TRAINING GUIDE

CareBridge Payer Portal
Electronic Visit Verification (EVV)

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INTRODUCTION

This Training Guide is intended to help Wyoming Department of Health (WDH) employees understand how to best utilize the CareBridge EVV Solution Payer Portal to manage provider organizations and the waiver participants they serve on a day-to-day basis. If at any point you have questions, please reach out to our CareBridge Technical Support Center at wyevv@carebridgehealth.com.

WHAT IS ELECTRONIC VISIT VERIFICATION (EVV)?

EVV uses technology to record the times and locations that Caregivers who provide personal care services, Check-In and Check-Out of a service visit. EVV has proven to accurately log Caregiver's times and minimize or eliminate inappropriate claims.

Under the Federal *21st Century Cures Act*, EVV is required to be used by providers and caregivers that deliver personal care (in 15-minute increments or 24-hour periods) to Medicaid beneficiaries (participants). The *21st Century Cures Act* requires that EVV systems collect and verify the following:

1. Type of service performed
2. Participant receiving the service
3. Caregiver providing the service
4. Date of the service
5. Location at the start and end of the service
6. Time the service begins
7. Time the service ends

WHAT IS CAREBRIDGE?

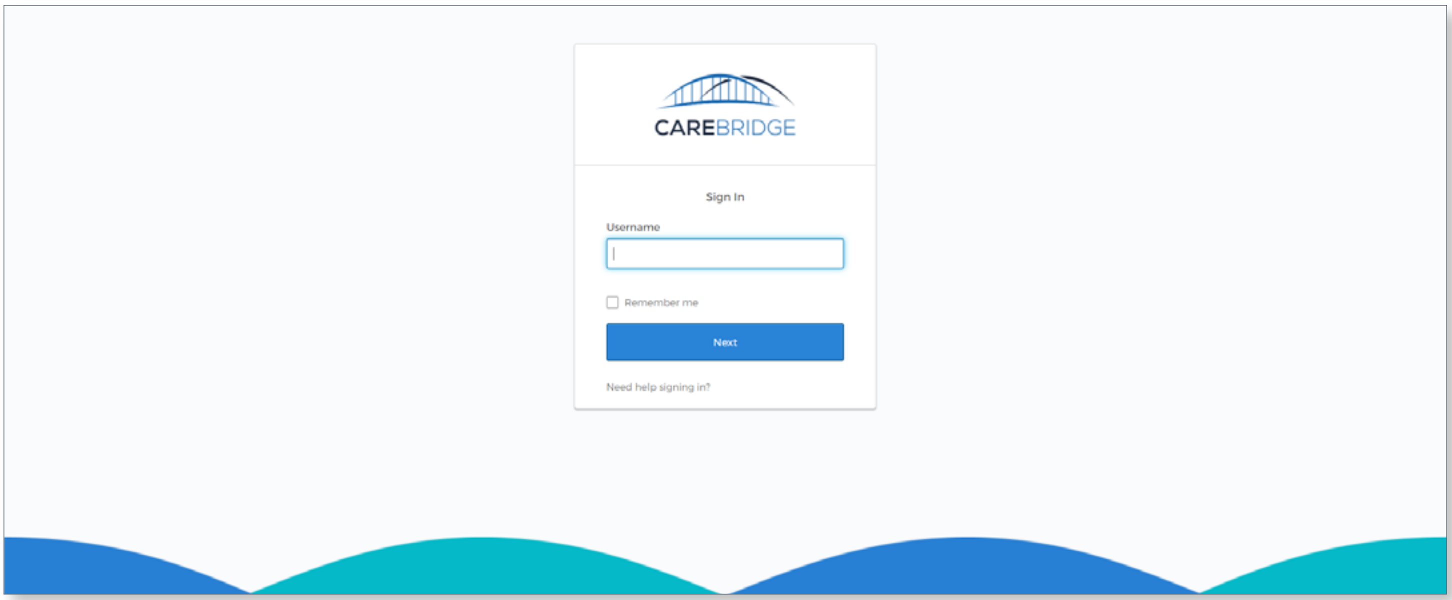
CareBridge is an Electronic Visit Verification (EVV) and EVV aggregation company formed to improve the processes that enable caring for people who receive Long-Term Services and Supports (LTSS). We offer LTSS solutions, including an EVV Solution that can be utilized via a mobile phone, tablet with GPS, Interactive Voice Response (IVR), and web-based portal to record the delivery of service and facilitate day-to-day management of participants' appointments and providers' claims.

CareBridge also supports a wide array of EVV aggregation solutions, allowing provider organizations to continue using their current 3rd-party EVV provider while still fulfilling the requirement to send data back to WHS.

SOLUTION OVERVIEW AND SETUP

OVERVIEW

The CareBridge Payer Portal is a conduit between WDH, provider organizations, and their caregivers. In an intuitive and user-friendly solution, it brings together all the relevant information for participants, prior authorizations for services, providers, visits, and claims to effectively manage information and ensure participants receive the highest quality of care. The following sections will provide an overview of the basic features and functions of the CareBridge Payer Portal.

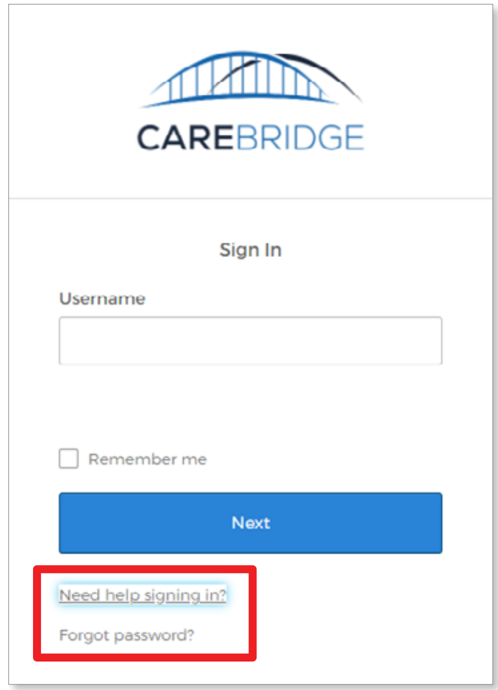


SETUP

SIGNING IN

1. Your first administrative (Admin) user profile will be created by CareBridge. The first Admin will use the person's email address to create their username and create temporary passwords for any additional user. The first Admin will then communicate login information to each of those additional users. The Admin can create both additional Admin users as well as Employee users. Admin users have full access to the Payer Portal. Employee users are not able to create other users, update employee information, or disable another employee role. Employee users are also not able to access the Settings page.
2. The additional users will then navigate to https://wyevv.carebridgehealth.com.
3. They can use the **Sign In** screen to create a new password and access the Payer Portal. (Password requirements are listed on the password screen.)
    a. Users will enter their username and click **Next**
    b. Then enter their temporary password and click **LOGIN**
    c. Next, they will create a new and unique password
    d. After creating a unique password, their account will be active

Users must reset their password after 60 days.

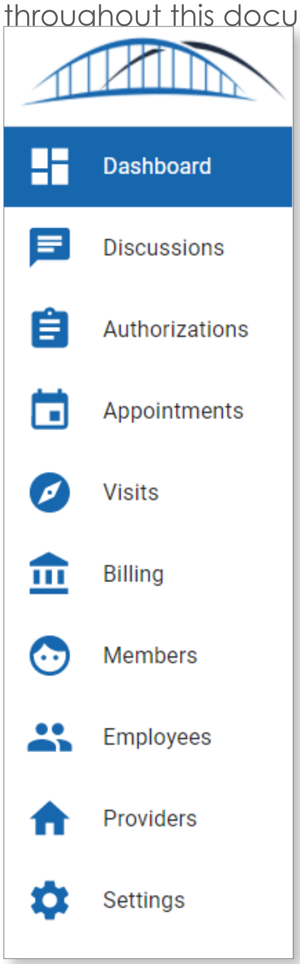


RESETTING YOUR PASSWORD

If a user needs to reset their password, they can navigate to the login page. Immediately below the large blue **LOGIN** button, the user can click the **Need help signing in?** button, then click **Forgot password?** They will need to enter their username or email address, then click the **Reset via Email** button, and the user will receive an email with instructions to finish resetting their password.

NAVIGATION

The CareBridge Payer Portal is organized into 10 main pages located on the left navigation pane. The seven primary EVV pages display data in a table format with the **PERSONAL FILTER** as the default sub tab seen first. The **PERSONAL FILTER** is an unfiltered view of the page's entire data table. Most pages have additional sub tabs that are pre-filtered lists to help the user quickly view important subsets of each page's table. The pages will be discussed in more detail throughout this document.



Dashboard: Allows employees to view key metrics and graphs in clear visualizations to support operational efficiency.

Discussions: Enables communication both internally within WDH and externally with provider organizations and caregivers.

Authorizations: Displays the details and critical information for all prior authorizations, including status and scheduled utilization percentage.

Appointments: Displays upcoming scheduled appointments and allows employees to view early, late, and missed appointments.

Visits: Shows completed visits and important details such as whether it was early, late, or missed; flags indicating problems, and if the visit is EVV compliant.

Billing: Displays all visits that have been exported for claims by providers and the claims' billing statuses.

Members: Displays participants' critical information.

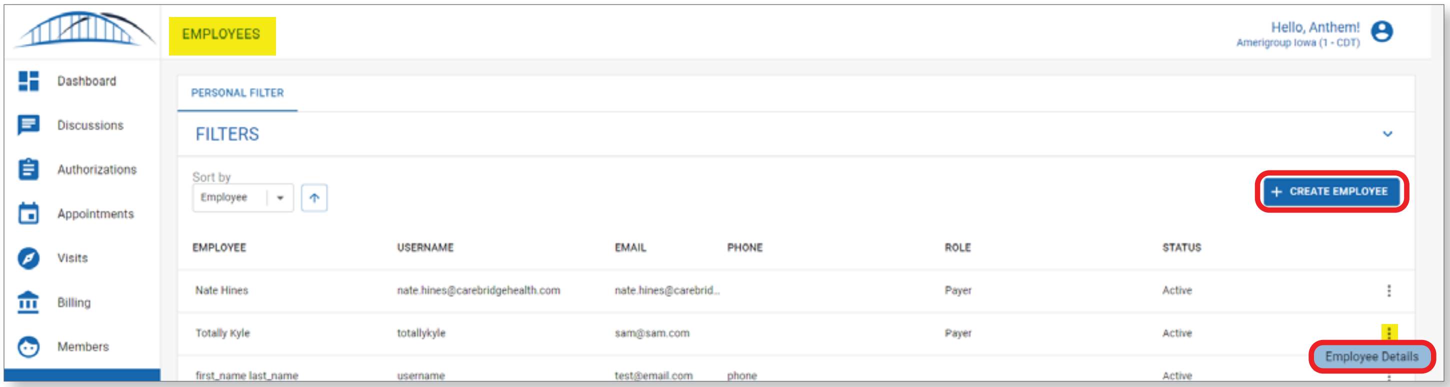
Employees: Lists WDH employees and allows creation and management of employee profiles.

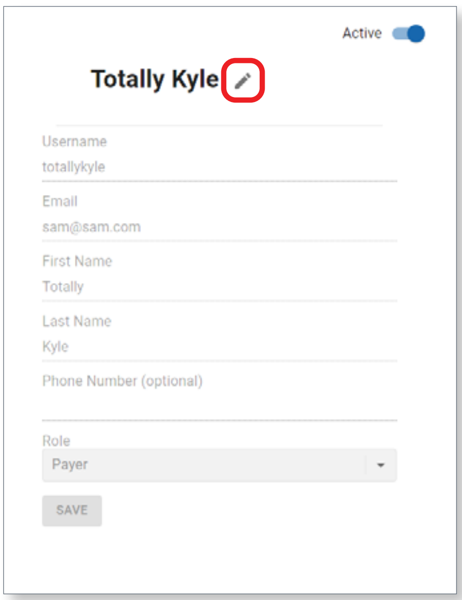
Providers: Lists all providers' relevant information.

Settings: Allows Admin users to 1) Create groups to which providers and participants can be assigned for more efficient business management and 2) View and manage imported prior authorization, member, and provider data files. Cannot be access by Employee users.

EMPLOYEES PAGE

The Employees page provides a table of WDH employees and their profile information. From the Employees page, Admin users can view, modify, and create new employees.





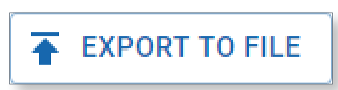
To view or edit details in an employee's profile, the Admin must click the **three dots** on the right end of the row and then select **Employee Details**. To enable editing in the Employee Details page, the Admin can click the **pencil icon** next to the Employee's name. When finished editing, they can click **SAVE**. Employee users cannot access the pencil icon or modify the employee details.

To add an employee to the Agency CareBridge account, the Admin must navigate to the Employees page and click **+ CREATE EMPLOYEE**. The Admin will manually create the employee's profile, including their username and a temporary password, then communicate that username and temporary password to the new employee.

When the new user logs in for the first time, they will be prompted to create a unique password. After that process is complete, their profile will be active.

FILE IMPORT AND EXPORTING REPORTS

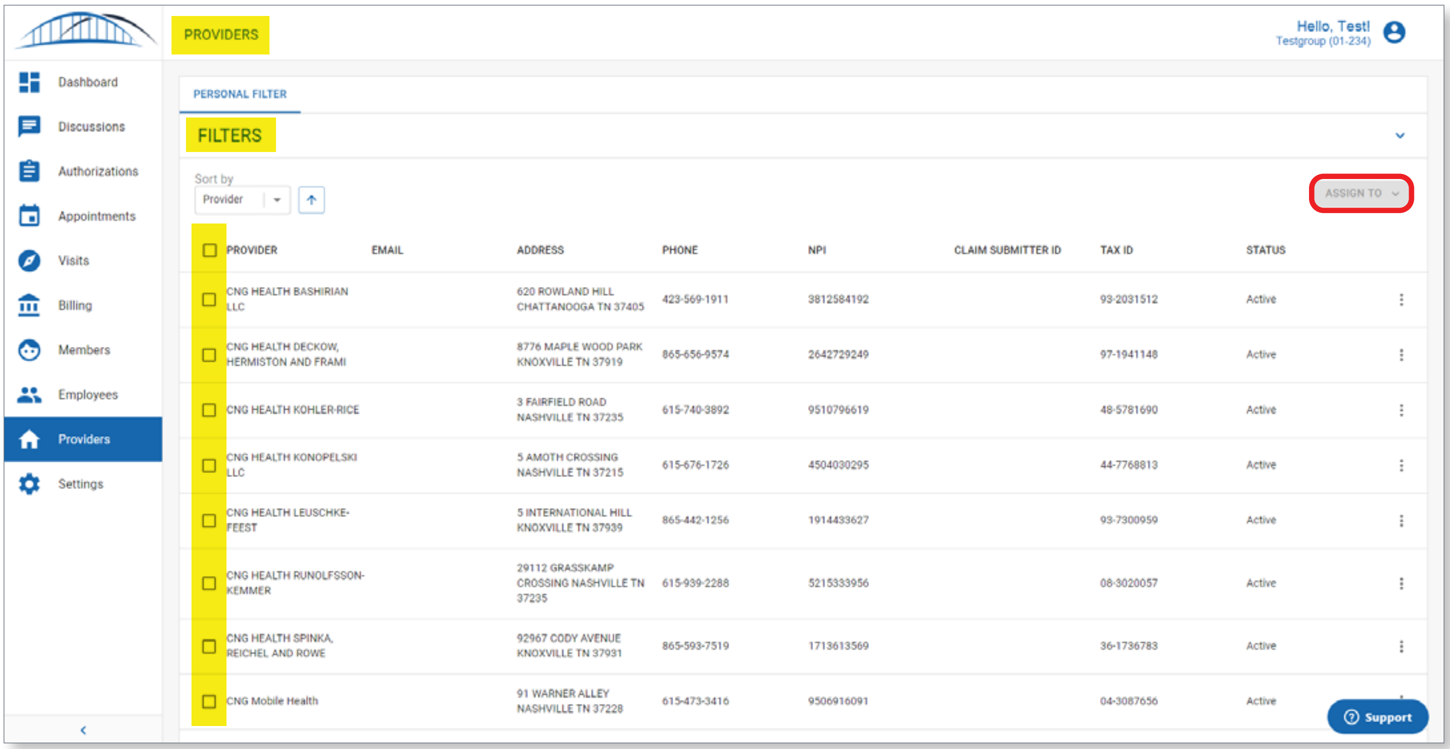
CareBridge receives three (3) files through automatic secure file transfer protocol (SFTP), a Participant file, a Prior Authorization (PA) file, and a Provider file. The files for participants and PAs update daily, and the Provider file updates weekly. Admins can view the import history, including any errors and warnings, in the Payer Portal by navigating to the 'Settings' page and selecting the **IMPORTS** tab. ***Please note the key details:*** Imported date and time, file type, status, number of records, warnings, and errors. To view the individual files and any warnings or errors, users can click the **three dots** on the right end of the table and select **Import Details**.



Agency Users with appropriate role-based rights can also export data tables from the Payer Portal as comma--separated value files. When viewing data in the portal, these users can use **FILTERS** to create the table they need and then click **EXPORT TO FILE** at the bottom left of the page. They will then be prompted to choose the download location on their computer.

PROVIDERS PAGE

The Providers page is unique to the Payer Portal and is a table of all the provider organizations in the Agency's network. Provider files are automatically updated weekly through SFTP from the Agency's provider information. Users can click **FILTERS** to find specific providers or use any combination of variables to create custom lists.

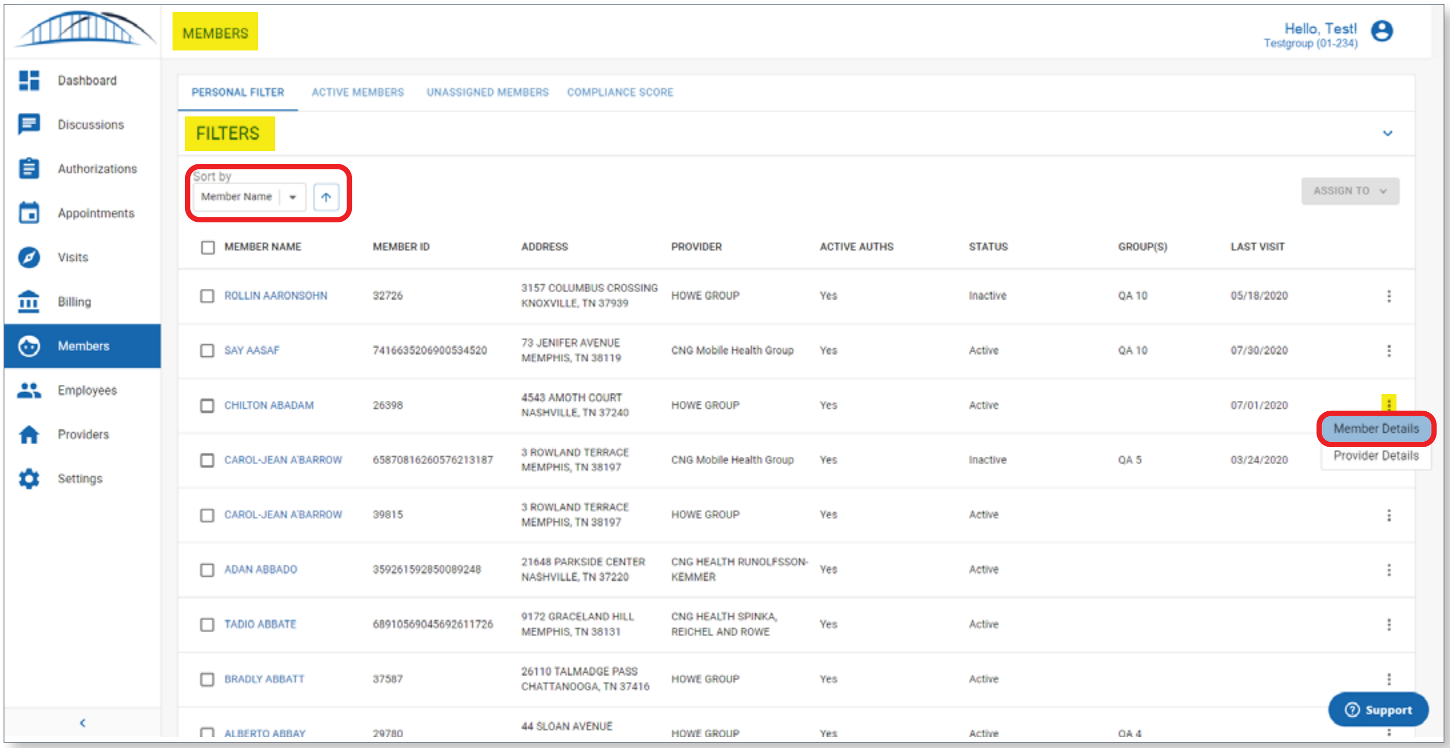


To help manage providers, Agency users can assign them to groups. To assign one or many providers to a group, the user can click the checkbox to the left of their name, click the **ASSIGN TO** button in the top right of the table, then choose the Group to which they should be assigned. Then the user should click **SUBMIT**.

Groups are created in the 'Settings' page and discussed in more detail in that section of this document.

MEMBERS (PARTICIPANTS) PAGE

The Members (Participants) page in the CareBridge Payer Portal allows WDH users to view the information of all members currently in the Portal. The Members page is populated with data from the Participant file, (provided by WDH) and is updated daily through SFTP.



VIEW MEMBERS (PARTICIPANTS)

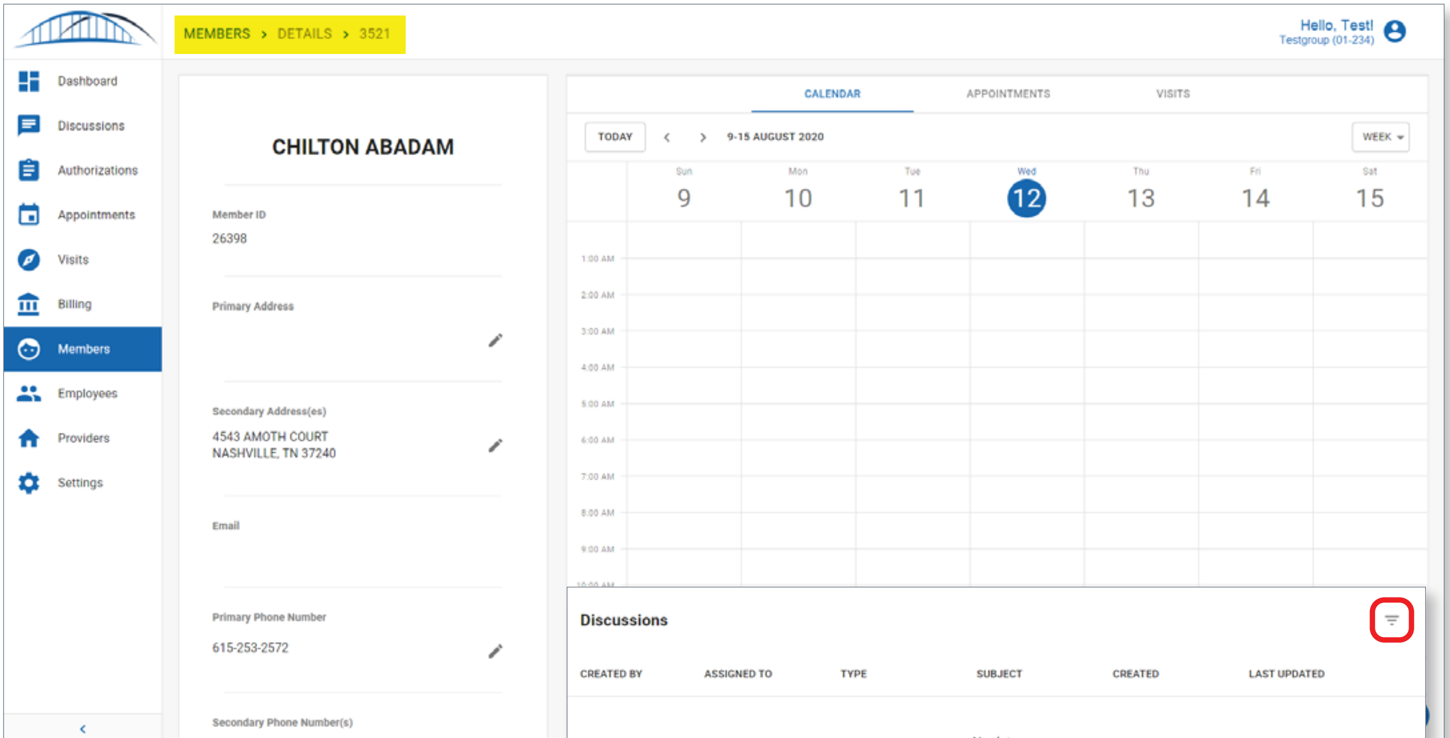
From the Members (Participants) page, users will see a table of all participants who have personal care services included as part of their care plan. The table can be filtered with multiple parameters by clicking **FILTERS** or sorted using the **Sort by** drop-down menu at the top left of the table.

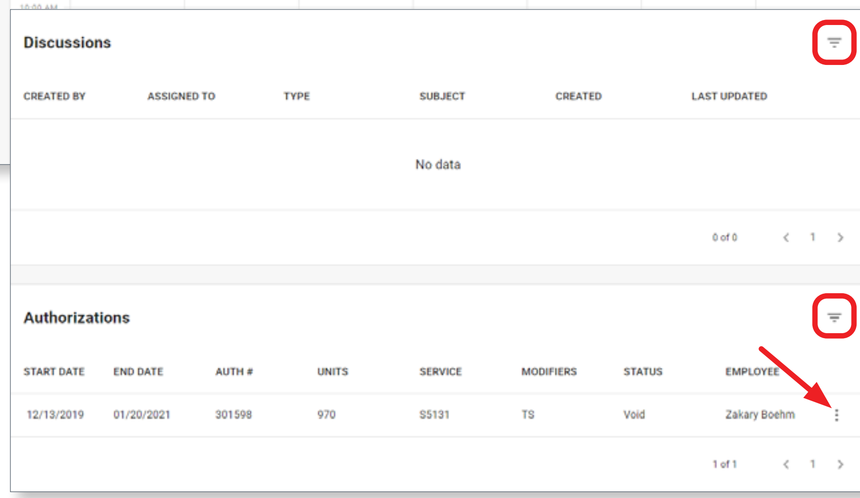
VIEW MEMBER (PARTICIPANT) DETAILS

To view or edit more details about a participant, the user can select the **menu icon (3 dots)** on the right end of the participant's row and then select **Member Details**.

From the Member Details page, the user can view participant demographic info, upcoming

APPOINTMENTS and completed **VISITS** in both a **CALENDAR** and list view. They can also view **Discussions** and **Authorizations** by scrolling down below the calendar.





The lists of Appointments, Visits, Discussions, and Authorizations can be filtered by clicking the upside-down **filter icon** at the top right of each list. The user can navigate to the details of each appointment, visit, discussion, or (prior) authorization by clicking the **menu icon (three dots)** at the right end of the row.

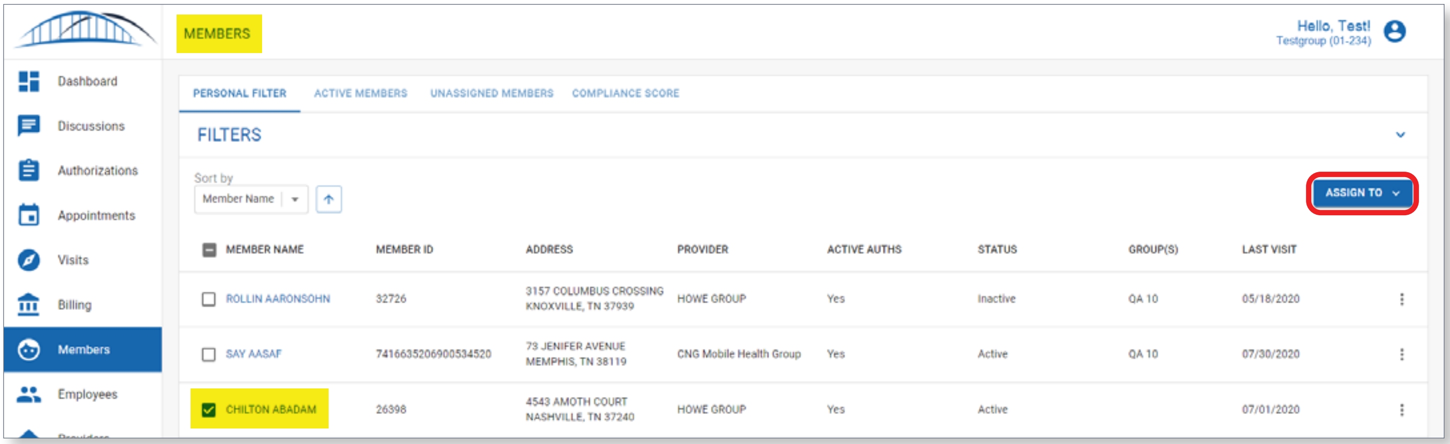
MODIFY MEMBER (PARTICIPANT) DETAILS

The Member Details page is populated with data from the Member (Participant) file (provided by WDH) and updates with the most recent information daily.

Providers have the ability to modify a participant phone number or address within the EVV solution, however, modifications made to participant information within the EVV solution do not translate as permanent changes to information on the WDH participant file. Please continue to follow the current WDH process of updating permanent participant contact information by notifying the assigned case manager.

ASSIGN TO A GROUP

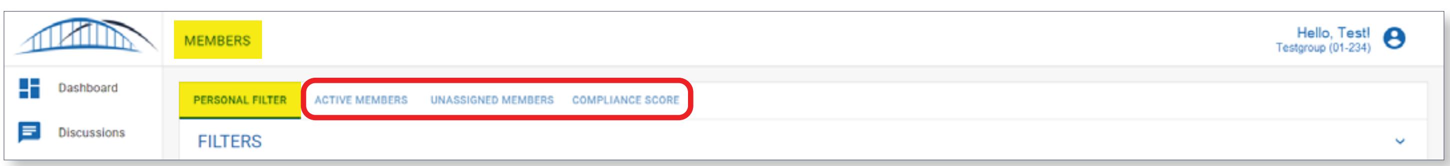
To help manage Participants, users can assign them to groups. Groups are an open-ended tool designed to help you manage participants (and providers). To assign one or many participants to a group, the user can click the **checkbox** to the left of their name, then click the **ASSIGN TO** button at the top right of the table, then choose the **Group** to which they should be assigned. Then the user can click **SUBMIT**.



Groups are created on the Settings page and are discussed in more detail in that section.

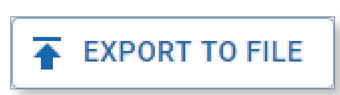
MEMBER (PARTICIPANT) REPORTS

By default, the **PERSONAL FILTER** is selected when navigating to the Members page. The **PERSONAL FILTER** can be used to filter and sort the member (participant) table in a variety of ways to return the subset of members that is most useful to the user. In addition to the **PERSONAL FILTER**, the Members page has three pre-filtered reports to help you quickly navigate to more useful participant data:



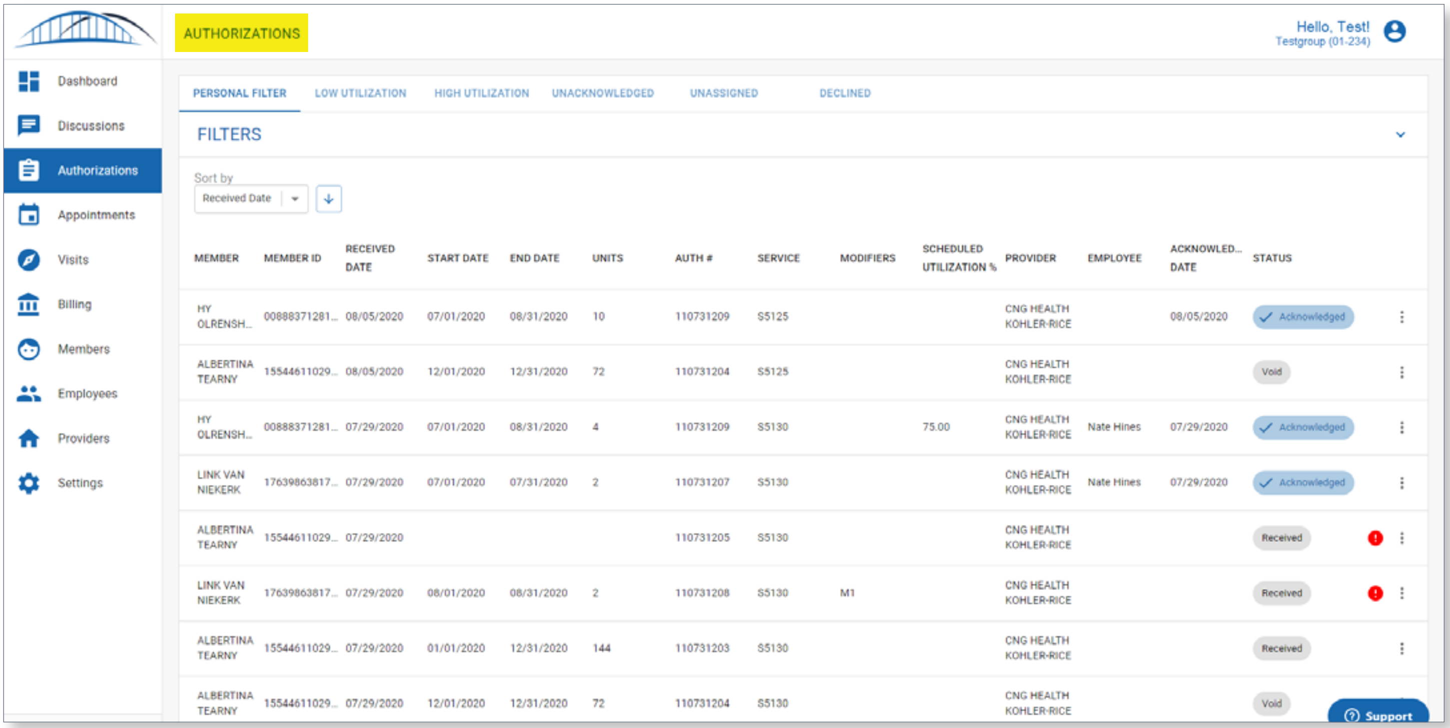
- **ACTIVE MEMBERS** shows all active participants who have personal services listed as part of their care plan.
- **UNASSIGNED MEMBERS** shows all participants who have not been assigned to a Group.
- **COMPLIANCE SCORE** returns a list of all participants sorted by Compliance Score in ascending order. View in descending order by clicking the **arrow button** to the right of the **Sort by** drop down menu. Compliance Score is defined in CareBridge as the percentage of visits that have all the required EVV data collected, are on time (not early, late, or missed), and are not a manual entry.

To export any table from the Members page to a comma separated value file, click **EXPORT TO FILE** in the bottom left of the table and choose where to download the file.



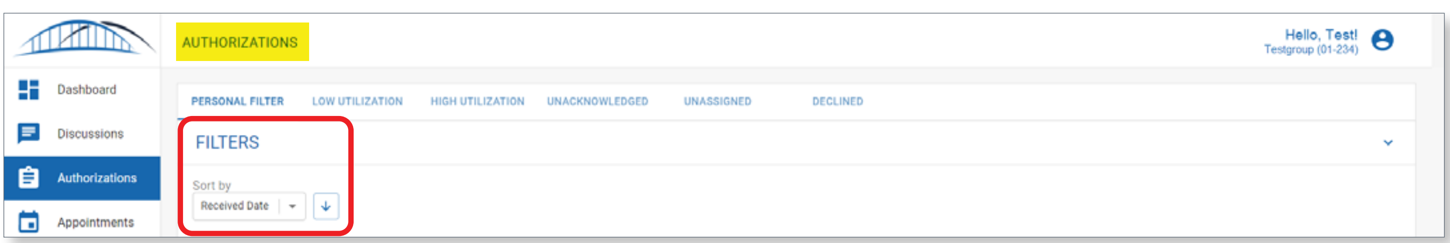
AUTHORIZATIONS PAGE

The Authorizations page contains a table of all active WDH prior authorizations for personal-care providers in the CareBridge Payer Portal. It allows WDH users to view authorization details and monitor Providers' actions on those authorizations. The Authorizations page reflects actions taken by Providers as well as data sent from the WDH in the Prior Authorization (PA) file that automatically updates daily.



VIEW AUTHORIZATIONS

The Authorizations page displays a table of all prior authorizations for personal care services currently found in the Payer Portal and their important details. The table can be filtered or sorted with multiple parameters by the user by clicking **FILTERS** or the **Sort by** drop-down menu at the top left of the table.



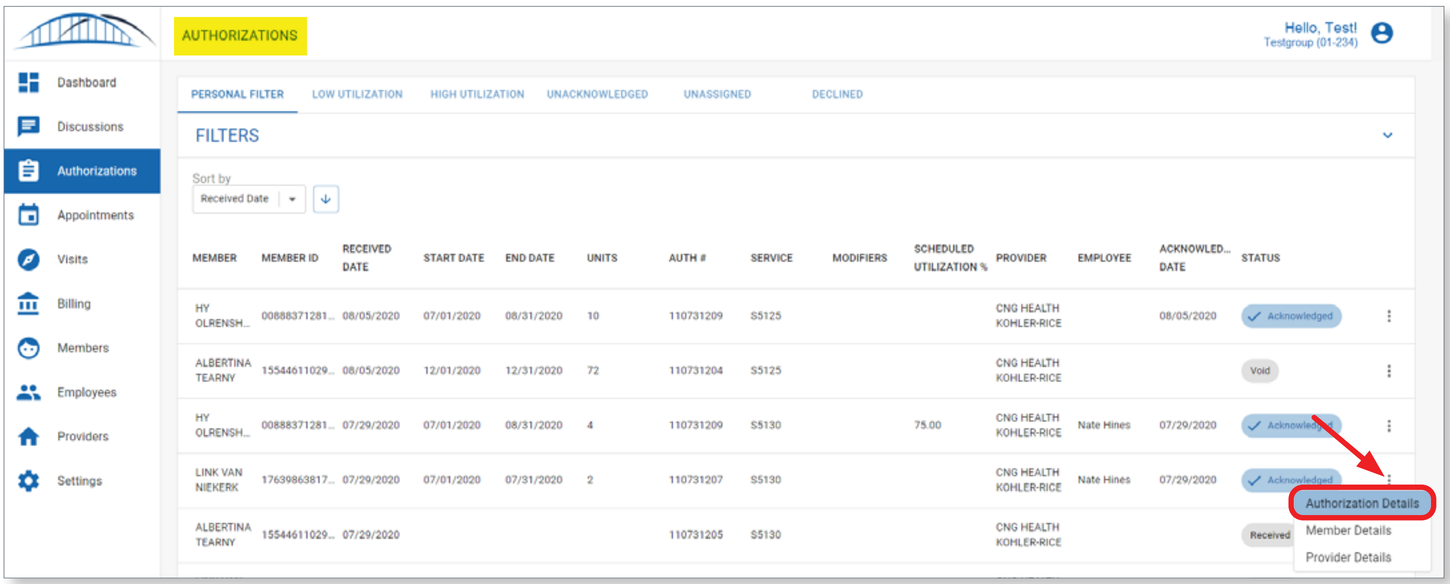
AUTHORIZATION STATUSES

In the CareBridge Payer Portal, PAs have two (2) statuses reflecting the providers' action: **Received** and **Acknowledged**. Providers must respond to every authorization.

- **Received:** A (prior) authorization has the status 'Received' when the WDH has sent the provider a PA in the CareBridge Provider Portal, but the provider has not yet acknowledged it.
- **Acknowledged:** A (prior) authorization has the status 'Acknowledged' only when the provider changes the PA's status in the CareBridge Provider Portal to 'Acknowledged.'

AUTHORIZATION DETAILS

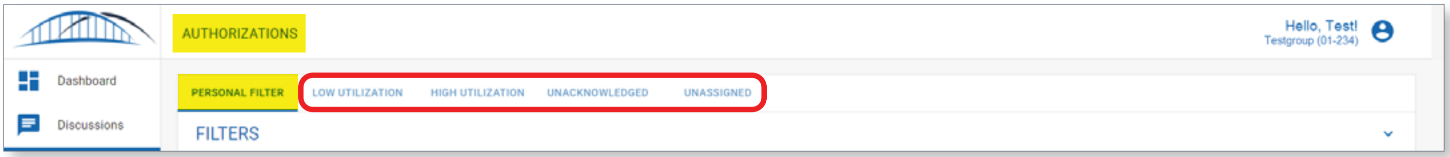
To view more details about a PA, the user can click the **menu icon (3 dots)** on the right end of the PA's row and select **Authorization Details**.



From the Authorization Details page, users can view start/end dates, service codes, modifiers, units, limits, schedules, both utilization and billed percentages, as well as upcoming appointments and completed visits attached to the authorization.

AUTHORIZATIONS REPORTS

By default, the **PERSONAL FILTER** is the first page you see when you go to the 'Authorizations' page. The **PERSONAL FILTER** can be used to filter and sort authorizations in a variety of ways to return specific subsets of authorizations. In addition, the Authorizations page has four pre-filtered lists to help users quickly see important authorizations data:

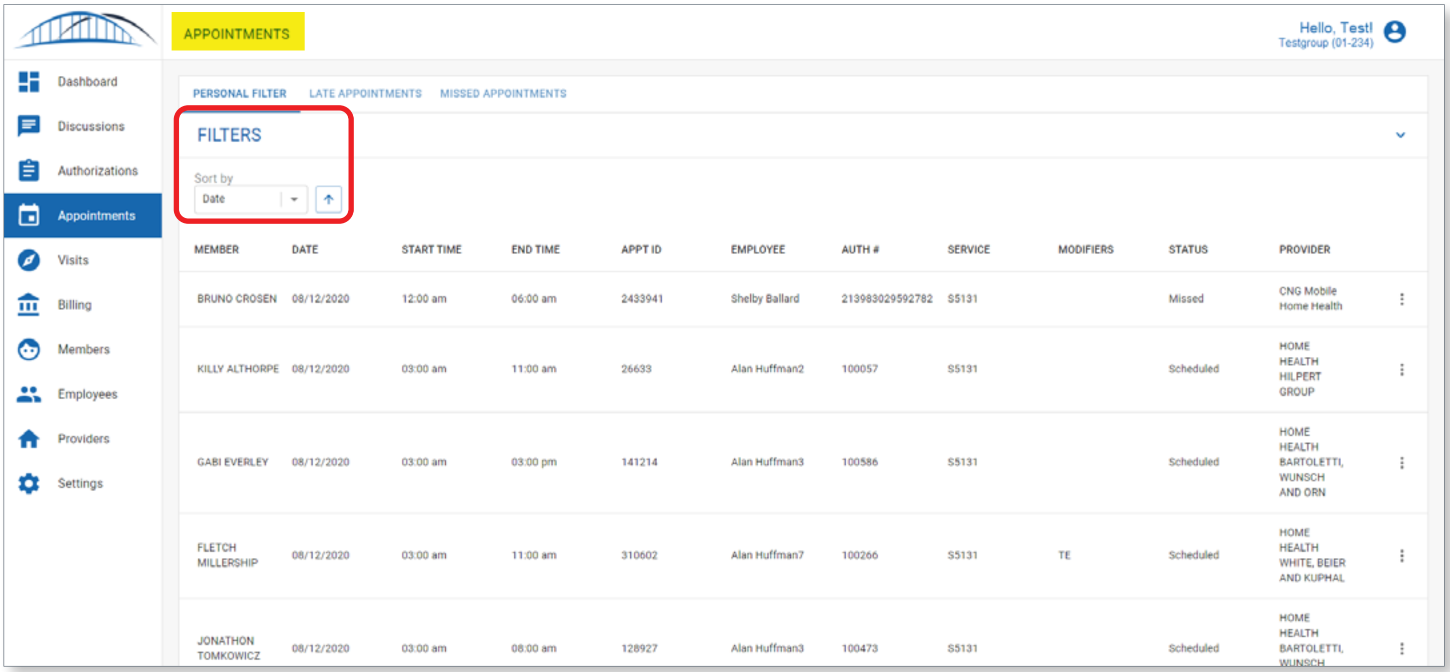


- **LOW UTILIZATION** returns all authorizations that have less than 25% of the authorized units scheduled.
- **HIGH UTILIZATION** returns all authorizations with greater than 75% authorized units scheduled.
- **UNACKNOWLEDGED** returns all authorizations that have not yet been acknowledged. Monitoring this list will allow WDH to proactively manage Provider Organizations who are not acting quickly enough to provide the service participants need.
- **UNASSIGNED** returns all authorizations that have not yet been assigned a caregiver.

To export any table from the Authorizations page to a comma separated value file, the user can click **EXPORT TO FILE** at the bottom left of the table and choose where to save the file.

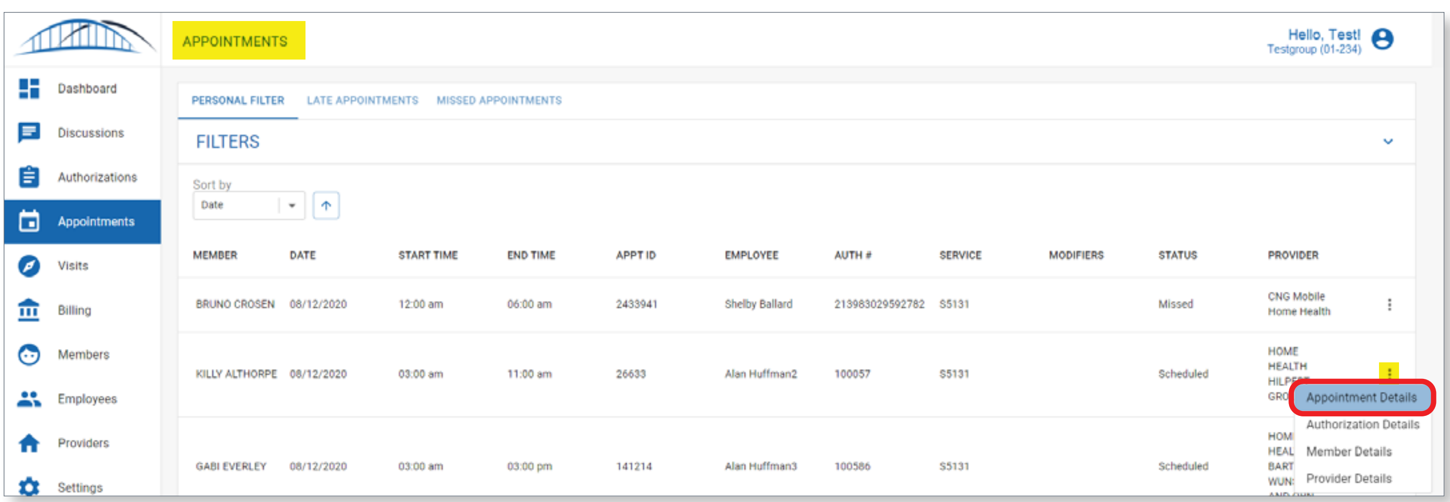
APPOINTMENTS PAGE

The Appointments page allows WDH users to view the details of all appointments scheduled by providers, including whether they are early, late, or missed. The Appointments page can be filtered and sorted with multiple parameters by clicking **FILTERS** or the **Sort by** drop-down menu at the top left of the table.

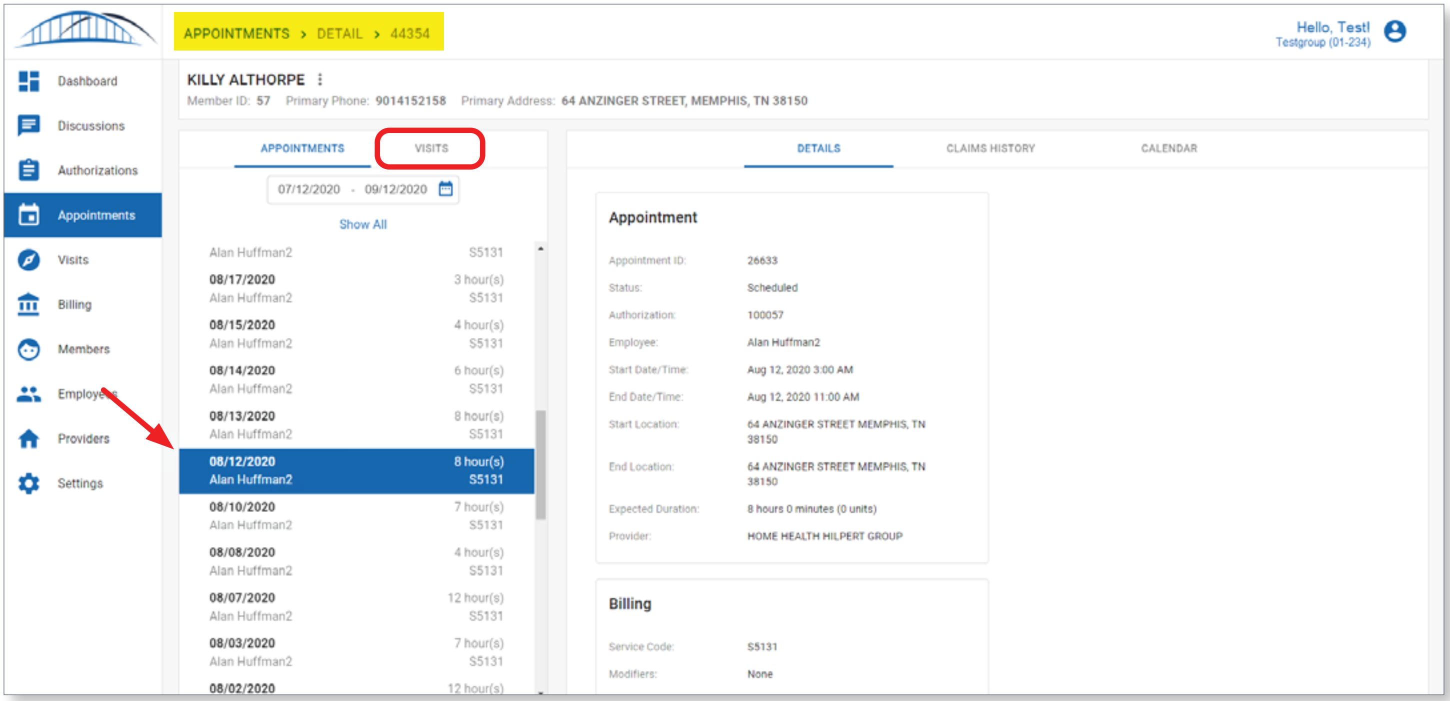


APPOINTMENT DETAILS

To view more details about an appointment, a user can click the **menu icon (3 dots)** on the right end of the appointment row and select **Appointment Details**. The Appointment Details page provides all relevant data for an appointment.

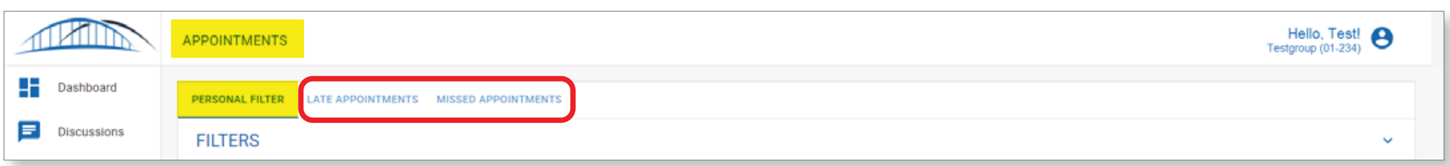


Users can view the details of a different appointment by locating it in the list on the left of the page. They can switch to viewing completed visits by clicking the **VISITS** tab at the top of the list.



APPOINTMENT REPORTS

By default, the **PERSONAL FILTER** is the first table when you go to the Appointments page. The **PERSONAL FILTER** can be used to filter and sort appointments in a variety of ways. In addition, the Appointments page has two pre-filtered lists to help you quickly see important PA data.



- **LATE APPOINTMENTS** shows all appointments that are late. An appointment is considered late when a Check-In has not occurred within thirty (30) minutes of the appointment start time.
- **MISSED APPOINTMENTS** shows all appointments that have been missed. An appointment is considered missed when a Check-In has not occurred within three (3) hours of the appointment start time.

EVV IN ACTION

Through the course of a visit, EVV details are collected and sent back to the CareBridge system, including the location and time of Check-in and -Out, the status of (EVV) Care Plan activities, and whether the caregiver observed any changes to the participant's condition. When using the mobile application, a participant's signature will also be collected, if possible, at the end of the visit.

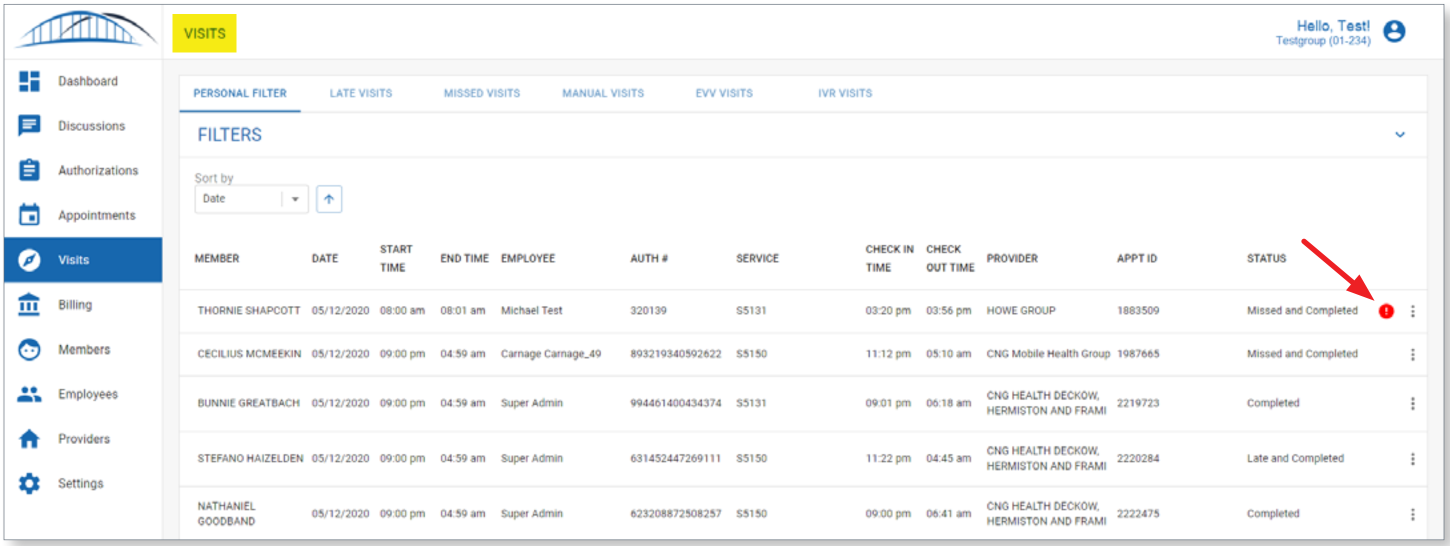
When different services are scheduled in consecutive order, the caregiver must Check-Out of the first service and Check-In for the second service for the visits to be billed accurately.

Within the CareBridge EVV Solution, there are two primary methods a caregiver can use to Check-In and Check-Out of an appointment. The preferred method is using the **CareBridge Mobile Application**. The second is via phone using the **CareBridge Interactive Voice Response (IVR)** system.

Please note: Even when cell coverage is not available at a participant's home, the mobile app can be used. The app will store the collected EVV data and then forward it to CareBridge when the caregiver's mobile device returns to an area with cell coverage.

VISITS PAGE

In the CareBridge Solution, an Appointment becomes a Visit only when valid Check-In and Check-Out times are collected.



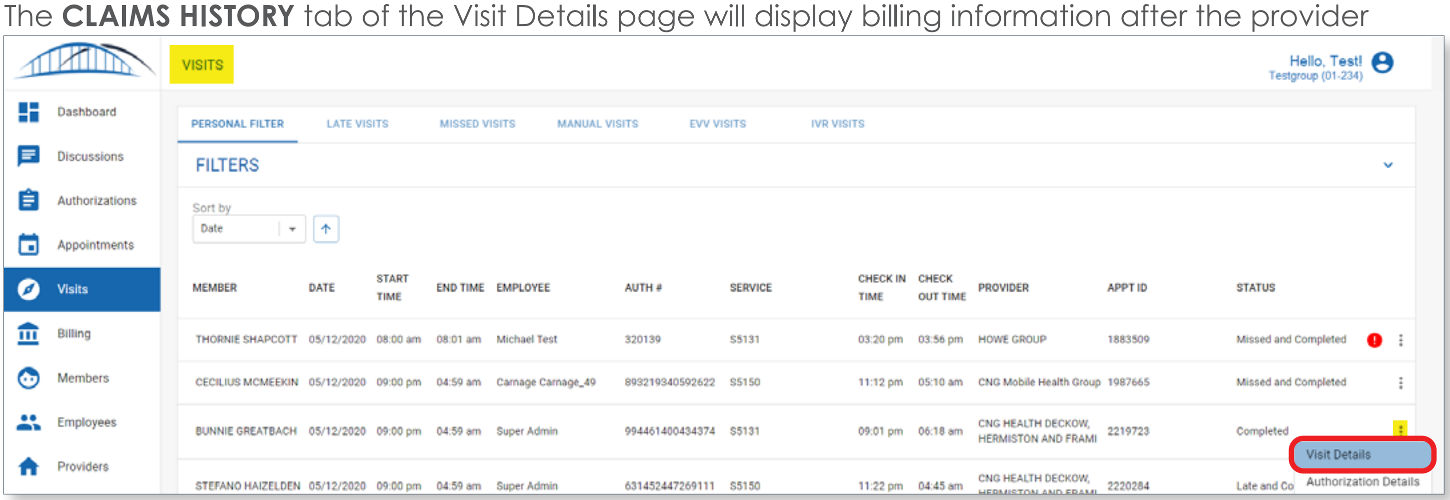
The Visits page allows WDH users to view the details of completed visits, including any Alerts identifying potential problems with a visit that may cause a claim to be rejected or denied. Providers are not able to export a visit for billing if the visit is flagged and are responsible for making necessary edits to the claims to resolve any Alerts in order to ensure the claim can be successfully processed.

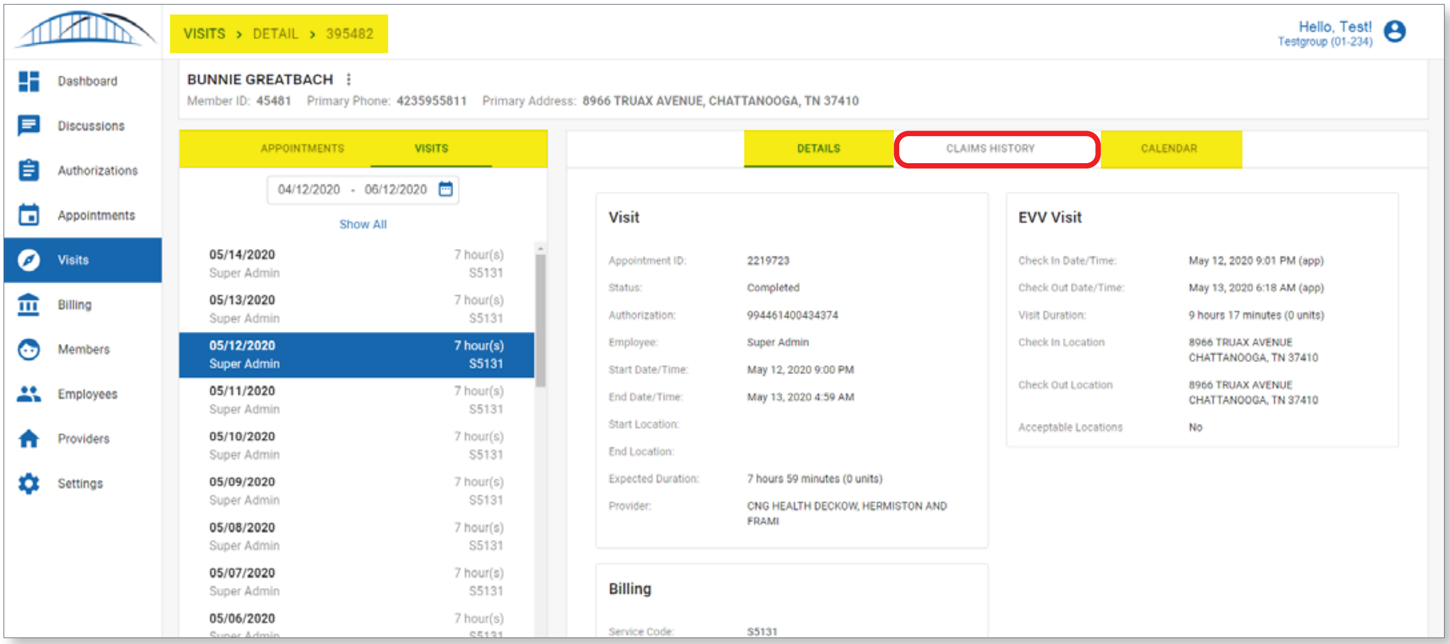
The Visits page can be filtered or sorted with multiple parameters by clicking **FILTERS** or the **Sort by** drop-down menu at the top left of the table. The data users see on the Visits page in the Payer Portal mirrors what providers see on their Visits page in the Provider Portal.

VISIT DETAILS

To view more details about a visit, the user can click the **menu icon (3 dots)** on the right end of the visit's row and select **Visit Details**. The Visit Details page aggregates all relevant information for completed visits, including scheduling data, EVV data collected during the Visit, and any data manually entered by the provider after the visit was completed.

The **CLAIMS HISTORY** tab of the Visit Details page will display billing information after the provider



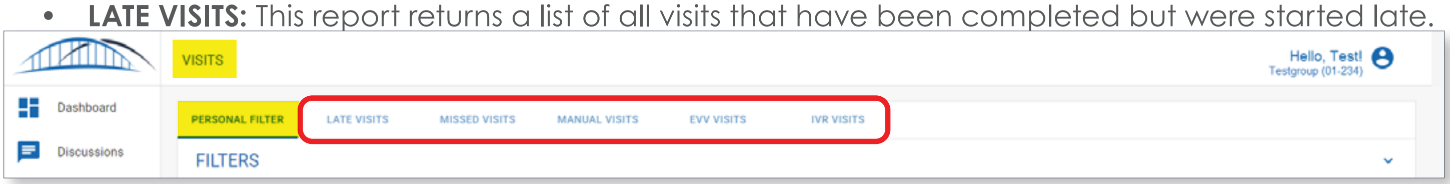


exports the visit for claims. A calendar view of the participant's **Appointments** and **Visits** is available under the **CALENDAR** tab of the Visit Details page.

VISITS REPORTS

By default, the **PERSONAL FILTER** is selected when navigating to the Visits page. The **PERSONAL FILTER** can be used to filter or sort the visits table with multiple attributes to return the most useful list of visits. In addition, the Visits page has five pre-filtered reporReports to help quickly navigate to important Visits.

- **LATE VISITS:** This report returns a list of all visits that have been completed but were started late.



  Based on the rules set forth by the WDH and the *Cures Act*, a visit's status is late when a Check-In does not occur within thirty (30) minutes of the scheduled start time. Late visits are not EVV-compliantSolution.

- **MISSED VISITS:** This report returns a list of all missed visits. Based on the rules set forth by the WDH and the Cures Act, a visit's status is missed when a Check-In did not occur within three (3) (3) hours of the appointment start time. Missed visits can still be completed, in which case their status will be 'Missed and Completed'. Missed visits are not EVV-compliant in the CareBridge Solution.
- **MANUAL VISITS:** This report returns a list of all manual entry visits. To add non-EVV visits to the system or edit details of existing EVV visits, Provider employees can complete a manual entry. All manual entry visits will have '(Manual)' in their status. Manual entries are not EVV-compliant.
- **EVV VISITS:** This report returns a list of all EVV-compliant visits completed using the preferred

EVV method, the CareBridge mobile application.

- **IVR VISITS:** This report returns a list of all EVV-compliant visits completed using IVR.

ALERTS

For a Provider to export a visit to claims, the visit must pass the CareBridge Alerts. If a problem is found that may cause the claim to be rejected or denied, the visit is marked with a **red exclamation icon**, and the provider will not be able to export the visit until all alerts are resolved.

In addition to the Visits page, Alerts are visible on the Authorizations, Appointments, and Billing pages of both the Provider and Payer Portals. Clicking the **red exclamation icon** will show the details of the alert.

Provider organizations may need to contact WDH for clarification of the Alerts. In those cases, the CareBridge Payer Portal can be used by Agency staff to view the visit's details to ensure both the Agency and the provider are viewing the same information. Some examples of CareBridge Alerts that providers may require WDH clarification on are:

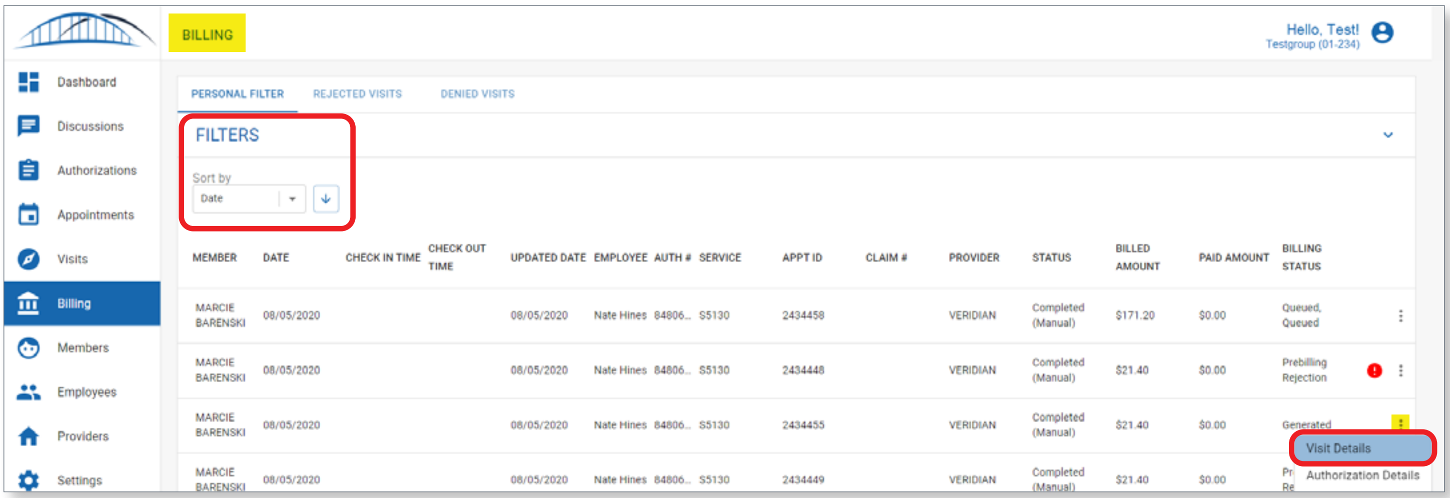
- Waiver participant is not eligible during appointment
- Appointment exceeds the max units of the Authorization
- Appointment is outside of the authorization dates
- WDH Data Issue

BILLING PAGE

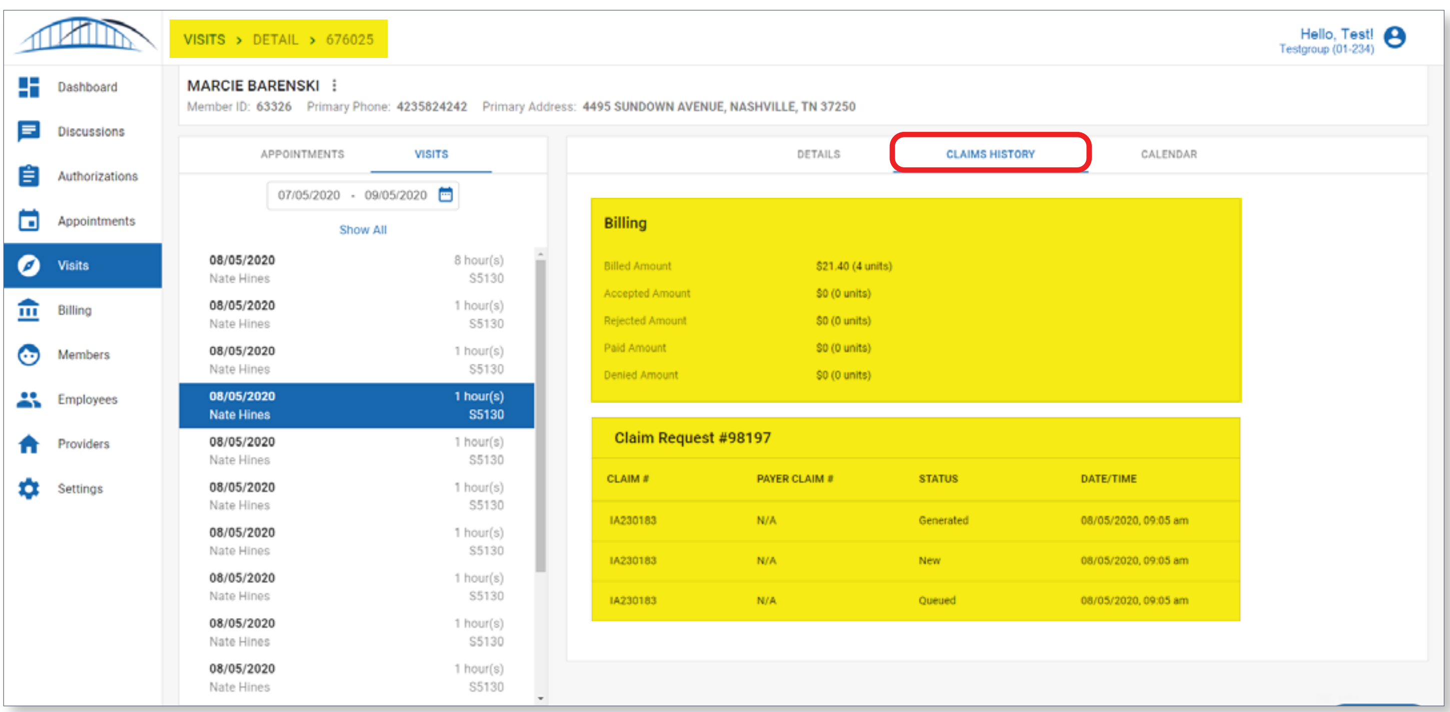
The Billing page allows WDH users to view the details of completed visits that providers have claimed, including information on denials, rejections, and paid amounts. It can be filtered or sorted with multiple parameters by clicking **FILTERS** or the **Sort by** drop-down at the top left of the table.

CLAIMS HISTORY

After a visit has been exported for claims, users can view details about the billing status and claim information by clicking the **menu icon (3 dots)** on the right end of the row for the visit and select **Visit Details**.



On the Visit Details page, users can see the billing status in the 'Billing' card and details of the claim in the **CLAIMS HISTORY** tab.



The **CLAIMS HISTORY** tab displays the visit's billing and claim details. Billing details include Billed Amount, Accepted Amount, Rejected Amount, Paid Amount, and Denied Amount. Below the Billing details are details on each individual Claim Request that was generated at export, including the individual statuses, claim number(s), and dates associated with the status changes.

BILLING REPORTS

When navigating to the Billing page, the **PERSONAL FILTER** is the default view and can be used to filter or sort the billing table to return the most useful list of billed visits. In addition, the Billing page has two pre-filtered reports to help quickly navigate to useful billed visits data:

- **REJECTED VISITS:** This report returns a list of all visits that have rejected claims.
- **DENIED VISITS:** This report returns a list of all visits that have denied claims.

BILLING STATUSES

The following billing statuses are available in the CareBridge Solution and can be seen associated with Claim Requests:

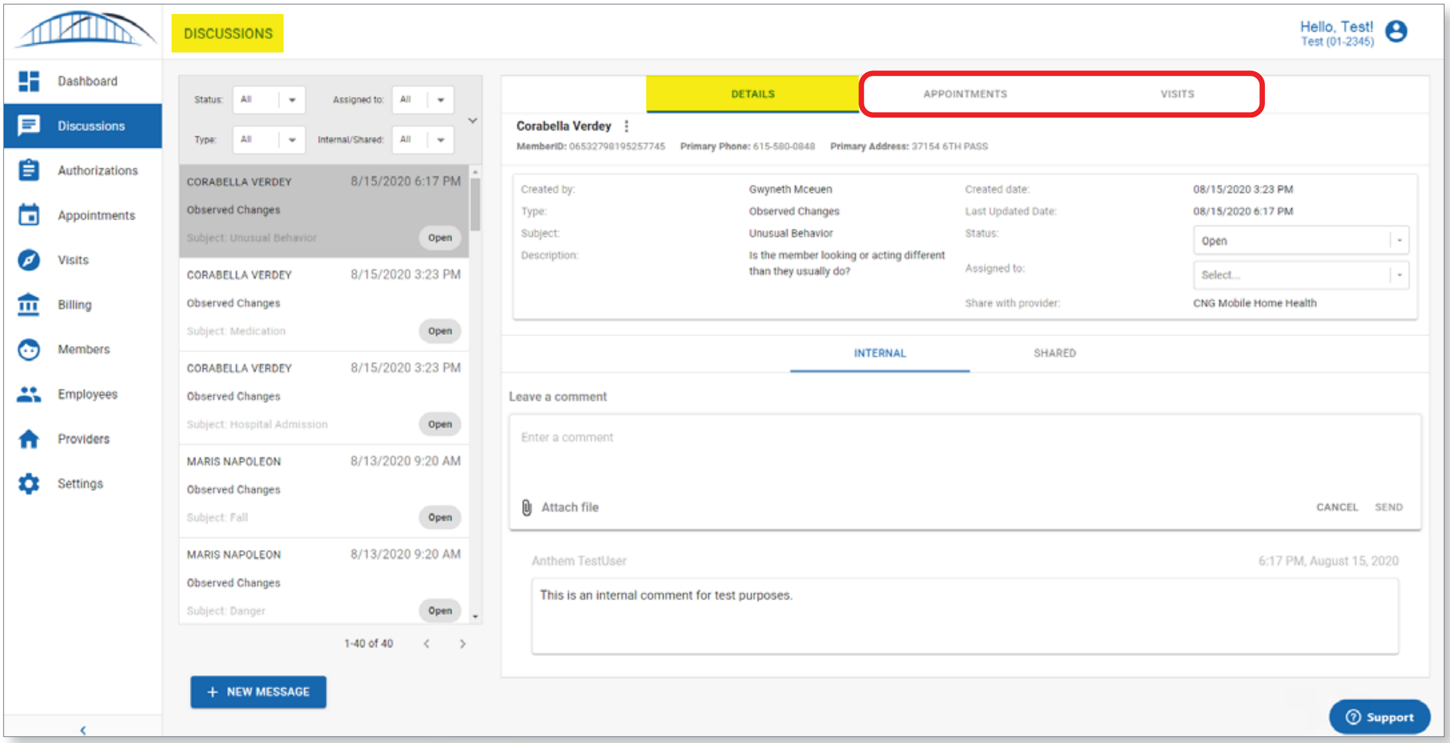
BILLING STATUS	DESCRIPTION
Pending	This visit has not yet been exported for claims
Queued	This visit has been queued for claim generation
Generated	This visit has a claim that has been generated
Submitted	This visit has a claim that has been submitted to WDH
Acknowledged	This visit has a claim that has been received by WDH
Confirmed	This visit has a claim that was accepted by WDH
Pre-Billing Rejection	This visit was rejected due to insufficient or invalid data prior to claim creation
Rejected	This visit was rejected by WDH due to insufficient or invalid data upon initial review of the claim
Paid	This visit was paid by WDH
Denied	This visit was denied by WDH due to insufficient or invalid data upon review of the claim
Voided	This visit claim was voided

COMMUNICATIONS

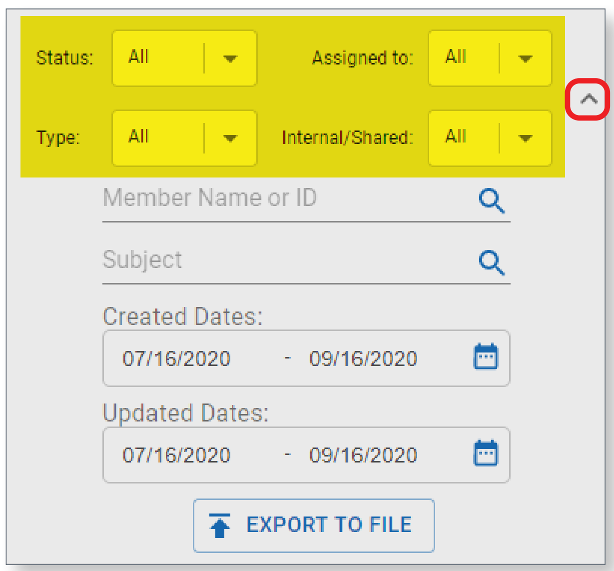
DISCUSSIONS

The Discussions page allows WDH users to manage and prioritize inbound communications, act on critical tasks, and communicate internally and externally with providers to ensure issues are resolved.

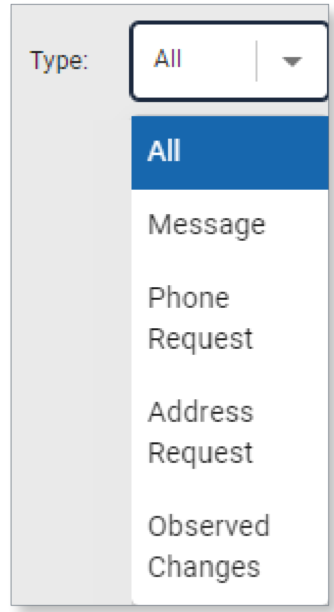
DISCUSSIONS NAVIGATION



On the Discussions page, users will see a list of all discussions that can be filtered by **Assigned to**, **Status**, **Type**, and **Internal/External**. Clicking the **expand arrow** next to the **Status** drop-down will allow the user to search for a discussion by member (participant) name or filter the list by either the date the discussion was created or last updated.



DISCUSSION TYPES



The CareBridge Portal has four different types of discussions.

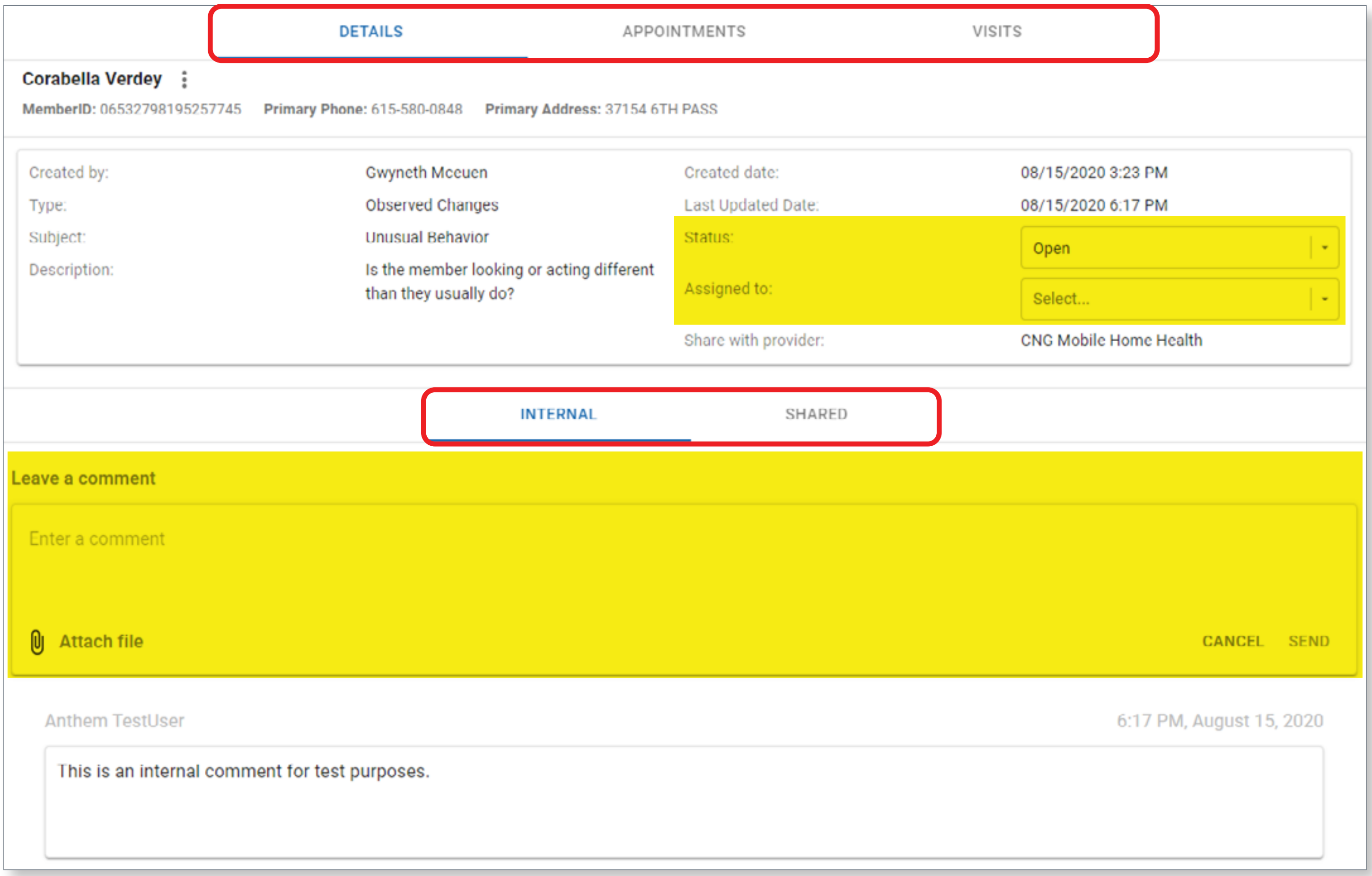
- **Message:** This discussion type is used for general purpose communication either internally between WDH employees or externally between WDH and provider organization employees.
- **Phone Request:** Provider organizations must request phone number updates from their WDH contact. When phone number updates are approved by WDH, a discussion is automatically generated and sent to the Discussions page for both the provider and WDH.
- **Address Request:** Provider organizations must request address updates from their WDH contact. When address updates are approved by WDH, a discussion is automatically generated and sent to the Discussions page for both the provider and WDH.
- **Observed Changes:** This Discussion type allows caregivers to communicate changes in the participant's condition to WDH. Observed changes discussions are created when a caregiver answers yes to an observed changes question during a visit. When an observed changes question is answered with a "yes," a discussion is automatically generated and sent to the Discussions page of both the provider organization and WDH. **This should be monitored regularly.**

DISCUSSION DETAILS

Clicking on a discussion will display the discussion's details. From the **DETAILS** tab, you can add information or update the discussion.

There are multiple actions that can be taken from the Discussion Details tab.

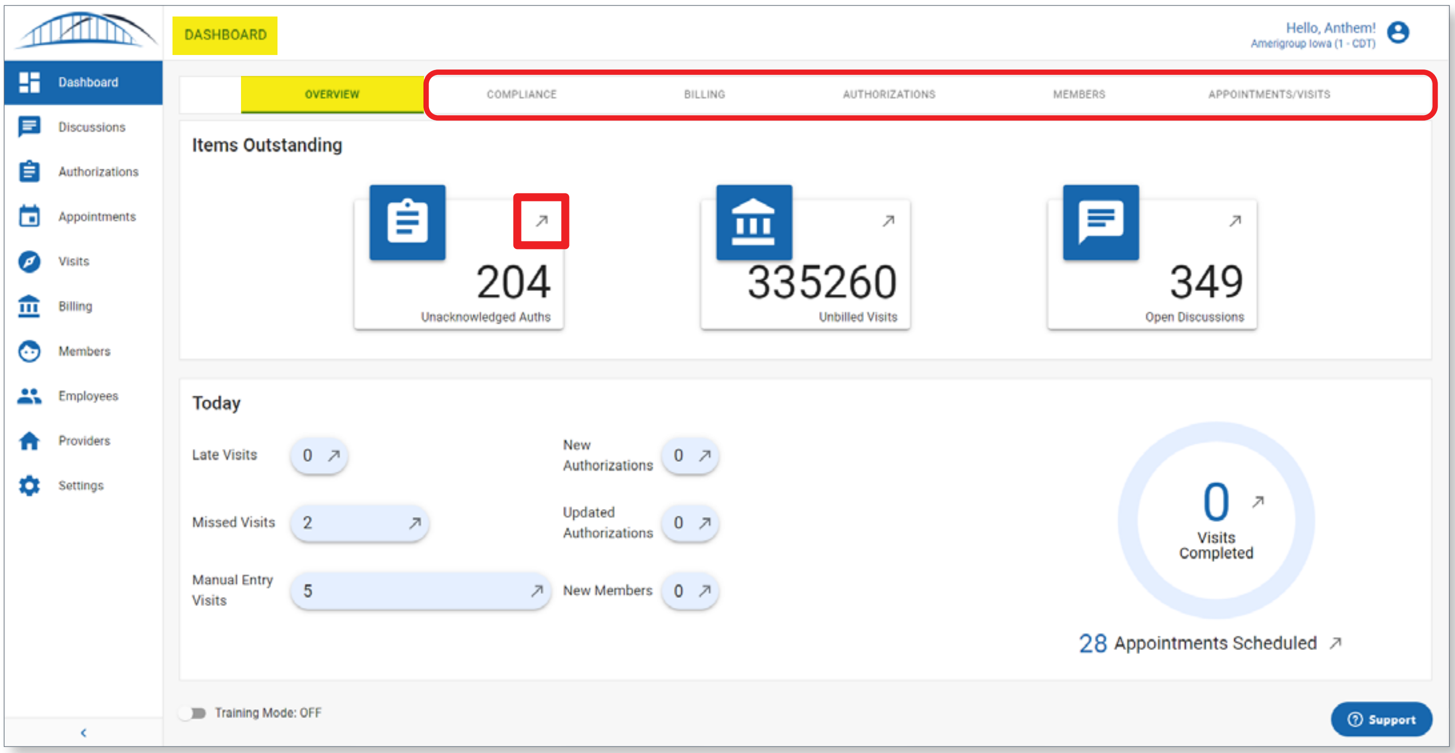
- **Status:** To manage discussions and track their progress, users can update the status. Statuses available are **Open**, **In Progress**, and **Closed**. It is important to update the status of a discussion so all users can see the current progress.
- **Assigned to:** To manage tasks across the agency, users assign discussions to an employee.
- **Approve/Reject:** If manually responding to an address or phone change request, a user can click the **Approve** or **Reject** button, then close the discussion.
- **Internal/Shared:** If a user needs to send the discussion to the participant's provider organization, they can select the provider from the **Share with provider** drop-down.
- **Comments:** At the bottom of the discussion, users can leave comments and correspond. If the discussion is internal, there will only be one tab: **INTERNAL.** If the discussion is shared, it will have both an **INTERNAL** and a **SHARED** tab. Both tabs allow for separate communication channels within the discussion. Internal comments will not be visible to the provider organization. The **SHARED** tab will only be available if the discussion has been shared with the participant's provider organization.


DETAILS
APPOINTMENTS
VISITS
Corabella Verdey
MemberID: 06532798195257745
Primary Phone: 615-580-0848
Primary Address: 37154 6TH PASS
Created by:
Gwyneth Mceuen
Created date:
08/15/2020 3:23 PM
Type:
Observed Changes
Last Updated Date:
08/15/2020 6:17 PM
Subject:
Unusual Behavior
Status:
Open
Description:
Is the member looking or acting different than they usually do?
Assigned to:
Select...
Share with provider:
CNG Mobile Home Health
INTERNAL
SHARED
Leave a comment
Enter a comment
Attach file
CANCEL
SEND
Anthem TestUser
6:17 PM, August 15, 2020
This is an internal comment for test purposes.

DASHBOARD & REPORTING

DASHBOARDS

The Dashboard page allows WDH users to view key metrics and trends over time to better manage providers. Each of the dashboards can be filtered by date range or provider. Clicking the **arrow icon** on the top right of each metric or graph will take you to a data table driving the metric or graph. For instance, clicking the **arrow** for **Unacknowledged Auths** will take you to the table of all unacknowledged PAs.

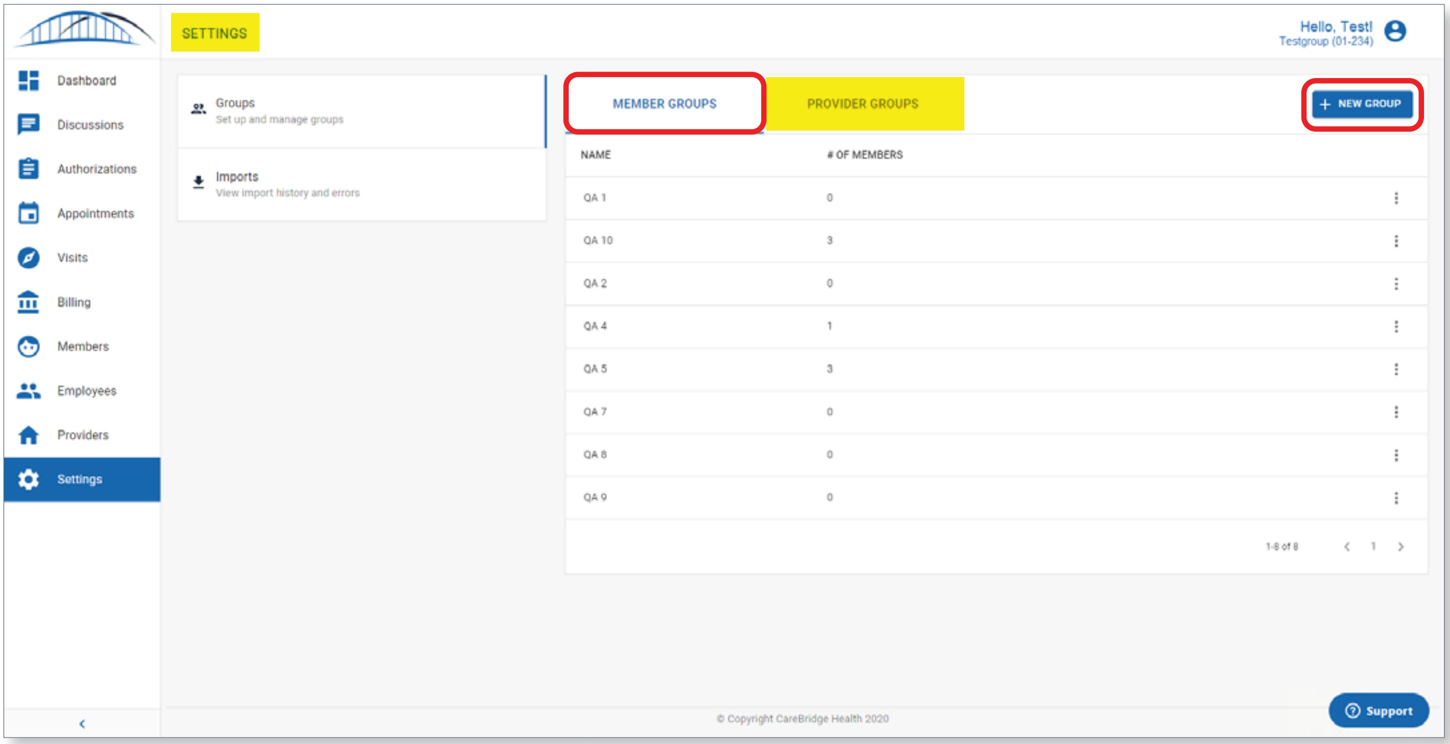


The Dashboard page has six individual dashboards with their own reports.

- **OVERVIEW:** Aggregates top-priority metrics in real time for WDH users to monitor their provider network as the day progresses. During implementation this will help WDH monitor EVV adoption.
- **COMPLIANCE:** Displays a break-down of how well a provider organization is complying with EVV regulations. The compliance score is the percentage of visits that are on time, collect all required EVV data, and are not manual entries.
- **BILLING:** Displays metrics related to the revenue cycle of completed visits in the CareBridge Solution.
- **AUTHORIZATIONS:** Helps WDH employees better understand the number of active PAs and PAs by Service type.
- **MEMBERS (PARTICIPANTS):** Helps WDH employees explore the number of active participants and view participants with low compliance scores (participants who have a higher % of late, missed, and manual visits) to take the appropriate actions.
- **APPOINTMENTS/VISITS:** Displays metrics for how visits are being completed.

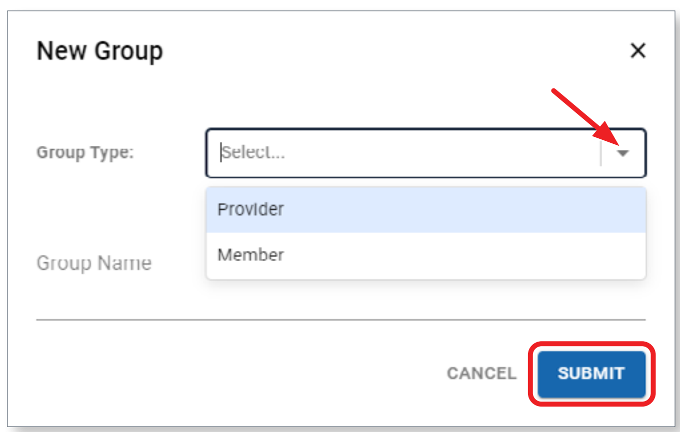
SETTINGS PAGE

The Settings page of the Payer Portal has two functions: 1) Create and manage **Groups** for members (participants) and provider organizations and 2) View or download the Participant, PA, and Provider files automatically sent between WDH and CareBridge electronic systems and the details of the import's success or failure. **The Settings page can only be accessed by Admin users.**



GROUPS

Groups in CareBridge are designed to help Agencies better manage providers and participants. They are an open-ended tool for all Payer Portal users to utilize. As one example, users might find it useful to create groups for providers who operate in specific zip codes. All Payer Portal users can see and utilize all groups that are created.



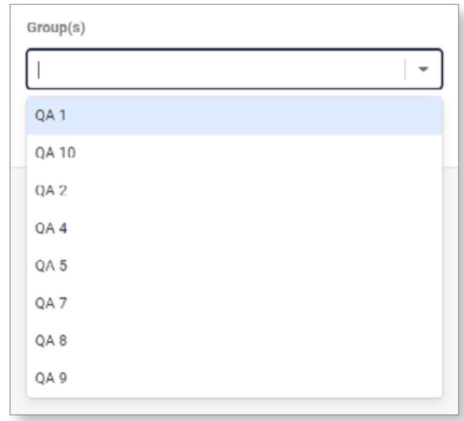
Creating and Managing

To view, create, and manage groups, the user can go to the **Groups** tab of the Settings page. participants (members) and providers have their own tabs.

To create a group, users can click **+ New Group**, select the type, create the name, and click **SUBMIT**.

To edit or delete a group, the user can click the **menu (three dots)** and then select **Edit Group**.

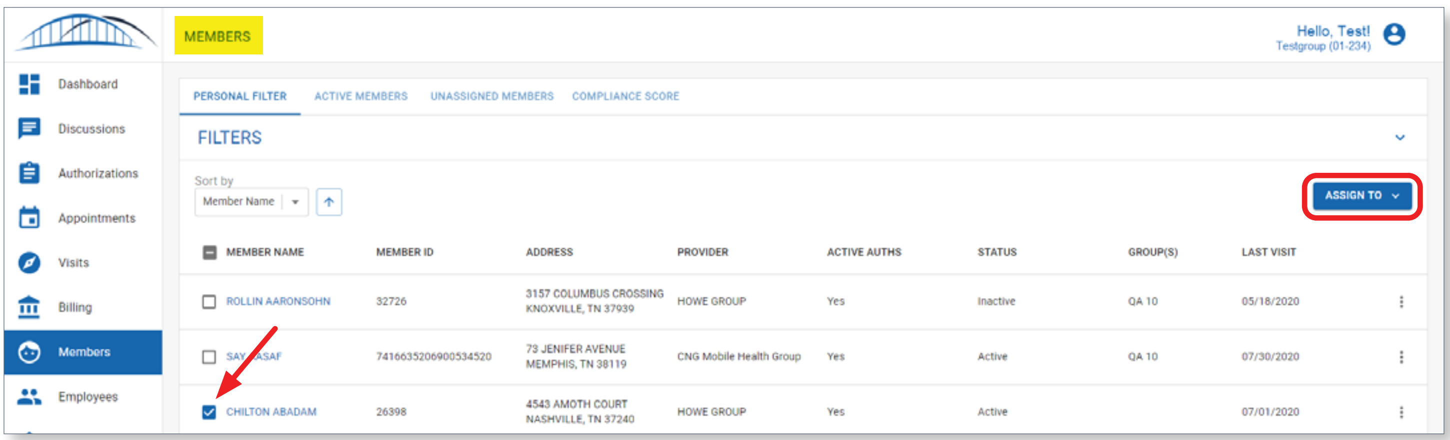
ASSIGNING GROUPS



To assign a participant or provider organization to a group, a user has two options. They can navigate to the member's (participant's) or provider's Details page, scroll down to the bottom, and find the **Groups** drop-down menu. Click the menu and select the group they need.

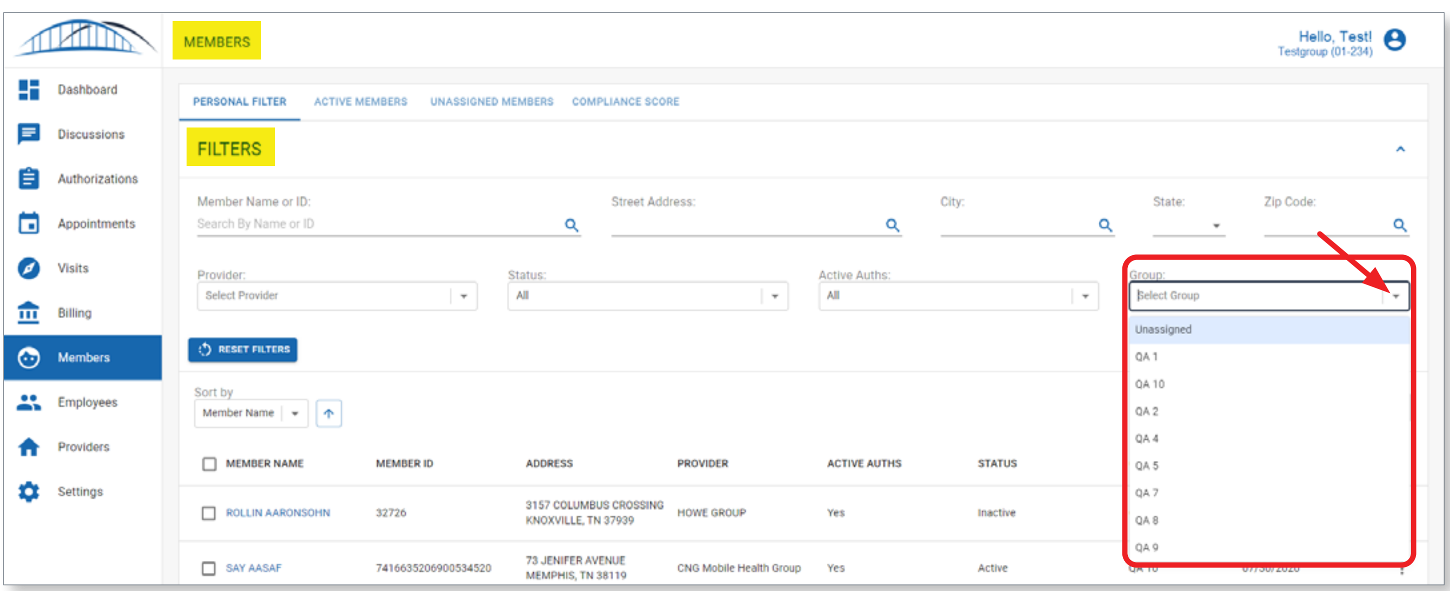
Users can also assign one or many members (participants) or providers to a group from their respective pages by selecting the **checkbox** on the left end of the row, then clicking **ASSIGN TO** at the top right of the table, and choosing the appropriate **Group**.

Members (Participants) and providers cannot be assigned to the same group.



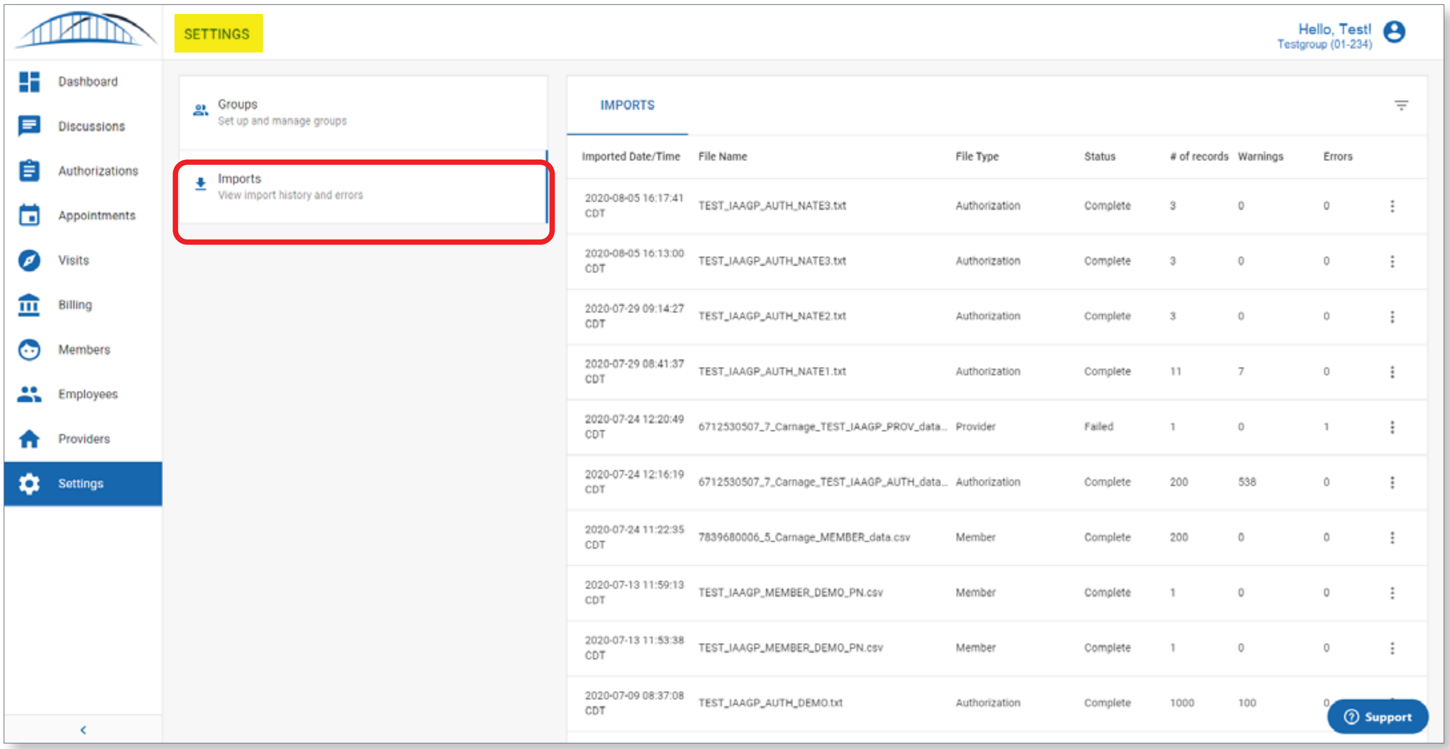
SEARCHING USING GROUPS

To view members (participants) or providers in specific groups, the user can go to their respective pages, expand the **FILTERS**, and then select the **Group** from the **Groups** field. The table will automatically update.



IMPORTS

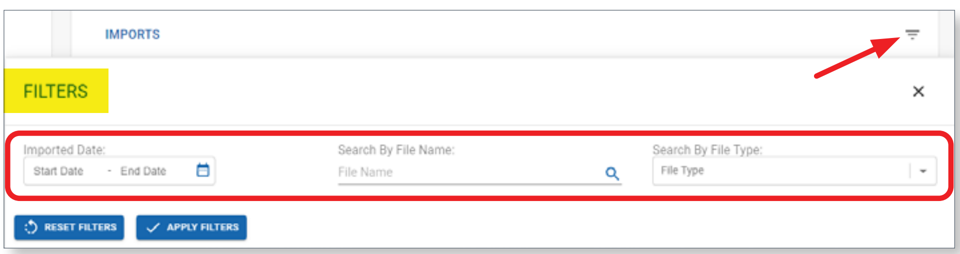
Users can view the records and details of the import history in the **IMPORTS** tab of the Settings page.

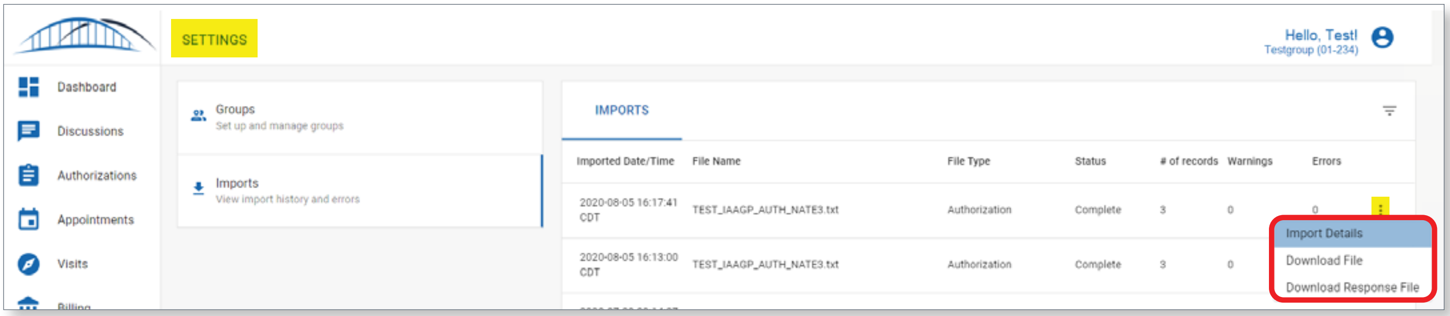


The files are sent over secure file transfer protocol (SFTP) on a daily or weekly basis between WDH and CareBridge. Participant and PA files update daily and Provider files update weekly.

Regardless of the file type, when CareBridge receives a file, it sends a response file back that includes information on records that were received, including any warnings or errors.

To search for specific files, the user can click the **FILTERS** button in the top right and search by import date, file name, and/or file type.





To view details of the import of large and/or individual records, the user can click the **menu (three dots)** on the far right of the row and select **Import Details**. From the Import Details page, they can scroll through all the records. The Import Details page has four sub-tabs dividing the file into its individual records according to status. The statuses are:

- **CREATES** which are newly created records,
- **UPDATES** which are updates to existing records,
- **WARNINGS** which are records with warnings that were accepted, and
- **ERRORS** which are records with errors that were rejected.

Users can also download both the files received by CareBridge and CareBridge's response file by clicking the **menu (three dots)** on the right end of the row.