excel	Completed	Cj Pierson RN	11/2/2021 09:27:14 AM	11/2/2021 09:27:15 AM	Delete
<input type="checkbox"/>	Schedule Summary	Excel	Completed	Cj Pierson RN	7/27/2020 10:28:59 AM	7/27/2020 10:28:59 AM	Delete

The refresh  icon is available in the bottom left of the window to get the latest update or select the **Refresh** button in the top right of the window.

ADDING TEMPLATES

Admin/New/Template

The window below will appear. Create a Name for the template. Then write the template inside the white Free Text section. The section is limited to 5000 characters. Once completed, select the **Save** button.

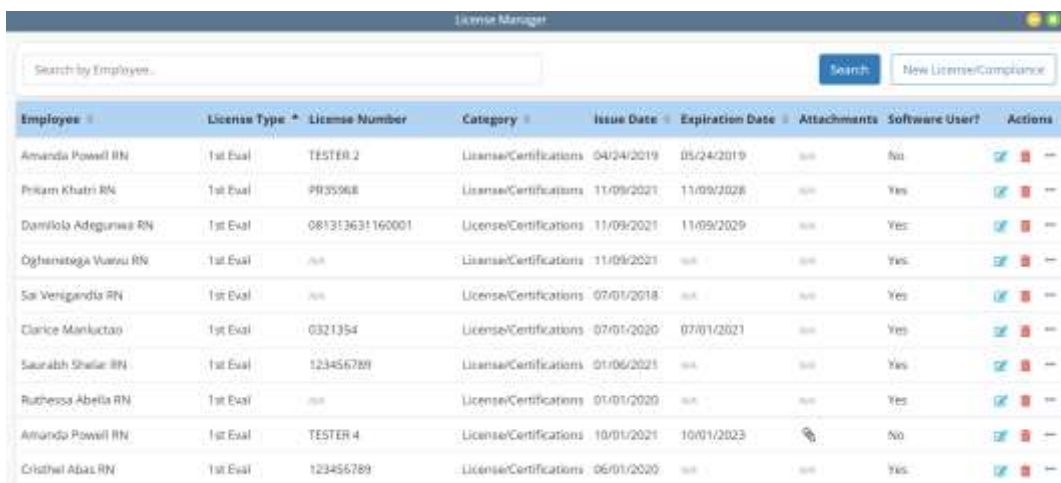
































NOTE: Templates can be used to save time for writing orders, goals, care plans, physician statements, narratives and other places inside visits

LICENSE MANAGER

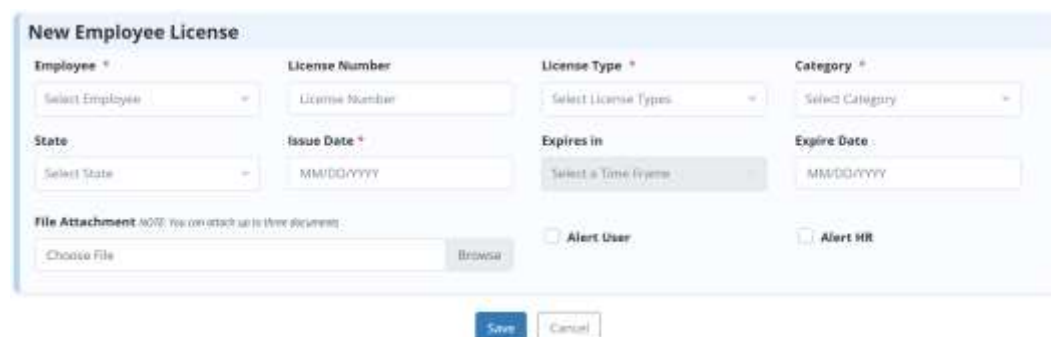
Employees/License Manager

A window will open that will show all current user licenses. Start Typing an Employee, License Type, Number, Category, Issue Date, Expire and/or Software User to narrow down the list. Results are shown over multiple pages and the number shown can be adjusted at the bottom of the page. Select the **New License/Compliance** button in the top right.



Employee	License Type	License Number	Category	Issue Date	Expiration Date	Attachments	Software User?	Actions
Amanda Powell RN	1st Eval	TESTER 2	License/Certifications	04/24/2019	05/24/2019	0/0	No	  
Priyam Khatri RN	1st Eval	PR35968	License/Certifications	11/09/2021	11/09/2028	0/0	Yes	  
Damilola Adegunwa RN	1st Eval	081313631160001	License/Certifications	11/09/2021	11/09/2029	0/0	Yes	  
Ogheniragha Vuvu RN	1st Eval	0/0	License/Certifications	11/09/2021	0/0	0/0	Yes	  
Sai Venigandla RN	1st Eval	0/0	License/Certifications	07/01/2018	0/0	0/0	Yes	  
Clarice Mankutao	1st Eval	0321354	License/Certifications	07/01/2020	07/01/2021	0/0	Yes	  
Saurabh Shelar RN	1st Eval	123456789	License/Certifications	01/06/2021	0/0	0/0	Yes	  
Ruthessa Abella RN	1st Eval	0/0	License/Certifications	01/01/2020	0/0	0/0	Yes	  
Amanda Powell RN	1st Eval	TESTER 4	License/Certifications	10/01/2021	10/01/2023	0/0	No	  
Cristhel Abas RN	1st Eval	123456789	License/Certifications	06/01/2020	0/0	0/0	Yes	  

A New Employee License line expands. Choose the Employee, License Type, Category and State from the drop-down menu. Enter the License Number, Issue & Expire Date. Add a File Attachment by selecting the **Browse** button. If the organization would like the system to remind the User or HR about the expiring license, check the Alert User and/or Alert HR boxes and designate an Alert Date. Select the **Save** button when complete.



New Employee License

Employee *

License Number

License Type *

Category *

State

Issue Date *

Expires in

Expire Date



File Attachment
NOTE: You can attach up to three documents.

Alert User

Alert HR

Save

Cancel

Select the edit  icon on the far right under the Action column to edit the information from the previous screenshot or the delete  icon to remove the employee license altogether.

ADDING SUPPLIES

Admin/New/Supply

The New Supply window opens. Enter the Description, HCPCS, Revenue Code and the Unit Cost. Then select the **Save** button.

A screenshot of the 'New Supply' window. It contains four input fields: 'Description', 'HCPCS', 'Revenue Code', and 'Unit Cost'. Each field has a red asterisk to its right, indicating it is required. At the bottom of the window are two buttons: 'Save' and 'Cancel'.

ADDING ADJUSTMENT CODES

Admin/New/Adjustment Code

The New Adjustment Code window opens. Enter the Code, Description and choose from a Negative or Positive Type. Then select the **Save** button.

A screenshot of the 'New Adjustment Code' window. It contains three input fields: 'Code', 'Description', and 'Type'. Each field has a red asterisk to its right, indicating it is required. The 'Type' field is a dropdown menu with the text '-- Select Type --'. At the bottom of the window are two buttons: 'Save' and 'Exit'.

ADDING DOCUMENT TYPES

Admin/New/Document Type

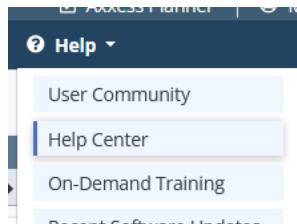
The New Document Type window opens. Enter the Document Name and choose from a Client, Employee, Client & Employee or Payer category. Then select the **Save** button.

A screenshot of the 'New Document Type' window. It contains two input fields: 'Document Name' and 'Category'. Each field has a red asterisk to its right, indicating it is required. The 'Category' field is a dropdown menu with the text '-- Select --'. At the bottom of the window are two buttons: 'Save' and 'Cancel'.

HELP CENTER

Help/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 of all of Axxess' products. It can be accessed by going to:



Or also available at <https://www.axxess.com/help/>

