

HOME CARE ADMINISTRATOR TRAINING MANUAL

December 2022





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COMPANY SETUP

Admin/Company Setup

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

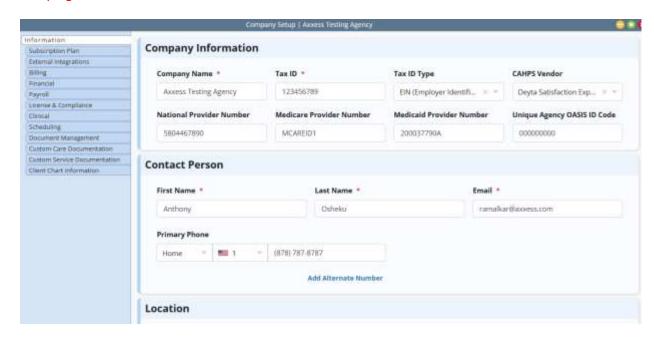


NOTE: For updating the signature, see Office Overview.

Company Setup is split into thirteen tabs found on the left side of the window.

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

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



Select the following buttons to toggle through the Company Setup window.

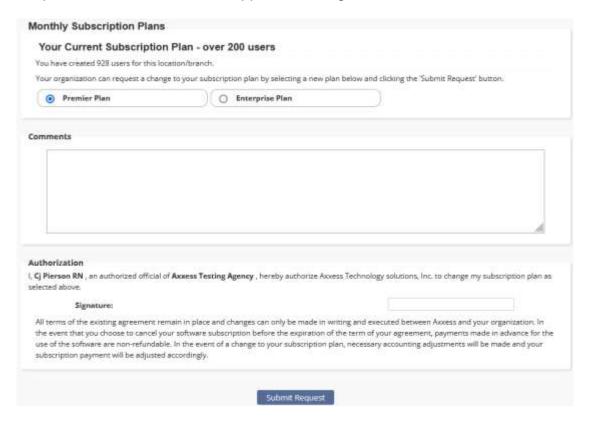




Save Save & Next Next Close

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

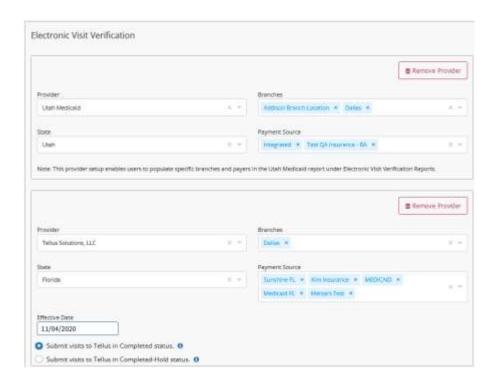
Subscription Plan - In this section, the current monthly subscription plan is shown. This plan is based on the number of users and/or active census and can be adjusted by submitting a written request in the comments section. Enter the user's electronic signature and select the **Submit Request** button. Upgrade the plan can only be done through the request form here, if users wish to downgrade their plan, enter a ticket in the Support Ticketing Center.



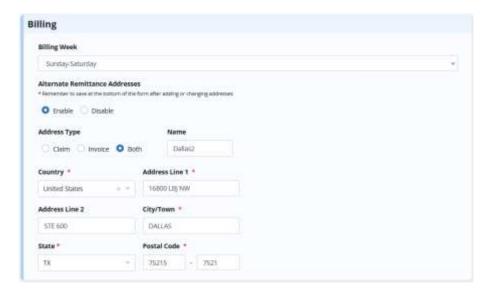
Electronic Visit Verification - The organization can connect their home care application to select outside vendors for services like Electronic Visit Verification (EVV). Enter the required information such as the provider, branches, state and payment source to connect (required information changes with integration).







Billing - This window enables users to decide billing settings. Indicate the weekly billing cycle, enable alternate remittance addresses and then fill in the address. Hover over the information ³ icon to get insight into questions.

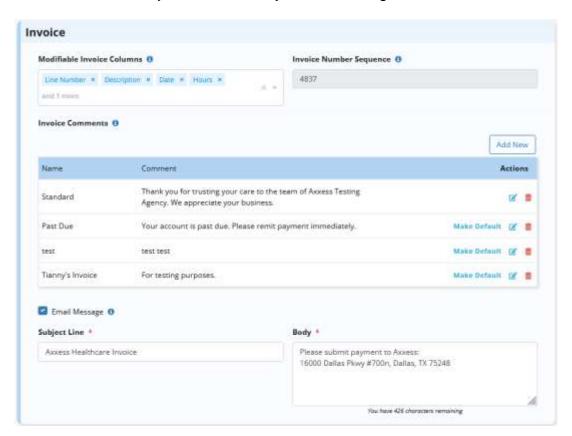


Insert modifiable invoice columns and choose the number sequence. Add invoice comments by selecting the **Add New** button. Edit, remove or make default comments that have been previously added by selecting the corresponding

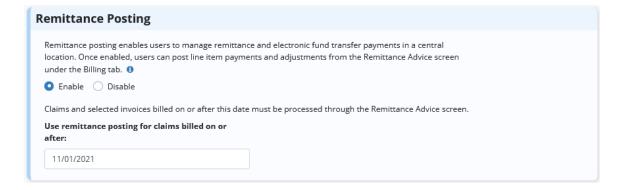




icons. If the organization wants to have a personal invoice message, check the box and fill out the subject line and body of the message.



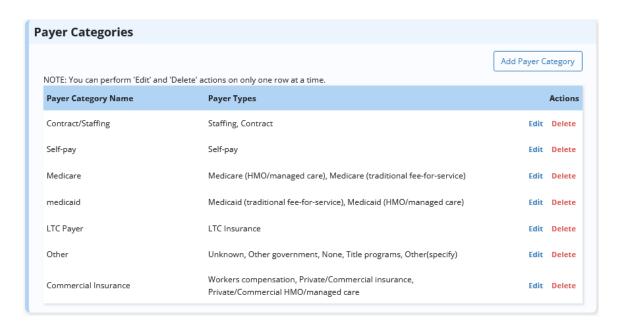
Enable remittance posting to manage remittance and electronic fund transfer payments in a central location and then selecting the date to begin use.



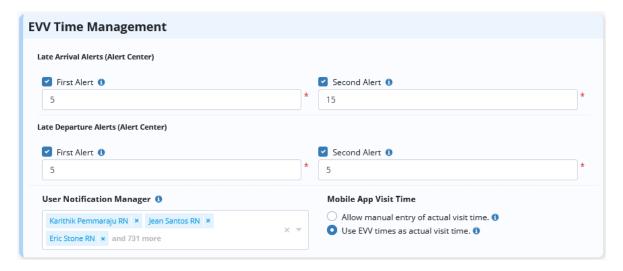
Enter new payer categories by selecting the **Add Payer Category** button. Once added, select the corresponding **Edit** and **Delete** hyperlinks to update.







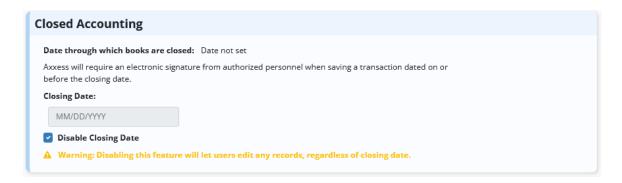
Determine the EVV time management settings. Decide how long the first and second alert will be for late arrivals and departures (in minutes) and who will be notified. Then determine whether the Axxess Home Care mobile app will allow for manual time entry or whether EVV will be the actual visit time.



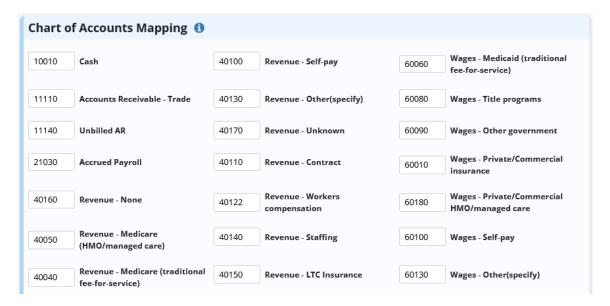
Financial - Choose a date through which accounts are closed. Axxess will require an electronic signature from authorized personnel when saving a transaction date on or before the closing date. Select the Disable Closing Date checkbox to let users edit any records regardless of the closing date.







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

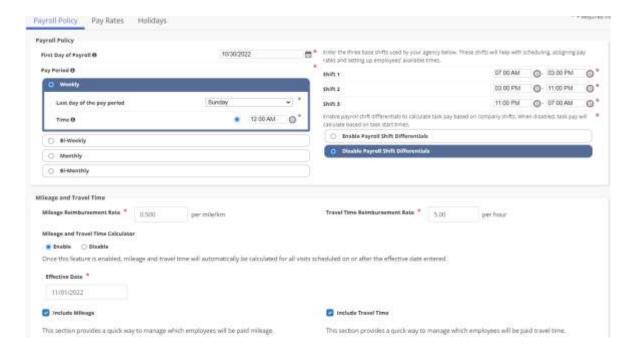


Payroll

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





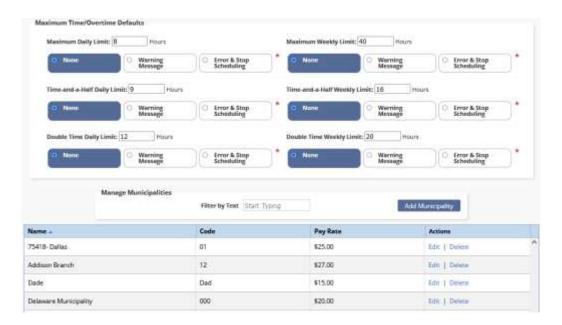


Enter the mileage and travel time reimbursement rates. Decide to enable the mileage and travel time calculator. When enabled, choose an effective date and decide if it will include mileage and/or travel time. Then decide which of the organization's employees will be allowed to manage paid mileage and/or paid travel time.

Determine if the organization will round start or end time for shifts (selecting 'none' is available). Enable unpaid meal breaks and set up shift duration requirements.

Enter the maximum and defaults if the organization pays overtime. Add municipalities by selecting the **Add Municipality** button if employees are paid a certain rate per region. After they have been added, they can be edited or removed by selecting **Edit** and **Delete**.





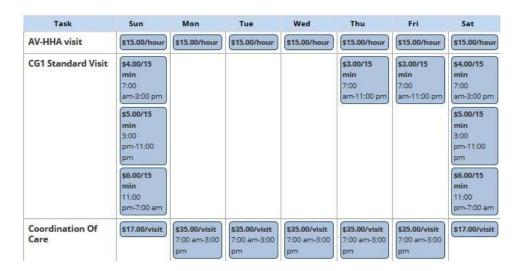
Pay Rates – Set up organization pay rates for all employees. Individual pay rates can be added under the **Employee Center**. Use the section at the top of the page to filter for specific Employee, Payment Source, Client and/or Task status by selecting one or multiple drop-down menus. Then select **Generate**.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



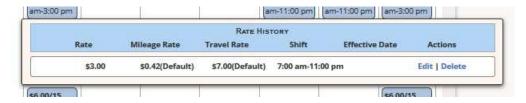
The main stage of the tab displays how a task is paid per day





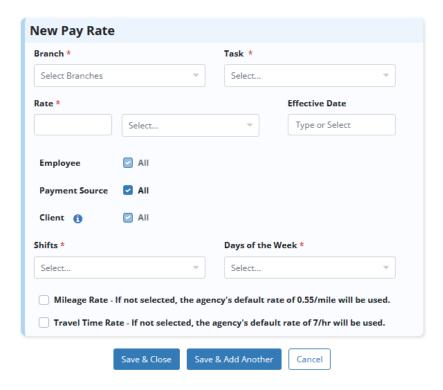


Hovering over a rate will give you more specifics about the rate and select the **Edit** or **Delete** hyperlinks to make updates.



Select the **New** button in the top right to add a rate. Choose the branch (if more than one) and task from the drop-down, enter the dollar amount, choose the time type, and enter the effective date or select the calendar icon. Then select the box to determine which employee, payment source and/or client for which the rate is applicable. To search for a specific employee, payment source and/or client, enter keywords for search. Select the All checkbox(es) if the rate applies to all employees, payment sources and/or clients. Then decide if the rate applies to a specific shift or days of the week. Select the green check mark icon if the rate applies to all shifts and/or days. Select the red X icon to uncheck all boxes. Determine if the pay rate should include mileage and/or travel time. If either box is selected, enter the rate. If they are not checked, the default payroll policy rate will be applied for mileage and travel time. Select **Save & Close** to complete. Select **Save & Add Another** to enter additional rates.





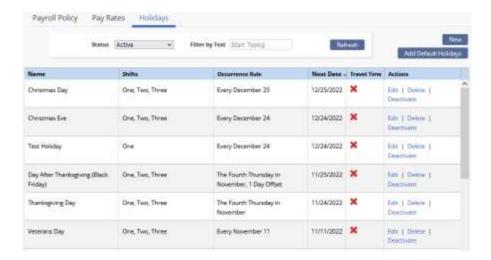
Holidays – Users can enter default holidays or create their own organizationspecific holidays. Holidays can be edited, deleted and/or deactivated by selecting any of the hyperlinks. Select **Add Default Holidays** to choose from the following list:

- Inauguration Day
- Washington's Birthday
- Easter Sunday
- Independence Day
- Labor Day
- Columbus Day
- Veterans Day
- Thanksgiving Day
- Christmas Eve

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

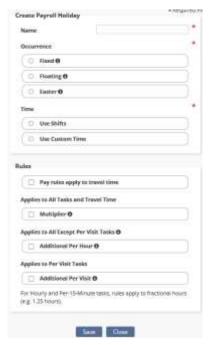






Enter the payroll holiday name, then decide how often the holiday will occur and the time. Then determine whether the holiday follows specific rules. Select Save

once completed.



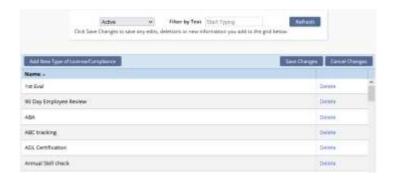
NOTE: The License, Scheduling, Document Management, Custom Care Documentation and Custom Service Documentation tabs have search functionality at the top of the screen to narrow down results. There are also options in some tabs to filter between active or inactive entries.



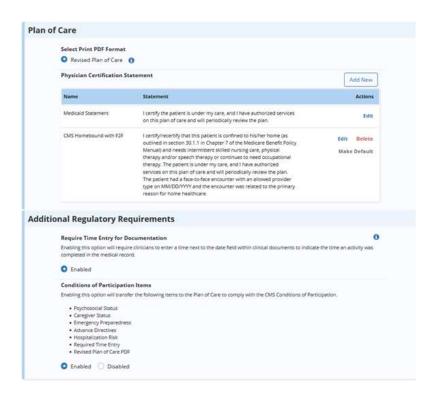




License & Compliance - Enables organizations to manage licenses or compliance items that must be completed/updated. Select **Add New Type of License/Compliance** and a free text space will open below. Enter the name, then select **Save Changes**. If any licenses were added in error, select **Delete**.

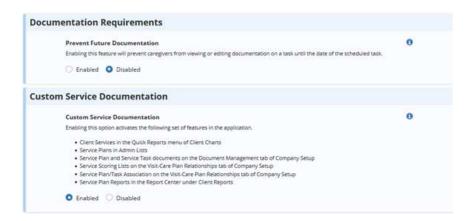


Clinical - Determine the print PDF format for the Plan of Care. There are options to Add New, Edit, Make Default or Delete the Physician Certification Statements. Enable or disable requiring clinicians to enter a time next to the date within clinical documents to indicate the time an activity was completed.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

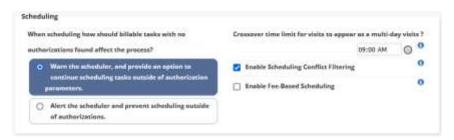




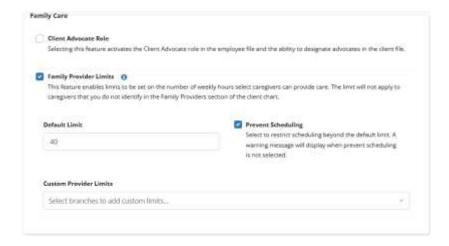




Scheduling - Organizations must determine if they will allow users to schedule billable tasks without an authorization and what the crossover time limit will be. Then decide to enable scheduling conflict filtering and/or fee-based scheduling.



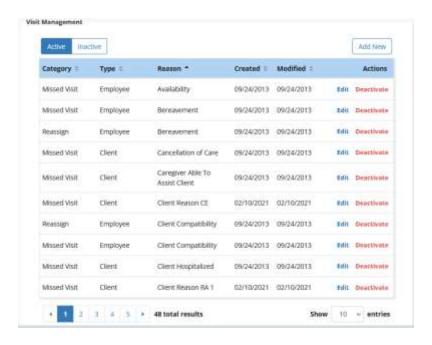
The family care settings must be selected. Choose whether to turn on the Client Advocate Role, Family Provider Limits and Prevent Scheduling features. Specific branches can also be added to have custom limits.



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







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



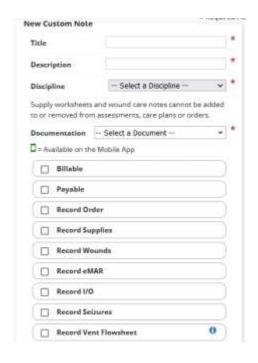
Document Management - The organization can create custom notes. Select **New** in the top right to add a custom note. Notes created here will appear in the Schedule Center, allowing staff to schedule visits.







Give the note a title, description and then choose the discipline and what type of assessment will be in the note. Any documentation choice with an cicon is available on the mobile app. Then indicate whether the note will be billable or payable, whether users can record an order, supplies used, wounds, eMAR, I/O, Seizure Record, Vent Flow Sheet, a narrative, Oxygen Risk Assessment, Adult Fall Risk Assessment and/or Pediatric Fall Risk Assessment. Select **Save** when completed. If custom notes need to be edited or no longer apply, select the **Edit** and **Deactivate** hyperlinks to make updates.







Custom Care Documentation

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



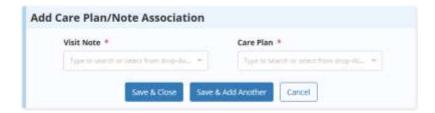
Care Plan/Note Associations - Organizations can add relationships between custom visit notes and custom care plans. The Care Plan/Note Associations tab is automatically filtered to show active associations. Search by name in the search bar. Select Add New to add and link one of the combinations.



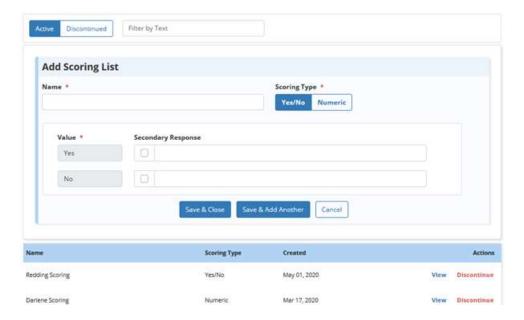
Choose from the drop-down menu for Visit Note and Care Plan, then select **Save & Close** or select **Save & Add Another** for additional associations. Select the **Discontinue** hyperlink if the relationship needs to be removed.







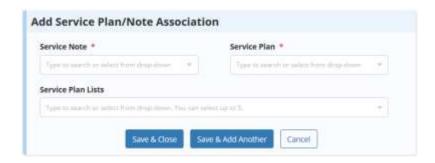
Custom Service Documentation – Select the Scoring List tab to enforce score entry when a caregiver indicates the completion of a client's goal. Select Add New to set up a scoring list. On the Add Scoring List window, name the list and select a scoring type. The scoring type defaults to Yes/No. Select Numeric to create a numbered scoring list. For each value, choose whether to require secondary responses. Check the box next to Secondary Response to require additional information from a caregiver when the respective response is selected.



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







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

Client Chart Information

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

Priority 1 - Life threatening (or potential)

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

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

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

Priority 5 - Not Serious

Select New to add an organization specific level.







The priority level will default to the next number and cannot be edited. Enter a title, descriptions and select **Save**.



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



Enter the name, choose the client type from the drop-down menu and enter a description. Select **Save** when complete.







Durable Medical Equipment - Organizations can add default Durable Medical Equipment (DME) and/or create new DME. Select the **Edit** or **Delete** hyperlinks to make updates to the DME list. Select **Add Default DMEs** to fill the table with typical default equipment found in home care. Select **New** to add an organization specific DME.



Enter the name and description, then select **Save**.







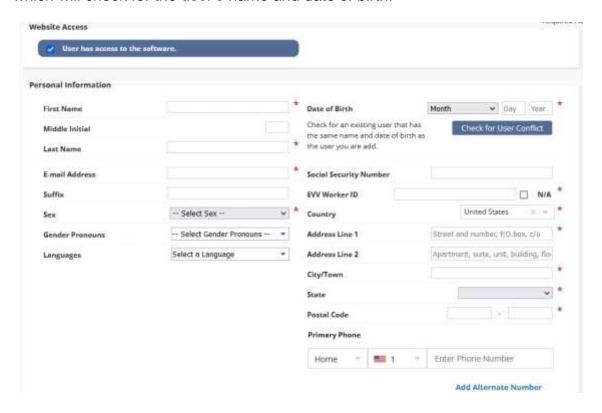
ADDING A NEW USER

Employees/New User

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

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

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

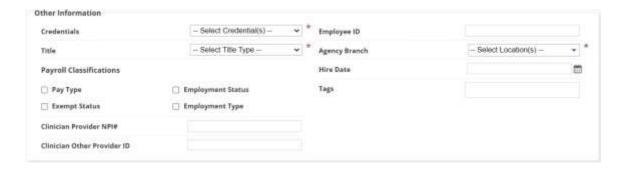


Choose credentials and title. Select additional boxes by selecting the Agency Branch drop-down menu if the user works at more than one branch. Enter the hire date and any tags associated with the user.

NOTE: The tagging feature may be used in: Messaging, Employee Center and Schedule Center. Several Reports also allow for filtering and/or displaying associated tags. Tag examples include teams or location.



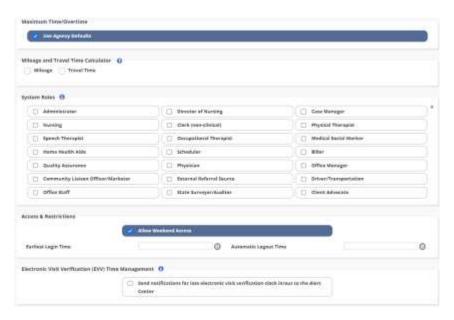




There are four different payroll classifications that may be chosen by check box. Enter the ID if the user being entered is a provider. Check the box for agency defaults for maximum time/overtime, which was created in the previous section of the manual. Indicate if the mileage and/or travel time calculator should be used for the user by checking the corresponding boxes. Roles are important in the software because they determine what a user can or cannot see, select, delete or undo.

There is also a restriction function that will allow organizations to limit the times that users can use the software. For example, if the "Allow Weekend Access" box is not checked and a user attempt to log in on a Saturday, the system will not allow entry. Times can also be adjusted for the earliest time a user can log in and/or when they are automatically logged out of the Home Care application.

Select the checkbox if the user should be notified for late EVV clock in/out to the Alert Center. Enter optional comments with a 500-character limit. Select **Create & Next** to save progress and go to the next tab.







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

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



At the bottom of the window are five buttons that can navigate through the new user window.



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

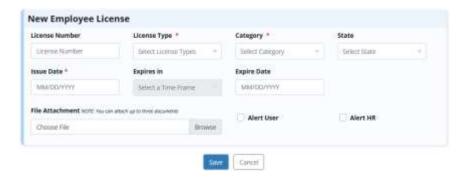
License & Compliance - Organizations can keep track of a user's licenses and compliance in this section. Select the edit or delete icons to make updates. Select the paperclip icon to view attachments. Select **New License/Compliance** to add licenses.



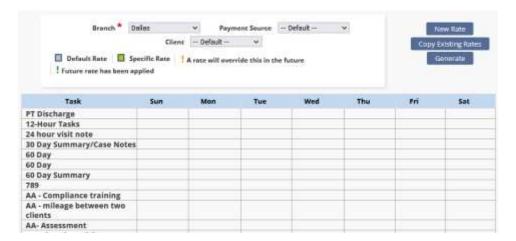




Enter the license number, choose the type, category and state from the corresponding drop-down menus. Choose or enter the issue date. Then choose the timeframe of when the expire date occurs in the drop-down menu. Enter the expire date and add any scanned documents by selecting the **Browse** button and finding the file on the computer. Select Alert User or Alert HR to set a reminder in the system to follow up on the user's license or compliance. Select **Save** when complete.



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



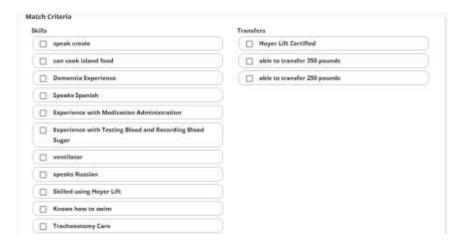




Choose an employee from the copy pay rates from the drop-down menu. Check the box to load employee (default) rates or select the bullets to load specific rates and/or load rates about specific payment sources or clients. Select **Apply** when complete.



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



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







Immunization - User immunizations are tracked in this section. Immunization lists can be exported to an Excel spreadsheet by selecting the **Export to Excel** button in the top right. To add an immunization, select the **Add Immunization** button in the top left.



A new window will open in which organizations must choose the type of immunization and who it was administered by from their corresponding dropdown menus. Then select the administration date by writing or selecting the date in the calendar. Users can select **Save & Close**, or if there is more than one immunization to add, select **Save & Add Another** to continue with another blank "Immunization Log Information" window.







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



There is also an option to **Delete** or **Inactivate** an immunization by selecting the hyperlinks in the far right under Action. Once an immunization is not active, it falls under the Inactive Immunizations section, where it then can also be Deleted or Reactivated.

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

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





EDITING A USER

Admin/Lists/Users

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

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

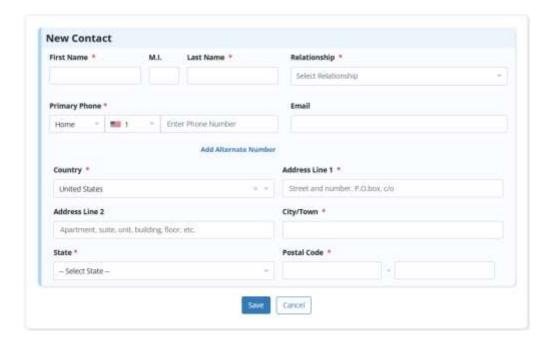


A user's window is split into eight tabs. The only tab that was not previously shown in the new user steps (above) is the **Emergency Contacts** tab.

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







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



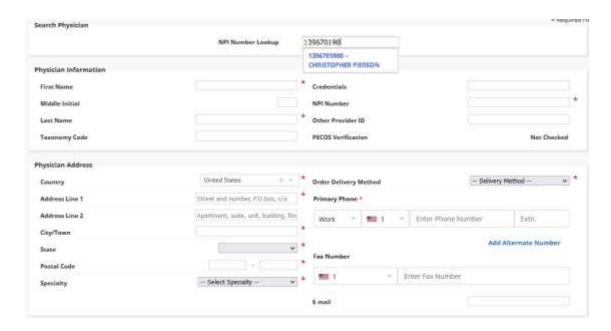
ADDING A PHYSICIAN

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

A new window will open. The quickest way to enter a physician is to begin entering their NPI number. As the number is typed, physicians and their corresponding NPI numbers will appear below for selection. After selecting the physician and selecting the tab key, the Physician Information and Address will auto-fill based on the information that is in the NPI registry. This can still be edited. Everything with a red asterisk is required.



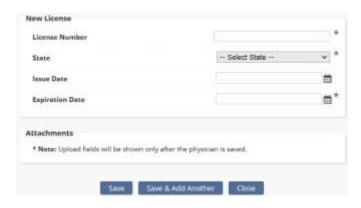




NOTE: If the NPI number is unknown, use the following website: NPPES NPI Registry (hhs.gov)

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

Select the **Add License** button to add any licenses tied to the physician. Enter the license number, choose the state, enter the issue and expiration date with the option to add attachments (only after a physician is saved). Select **Save** once complete.



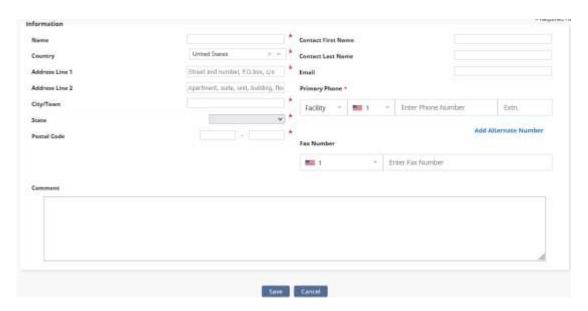




ADDING A NEW FACILITY

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

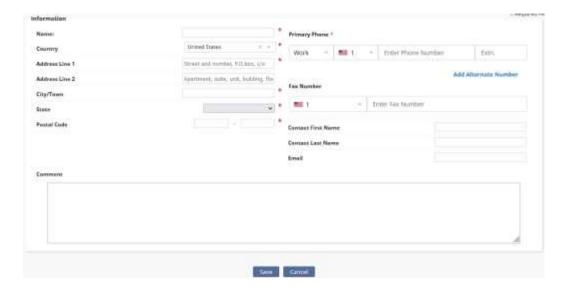
A new window will open. Enter the name, address and primary phone. When finished, select the **Save** button at the bottom.



ADDING A NEW PHARMACY

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

A new window will open. Enter the name, address and primary phone. When finished, select the **Save** button at the bottom.







OASIS TRANSMISSION

View/OASIS Management/OASIS Ready for Export

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



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

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

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



Similarly, if an OASIS needs to be marked as completed, but was not exported, check the box next to the client's name and select the **Mark Selected as**

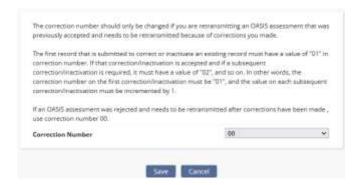




Completed (Not Exported) button at the bottom of the page. A confirmation window will open, select the **Yes** button.



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



ORDERS MANAGEMENT

View/Orders Management

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

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

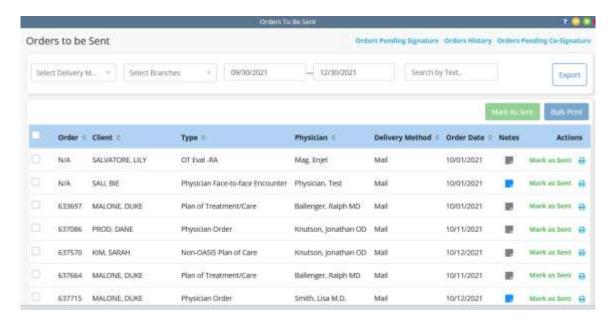
To enter a new note, select **Add Note**. To update a note, click on the edit icon. To remove a note, select the **Resolve** hyperlink.

Orders To Be Sent - This window houses orders that are ready to be sent to the physician for signature. Filtering for orders begins with the delivery method and the branch (if more than one) from the drop-down menu. Choose the date





range of the orders planning to be sent. Start typing any order (number), client, type or physician name in the free text space.



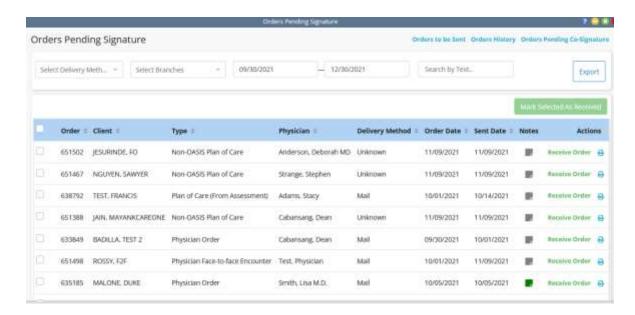
To print an order, select the printer icon on the far right of the order. Once printed, check the boxes to the left of the order and select the green **Mark As Sent** button for multiple orders. Select the green **Mark as Sent** hyperlink for individual orders. They will then be marked as sent to the physician, and a green disappearing notification will confirm.

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

Orders Pending Signature - This window houses orders that need to be marked as signed by the physician. Filtering for orders begins with the delivery method and the branch (if more than one) from the drop-down menu. Choose the date range of the orders planning to be signed. Start typing any order (number), client, type or physician name in the free text space.







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



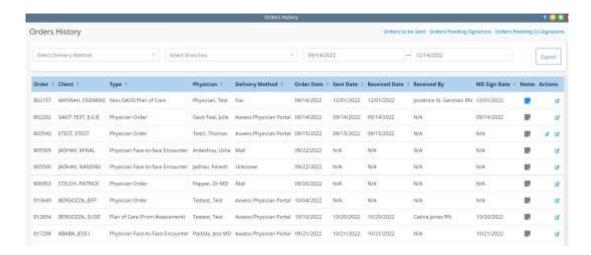
A new window will open to confirm or enter the received and physician signature date, then select the **Mark** button. The date auto-populates with today's date. Once marked as signed, they will disappear from the Orders Pending Signature window and be in the Orders History section.







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



Select the edit icon to make updates. The line will expand, type in the date or select the calendar icon to adjust the order's sent, received and/or physician signature date. Select **Update** to save.



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

Orders Pending Co-Signature - This is where orders are housed that need a co-signature because the user who signed the order requires a co-signature (per their permissions). To find a specific order, choose the branch (if more than one) from the drop-down menu, then select a date range. Start typing an order, date, client, MRN, type, physician, clinician and/or sign date in the free text space to narrow down the order list even further.





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



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



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







ADDING A PAYMENT SOURCE

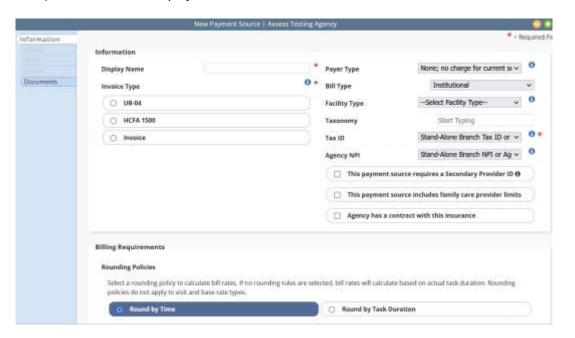
Admin/New/Payment Source

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

Information - Enter the display name and select the invoice type. Whichever type is chosen will dictate which tabs will be available on the left.

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

Decide on billing requirements including rounding policies and roll-up services. If UB-04 or HCFA 1500 were chosen, a clearinghouse will have to be chosen. Indicate if the payer will split overnight shifts into two billing lines. Then the organization must decide who is doing the billing (organization, Axxess or vendor). Then enter the payer information.

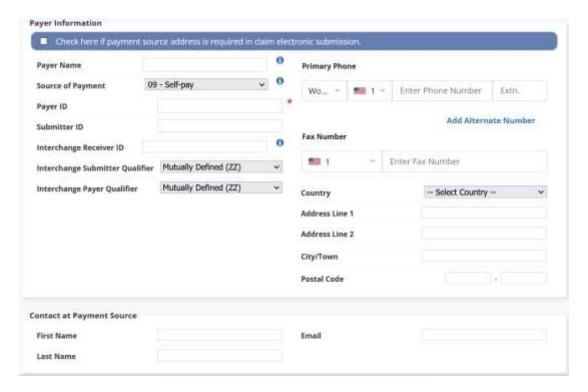




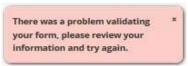


NOTE: The information 1 icon is a reference. Hover over the icon for more insight about that question or section.

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



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



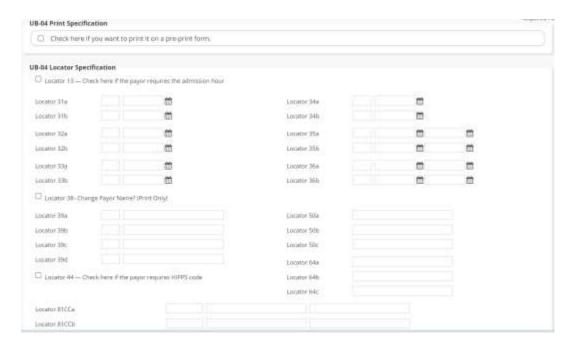
The required sections that are missing information will be highlighted in red:



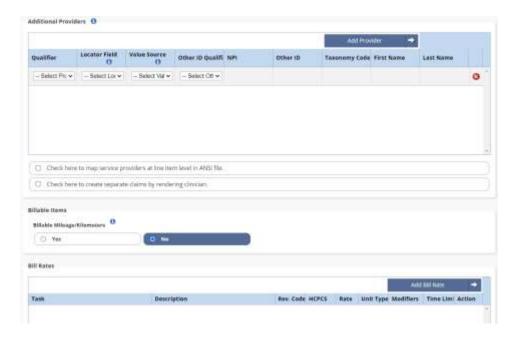
UB-04 - Depending on how the insurance pays out, whether episodic or per visit, will determine if this tab is active. The payer being added in the screenshot below is for the UB-04. Fill out the locator sections 31a through 81CCd on the form and their corresponding dates.







Below are the Additional Providers and Bill Rates sections. Select the **Add Provider** button to enter an additional provider. A line will appear in the Provider section, choose the qualifier, locator field and value source drop-down menus. If providers need to be removed, select the red icon. Decide if mileage is billable. Then select the **Add Bill Rate** button.





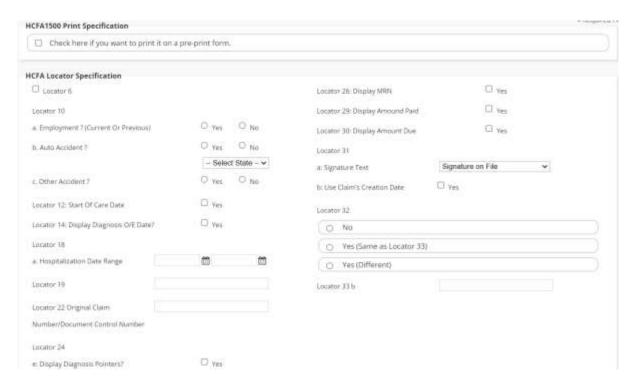


A new window will open. Fill out the Add Visit Information form and select **Save & Exit** or select **Save & Add Another** for additional entries.



Select the **Previous** button to get back to the **Information** tab or select the **Save** & **Close** button at the bottom to complete the payment source.

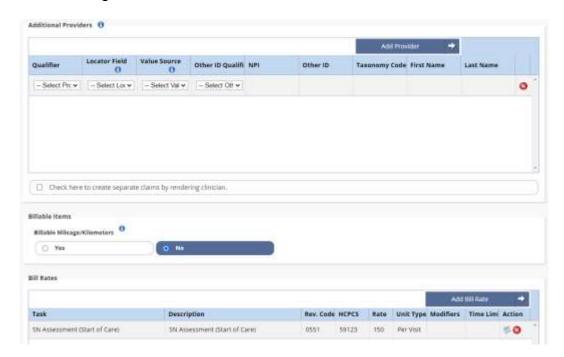
HCFA - In this step, the organization will need to decide if they want HCFA 1500 printed on a pre-print form. After that, the HCFA Locators must be entered and chosen.







Below the locators are the additional providers and bill rates. Selecting the **Add Provider** button to enter an additional provider. A line will appear in the Additional Providers section, choose the qualifier, locator field and value source drop-down menus. If providers need to be removed, select the red icon. Decide if mileage is billable. Then select the **Add Bill Rate** button.



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

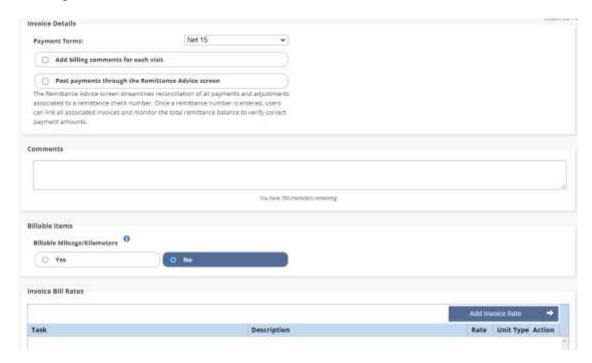






Select the **Previous** button to get back to the **Information** tab or tap on the **Save** & **Close** button at the bottom to complete the payment source.

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



Choose the task and service unit type then enter the preferred description, rate, service units per visit and if mileage applies to the task. Select **Save & Exit** to finish or select **Save & Add Another** for additional entries. To edit previously entered invoice rates, select the edit icon or if they need to be removed, select the red icon.







EDITING AN EXISTING PAYMENT SOURCE

Admin/Lists/Payment Sources

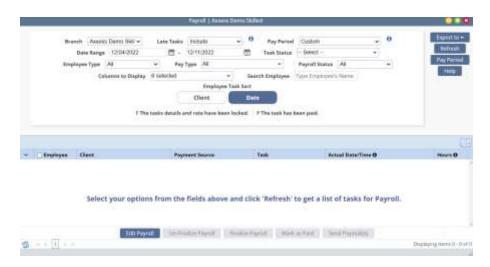
Select the **Edit** hyperlink to the far right of the screen under the Action column. To search for a payment source, start typing any part of the name, payer type, payer category, payer ID, invoice type, phone or contact person in the white free text space at the very top of the page.



PAYROLL

Employees/Payroll

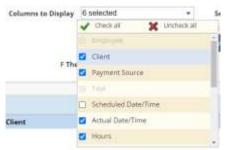
The following window will open with only search criteria at the top. Select the branch from the drop-down menu (if there is more than one). Select the Late Tasks, Pay Period, Task Status, Employee Type, Pay Type and Payroll Status.







Select which columns to display by checking the corresponding boxes. Selecting the green check mark will select all statuses and selecting the red X will uncheck all choices. Search for employees by name and then decide whether to sort employee tasks by client or date. Then select the **Refresh** button to see the results.



To minimize the search window to see more employees, select the collapse icon Employees will be grouped by their name with a check box next to them. Selecting the > icon to the left of their name will expand their list of payable items. They are organized in the following columns: Client, payment source, task, actual date/time and hours. For the top-right menu items, export the payroll list by selecting the **Export to** button and select Excel. Select the **Pay Period** button to create a new pay period.



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



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







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



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







The actual date/time becomes editable. Enter to select different days and times for tasks. When done editing, select the **Save** button.



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



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

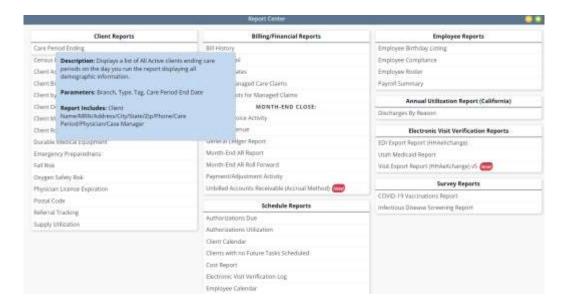
REPORT CENTER

Reports/Report Center

This is where all Home Care reports are found. They are split up into seven categories. The categories are Client, Billing/Financial, Employee, Annual Utilization Report, Electronic Visit Verification Reports, Survey Reports and Schedule Reports. Hovering over the report will show what the report entails, its description, parameters and what the report Includes.

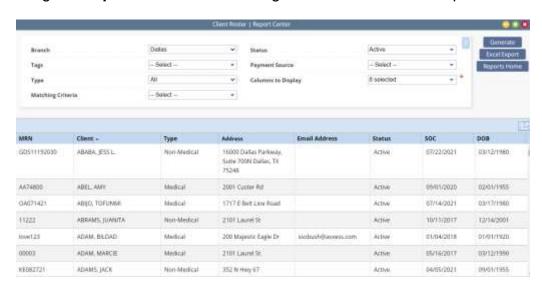






Most of the reports function the same way. In the example report below, Client Roster, parameters must be chosen, then select the **Generate** button to the right to display the results below.

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



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





Here, users can retrieve a copy of the finished report and see who ran the report and when. Search through the completed reports by typing the name, format, status, requested by, started and completed date in the free text space at the top of the screen.

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



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

ADDING TEMPLATES

Admin/New/Template

The window below will appear. Create a name for the template. Then write the template inside the white free text section. The section is limited to 10,000 characters. Once completed, select the **Save** button.



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

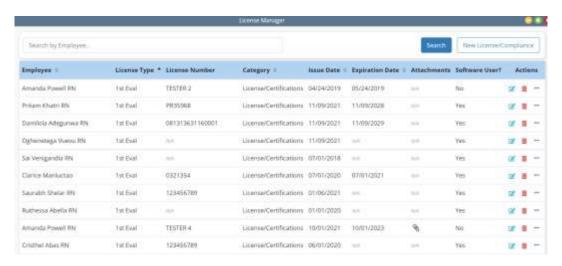




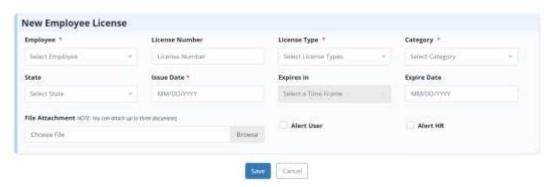
LICENSE MANAGER

Employees/License Manager

A window will open that will show all current user licenses. Start typing an employee, license type, number, category, issue date, expire and/or software user to narrow down the list. Results are shown over multiple pages and the number shown can be adjusted at the bottom of the page. Select the **New License/Compliance** button in the top right.



A New Employee License line expands. Choose the employee, license type, category and state from the drop-down menu. Enter the license number, issue and expire date. Add a file attachment by selecting the **Browse** button. If the organization would like the system to remind the user or HR about the expiring license, check the alert user and/or alert HR boxes and designate an alert date. Select the **Save** button when complete.



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





ADDING SUPPLIES

Admin/New/Supply

The New Supply window opens. Enter the description, HCPCS, revenue code and the unit cost. Then select the **Save** button.



ADDING ADJUSTMENT CODES

Admin/New/Adjustment Code

The New Adjustment Code window opens. Enter the code, description and choose from a negative or positive type. Then select the **Save** button.



ADDING DOCUMENT TYPES

Admin/New/Document Type

The New Document Type window opens. Enter the document name and choose from a client, employee, client and employee or payer category. Then select the **Save** button.



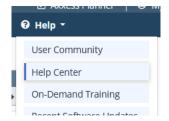




HELP CENTER

Help/Help Center

A great resource that is available 24/7 is our Help Center. It is a place to get answers to frequently asked questions or watch videos of all of Axxess' products. It can be accessed by going to:



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

