

HOSPICE ADMINISTRATOR OVERVIEW TRAINING MANUAL

March 2022

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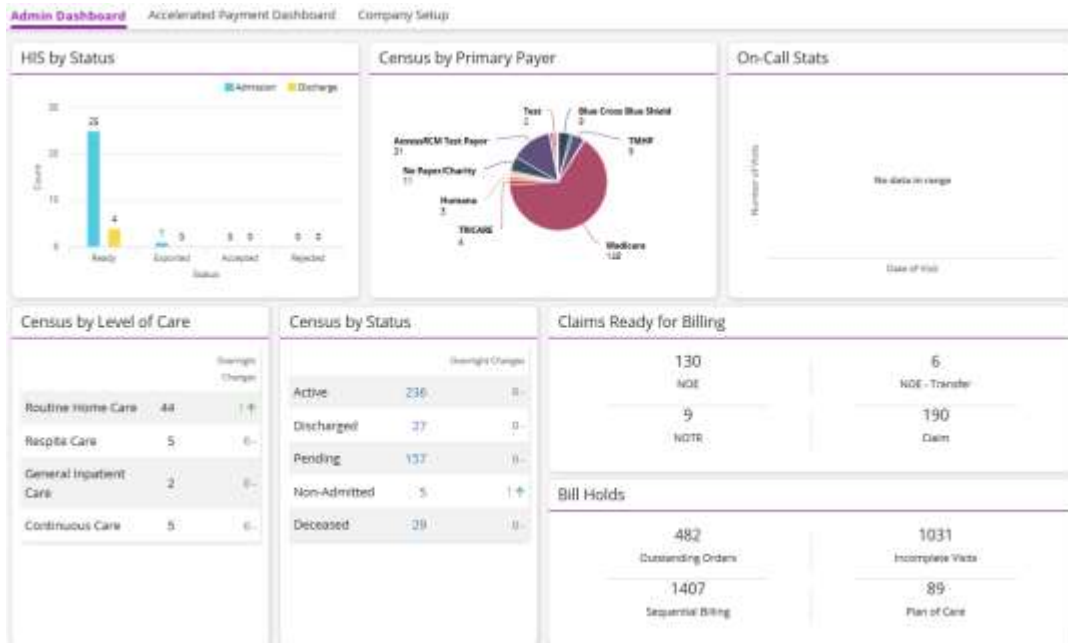
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ADMIN DASHBOARD

Admin/Admin Dashboard

The Administrator Dashboard consists of seven different tiles:



HIS by Status - Bar graph view of HIS differentiated by the number of admission and discharge in ready, exported, accepted and rejected status.

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

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

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

Census by Status - Shows the number of patients by referrals, admission, active, discharge and deceased.

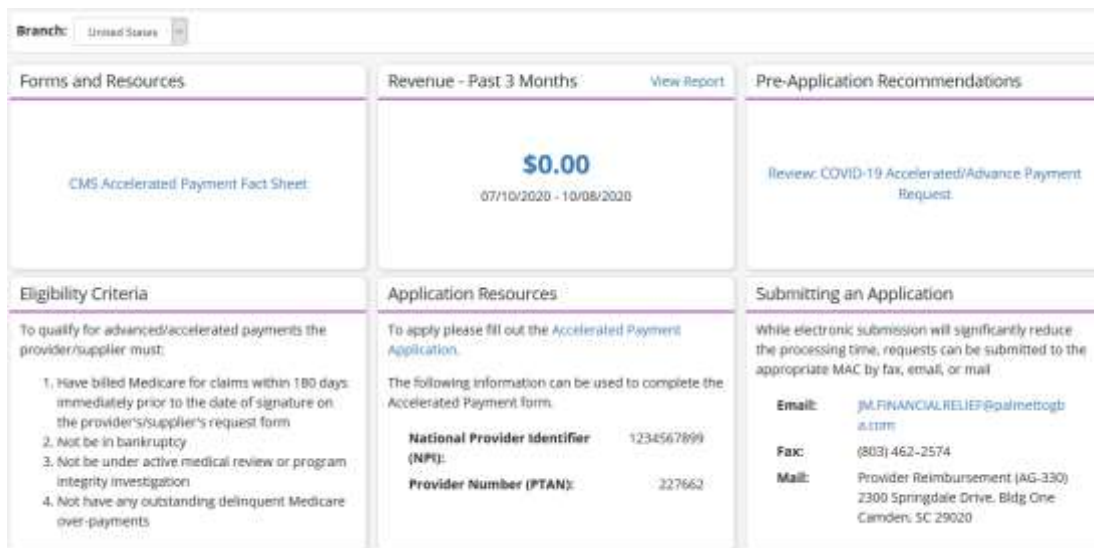
Claims Ready for Billing - Shows the number of claims by NOE, NOE-Transfer, NOTR and claims that are ready for submission.

Bill Holds - Shows the number of bills being held by outstanding orders, incomplete visits, sequential billing and plan of care.

ACCELERATED PAYMENT DASHBOARD

Admin/Accelerated Payment Dashboard

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



The screenshot shows the Accelerated Payment Dashboard interface. At the top, there is a 'Branch' dropdown menu set to 'United States'. The dashboard is divided into six main sections:

- Forms and Resources:** Contains a link to 'CMS Accelerated Payment Fact Sheet'.
- Revenue - Past 3 Months:** Displays a revenue amount of '\$0.00' for the period '07/10/2020 - 10/08/2020'. A 'View Report' link is available.
- Pre-Application Recommendations:** Contains a link to 'Review COVID-19 Accelerated/Advance Payment Request'.
- Eligibility Criteria:** Lists requirements for advanced/accelerated payments:
 1. Have billed Medicare for claims within 180 days immediately prior to the date of signature on the provider/supplier's request form
 2. Not be in bankruptcy
 3. Not be under active medical review or program integrity investigation
 4. Not have any outstanding delinquent Medicare over-payments
- Application Resources:** Provides instructions to fill out the Accelerated Payment Application and lists information needed to complete the form:
 - National Provider Identifier (NPI):** 1234567899
 - Provider Number (PTAN):** 227662
- Submitting an Application:** Explains that electronic submission reduces processing time and provides contact information:
 - Email:** JN.FINANCIALRELIEF@palmettogb.com
 - Fax:** (803) 462-2574
 - Mail:** Provider Reimbursement (AG-330) 2300 Springdale Drive, Bldg One Camden, SC 29020

The Accelerated Payment Dashboard provides useful information about accelerated payments that are available under the CARES Act. Information on the dashboard is uniquely customized to each organization based on the assigned Medicare Administrative Contractor (MAC) and organization-specific data.

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

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

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

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

COMPANY SETUP

Admin/Company Setup

Company Setup is split up into seven tabs found on the left side of the window. Choose the provider (if there is more than one) the setup is being completed for by choosing them from the drop-down menu at the top.

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

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

Admin Dashboard Accelerated Payment Dashboard **Company Setup**

Company Information

Financial & Billing

Clinical

Operations

Scheduling

Payroll

Subscription Plans

Select a provider to view and manage details for the selected provider. The setup completed for each provider will be applied to all locations for that provider.

Provider: Testing Home Health

Provider Information

Provider Name *
Testing Home Health Agency, Inc.

Tax ID *
222222222

Tax ID Type *
☒ Employer Identification Number
☐ Social Security Number

Contact First Name *
Riah

Contact Last Name *
Vair23

Contact Email
Enter Contact Email

CAHPS Vendor
Strategic Healthcare Programs

CAHPS Vendor ID
12345678

National Provider Identifier
0011122203

Medicare Provider Number
3335

Medicaid Provider Number
456789010

Medicaid Provider Identifier
Enter Medicaid Provider Identifier

TXM Medicaid Provider Identifier

Cancel Next Save

Organization Location - Enter the organization's name, phone and fax number, address and time zone. Additional branch locations can be added below. Select the **Next** button to continue.

United States Location

Location Name
United States

Country *
United States of America

Primary Phone
Home 1 Enter Phone Number Extn.

Fax

Time Zone
(GMT-05:00) Central Time

Address Line 1
16000 Dallas Parkway

Address Line 2
1717 E Belt Line Road

City
Dallas

State
TX

ZIP
75241

County
Dallas

Company Code
T101

Location Code
1001

- Financial & Billing** - Determine the date through which books are closed for the organization.

Closed Accounting

Date through which books are closed: 08/31/2020

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

Closing Date
08/31/2020

☐ **Disable Closing Date**

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

The Chart of Accounts Mapping feature enables users to assign account numbers based on their organization's accounting system. Account numbers assigned to each general ledger account in Company Setup will flow to the General Ledger Report. This feature enables users to organize financial data and create financial statements, including income statements and balance sheets.

When the **View Chart of Accounts** button is selected, a new window will open and display the following details for each account: Branch, account name, account number and effective date. Users can select **Branch** or **Account** at the top of the screen to group the accounts by branch or account name.

Chart of Accounts

Branch Account Branch: All Search for Account Name/Number... Bulk Update

Branch	Account Name	Account Number	Effective Date	Actions
Branch: United States				
United States	Revenue - Medicare		03/29/2018	Update View History
United States	Wages - Medicare		03/29/2018	Update View History
United States	Liability - Room and Board		03/29/2018	Update View History
United States	Unbilled AR - Room and Boards		03/29/2018	Update View History
United States	Revenue - Medicare HMO		03/29/2018	Update View History

Select **Bulk Update** at the top of the screen to update the account numbers and/or effective dates for multiple accounts. If accounts are grouped by branch, select **Apply to All Branches** on each row to apply the corresponding account number to all branches.

Branch Account Branch: All Search for Account Name/Number... Cancel Save Bulk Update

Branch	Account Name	Account Number	Effective Date	Actions
Branch: United States				
United States	Revenue - Medicare		03/29/20	Apply to All Branches
United States	Wages - Medicare		03/29/20	Apply to All Branches
United States	Liability - Room and Board		03/29/20	Apply to All Branches
United States	Unbilled AR - Room and Boards		03/29/20	Apply to All Branches

If accounts are grouped by account name, select **Apply to All Branches** next to the first account to apply the account number to all subsequent branches. Once all appropriate updates have been made, select **Save Bulk Update**. Once saved, the counter will show the number correlating to the number of rows that were updated.

To update the account number and/or effective date for an account, select **Update** under Actions next to the appropriate account. Updates can be made to the account number and effective date, then select **Save**.

Branch	Account Name	Account Number	Effective Date	Actions
Branch: United States				
United States	Revenue - Medicare		03/29/20	<input type="button" value="Save"/> <input type="button" value="Cancel"/>

When **View History** is selected, a table will open to display all changes made to the account, sorted by most recent to oldest updates. Account numbers added in the Chart of Accounts section in Company Setup will appear in the Account column of the General Ledger Report.

Select the **Next** button to continue, **Save** button to keep any changes or **Previous** to see the last page.

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

Interdisciplinary Group (IDG) Meetings

15-Day Compliance *

Enabling 15-day compliance prevents users from ending an IDG meeting if the next meeting for any patients on the agenda is scheduled over 15 days away. This feature also prevents users from removing a patient from an IDG meeting if the patient has not had an IDG review in the last 15 days. When this feature is disabled, users will receive 15-day compliance warnings, but will be able to end meetings and remove patients from the agenda after acknowledging the warning.

☐ Enable
 ☒ Disable

Print Document Addendum

Enable this feature to include any addendum attachments in the download/print view of completed documents.

☒ Enable
 ☐ Disable

Documentation Requirements

Edit Signature Date and Time *

Enable this feature to allow users to edit the signature date and time when signing documents in the system. The actual signature date and time will also be tracked for auditing purposes. If the required signature time feature is not enabled, users will only be able to view and edit the signature date when signing documents in the system.

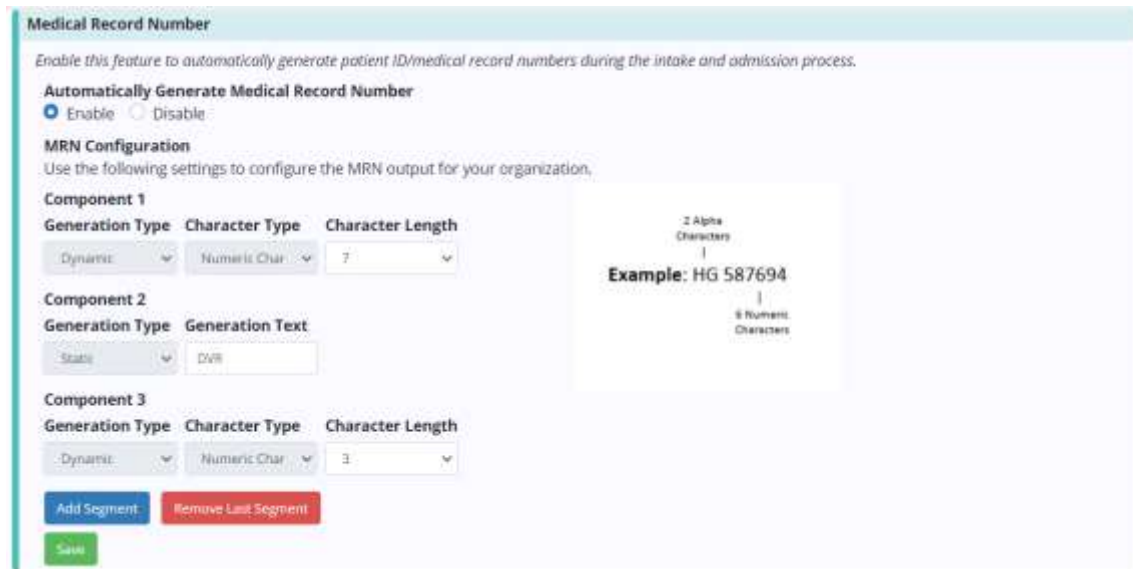
☒ Enable
 ☐ Disable

Require Signature Time on Documentation *

Enable this feature to track the signature time when users sign documents in the system.

☐ Enable
 ☒ Disable

4. **Operations** – Enable the Medical Record Number feature to automatically generate medical record numbers during the intake and admission process. If enabled, decide how it will be configured.



Select **Add Segment** to begin configuring the medical record number. Each segment is part of the medical record number and can consist of alpha or numeric characters. From the generation type menu, select static or dynamic. The static option enables the user to enter a defined set of characters that will not change. Users can enter the set of unchanging characters in the generation text box. The dynamic option enables the user to select if the segment should be alpha or numeric and to select the number of characters in the segment.



Once a segment has been created, select **Add Segment** to add a new segment and continue configuring the medical record number. To remove the most recent segment, select **Remove Last Segment**. When the MRN setup is complete, users must ensure that the configuration is feasible within the system.

NOTE: There cannot be only one static segment, as this will only generate one MRN in the system. If there is only one dynamic segment, it must be at least four characters long to ensure an adequate number of MRN combinations. There cannot be two consecutive dynamic segments. Only a maximum of five segments or 50 total MRN characters are allowed.

To proceed with the setup, select **Save** at the bottom of the screen. Once the information is saved, the feature will begin working within the system. When a referral is converted to a pending patient, the system will automatically generate a medical record number. This field will remain editable in the patient profile.

The next feature that must be set up is the Medicare Week. Choose the seven-day range for the organization's Medicare Week. If no selection is made, the software will default to Sunday - Saturday. An organization's Medicare Week can also be updated to support operational changes that may occur at the organization. All previous selections and the effective dates can be viewed here.

Medicare Week

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

[Add Medicare Week](#)

Medicare Week	Start Date	End Date	Actions
Sunday-Saturday	06/11/2020	Not Available	No Actions
Wednesday-Tuesday	05/31/2020	06/05/2020	No Actions
Tuesday-Monday	05/25/2020	05/30/2020	No Actions

[1](#) [2](#) [3](#) 4 total results
 Show 3 entries

Enable patient tags to allow for custom tags to be associated with any patient within their patient profile.

Patient Tags


Enabling this feature will allow for custom tags to be associated to any patient within their patient profile.

Patient Tags
☒ Enable ☐ Disable

[Active](#) [Inactive](#)
[Add Tag](#)



Tag	Created By	Start Date	Actions
test	Abdul MD Test	10/22/2021	Edit Delete
yellow	Abdul MD Test	10/22/2021	Edit Delete
Fail	Dioni Hipolito	11/01/2021	Edit Delete
purple	Amy Smith	11/10/2021	Edit Delete
sample	Danny Alima Rn Alima	12/20/2021	Edit Delete

If enabled, select **Add Tag** to create new tags. Enter the name and select **Save** for a single entry or select **Save and Add Another** for multiple. Select the [Edit](#) icon

icon to edit previously entered tags or select the  icon to deactivate entries. Search for tags by using the search bar. View the list of entries by Active or Inactive.

Next, choose how Social Security numbers are displayed on patient face sheets.









Organizations can add their own consents. Begin the process by selecting **Add Consent**. Select **Upload Consent** to upload a consent form, admission packet or other documents for patient/caregiver to sign before receiving hospice care. Select **Choose File** to find the document to upload and choose the document type. Decide if the consent applies to all active and pending patients or only to future patients. Then select **Upload**.

Select the  icon to remove consents or select the  icon to deactivate. Select **Select Consent Template** to create a custom consent form to meet your organization's requirements. Choose the consent template and choose the document type. Decide if the consent applies to all active and pending patients or only to future patients. Then select **Customize**.

Consents

*Click **Upload Consent** to upload a consent form, admission packet or other documents for patient/caregiver to sign before receiving hospice care. Click **Customize Consent Form** to create a custom consent form to meet your organization's requirements.*

[Add Consent](#)

Document Type	Consent Source	Activation Date	Deactivation Date	Date Last Updated	Applied To	Active	Actions
Consents	Upload	05/20/2021	Not Available	05/20/2021	All Active and Pending Patients	Yes	 
Advance Directives	Upload	05/20/2021	Not Available	05/20/2021	All Active and Pending Patients	Yes	 
Hospice Physician Certification of Terminal Illness	Upload	06/02/2021	Not Available	06/02/2021	All Active and Pending Patients	Yes	 
Face-to-Face	Upload	11/19/2021	Not Available	11/19/2021	All Active and Pending Patients	Yes	 

Lastly, decide the effective date of hospice election and how the date signed is decided.

- Scheduling** - Choose which task will be active or inactive for your organization. Search for a task in the search bar or filter the list by selecting all, active or inactive. Select the red Deactivate hyperlink on the right to deactivate. Choose a deactivation date and then select Save. Select the green Activate hyperlink on the right to make deactivated tasks active again. Choose an activation date and select Save.

Scheduling Task List

The Active list below includes all tasks that are active and available for scheduling. The inactive list includes all other task types that are not active for scheduling. To activate or deactivate a task, select the "Deactivate" or "Activate" link associated with the task name to move the task to the appropriate list. If a task is moved from the Active list to the inactive list, any visits scheduled for that task will remain active.

Search for Task... All

Task	Status	Start Date	End Date	Actions
Aroma Therapy Visit	Inactive	01/15/2022	02/16/2022	Activate
Art Therapy Visit	Inactive	03/24/2018	11/25/2021	Activate
Attending Physician Certification of Terminal Illness	Active	03/24/2018	Not Available	Deactivate
Bereavement Assessment	Active	02/05/2022	Not Available	Deactivate
Bereavement Counseling Note	Active	03/24/2018	Not Available	Deactivate

- Payroll** - Specify company payroll rates based on individual organization practices to ensure accurate payroll cost reporting for activities performed. Decide to enable or disable the Payroll Center. Enabling the feature allows organizations to view the Payroll Center, edit payroll data and generate payroll export files with the components and data layout required by the organization's payroll vendor.

Payroll Center

Click to enable or disable the Payroll Center. Enabling this feature allows you to view the Payroll Center, edit payroll data, and generate payroll export files with the components and data layout required by your payroll vendor. Disabling this feature does not prevent you from generating payroll reports, but the components and layout may not be consistent with your payroll vendor's specifications.

Note: A generic export and specifications for Lawson and UltiPro are available at this time.

☒ Enable ☐ Disable

Export enabled/disabled as of: 02/07/2022

Export enabled/disabled by: Amerson, Wendy

Payroll Batch ID: H5506

Payroll Vendor: Lawson




[Add Branch](#)

Branch	Payroll Company Code/ID	Start Date	End Date	Actions
United States	D2323	12/01/2020	Not Available	Edit Delete Refresh

1 1 total results

Show 10 entries

Once enabled, choose your payroll vendor. Enable the Payroll Center for different branches by selecting the **Add Branch** button. Choose the branch,

payroll company code/ID, start date and select the green **Save** hyperlink on the right. Once entered branches can be edited by selecting the  icon, removed by selecting the  icon or deactivated by selecting the  icon.

Enable or disable the Mileage Calculator feature which automatically calculates the mileage for all visits scheduled within 14 days prior to the enable date that are completed or pending QA approval. Once enabled, decide if the organization wants to include the mileage from the worker's departure to return home.

Mileage Calculator
Once this feature is enabled, mileage will automatically be calculated for all visits scheduled within 14 days prior to the enable date that are completed or pending QA approval
Mileage Calculator
☒ Enable ☐ Disable
Enabled/disabled as of: 01/14/2022 **Enabled/disabled by:** Vail, Julie
Mileage Calculation Parameters
☐ Include mileage from the worker's departure to return home


The Current Payroll Settings section at the top of the tab displays current rates and settings that have been set for the organization. This information is read-only and updates automatically when the company settings are changed. The following information appears in this section:

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

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

Current Payroll Settings

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

Payroll Policy – If your organization has multiple pay cycles, enable the Payroll Cycle feature to create custom payroll group names. Select **Add Cycle** to create a new payroll cycle group. Enter the name and select **Save**. Once added, select the  icon to make changes or select the **Deactivate** hyperlink to remove. Choose whether to see the list of active or inactive groups by selecting the tab.





Payroll Cycle

If your organization has multiple pay cycles, enable this feature to create custom payroll group names. Organizations must have a minimum of 1 payroll cycle group and a maximum of 4 groups.

☒ Enable
☐ Disable





Active Inactive

Add Cycle

Payroll Cycle Group	Actions
Default	Deactivate 
Hospice	Deactivate 
PRN Staff_Weekly	Deactivate 
test	Deactivate 

Active Inactive

Add Rate

Payroll Cycle Group	Start Date	End Date	Frequency	First Day of Period	Last Day of Period	Actions
Hospice	01/23/2022	Not Applicable	Bi-Weekly	01/23/2022	Saturday	View Details  
test	11/01/2021	Not Applicable	Bi-Weekly	11/01/2021	Sunday	View Details  

Select **Add Rate** to enter new payroll cycle rates. Choose the payroll cycle group, first day of the pay period, payroll frequency and allowable reimbursements.

Add Rate

Payroll Cycle Group *

Select Group

First Day of Pay Period * ⓘ

MM/DD/YYYY

Payroll Frequency * ⓘ



Select Frequency



Allowable Reimbursements ⓘ







☐ Mileage
☐ Travel Time
☐ On-Call
☐ On-Call Mileage
☐ On-Call Travel Time

Add Rate

Cancel

Then select the **Add Rate** button to save. After rates have been entered, select the green View Details hyperlink under the Actions column to see which reimbursements are included. Rates can be edited by selecting the  icon or removed by selecting the  icon.

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

Rates				
<div> Mileage Travel On-Call On-Call Mileage On-Call Travel Non-Patient Activity </div>				
The information entered below will be used to calculate the mileage rate amount reflected in your company payroll settings.				<div>Add Rate</div>
Reimbursement Rate	Start Date	End Date	Actions	
<div>Current</div> \$0.585	02/02/2022	Not Applicable		
\$0.700	02/01/2022	02/01/2022		
\$0.700	01/18/2022	01/31/2022		

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

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

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

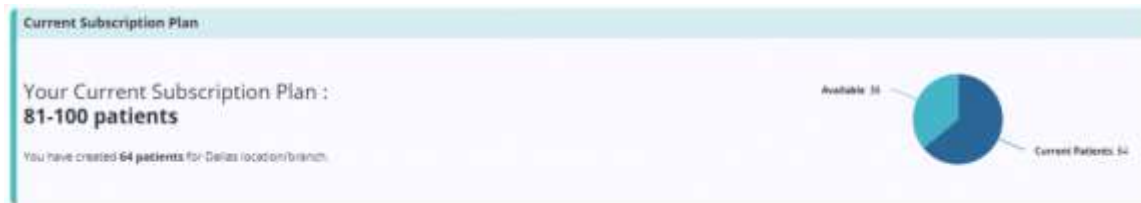
On-Call Mileage - Add new on-call mileage reimbursement rate and start date. The start date will automatically update the end date for any of the company's existing settings.

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

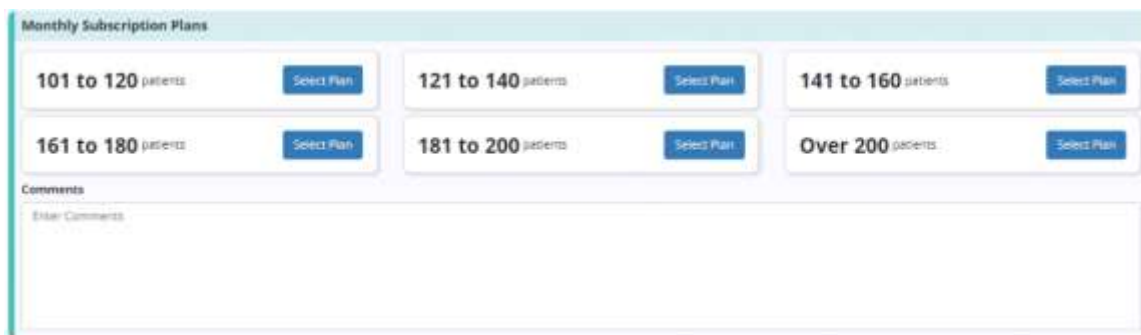
Non-Patient Activity - Setting non-patient activity pay rates enables users to generate reports with the data needed to seamlessly process payroll and monitor operational processes. Rates can be set for individual activities and branches or can be set to apply to multiple activities and branches. These rates will be used to calculate reimbursement for these activities.

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

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



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



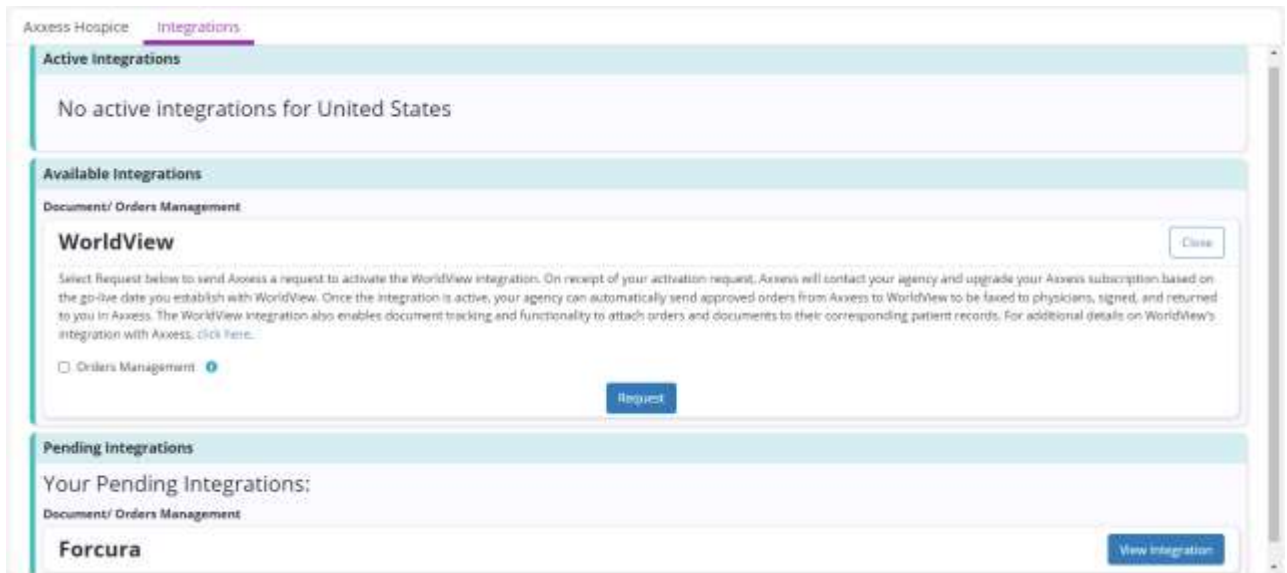
Monthly Subscription Plans

101 to 120 patients	Select Plan	121 to 140 patients	Select Plan	141 to 160 patients	Select Plan
161 to 180 patients	Select Plan	181 to 200 patients	Select Plan	Over 200 patients	Select Plan

Comments



Enter Comments

Integrations – The Integrations tab will show all active, available and pending integrations per branch. There are multiple options for pharmacy integrations, orders and document management and select the **View Integration** button to see an explanation of the integration and how it might help the organization. If the organization is interested in implementing the integration, select the **Request** button and the Axxess team will be in contact with the organization.



ADD AND LISTS

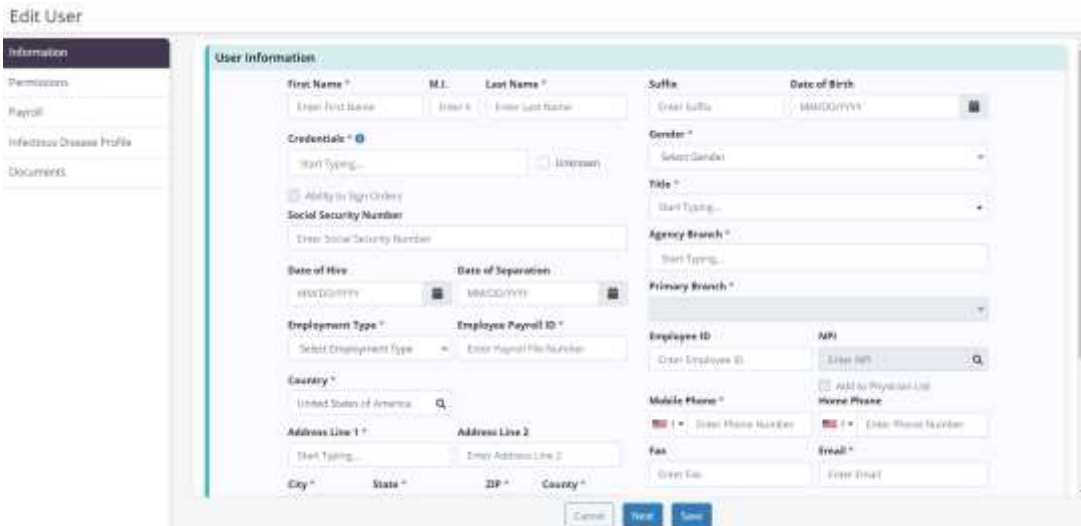
The top right-hand corner of Axxess Hospice houses the Lists and Add sections.

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

ADDING A NEW USER

Add/User

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



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



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

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

To save time, copy permissions from another user by selecting their name from the drop-down and selecting **Apply**. If permissions are not being copied, users can select the check box in the top left corner of each category that will check every single permission box in that section. Selecting the checkbox to the left of each permission group will allow all permissions for that selection. Checking the box at the top of each column will add that permission type for each item in a section. Permissions can be individually selected with the following functions:

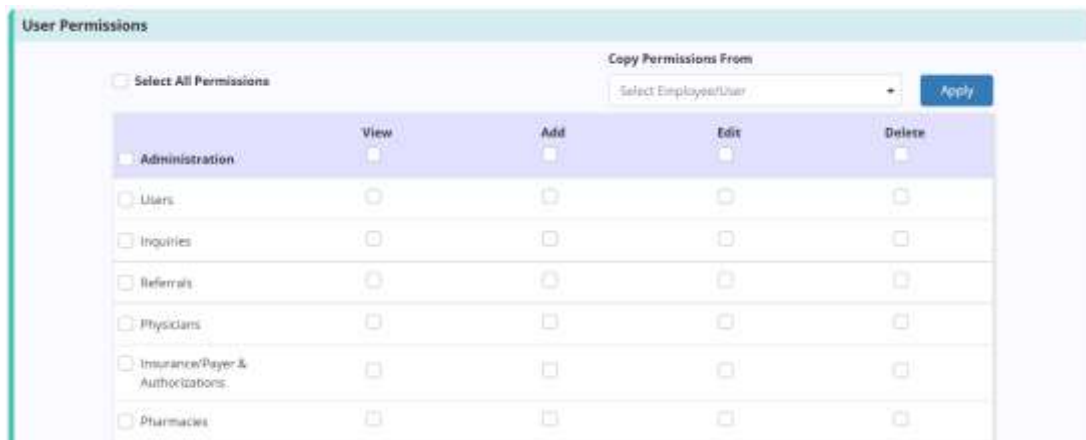
Administration - Users can view, add, edit and/or delete.

Clinical - Users can view, add, edit, delete and/or reassign.

Billing - Users can view, add, edit, e-submission and/or delete.

Reports - Users can view, export and/or delete.

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



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

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

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

Current Payroll Settings

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

Pay Type - Select **Add Rate** to enter new user settings, including pay type, employment and exempt status, start date and/or allowable reimbursements. Updating the user's start date will automatically update the end date for any of the user's existing settings. Select the **Add Rate** button to complete.

Add Rate



Pay Type [?]

Employment Status



Exempt Status

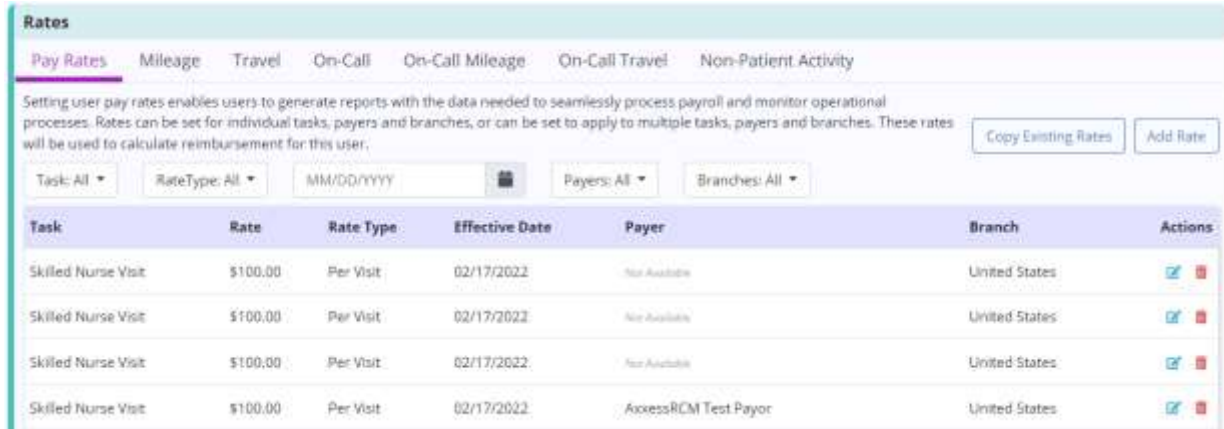
Start Date [?]

Allowable Reimbursements [?]
☐ Mileage ☐ Travel Time ☐ Surcharge ☐ On-Call ☐ On-Call Mileage ☐ On-Call Travel Time

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

Rates - Comprised of the **Pay Rates**, **Mileage**, **Travel**, **On-Call**, **On-Call Mileage**, **On-Call Travel** and **Non-Patient Activity** rate tabs. This section enables users to enter customized rates and view historical rates for the company. This functionality works the same in each tab by adding a new rate by

selecting the **Add Rate** button. To adjust a rate, select the  icon under Actions and to remove a rate, select the  icon.



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



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

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

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

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

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

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

Non-Patient Activity - Setting non-patient activity pay rates enables users to generate reports with the data needed to seamlessly process payroll and monitor operational processes. Rates can be set for individual activities and branches or can be set to apply to multiple activities and branches. These rates will be used to calculate reimbursement for these activities.

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

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

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

COVID-19 Screening

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

Person Screened * Name Date of Screening * Time of Screening *

☐ Refused Screening

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

☐ No ☐ Yes

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

☐ No ☐ Yes

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

☐ No ☐ Yes

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

☐ No ☐ Yes

Risk Level:

☐ Low ☐ High

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

[Sign Screening](#) [Sign & Add Another](#) [Cancel](#)

Documents – Users can attach documents to user profiles. To upload a user document, select the **Add Documents** button. Choose the file to attach. Confirm the document name, choose the document type, effective and expiration date. Select the **Save Documents** button to complete or select the **Add Another Document** hyperlink to continue adding.

Document Name *	Document Type *	Effective Date *	Expiration Date *	Actions
PERSON Car Insurance 021E	Car Insurance	02/18/2022	02/18/2023	Delete

[Add Another Document](#) [Save Documents](#) [Cancel](#)

Search through the list of documents by using the search bar. The list defaults to viewing active documents but can be changed to viewing inactive documents by selecting the tab. Select the icon to remove documents, select the icon to edit or select the icon to deactivate.

Documents

[Add Documents](#)

[Active](#) [Inactive](#)

Document Name *	Document Type *	Effective Date	Expiration Date	Upload Date	Actions
PERSON Car Insurance 021E22.docx	Car Insurance	02/17/2022	02/17/2023	02/18/2022	

[1](#) 1 total results [Show](#) 10 entries

EDITING A USER

People/People Center/Edit



The screenshot shows the 'People Center' tab selected. On the left, there are filters for Branch, Status, Employee Type, and Team. The main area displays the profile of 'Abdul MD Test', including a photo, name, gender (Male), and a red box around the 'Edit' link. Other details include address, phone number, email, title (Hospital Medical Director), credentials (RN, LVN, LPN, MD, MSW, S...), team (TEST, Tea Party, Abdul Team), and date of hire (Not Available). On the right, there are buttons for 'Deactivate User', 'Send Message', and 'Manage Documents'.

The **People Center** will display a list of users. By default, this will show active users. Use the filters or the search feature in the top left to filter for specific employees or scroll down through the list. Selecting the name of the user will show detailed information of that user including their photo (user can change), name, gender, address, phone number, email address, title, credentials, team and date of hire.

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

ADDING A PHYSICIAN

Add/Physician

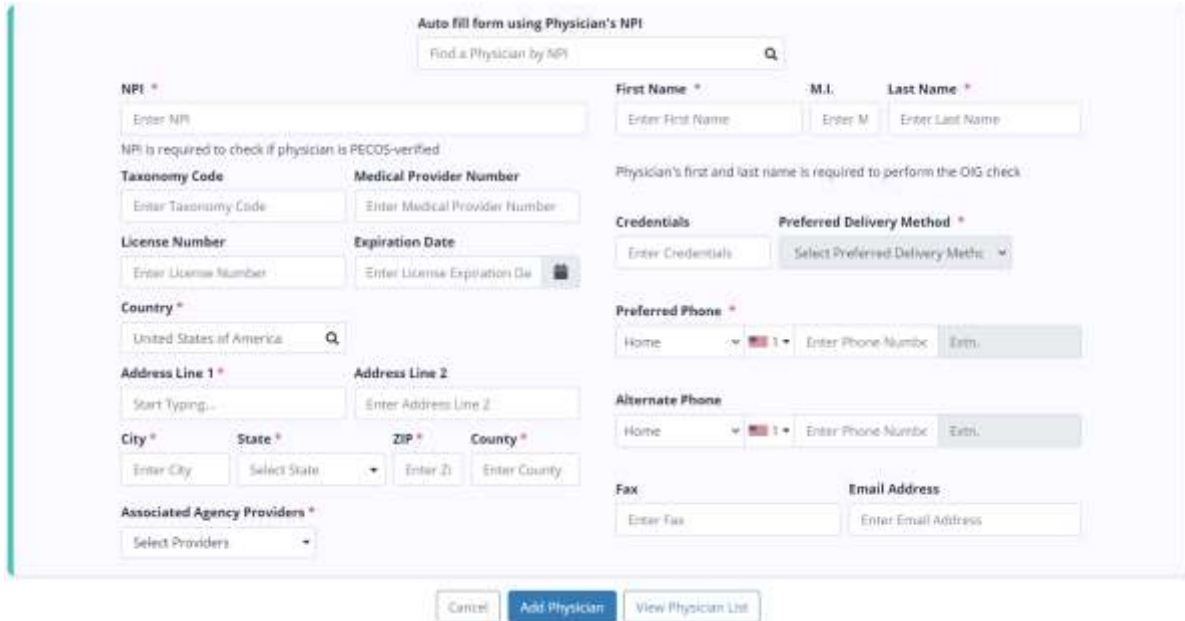
The quickest way to enter a physician is by entering their NPI number. As the number is typed, physicians and their corresponding NPI numbers will appear below for selection.



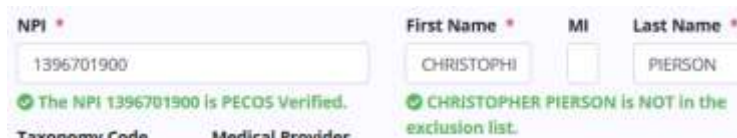
The screenshot shows a search bar with the text '13967019'. Below the search bar is a dropdown menu titled 'Auto fill form using Physician's NPI'. The dropdown lists several physicians with their NPI numbers and names: 1396701900 - CHRISTOPHER G PIERSON, 1396701918 - YELITZA RIVERA, 1396701976 - STEVEN RAYMOND WEBB, 1396701934 - HILDA MARIAN DE GAET, 1396701942 - SANDEEP SAMANT, 1396701967 - SUSAN MARIE BLANEY, and 1396701975 - KIMBERLY OSCOD SCH...

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

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



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



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

ADDING A NEW VENDOR

Add/Vendor

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

Vendor Information

Vendor Name *
Enter Vendor Name

Country *
United States of America

Vendor Type *
Select Vendor Type

NPI * ☒ Not Applicable
Enter NPI

Address Line 1 *
Start Typing...

Address Line 2
Enter Address Line 2

Medicare Contract Number
Enter Medicare Contract Number

Medicaid Contract Number
Enter Medicaid Contract Number

City *
Enter City

State *
Select State

ZIP *
Enter ZIP

County *
Enter County

Contact First Name *
Enter Contact First Name

Contact Last Name *
Enter Contact Last Name

Fax
Enter Fax

Email
Enter Email

Primary Phone
Mobile: ☐ ☐ Enter Phone Number

☐ After Hours

Associated Agency Providers *
Select Providers

Comments

Contract
Yes No

Community Liaison
Start Typing...

[Add New Contact](#)

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

Resource Utilization Group (RUG) Rates

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

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

ADDING A NEW PHARMACY

Add/Pharmacy

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

Associated Agency Providers *

Select Providers

Pharmacy Name *

Enter Pharmacy Name

Contact First Name

Enter Contact First Name

Contact Last Name

Enter Contact Last Name

Country *

United States of America

Address Line 1 *

Start Typing...

Address Line 2

Enter Address Line 2

City *

Enter City

State *

Select State

ZIP *

Enter ZIP

County *

Enter County

Primary Phone

Mobile

Enter Phone Number

Enter

Fax

Enter Fax

Email

Enter Email

Comments

Add Pharmacy

View Pharmacy List

ORDERS MANAGEMENT

Patients/Orders Management

Use the search bar to find a specific order. Filtering is the same for all tabs. Search by patient name, physician, type, order date, age, branch, team or delivery method.

Search by Patient Name

Search by Physician

Type to Filter Type...

Order Date

Age: All

Branch: All



Team: All

Delivery Method: All

Orders are split into three tabs:

- To Be Sent** - This section shows orders ready to be sent for signature. Orders are displayed by age of order, patient, team, physician, delivery method, type, order date, date approved and order preview.

To Be Sent Pending Signature Completed Orders										
<div> <div>Search by Patient Name</div> <div>Search by Physician</div> <div>Type to Filter Type...</div> <div>Order Date</div> <div>Age: All</div> <div>Branch: All</div> <div>Team: All</div> <div>Delivery Method: All</div> </div>										
Mark Selected as Sent										
<input type="checkbox"/>	Age of Order	Patient	Team	Physician	Delivery Method	Type	Order Date	Date Approved	Order Preview	Actions
<input type="checkbox"/>	1 days	Ogle, Amanda	Axxess Academy	Ralph Doolittle	Mail	Physician Order	02/17/2022	02/17/2022		<div>Mark as Sent</div> <div>Update Delivery Method</div>
<input type="checkbox"/>	1 days	Agar, Channing	Team Stars	OWAIS LODHI	Mail	Physician Order	02/17/2022	02/17/2022		<div>Mark as Sent</div> <div>Update Delivery Method</div>
<input type="checkbox"/>	2 days	Akbari, Arthur	ABC Team	Jose Lopez	Mail	Physician Order	02/16/2022	02/16/2022		<div>Mark as Sent</div> <div>Update Delivery Method</div>
<input type="checkbox"/>	2 days	Larson, Karl	Axxess Academy	Ralph Doolittle	Mail	Initial Plan of Care	02/16/2022	02/16/2022		<div>Mark as Sent</div> <div>Update Delivery Method</div>
<input type="checkbox"/>	2 days	RoseTest, AmyPatient	Axxess Team	Ralph Doolittle	Mail	Physician Order	02/16/2022	02/16/2022		<div>Mark as Sent</div> <div>Update Delivery Method</div>
<input type="checkbox"/>	2 days	RoseTest, AmyPatient	Axxess Team	Ralph Doolittle	Mail	Physician Order	02/16/2022	02/16/2022		<div>Mark as Sent</div> <div>Update Delivery Method</div>

Select the patient hyperlink to go straight to the Patient Chart. Print orders individually by selecting the  icon under the Action column. Download orders by selecting the  icon. Select the **Update Delivery Method** hyperlink to change the delivery method.

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

2

Mark Selected as Sent

Age of Order	Patient	Team	Physician	Delivery Method	Type	Order Date	Date Approved	Order Preview	Actions
<input checked="" type="checkbox"/> 1 days	Ogle, Amanda	Axxess Academy	Ralph Doolittle	Not Available	Physician Order	02/17/2022	02/17/2022	Mark as Sent Update Delivery Method	
<input checked="" type="checkbox"/> 1 days	Again, Checking	Team Stars	OWAIS LODHI	Not Available	Physician Order	02/17/2022	02/17/2022	Mark as Sent Update Delivery Method	
<input type="checkbox"/> 2 days	Aandvark, Arthur	ABC Team	Jose Lopez	Mail	Physician Order	02/16/2022	02/16/2022	Mark as Sent Update Delivery Method	

- Pending Signature** - This section shows orders that have been sent for signature and are expected back. Orders are displayed by age of order, patient, team, physician, delivery method, type, order date, sent date and order preview.

To Be Sent

Pending Signature

Completed Orders

Search by Patient Name

Search by Physician

Type to Filter Type...

Order Date

Age: All

Branch: All



Team: All

Delivery Method: All

Mark Selected as Received

Upload Status

	Age of Order	Patient	Team	Physician	Delivery Method	Type	Order Date	Sent Date	Order Preview	Actions
<input type="checkbox"/>	1 days	WPH, Jim Bob	Axxess Team	Jose Lopez	IDG	Physician Order	02/17/2022	02/17/2022		<div>Mark as Received</div> <div>Update Status</div> <div></div>
<input type="checkbox"/>	1 days	Adams, Wednesday	Team WMA-2	Jose Lopez	IDG	Physician Order	02/17/2022	02/17/2022		<div>Mark as Received</div> <div>Update Status</div> <div></div>
<input type="checkbox"/>	1 days	Aandvark, Arthur	ABC Team	CHARLES WREN	IDG	Physician Order	02/17/2022	02/17/2022		<div>Mark as Received</div> <div>Update Status</div> <div></div>
<input type="checkbox"/>	2 days	Riggins, Sara	Axxess Academy	Ralph Doolittle	Not Available	Physician Order	02/16/2022	02/17/2022		<div>Mark as Received</div> <div>Update Status</div> <div></div>
<input type="checkbox"/>	2 days	Riggins, Sara	Axxess Academy	Ralph Doolittle	Not Available	Initial Plan of Care	02/16/2022	02/17/2022		<div>Mark as Received</div> <div>Update Status</div> <div></div>

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

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

Age of Order	Patient	Team	Physician	Type	Order Date	Sent Date	Order Preview	Actions
34 days	Soo, Peggy	Axxess Team	Ralph Doolittle	Physician Order	09/03/2020	09/03/2020	Marking in Progress	

Received Date

10/07/2020

Signed Date

MM/DD/YYYY

Mark

Cancel

Similarly, change the status of individual orders by selecting the green **Update Status** hyperlink under the Actions column. Change the status in the drop-down menu and select the **Update** button.





















Age of Order	Patient	Team	Physician	Mail	Initial Plan of Care	Order Date	Sent Date	Status	Actions
2 days	Mahajan, Bhushan	Axxess Academy	Ralph Doolittle	Mail	Initial Plan of Care	02/16/2022		To Be Sent	Update



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

Age of Order	Patient	Team	Physician	Delivery Method	Type	Order Date	Sent Date	Order Preview	Actions
1 days	Irish, Jinx Leah	Axxess Team	Jose Lopez	IDG	Physician Order	02/17/2022	02/17/2022	Mark as Received	Update Status
1 days	Adams, Wednesday	Team WMA	Jose Lopez	IDG	Physician Order	02/17/2022	02/17/2022	Mark as Received	Update Status

Similarly, to update the status of multiple orders, select checkboxes to the left of orders then select the **Update Status** button at the top right. The number of orders selected will show on the right side of the button. Select the top left checkbox in the purple header to select all orders.

3. **Completed Orders** - This section shows orders that are signed and received. Orders are displayed by patient, team, physician, type, order date, sent date, signed date and received date.

To Be Sent Pending Signature Completed Orders									
Search by Patient Name		Search by Physician		Type to Filter Type...	Order Date	Branch: All +	Team: All +		
Patient	Team	Physician	Type	Order Date	Sent Date	Signed Date	Received Date	Actions	
Hempick, Kyle	Matt's Testing Team	MARIA HANSBERRY	Physician Order	04/10/2019	07/29/2019	11/13/2019	11/13/2019		
Sandil, Laverne	Avenger	MARY HAMMACK	Hospice Physician Certification of Terminal Illness	04/26/2019	04/26/2019	04/26/2019	04/26/2019		
Acosta, Sandra	Access Team	MARIA HANSBERRY	Physician Order	04/30/2019	05/03/2019	05/05/2019	05/08/2019		
Acosta, Sandra	Access Team	MARY HAMMACK	Physician Order	04/30/2019	05/08/2019	11/13/2019	11/13/2019		
Alfonso, Patricia	Test Team	MARIA HANSBERRY	Physician Order	05/08/2019	11/13/2019	11/13/2019	11/13/2019		
Cab, Yelene	Test Team	MARIA HANSBERRY	Physician Order	05/09/2019	05/09/2019	05/07/2019	05/07/2019		
Lisbon, Jake	Access Team	MARIA HANSBERRY	Hospice Physician Certification of Terminal Illness	05/17/2019	05/17/2019	01/01/0001	06/25/2019		
Otero, Lilián	Access Team	MARIA HANSBERRY	Physician Order	05/21/2019	05/21/2019	05/21/2019	05/21/2019		
Acosta, Sandra	Access Team	MARIA HANSBERRY	Hospice Physician Certification of Terminal Illness	06/09/2019	07/09/2019	01/01/0001	06/25/2019		
Torres, Cynthia	Access Team	MARIA HANSBERRY	Hospice Physician Certification of Terminal Illness	06/10/2019	06/11/2019	06/10/2019	06/11/2019		
				4 1 2 3 4 5 6 51 total results		Show 10 entries			

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

ADDING AN INSURANCE/PAYER

Add/Insurance/Payer

Insurance/Payer Details - Enter the display name, payer type, bill type, taxonomy, associated agency providers, payer name, address, source of payment, payer ID and other fields below. Select the **Save** button to keep what has been entered or select the **Next** button to move on to the **Billing Information** tab.

Insurance/Payer

Insurance/Payer Details
Billing Information
Fee Schedule

Information

Display Name *

Enter Display Name

Bill Type *

Select Bill Type

Associated Agency Providers *

Select Provider

☐ Agency has a contract with this insurance

Payer Type *

Select Payer Type

Taxonomy *

Start Typing...

Tax ID

Enter Tax ID

Payer Address

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

Payer Name *

Start Typing...

Source of Payment *

Select Source of Payment

Payer ID *

Start Typing...

Phone Number

Mobile

Enter Phone Number

Call

Fax Number

Enter Fax number

Country *

United States of America

Address Line 1 *

Start Typing...

Address Line 2

Enter Address Line 2

City *

Enter City

State *


Select State

ZIP *

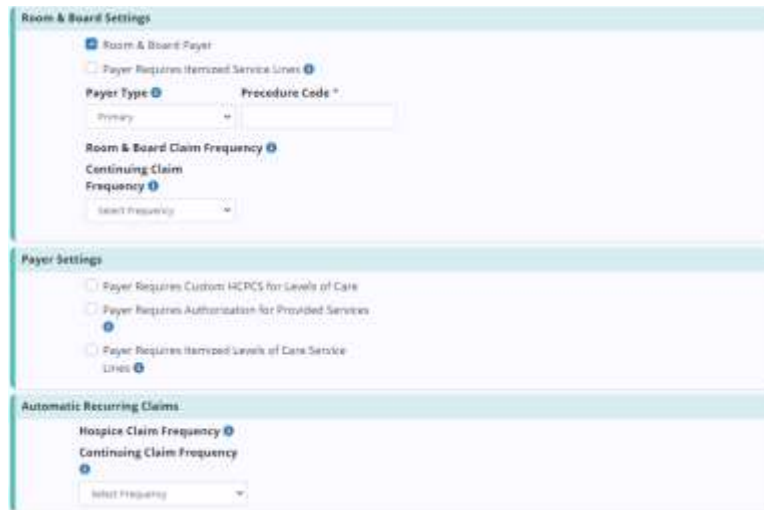
Enter Zip

Save
Next
Cancel

axxess.com

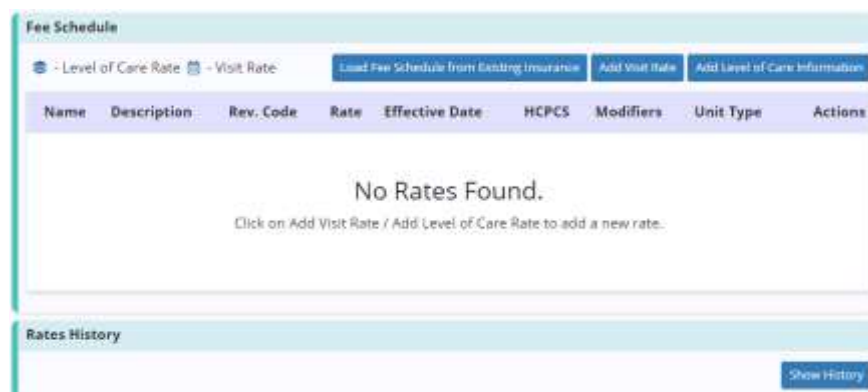

/Axxess

Billing Information - Indicate whether payer uses Room & Board. If so, choose the payer type from the drop-down menu and enter the procedure code. Then choose the Room & Board frequency and the last day of billing cycle. Choose the payer settings including custom HCPCS, authorization and/or itemized LOC service lines. If the payer has automatic recurring claims, choose the frequency.



Select the **Save** button to keep what has been entered or select the **Next** button to move on to the **Fee Schedule** tab. Select the **Previous** button to go back to **Insurance/Payer Details** tab.

Fee Schedule - The section to be able to add level of care and visit rates while looking at the history of what has been previously added.



To save time, select the **Load Fee Schedule from Existing Insurance** to copy the fee schedule from a previously entered insurance. Select the **Add Visit Rate** button to add new visit rates. Choose the task, preferred description, effective

date, service unit type, revenue code and rate (and unit). Select **Save Visit Information** button when finished.

Add Visit Information

Task * - Select Task -	Preferred Description * Enter Preferred Description
Effective Date * MM/DD/YYYY	Modifier
Revenue Code * Enter Revenue Code	Service Unit Type * - Select Unit Type -
Rate * Enter Rate Per Unit	HCPES Code Enter HCPES

[Save Visit Information](#) [Cancel](#)

Select **Add Level of Care Rate** button. Choose level of care, preferred description, effective date, rate (and unit), revenue code and service unit type. Select **Save Level of Care Rate** button when finished.

Add Level of Care Rate

Level of Care * - Select Level of Care -	Preferred Description * Enter Preferred Description
Effective Date * MM/DD/YYYY	Rate * Enter Rate Per Unit
Revenue Code * Enter Revenue Code	HCPES Code Enter HCPES C
Service Unit Type * - Select Service Unit Type -	

[Save Level of Care Rate](#) [Cancel](#)

EDITING EXISTING INSURANCE/PAYERS

List/Insurance/Payers

Select the **Edit** hyperlink to the far right of the screen under the Action column. This is also where the **Delete** function is found to remove. Filter by provider by using the drop-down menu. To search for a payer, start typing any payer details in the white free text space at the top left of the page. Payers can also be added from here by selecting the **Add Insurance/Payer** button in the top right.

Insurance/Payer

Providers: All ▾ Search for Payer by Name... [Add Insurance/Payer](#)

Provider	Payer Name	Display Name	Bill Type	Payer Type	Phone	Fax	Actions
Testing Home Health Agency, Inc.	Wellpoint Inc	Wellpoint Inc	Institutional (UB-04)	Private Insurance/Medigap	(888) 888-8888		Edit Delete
Testing Home Health Agency, Inc.	UnitedHealth Group	UnitedHealth Group	Professional (CMS-1500)	Private managed care	(770) 777-7777	Not Available	Edit Delete
Testing Home Health Agency, Inc.	TRICARE	TRICARE	Institutional (UB-04)	Other government (e.g., TRICARE, VA, etc.)	(124) 565-4565	(872) 565-4635	Edit Delete
Testing Home Health Agency, Inc.	Tricare	Tricare Mango	Professional (CMS-1500)	Other government (e.g., TRICARE, VA, etc.)		Not Available	Edit Delete
Testing Home Health Agency, Inc.	Test Bree	test T2	Institutional (UB-04)	Medicare (traditional fee-for-service)		Not Available	Edit Delete
Testing Home Health Agency, Inc.	Pay me Krishna (not)	Krishna's Insurance	Institutional (UB-04)	Medicare (traditional fee-for-service)		Not Available	Edit Delete
Testing Home Health Agency, Inc.	Medicare Default Payer	Medicare	Institutional (UB-04)	Medicare (traditional fee-for-service)	Not Available	Not Available	Edit

ADDING TEMPLATES

List/Templates

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

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

Templates

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

Create a name for the template. Then write the template inside the description. To include areas where clinicians must insert patient-specific information, insert asterisks in the description text. When a template that includes asterisks has been selected for documentation, the system will automatically alert users to replace all asterisks in the template before the note can be saved or complete. Select the **Save Template** button once completed.

Add Template

Template Name *

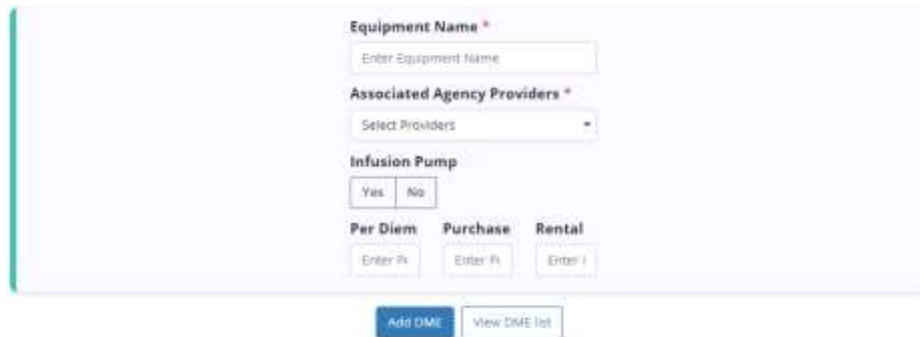
Description

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

ADDING DME

Add/DME

Enter the equipment name and choose associated agency providers. Then decide whether the DME (Durable Medical Equipment) is an Infusion Pump. Then enter the price for per diem, purchase and rental for the DME. Select the **Add DME** button at the bottom when finished.



The form contains the following fields and buttons:

- Equipment Name ***: Text input field with placeholder "Enter Equipment Name".
- Associated Agency Providers ***: Dropdown menu with placeholder "Select Providers".
- Infusion Pump**: Radio buttons for "Yes" and "No".
- Per Diem**: Text input field with placeholder "Enter P".
- Purchase**: Text input field with placeholder "Enter P".
- Rental**: Text input field with placeholder "Enter R".
- Add DME**: Blue button.
- View DME list**: White button.

Select the **View DME list** button to see the current list. Filter by provider by using the drop-down menu. Search through the list by typing the equipment name in the search bar in the top left. **Edit** or **Delete** by selecting the hyperlinks under the Actions column. Users can also add additional DME by selecting the **Add DME** button in the top right.

DME

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

ADDING SUPPLIES

Add/Supplies

Enter the supply name, indicate whether the supply is formulary and enter unit cost. Choose the associated agency providers. Select the **Add Supply** button at the bottom when finished.

Name *

Formulary
☐ Yes ☒ No

Unit Cost

Associated Agency Providers *

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

<input type="text" value="Search by Supply Name"/> <input type="button" value="Add Supply"/>			
Supply Name	Formulary	Unit Cost	Actions
Aquaphor	No	5.15	Edit Delete
bed sheet	No	2	Edit Delete
body wash, bottle	Yes	1.5	Edit Delete
Chair Cushion	Yes	10	Edit Delete
Cotton Balls	No	0.5	Edit Delete

ADD TEAMS

Add/Team

Team Details - Enter team details, including a team name. Then start typing the name of the hospice physician, clinical manager, hospice medical director (optional) and choose an agency branch. After typing, names will then be available for selection.

Team

Team Details

Groups

Team Details

Team Name *
Enter Team Name

Hospice Physician *
Start Typing...

Agency Branch *
Select E...

Clinical Manager *
Start Typing...

Hospice Medical Director
Start Typing...

Type
IDG

Meeting Schedule

Add Meeting Schedule

Frequency	Repeat On	Meeting start date	Meeting Start Time	Actions
No Meeting Schedules Found.				

Team Members

Start Typing... Add Selected Member

Member	Title	Actions

Cancel Next Save

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

New Meeting Schedule

Repeat *
Select Frequency

Repeat on *
Sun Mon Tue Wed Thu Fri Sat

Effective from *
MM/DD/YYYY

Meeting Start Time *
Enter Meeting Start Time

Cancel Save

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

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



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

New Group

Name *

Hospice Physician

Meeting Schedule *

Please add a meeting schedule to the team.

Cancel

Save

ADD DOCUMENT TYPES

Lists/Document Types

Document types categorized as patient documents will appear when adding documents to patient profiles. Document types categorized as employee documents will appear when adding documents to employee profiles. Before uploading documents to employee or patient profiles, users must set up document types.

Type *	Created	Last Modified	Actions
Advance Directives	07/11/2018	Default document type cannot be modified.	
Attending Physician Certification of Terminal Illness	09/30/2019	Default document type cannot be modified.	
Election Addendum	09/24/2020	Default document type cannot be modified.	
Election Form	09/05/2018	Default document type cannot be modified.	
Face-to-Face	10/01/2018	Default document type cannot be modified.	
Hospice Physician Certification of Terminal Illness	09/05/2018	Default document type cannot be modified.	
Medical History	07/11/2018	Default document type cannot be modified.	
Notice of Medicare Non-Coverage (NOMNC)	09/30/2019	Default document type cannot be modified.	
Orders	07/11/2018	Default document type cannot be modified.	
Revocation Statement	09/04/2018	Default document type cannot be modified.	

When users arrive on the page, default document types will show. Select the **Custom** tab to see created types and add more. Search through the list in the search bar or add another by selecting the **Add Document Type** button.

Provider	Type *	Category *	Created	Last Modified	Actions
Testing Home Health Agency, Inc	A Document Type	Patient	02/22/2022	02/22/2022	Edit Delete
Testing Home Health Agency, Inc	Advance Directives I	Patient	02/09/2021	02/09/2021	Edit Delete
Testing Home Health Agency, Inc	Blod Borne pathogens manual	Employee	09/21/2021	09/21/2021	Edit Delete
Testing Home Health Agency, Inc	bluebird	Patient	02/21/2022	02/21/2022	Edit Delete
Testing Home Health Agency, Inc	Car Insurance	Employee	09/29/2021	09/29/2021	Edit Delete
Testing Home Health Agency, Inc	Consents	Patient	02/09/2021	02/09/2021	Edit Delete

Enter a name for the document type in the type field and select a category from the category menu. Select the associated providers and select **Save Document Type** to finish adding the document type.

Add Document Type

Type *

Category *

Associated Agency Providers *

[Save Document Type](#) [Cancel](#)

To edit a document type, category or associated providers, select the **Edit** hyperlink under Actions next to the document type. Select **Delete** to remove.

HIS EXPORT

Home/HIS Export Manager

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

Pending Approval

Export Ready

Export History

Search by Patient Name

11/20/2021 - 02/18/2022

Select HIS Export Type

All Branches

Approve Selected

<input type="checkbox"/>	Days Remaining	Patient	Payer	Type	Admit/Discharge Date	Last Modified On	Actions
<input checked="" type="checkbox"/>	22 days overdue	AKUJHWA, Angelo	AxxessRCM Test Payor	Admission 6 Transactions	01/13/2022	02/18/2022 07:16 AM	Check Errors Edit
<input type="checkbox"/>	12 days	Al-Balushi, Issa	AxxessRCM Test Payor	Admission 6 Transactions	02/16/2022	02/17/2022 10:17 AM	Approve Edit
<input type="checkbox"/>	12 days	Ang, Mary Beverly	AxxessRCM Test Payor	Admission 6 Transactions	02/16/2022	02/17/2022 10:25 AM	Approve Edit
<input type="checkbox"/>	23 days overdue	Anthony, Charles	AxxessRCM Test Payor	Discharge 1 Transactions	01/19/2022	02/12/2022 04:41 AM	Approve Edit

In each tab, search for patients by name in the search bar, change the date range of HIS by selecting the date range bar, choose the HIS export type or branch.

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

Pending Approval

Export Ready

Export History

Search by Patient Name

11/20/2021 - 02/18/2022

Select HIS Export Type

All Branches

Approve Selected

	Days Remaining	Patient	Payer	Type	Admit/Discharge Date	Last Modified On	Actions
<input checked="" type="checkbox"/>	22 days overdue	AKUHWA, Angelo	AxxessRCM Test Payor	Admission 4 Inconsistencies	01/13/2022	02/18/2022 07:16 AM	Check Errors Edit
<input type="checkbox"/>	12 days	Al Balushi, Issa	AxxessRCM Test Payor	Admission 4 Inconsistencies	02/16/2022	02/17/2022 10:17 AM	Approve Edit
<input type="checkbox"/>	12 days	Ang, Mary Beverly	AxxessRCM Test Payor	Admission 4 Inconsistencies	02/16/2022	02/17/2022 10:25 AM	Approve Edit

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

- **Green** = More than five days remaining
- **Orange** = Five to one days remaining
- **Red** = Zero days remaining or overdue

Each line will show the days remaining, patient name (selected will go to patient chart), payer, type (selected will go to HIS), admit/discharge date and last modified on. The Action column hyperlinks allow users to **Approve** or **Edit** the HIS.

<input type="checkbox"/>	Days Remaining	Patient	Payer	Type	Admit/Discharge Date	Last Modified On	Actions
<input type="checkbox"/>	12 days	Al Balushi, Issa	AxxessRCM Test Payor	Admission 4 Inconsistencies	02/16/2022	02/17/2022 10:17 AM	Approve Edit

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

Search by Patient Name		02/16/2022 - 02/18/2022		Select HIS Export Type	All Branches	Approve Selected	
<input type="checkbox"/>	Days Remaining	Patient	Payer	Type	Admit/Discharge Date	Last Modified On	Actions
<input checked="" type="checkbox"/>	12 days	Al Bakushi, Issa	AxxessRCM Test Payor	Admission	02/16/2022	02/17/2022 10:17 AM	Approve
<input checked="" type="checkbox"/>	12 days	Ang, Mary Beverly	AxxessRCM Test Payor	Admission	02/16/2022	02/17/2022 10:25 AM	Approve

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

Pending Approval

Export Ready

Export History

Search by Patient Name

11/20/2021 - 02/18/2022

Select HIS Export Type

All Branches

Mark Selected as Exported

Generate HIS File

Update Status

<input type="checkbox"/>	Days Remaining	Patient	Payer	Type	Admit/Discharge Date	Approved Date	Actions		
<input type="checkbox"/>	<div><div></div>29 days</div>	Ademur, Samuel	AxxessRCM Test Payor	Admission	02/16/2022	02/17/2022	Mark as Exported	Generate HIS File	Update Status
<input type="checkbox"/>	<div><div></div>50 days overdue</div>	Anthony, Charles	AxxessRCM Test Payor	Admission	11/29/2021	02/04/2022	Mark as Exported	Generate HIS File	Update Status
<input type="checkbox"/>	<div><div></div>33 days overdue</div>	Arwan, Nufi	Medicare	Discharge	12/16/2021	01/26/2022	Mark as Exported	Generate HIS File	Update Status
<input type="checkbox"/>	<div><div></div>55 days overdue</div>	Daniels, Charlie	Medicare	Discharge	11/24/2021	11/25/2021	Mark as Exported	Generate HIS File	Update Status
<input type="checkbox"/>	<div><div></div>41 days overdue</div>	Kraenzlin, Vanessa	AxxessRCM Test Payor	Discharge	12/08/2021	02/05/2022	Mark as Exported	Generate HIS File	Update Status
<input type="checkbox"/>	<div><div></div>29 days</div>	Mahajan, Bhushan	AxxessRCM Test Payor	Admission	02/16/2022	02/18/2022	Mark as Exported	Generate HIS File	Update Status

1

6 total results

Show 10 entries

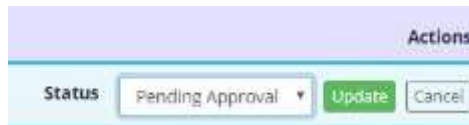
Each line will show the days remaining, patient name (selected will go to patient chart), payer, type, admit/discharge date and approved date. The Action column hyperlinks allow users to **Mark as Exported** or **Generate HIS File**.

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

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

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

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



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



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

Export History - Once the organization receives the file indicating if it was approved or rejected, users can update the status by selecting the **Update Status** hyperlink in the Actions column or by checking the box(es) on the left side of multiple rows and selecting the **Update Status** button to update statuses in

bulk. Users can also create correction or cancellation files by selecting **Make a Correction** and **Generate Cancel** hyperlinks in the Actions column.

Pending Approval		Export Ready	Export History				
Search by Patient Name		05/01/2020 - 08/31/2020	3 status Selected *	Select HIS Export Type		Update Status	
<input type="checkbox"/>	Patient	Payer	Type	Status	Admit/Discharge Date	Exported Date	Actions
<input type="checkbox"/>	AJASA, BABAWALE	AxxessRCM Test Payor	Admission	Exported	06/11/2020	08/11/2020	Generate Cancel Make a Correction Update Status
<input type="checkbox"/>	Alvin, de Chipmunk	AxxessRCM Test Payor	Admission	Exported	06/21/2020	09/15/2020	Generate Cancel Make a Correction Update Status
<input type="checkbox"/>	Bears, Masha	AxxessRCM Test Payor	Admission	Exported	05/11/2020	08/08/2020	Generate Cancel Make a Correction Update Status
<input type="checkbox"/>	Demo, Friday	Medicare	Admission	Rejected	06/26/2020	08/11/2020	Generate Cancel Make a Correction Update Status
1		4 total results				Show 10 entries	

HELP CENTER

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

