HOME HEALTH ADMINISTRATOR OVERVIEW QUICK REFERENCE GUIDE

September 2022

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NOTE: All asterisked (*) items are required.

COMPANY SETUP
Admin/Company Setup

After entering your signature, select **Proceed**. Setup has the following 11 tabs:

1. Company Information - Enter the organization's information including IDs and Provider Numbers.
   a. Enter submitter information from Medicare, as well as the address of the location tied to the submitter information.
   b. Upload the organizational logo by selecting the **Upload Logo** button.
   c. Selecting the **Activity Logs** button will open a new window showing which users have changed data in the **Company Information** tab and when the change was made.
   d. Select **Save**.

2. Subscription Plan - To adjust the organization's monthly subscription plan.
   a. Write the request in the Comments section.
   b. Enter the signature.
   c. Select **Submit Request**.
   d. If organizations want to downgrade their plan, they must enter a ticket in the **Support Ticketing Center**.

3. Clinical
   a. **Enable** or **Disable** the Wound Manager which tracks wounds and wound orders.
   b. **Enable** or **Disable** Vital Sign Parameters according to organizational policies and procedures.
      i. After enabling, enter a greater than and/or less than limit by selecting the **Edit** hyperlink.
   c. **Enable** or **Disable** the OASIS Assessment validations to have this information scrubbed while the clinician is filling out the OASIS.
   d. **Enable** or **Disable** Visit and Travel Time Validations. These include visit and travel time discrepancies, partial travel time, visit time duration and travel time duration.
   e. **Select** any of the tasks to bypass the Quality Assurance (**QA) Center**.

f. Check and/or uncheck specific OASIS scrubber audit boxes that the Axxess scrubber looks for.
g. **Enable** or **Disable** the Plan of Care Summary generated in the Patient Chart.
h. **Enable** or **Disable** Time Entry for Documentation and Therapist License Number with Signature.
i. To save, select **Submit Request.**

4. Scheduling
   a. **Enable** or **Disable** the orders-driven scheduling Frequency and Duration Warning alert and/or the Frequency and Duration Compliance.
   b. **Enable** or **Disable** alerts that require clinicians to provide appropriate authorizations before opening visits.
   c. **Enable** or **Disable** Delete Visits After Discharge which automatically deletes remaining visits when a discharge visit has been completed and approved by QA or a patient has been manually discharged.
   d. **Enable** or **Disable** Auto-Generate Recert Episodes which automatically generates a recert episode when a patient with a scheduled recert visit reaches the last five days of the current episode.
   e. To save, select **Submit Request**.

5. Operations
   a. **Enable** or **Disable** Patient Name Alerts.
      i. If enabled, choose the check patient name matches by first and last name or by last name only.
   b. Select **Submit Request.**
   c. **Enable** or **Disable** the Pre-Claim Review Center (PCR)
      i. If enabled, enter the effective date.
   d. **Enable** or **Disable** the Final Claim UTN Validation.
   e. Select **Submit Request.**
   f. Enter evacuation zones by selecting **Add Evacuation Zone**.
      i. Enter the name of the zone.
      ii. Select **Add**.
      iii. Make edits by selecting 📝 or remove zones by selecting 🗑.

6. Billing

a. Select the Medicare Week from the drop-down. Then decide if LUPA Claim Re-Calculation and Therapy Upcoding-Down-coding will be **enabled** or **disabled** for traditional Medicare and/or HMO/Managed Care Medicare.
b. Enter Medicare Submitter Information.
c. To save, select **Submit Request.**

7. Financial
a. Select date through which books are closed. **NOTE**: If the Disable Closing Date check box is selected, users will be able to edit any records (permission-based) regardless of closing date. If the Disable OASIS Lock is selected, users will be able to edit OASIS records regardless of closing date.
b. Generate the General Ledger Report by filling out the parameters and select **Request Report**.
c. Select the **View Charts of Accounts** button to open the Chart of Accounts window.
   i. Users can group accounts by branch or account name
   ii. Select **Bulk Update** to update the account numbers and/or effective dates for multiple accounts. Once all selections have been made, select **Save Bulk Update**. Select **Yes** in the confirmation box.
   iii. Update accounts individually by selecting **Update** or to view account history, select **View History.**
d. Decide Average Discipline Cost Per Visit.
   i. Select **Edit** to update how much staff are paid per visit.
   ii. Decide the average cost per visit and its effective date based on location and discipline.
   iii. Select **Update**.
e. To save, select **Submit Request.**

8. Payroll
a. **Enable** or **Disable** vendor-specific payroll exports. If enabled, choose the Payroll Vendor and enter Payroll Company Code/ID.
b. **Enable** or **Disable** multiple pay cycles for the organization.
c. **Enable** or **Disable** task approval in the Payroll Export Center.
d. **Enable** or **Disable** the Mileage Calculator and decide if weekend mileage is included.
e. Enter Company Mileage Reimbursement Policy:
   i. Select **Add New**.

   ii. Enter Effective Date and Reimbursement Rate

   iii. Select **Save**.

  f. To save, select **Submit Request.**

9. Integrations

  a. Select **Enable** to send Axxess a request to activate the WorldView, Doctor Alliance or Forcura document management integrations. Once the integrations are active, the organization can automatically send approved orders from Axxess to the respective company. There are additional settings that can be selected per integration partner.

  b. **Enable** or **Disable** Surescripts Clinical Direct Messaging integration. Once enabled and active, organizations will automatically receive Surescripts messages in the Axxess Alert Center.

  c. **Enable** or **Disable** the Health Recovery Solutions for telehealth service integration.

  d. To save, select **Submit Request**.

10. Support Ticketing Center

  a. Organizations may designate super users (number is based on subscription) to directly engage the Axxess support team and request help through the Support Ticketing Center by selecting the check box next to chosen users.

11. Electronic Visit Verification Setup

  a. If an EVV vendor is being used, choose Vendor, Payers, Branches and Effective Date. If more than one vendor is being used select **+ Add EVV Vendor**.

  b. Select the **Remove Vendor** button to delete the EVV account.

  c. To save, select **Save**.

ADDING A NEW USER

Admin/New/User

1. Enter the user's information.

  a. Select **Duplicate from** the dropdown menu to copy Roles, Permissions and Restrictions from another user.

2. **Check** Role(s) boxes depending on position.
3. Check **Allow Weekend Access** box to be able to login during the weekend. Select Earliest Login Time and Automatic Logout Time.
4. Check Permissions boxes individually or **Select all Permissions**. **NOTE**: Under Clinical Permissions – Organizations, choose either ability both notes and orders. If both options are checked, the user will not be able to do either.
5. Enter any comments related to the user.
6. Select **Add User**.

EDITING A USER
Admin/Lists/Users

Select **Edit**. There are seven tabs:

1. Information – Same as User Information section when adding new user except select if software should be in **English** or **Español**.

2. Permissions – *See adding a new user.*

3. Licenses – To make changes, select edit or delete icon**.** To add new:
   a. Select **New License.**
   b. Choose license type.
   c. Enter license number.
   d. Add issue and expiration dates.
   e. Select **Choose Files** to find document saved on computer to add as an attachment.
   f. Select **Add.**

4. Visit Activity Pay Rates – To make changes to pay rates select **Edit** or **Delete.** To add new visit pay rates:
   a. Select **New Visit Pay Rate**.
      i. Choose the insurance, task and pay type.
      ii. Enter user and mileage rates.
      iii. Select **Add**.

   To add new non-visit pay rates:
   b. Select **New Non-Visit Pay Rate**.
      i. Choose non-visit activity and pay rate.
      ii. Enter user and mileage rates.

        iii.   Select **Add**.

Import Pay Rates to copy pay rates set up for other users. Select user, then select **Apply**.

5. Immunization – **Delete** or **Inactivate** from active list.
    a. Select **Add Immunization**.
        i. Choose the type of immunization and who it was administered by.
        ii. Select date administered.
        iii. Select whether comorbid condition present.
        iv. Select **Save** or **Save & Add Another** to continue with another immunization.

    To add declined immunization:
    b. Select **Decline/ Contraindicate Immunization.**
        i. Choose type of immunization.
        ii. Select date documented.
        iii. Select whether comorbid condition present.
        iv. Select declined or contraindication.
        v. Select **Save** or **Save & Add Another** to continue with another declined immunization. Listed under Inactive Immunizations.

Inactivate or **Delete** immunizations individually by selecting the hyperlinks under the Action column. Inactivate immunizations can also be deleted or activated.

6. Infectious Disease Profile - Add, view or remove COVID-19 screenings.
    a. Select **COVID-19 Screening**.
    b. Choose person screened. Checkbox if the user refused screening.
    c. Enter the reported temperature.
    d. Answer all questions and choose a risk level. Templates and additional screening requirements may be entered.
    e. Select the screening acknowledgment checkbox.
    f. Enter the clinician signature and confirm the signature date and time (both auto-generate the time the window was opened).
    g. Select **Sign Screening** or **Sign & Add Another** to continue with another screening.
7. Personnel Notes - Add, view history, edit, print or delete personnel notes.
    a. Select **New Personnel Note**.

b. Choose the type of note.
c. Enter comments.
d. Select **Save Note** or **Save and Add Another** for additional notes.

DELETED USERS

Admin/Deleted Users

1. Select the **Restore** hyperlink or check one or more boxes to the left of the usernames. Then select the **Restore** button at the bottom to restore multiple users at once.
2. Select the **Excel Export (Deleted)** button in the top right to create an Excel spreadsheet with all deleted users listed.

ACCELERATED PAYMENT CENTER

Admin/Accelerated Payment Center

1. Select the appropriate location (branch) from drop-down menu.
2. View six automatically updating tiles or select hyperlinks in each tile.
   a. Forms and Resources
   b. Revenue - Past 3 Months
   c. Pre-Application Recommendations
   d. Eligibility Criteria
   e. Application Resources
   f. Submitting an Application

NON-VISIT ACTIVITY MANAGER

Admin/Non-Visit Activity Manager

Start Typing either Users, Non-Visit Activity, Branch, NVA Date, Begin and End Time, Mileage, Paid Date and/or Comments to find specific activities. To assign:

1. Select **Assign Non-Visit Activity.**
   a. Choose user and branch.
   b. Select NVA date.
   c. Choose non-visit activity.
   d. Enter time in and out.
   e. Enter mileage and any comments.

      f.   Select **Save.**

2. Select **Edit** to make changes. Same screen as previous except for paid date (select) and paid status (check box). Select **Update. NOTE**: Checking the paid status box will change the icon seen on first Non-Visit Activity window from a red **X** to a green check mark.
3. Select **Activity Logs** to show which users have edited the activity entry and when.
4. Select **Delete** to remove.

ADDING A PHYSICIAN
Admin/Lists/Physicians/New Physician or *Admin/New/Physician*.

1. Enter the NPI number. Begin typing the number and the physician can be selected.
2. Physician Information will auto-fill based on NPI registry information. **NOTE**: If the NPI number is unknown, use the following website. https://npiregistry.cms.hhs.gov/registry/
   a. System will automatically run PECOS Verification. ✔ = verified, ✖ = not verified.
3. Select **Save**.

ADDING A NEW FACILITY
Admin/New/Facility or *Admin/Lists/Facilities/New Facility*

1. Enter facility information details.
2. Select **Save**.

ADDING A NEW PHARMACY
Admin/New/Pharmacy or *Admin/Lists/Pharmacies/New Pharmacy*

1. Enter pharmacy information details.
2. Select **Save**.

OASIS TRANSMISSION
Create/OASIS Export.

Choose branch, payment source and select assessment date range, then select **Generate** to filter.

1. Select one or multiple boxes to the left of the name (or Check/Uncheck All check box), then select:
    a. **Generate OASIS File.**
        i. Downloads the raw OASIS file on the computer to be uploaded to Center for Medicare Services (CMS).
        ii. Once sent to CMS, go back to the window, check boxes of submitted OASIS.
    b. **Mark Selected as Exported**. Confirmation that OASIS file(s) have been accepted by CMS.
        i. Select **Yes, Mark as Exported** or if it was not exported then
    c. **Mark Selected as Completed (Not Exported).**
        i. Confirm by selecting **Yes, Mark as Completed (Not Exported)**.
2. Change the Correction # by:
    a. Select **Edit** hyperlink.
    b. Choose Correction Number.
    c. Select **Edit**.

ORDERS MANAGEMENT
View/Orders Management

There are four sections:

1. Orders Pending Co-Signature – Choose branch, select date range, then select **Generate**. Start typing any order number, patient, physician or clinician name to narrow search.
    a. Select order type hyperlink.
    b. Choose **Co-Sign** or **Print**.
    c. Enter clinician co-signature.
    d. Confirm co-signature date (auto-generates today's date).
    e. Select **Co-Sign** or **Co-Sign and Approve**.

2. Orders To Be Sent – Filter by branch and then choose the delivery method. Choose the date range and patient status. Select **Generate**. Start typing any order number, patient, type, or physician name to narrow the

search. Select the 🗎 icon to view or write any notes attached to that specific order.

To send manually:

    a. Select the printer icon 🖨.
    b. Once printed, check the boxes to the left of the order.
    c. Select **Send**. **NOTE**: Delivery method must be fax or mail.

To send electronically:

    a. Check the boxes to the left of the order.
    b. Select **Send**. **NOTE**: Delivery method must be electronic or Axxess Physician Portal.

3. Orders Pending MD Signature - Choose branch, select date range, patient status and then select **Generate**. Start typing any order number, patient, payer, type, internal referral source or physician name in the free text space to narrow down.

For multiple orders:

    a. Check the box(es) next to the order.
    b. Select **Receive Orders.**
    c. Confirm received and physician signature date.
    d. Select **Mark as Received**.

For single order:

    a. Select **Receive Order** hyperlink**.**
    b. Confirm received date (auto-generates to today's date).
    c. Enter MD sign date.
    d. Select **Update**.

4. Orders History – Choose branch, select date range, patient status and then select **Generate**. Window can be refreshed, order notes can be managed, orders can be printed and the list can be exported.

    a. Select **Edit** to update an order.
    b. Update sent, received and/or physician signature date.
    c. Select **Update** to save.

ADDING AN INSURANCE/PAYER

Admin/New/Insurance Payer or *Admin/Lists/Insurances Payers/New Insurance.*

New payer is split into four steps/tabs:

1. Insurance/Payer Details
   a. If there is no contract with the insurance, uncheck the box. If there is a contract, enter the contract effective and expiration date. Select **Browse** to add attachment(s). Enter account manager first and last name, phone number and email.
   b. Enter insurance/payer name along with the type and source of the payment. All other fields are optional.
   c. Select episodic, per visit or both. Complete the form.
   d. Check box if Axxess is used for clearinghouse, if not, enter information.
   e. Enter the insurance contact person. If the payer's address is required, check the box and enter the address. Check the last box if payments are sent to a different address from their physical location.
   f. Select **Next: Billing Information >**

2. Billing Information
   a. Select **General Practice: UB** and/or **Home Health: HCFA** and complete the forms.
   b. Select **Next: Fee Schedule >** to continue. Select **< Save & Previous: Insurance/Payer Information** to return to previous tab.

3. Fee Schedule
   a. (Optional) Select **Delete Rates** to remove previously entered rates.
   b. Select the existing insurance to copy rates from, then confirm taxonomy code. Select **Load Rates**.
   c. If the payer rates match Medicare, select **Load Medicare Rates**.
   d. Select **Add Visit Information**.
   e. Confirm taxonomy code, select the task, enter the preferred description and revenue code. Enter HCPCS code, rate, modifier and choose the service unit type. Service units per visit will autogenerate to one. Select **Add & Exit** to complete.
   f. Select **Edit** for updates or **Delete** to remove**.**
   g. Select **Next: Summary >**

4. Summary – Shows summary of previously entered.
    a. Select the ✏ icon to go back to edit previous sections.
    b. Select **Complete.**

EDITING AN EXISTING PAYER
Admin/Lists/Insurances Payers or *View/Lists/Insurances Payers*

1. To search, start typing any part of the insurance, display name, payer class, type of bill, bill type, payer ID, invoice type, phone or contact person.
2. Select ✏ to make edits or select 🗑 to delete.
3. Select the three-dot icon under Actions to **View Activity Log** that lists which users have made any changes to the payer and when they were made.

PAYROLL EXPORT CENTER
Admin/Payroll Export Center

1. Choose date range, employees*, branch* and task type* (*multi-select).
2. Select **+ More Filters** to see additional filters.
3. Select **Generate. NOTE:** Additional Columns menu enables users to generate (multi-select) more robust payroll data.

To make edits:
1. Select ✏ to make edits to the visit time, travel time, associated mileage and surcharge amount.
2. Select 💾 to save.

Reports can be generated by using the following buttons:
- **Export Generated** – Summary overview excel file.
- **Export Details** – Creates excel file with up to 25 columns of data.
- **Payroll Export** – Generates a .csv or .txt for vendor to process payroll.

Select the checkbox(es) of individual payroll entries and select an **Export** button or select the select all checkbox to export all pending entries.

REPORT CENTER

Reports/Report Center.

Hovering over reports shows the description, parameters and what the report includes.
1. Select report.
2. Enter search parameters.
3. Select **Generate Report.** Select **Reports Home** to go back.

Some reports must be requested:
1. Select report.
2. Enter search parameters.
3. Select **Request Report**.
4. Go to **Reports/Completed Reports.**
5. To search, start typing the name, format, requested by, started and completed date.
6. Select the **Name** hyperlink of the report to view. Select the **Delete** hyperlink to remove.

ADDING TEMPLATES

Admin/New/Template

1. Enter name.
2. Enter text.
3. Select **Save**.

LICENSE MANAGER

Admin/License Manager

1. Select **Add Non-User License**.
2. Enter first name and last name.
3. Choose license type.
4. Enter initiation date and expiration date.
5. Select **Browse** to add File Attachment.
6. Select **Add**. Select the **Edit** hyperlink to update or select the **Delete** hyperlink to remove.

CUSTOM NOTE MANAGER

Admin/Custom Note Manger

1. **Select Create New Custom Note.**
2. Select Discipline.
3. Enter Custom Name.
4. Enter Note Description.
5. Select **Save.** Select the **Edit** hyperlink to update or select the **Delete** hyperlink to remove.

HELP CENTER

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