



CAREBRIDGE

INTEGRATED USER GUIDE



TABLE OF CONTENTS

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CONTENTS

OVERVIEW.....	3
WHAT IS EVV?.....	3
WHAT IS CAREBRIDGE?.....	3
THE INTEGRATED AGENCY PORTAL.....	4
HOW TO GET STARTED.....	4
USING THE INTEGRATED AGENCY PORTAL.....	6
DASHBOARD PAGE.....	6
AUTHORIZATIONS PAGE.....	6
APPOINTMENTS PAGE.....	9
VISITS PAGE.....	9
BILLING PAGE.....	10
MEMBERS PAGE.....	10
EMPLOYEES PAGE.....	11
CLAIMS.....	12
SETTINGS PAGE.....	13
PROVIDER ADMIN PAGE.....	13
OUTBOUND AGGREGATION.....	15



INTEGRATED USER GUIDE

OVERVIEW

To make it easier for you to review and confirm that the data in your EVV system matches what CareBridge has received from health plan/state partners and your EVV vendor, you have access to an enhanced read-only version of the CareBridge Provider Portal called the **Integrated Agency Portal**.

If you have questions, our team is always here to help. Just email evvintegrationsupport@carebridgehealth.com or call us at 1 (844) 920-0989.

This environment allows you to easily review and verify data in the CareBridge Portal, including member and authorization information, as well as alert and claim status. Any needed updates will still need to be made within your chosen EVV vendor's solution and resubmitted via the integration process as it is done today. **Please note:** any such updates will **not** be immediately reflected in the CareBridge Provider Portal.

By using the Integrated Agency Portal to regularly conduct this type of reconciliation, you'll see a reduction in the amount of pre-billing validation errors for each visit, as well as decreased time to generate claims.

This guide is meant to help integrated agencies learn how to use the Integrated Agency Portal to view details. If you have any questions, our team is here to help. Just email evvintegrationsupport@carebridgehealth.com or call 1 (844) 920-0989.

Current Users: If you are already an integrated provider accessing the CareBridge portal, no action is needed for this change to take effect.

WHAT IS EVV?

Electronic Visit Verification (EVV) is the use of technology to record the timing, service provision details, and location of Caregivers during appointment Check-In and Check-Out. This verification method provides an accurate record of caregivers' actions in accordance with the member's person-centered service plan while minimizing or eliminating inappropriate claims.

WHAT IS CAREBRIDGE?

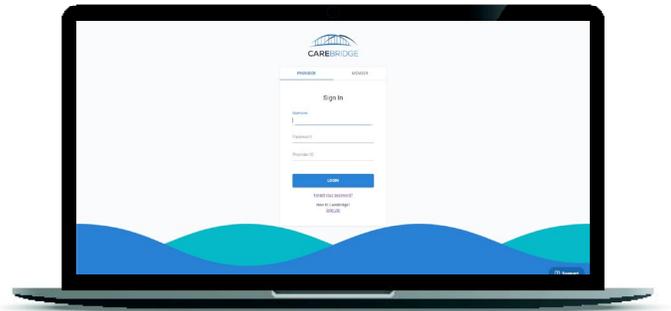
CareBridge is a company formed to support care for people who receive Long-Term Services and Supports (LTSS). We offer LTSS solutions including an Electronic Visit Verification Platform that can be utilized via a mobile phone, GPS-enabled tablet, landline and web-based portal to record service delivery and facilitate day-to-day management of members' appointments.

CareBridge also supports a wide array of EVV data aggregation solutions in which CareBridge builds an integration with a provider's EVV system, allowing provider agencies to keep their current EVV solution while still providing required data back to the health plan or state. **There is no charge to members, provider organizations, or caregivers for using the CareBridge Integrated Agency Portal.**



THE INTEGRATED AGENCY PORTAL

We understand that your time is valuable, so this streamlined process will allow you to access the Integrated Agency Portal, review and verify critical data, and then make the necessary updates to your chosen EVV vendor's solution, as often as you'd like — all without having to make a phone call.



In order to generate claims or send data to state aggregators, data received from third-party EVV solutions must be matched against the data CareBridge receives from our payer partners. In order to provide visibility to provider agencies when they are attempting to update data in their EVV systems, CareBridge provides Integrated Agency Portal access to view to view member, authorization, visit, billing, and outbound aggregation information. This enables Provider Agencies to validate the data within their systems.

Please note: Agencies using a third-party EVV system, are not able to update their billing or visit data in the Integrated Agency Portal. Changes to the data must be made within their chosen EVV solution and that data must be re-submitted to CareBridge via the integration process.

HOW TO GET STARTED

CareBridge coordinates with providers and their third-party EVV vendors to ensure the necessary data integration between systems, allowing providers to keep their current, 21st Century Cures Act compliant EVV solution. CareBridge supports data aggregation by way of accepting visit data from third-party EVV vendors, and performing a series of validation checks on the data before sending to health plans or state Medicaid agencies, either by way of claims or EVV visit files.

The following is a general description of the steps in the data integration process:

1. Appointments / Visits data file is placed in SFTP folder by provider and/or third-party vendor
2. CareBridge processes Appointments / Visits file
 - Prior to visits being loaded into CareBridge, a series of validation checks are performed to ensure that visits are:
 - i. Compliant with the 21st Century Cures Act
 - ii. Meet all health plan and state Medicaid defined requirements
 - iii. Passes common billing rules
3. CareBridge places response file in SFTP for review by provider and/or third-party vendor
 - Provider need to take action to resolve response errors and resubmit update data to CareBridge
4. CareBridge utilizes visit data to generate claims or EVV visit files for submission to health plans and/or state Medicaid agencies
5. Providers will continue to receive claim remittances through previously established mechanisms

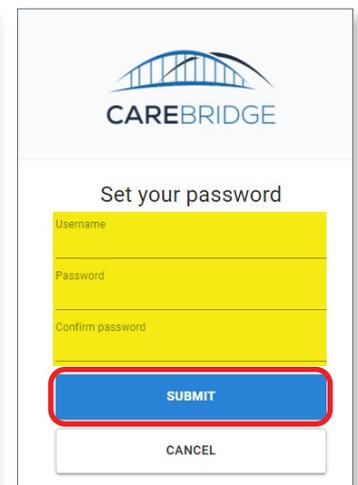
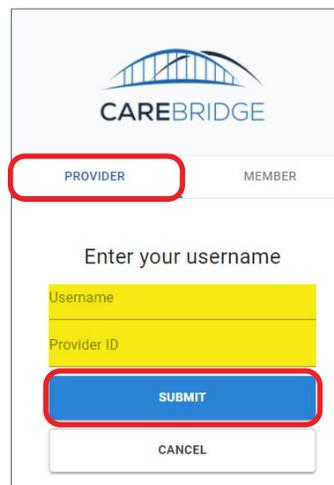
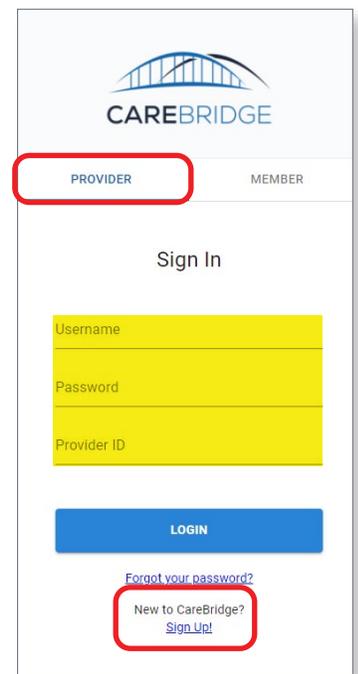
To begin the integration process with CareBridge, the provider must fill out the [Provider Set Up and Access form](#). Through this form, users will make their vendor selection and request credentials to log into the CareBridge portal. If you have questions about the integration process or are unsure of your vendor's integration status please email evvintegrationsupport@carebridgehealth.com or call **(844) 920-0989**.

If your EVV vendor has any technical questions, please have them contact evvintegration@carebridgehealth.com.

LOGGING INTO THE INTEGRATED AGENCY PORTAL FOR THE FIRST TIME

The first admin's username will be provided by CareBridge. Then the first admin will create the usernames for any other admin role users (or employee role users) the provider organization decides to add. This initial setup must be completed before other users are able to login.

1. Once you receive your username and Provider ID from CareBridge, navigate to your Integrated Agency Portal URL and select the **Provider** tab.
2. Then, click the **"New to CareBridge? Sign Up!"** link below the blue **LOGIN** button.
3. You will then be asked to enter your **Username** and **Provider ID**.
4. A **Sign-Up code** will be sent to you in a text or email. Once you enter the **Sign Up code** you can create your 8-character **password**. **Please note:** the **Sign Up code** is good for 20 minutes.
5. Click **SUBMIT**, and you are registered in the Integrated Agency Portal.



USING THE INTEGRATED AGENCY PORTAL

When you log in to the Integrated Agency Portal please remember that integrated agencies have a **READ-ONLY** view. Any changes to the data must be made within the agency's chosen EVV solution and that data must be re-submitted to CareBridge via the integration process.

DASHBOARD PAGE

Consider the Dashboard your home page. It is the default screen when a user signs into the Integrated Agency Portal.

The dashboard page features a navigation sidebar on the left with options: Dashboard, Discussions, Authorizations, Appointments, Visits, Billing, Members, Employees, Claims, Settings, and Provider Admin. The main content area has tabs for OVERVIEW, COMPLIANCE, BILLING, AUTHORIZATIONS, MEMBERS, and APPOINTMENTS/VISITS. Under 'Items Outstanding', there are three cards: Unacknowledged Auths (12), Unbilled Visits (10), and Open Discussions (22). The 'Today' section shows: Late Visits (17), Missed Visits (13), Manual Entry Visits (8), New Authorizations (16), and New Members (23). A circular gauge shows 6 Visits Completed, and 30 Appointments Scheduled.

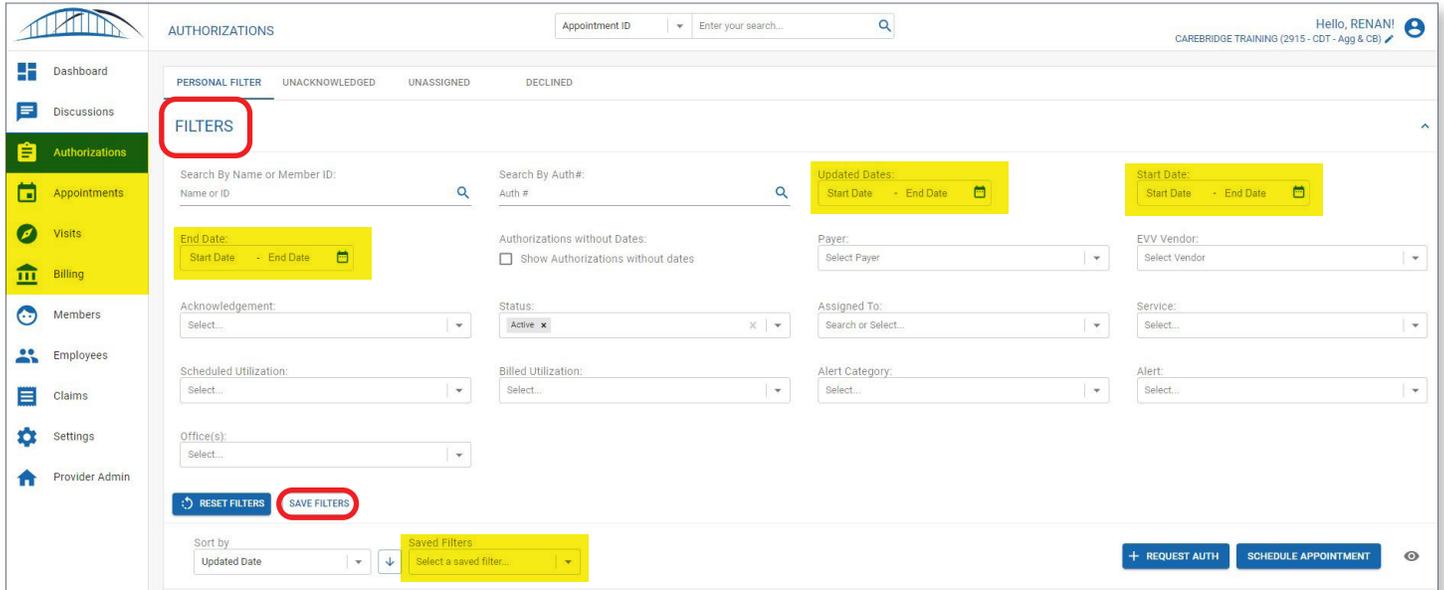
AUTHORIZATIONS PAGE

The Authorizations page shows information such as start and end dates, authorization numbers, scheduled and billed utilization percentages, statuses, and assigned caregivers.

The Authorizations page includes filters for PERSONAL FILTER, UNACKNOWLEDGED, UNASSIGNED, and DECLINED. It has a 'Sort by' dropdown set to 'Updated Date' and a 'Saved Filters' dropdown. Two buttons are visible: '+ REQUEST AUTH' and 'SCHEDULE APPOINTMENT'. The table below lists authorization records with columns: MEMBER, UPDATED DATE, START DATE, END DATE, UNITS, AUTH #, SERVICE, MODIFIERS, SCHEDULED UTILIZATION %, BILLED UTILIZATION %, PAYER, STATUS, ACKNOWLEDGMENT, and EMPLOYEE.

MEMBER	UPDATED DATE	START DATE	END DATE	UNITS	AUTH #	SERVICE	MODIFIERS	SCHEDULED UTILIZATION %	BILLED UTILIZATION %	PAYER	STATUS	ACKNOWLEDGMENT	EMPLOYEE
FRANK GRANT	05/19/2023	01/01/2021	12/31/2024	3000	5C34FB3B2EF	S5125		1.27	0	CB Test Payer	Active	✓ Acknowledged	Shelby Ball...
DONALD HANCOCK	03/08/2023	01/01/2021	12/31/2023	1000	4DC9BA04273	S9122		0	0	CB Test Payer	Active	✓ Acknowledged	Select...
SIMONE JOHNSON	02/09/2023	01/01/2021	12/31/2024	3000	8BEE7DEE5C	S5125		0	0	CB Test Payer	Active	✓ Acknowledged	Select...
AMANDA CLINTON	02/09/2023	01/01/2021	12/31/2024	3000	43760ASE362	S5125		0	0	CB Test Payer	Active	✓ Acknowledged	Select...

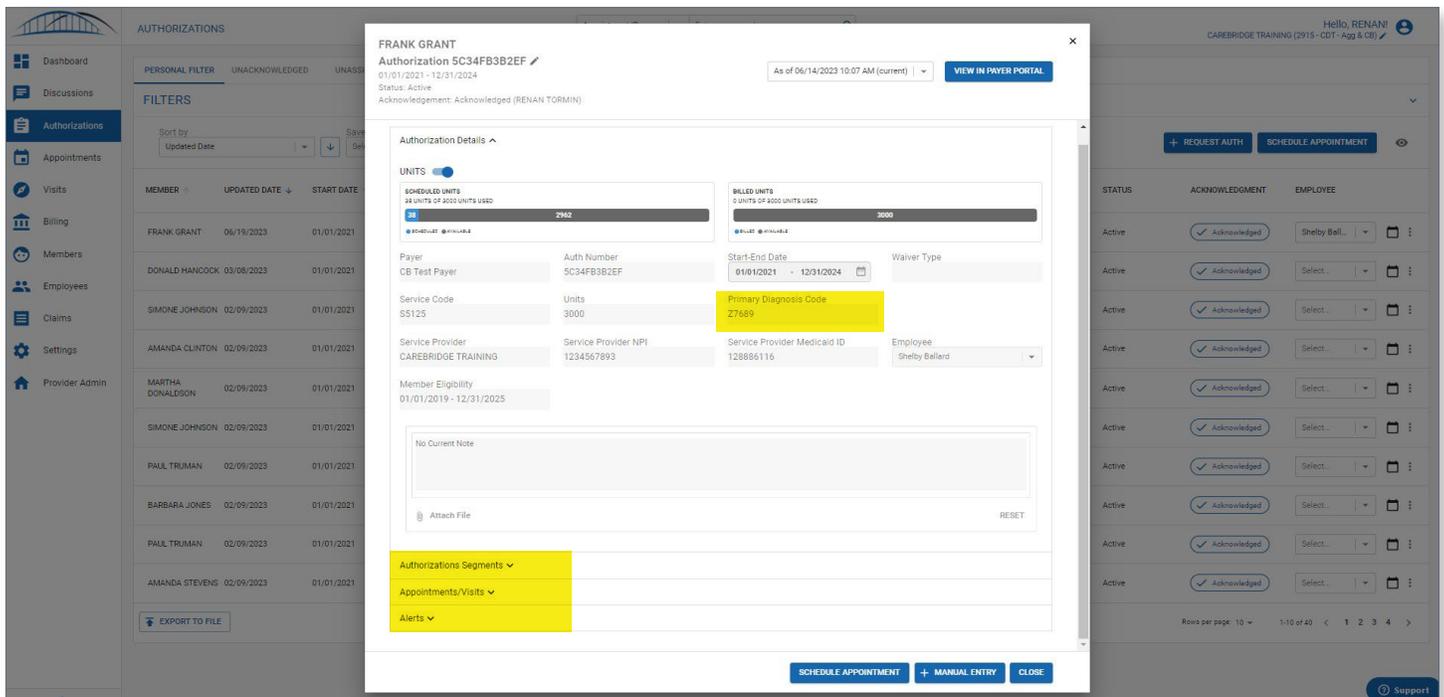
When looking for specific information in the Authorizations, Appointments, Visits, or Billing pages, just click **FILTERS** to set custom parameters. *Don't forget to adjust your **date ranges** and **updated date ranges** to find the appropriate data.*



To save a **FILTER** that you use regularly, just click on **SAVE FILTERS**. This customized filter can be accessed easily in the future by selecting it from the **Saved Filters** dropdown menu. A saved filter will only be available on the page it was created, for the user who created it.

To view more information about an Authorization, click the (three dots) **menu button** on the far right and select **Authorization Details**.

The Authorization Details screen will open. Here you can see more information such as **Diagnosis Code(s)**, **Authorization Segments**, and **Appointments/Visits**.



To export reports or lists, filter your data as needed, then click on the **EXPORT TO FILE** button at the bottom of the page. Choose a file type and the Export screen will appear. Click **DONE**.

AUTHORIZATIONS

Appointment ID [v] Enter your search... [q]

PERSONAL FILTER UNACKNOWLEDGED UNASSIGNED DECLINED

FILTERS

Sort by Member [v] Saved Filters Select a saved filter... [v]

+ REQUEST AUTH SCHEDULE APPOINTMENT

MEMBER	UPDATED DATE	START DATE	END DATE	UNITS	AUTH #	SERVICE	MODIFIERS	SCHEDUL... UTILIZATI...	BILLED UTILIZATI...	PAYER	STATUS	ACKNOWLEDGMENT	EMPLOYEE
RONALD WASHINGTO...	02/09/2023	01/01/2021	12/31/2024	3000	D65630EE6FD	S5125		0	0	CB Test Payer	Active	Received	Select... [v]
RONALD WASHINGTO...	02/09/2023	01/01/2021	12/31/2024	3000	9239C51E893	S5125		0	0	CB Test Payer	Active	Received	Select... [v]
DIWGT WASHINGTO...	02/09/2023	01/01/2021	12/31/2023	1000	DDE12DCF900	S9122		0	0	CB Test Payer	Active	Received	Select... [v]
DIWGT WASHINGTO...	02/09/2023	01/01/2021	12/31/2023	1000	91DEA1D823D	S9122		0	0	CB Test Payer	Active	Received	Select... [v]

EXPORT TO FILE

- Download as CSV
- Download as XLS
- Download as PDF

Export Successful

Your document is being generated and will include the first 5000 rows. Navigate to the *Settings* page and tap the *Documents* card to download this export, or use the button below to **Go to Documents Page**.

GO TO DOCUMENTS PAGE CLOSE

The file will be saved to a **Documents** list that is accessible through the Settings page. Just click on the **download** button on the far right to save the file(s) to your computer.

SETTINGS

Appointment ID [v] Enter your search... [q]

OFFICES: Set up and manage offices

GROUPS: Set up and manage groups

DOCUMENTS

NAME	USER	DATE/TIME	STATUS
Authorizations.csv	RENAN TORMIN	06/22/2023 9:03 AM	Completed
Billings.xls	AMANDA S	06/15/2023 10:27 AM	Completed

Rows per page: 10 1-2 of 2

APPOINTMENTS PAGE

Here you can find the appointment dates, times, ID numbers, types of services being performed, and the assigned caregiver. Appointments that are sent to CareBridge containing only Appointment Start/End dates and times and no Check-In/Check-out Data are listed on this page.

The screenshot shows the 'APPOINTMENTS' page in the CareBridge system. The left sidebar contains navigation options: Dashboard, Discussions, Authorizations, Appointments (selected), Visits, Billing, Members, Employees, Claims, Settings, and Provider Admin. The main content area has a search bar for 'Appointment ID' and a user profile for 'Hello, RENANI'. Below the search bar are tabs for 'PERSONAL FILTER', 'LATE APPOINTMENTS', 'MISSED APPOINTMENTS', and 'CANCELLED APPOINTMENTS'. A 'FILTERS' section allows sorting by 'Date' and selecting a saved filter. A table lists appointments with columns: MEMBER, DATE, START TIME, END TIME, APPT ID, EMPLOYEE, AUTH #, SERVICE, STATUS, and PAYER. Two appointments for 'FRANK GRANT' are shown, both scheduled for 06/28/2023 and 06/30/2023. An 'EXPORT TO FILE' button is at the bottom left, and 'SCHEDULE APPOINTMENT' is at the top right.

VISITS PAGE

Visits that are sent to CareBridge have three states. Appointments, Visits, and Billable (action taken within the EVV source system to trigger the export). Each visit type will be listed on their respective pages. Visits that are sent to CareBridge with Check-In/Check-Out information, but no ClaimAction values are listed on this page.

The screenshot shows the 'VISITS' page in the CareBridge system. The left sidebar is identical to the Appointments page. The main content area has a search bar for 'Appointment ID' and a user profile for 'Hello, RENANI'. Below the search bar are tabs for 'PERSONAL FILTER', 'LATE VISITS', 'MISSED VISITS', 'MANUAL VISITS', 'EVV VISITS', 'IVR VISITS', and 'FOB VISITS'. A 'FILTERS' section allows sorting by 'Date' and selecting a saved filter. A table lists visits with columns: MEMBER, DATE, CHE-IN TIME, CHE-OUT TIME, EMPLOYEE, AUTH #, SERVICE, PAYER, APPT ID, and STATUS. Multiple visits for 'FRANK GRANT' are shown, with various dates and times. An 'EXPORT FOR BILLING' button is at the top right, and 'MANUAL ENTRY' is at the bottom right. An 'EXPORT TO FILE' button is at the bottom left.

BILLING PAGE

The Billing page provides the user with information needed to track the billing of a visit. Claim numbers, payer information, the amount billed and billing status are available for claims that CareBridge generates and submits to the payer. To view pre-filtered reports on rejected or denied visits, click on the tabs at the top of the page. Visits that are sent to CareBridge with Check-In/Check-Out information and a **ClaimAction value** of **N** (N=New Claim) or **E** (E=Billed Externally) are listed on this page.

The screenshot shows the Billing page with a sidebar on the left containing navigation options like Dashboard, Discussions, Authorizations, Appointments, Visits, Billing (selected), Members, Employees, Claims, Settings, and Provider Admin. The main content area has a top navigation bar with 'PERSONAL FILTER', 'REJECTED VISITS', and 'DENIED VISITS'. Below this is a 'FILTERS' section with 'Sort by Date' and 'Saved Filters'. The main table lists visits with the following data:

MEMBER	DATE	CHECK IN TIME	CHECK OUT TIME	UPDATED DATE	EM...	AUTH #	SERVICE	APPT ID	CLAIM #	PAYER	STATUS	BILLED AMOUNT	PAID AMOUNT	BILLING STATUS
FRANK GRANT	05/22/2023	08:00 AM	10:00 AM	06/22/2023	AMANDA S	5C34FB3B2EF	S5125	12839		CB Test Payer	Missed and Completed (Manual)	\$20.00	\$0.00	Pending
FRANK GRANT	05/02/2023	12:00 PM	01:00 PM	06/22/2023	AMANDA S	5C34FB3B2EF	S5125	13830		CB Test Payer	Completed (Manual)	\$10.00	\$0.00	Pending
FRANK GRANT	04/11/2023	12:30 PM	01:00 PM	06/22/2023	AMANDA S	5C34FB3B2EF	S5125	12840		CB Test Payer	Completed (Manual)	\$5.00	\$0.00	Pending
FRANK GRANT	04/03/2023	03:10 PM	04:00 PM	06/22/2023	AMANDA S	5C34FB3B2EF	S5125	12442		CB Test Payer	Missed and Completed (Manual)	\$7.50	\$0.00	Pending

MEMBERS PAGE

Here, you can find Member ID numbers, the address on file, payer information, active authorizations, status, what offices and groups are being used, and information about most recent visits.

To see even more information, click on the **three dots menu** and select **Member Details**.

The screenshot shows the Members page with a sidebar on the left containing navigation options like Dashboard, Discussions, Authorizations, Appointments, Visits, Billing, Members (selected), Employees, Claims, Settings, and Provider Admin. The main content area has a top navigation bar with 'PERSONAL FILTER', 'ACTIVE MEMBERS', 'UNASSIGNED MEMBERS', and 'COMPLIANCE SCORE'. Below this is a 'FILTERS' section with 'Sort by Member Name' and 'Saved Filters'. The main table lists members with the following data:

MEMBER	MEMBER ID	MEDICAID ID	ADDRESS	PAYER(S)	EVV VENDOR(S)	ACTIVE AUTHS	STATUS	OFFICE(S)	GROUP(S)	LAST VISIT
JOHN ADAMS	22392	5781038J	919 HWY 1 W IOWA CITY, IA 52246	CB Test Payer		No	Active			03/02/2023
ALLISON BUSH	21848	8805272I	255 16TH ST SW SIOUX CENTER, IA 51250	CB Test Payer		No	Active			01/19/2023
PAUL CARTER	22389	6136100T	3201 MANAWA CENTRE DR COUNCIL BLUFFS, IA 51501	CB Test Payer		No	Active			
AMANDA CLINTON	22375	7016760A	5101 SE 14TH ST DES MOINES, IA 50320	CB Test Payer		Yes	Active			
JANE DAVIS	22392	8050640E	1800 N 16TH ST COUNCIL BLUFFS, IA 51501	CB Test Payer		No	Active			

The Member Details screen will show you general information, a **CALENDAR** and list view of **APPOINTMENTS** and **VISITS**, the **(EVV) CARE PLAN**, and **Authorizations**.

EMPLOYEES PAGE

On this page, you may view information about any caregivers and agency office workers that have been given access to the Provider Portal or mobile app. Administrators can use the **+ CREATE EMPLOYEE** button to create additional administrators who need access to view the portal. Caregivers do not need to be created manually- this information is populated based on the appointment and visit data that is received.

CLAIMS

The Claims page shows the status of all generated claim requests and associated payer claim numbers. Through the **claims details**, users can see all visits associated with the specific claim. This information can also be viewed via the *billing* page on a per-visit basis.

MEMBER NAME	MEMBER MEDICAID ID	UPDATED DATE	BILLED DATE	CLAIM #	PAYER CLAIM #	BILLED AMOUNT	PAID AMOUNT	PAYER NAME	SERVICE	CLAIM STATUS
FRANK GRANT	5965619R	06/22/2023 09:10 AM	06/22/2023 09:10 AM	IA18923		\$10	\$0.00	CB Test Payer	S5125	Queued
FRANK GRANT	5965619R	06/22/2023 09:10 AM	06/22/2023 09:10 AM	IA18922		\$5	\$0.00	CB Test Payer	S5125	Queued
FRANK GRANT	5965619R	06/22/2023 09:10 AM	06/22/2023 09:10 AM	IA18921		\$7.5	\$0.00	CB Test Payer	S5125	Queued
FRANK GRANT	5965619R	06/22/2023 09:10 AM	06/22/2023 09:10 AM	IA18920		\$20	\$0.00	CB Test Payer	S5125	Queued

CLAIMING PROCESS

Providers using a third-party vendor must submit visits with a *valid claim action* for CareBridge to take action on the received information. The following is a list of *valid claim actions* and their descriptions:

“N” = New claim: This is used to generate a new claim request or corrected claim to the payer or to update a billed visit. This is required for all payer partners that support claiming through CareBridge.*

“V” = Void Claim: This should be used to void a billed visit. Updates to billed visits will remain on hold until the prior claim reaches a terminal status.

“E” = Billed Externally: This indicates that the provider is submitting a claim request independently to the payer. CareBridge will NOT generate a claim request in these instances. This claim action should only be used for payer partners that *do not support claiming through CareBridge* or during an implementation window as approved on a case-by-case basis by an associated payer partner.

If there is no claim action (**“Null”**), CareBridge will not act on the visit from a claiming perspective, and the visit will appear on the *Visits* page rather than the *Billing* page. A scheduled appointment should not have a claim action.

* CareBridge generates the most appropriate claim action based on the information provided.

SETTINGS PAGE

The Settings page is contains individual tabs for setting up offices and groups, downloading documents, rate information, billing configurations, and vendor information.

The screenshot shows the 'SETTINGS' page with a sidebar on the left containing navigation options: Dashboard, Discussions, Authorizations, Appointments, Visits, Billing, Members, Employees, Claims, Settings (highlighted), and Provider Admin. The main content area is titled 'EVV VENDOR' and includes a search bar for 'Appointment ID'. Below the search bar is a 'Filters' section. The main table has the following data:

VENDOR NAME	PAYER	SERVICE TYPE	EFFECTIVE START DATE	EFFECTIVE END DATE	UPDATED DATE
CareBridge	CB Test Payer	Home Health	01/01/2022		09/26/2022
CareBridge	CB Test Payer	Personal Care	11/01/2021		09/26/2022

At the bottom right of the table, it says 'Rows per page: 5' and '1-2 of 2'.

PROVIDER ADMIN PAGE

The provider Administration page displays important information regarding the provider such as alternate business names, Medicaid ID, NPI, and eligibility dates with specific payers. The information on this page is received directly from CareBridge's payer partners. Users can view any provider level alerts through the provider details page.

The screenshot shows the 'PROVIDER > ADMINISTRATION' page. The sidebar on the left has 'Provider Admin' highlighted in yellow. The main content area is titled 'FILTERS' and includes a 'Sort by' dropdown and a 'Saved Filters' dropdown. The main table has the following data:

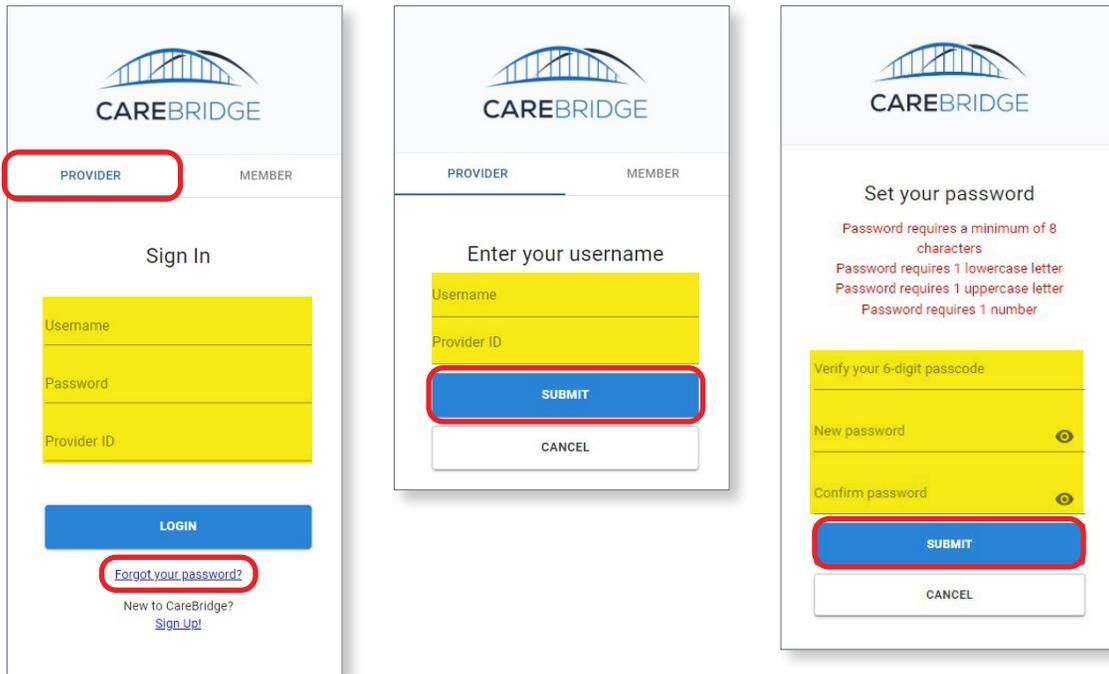
NAME	MEDICAID ID	ALTERNATE PROVIDER ID	NPI	PAYER	EFFECTIVE START DATE	EFFECTIVE END DATE	STATUS
CAREBRIDGE TRAINING	128886116		1234567893	CB Test Payer	01/01/2019	12/31/9999	Active

Below the table, there is an 'EXPORT TO FILE' button and pagination information: 'Rows per page: 10' and '1 of 1'.

WHAT IF I FORGET MY PASSWORD?

If you forget your password, click the **Forgot Your Password?** button just below the blue **LOGIN** button. On the next page, enter your **username** and **Provider ID** then click **Submit**.

You will then be able to reset your password.



SUPPORT INFORMATION

If you have any questions or need help, email the CareBridge Support Center at evvintegrationsupport@carebridgehealth.com or call us at 1 (844) 920-0989.

OUTBOUND AGGREGATION

In some states, in addition to generating claims for payer partners, CareBridge also sends visit data received to other aggregators (see the table below).

OUTBOUND INTEGRATIONS BY STATE	
State	Aggregator
AR	Authenticare
NJ	HHAeXchange
NJ	Horizon

VIEW AGGREGATION STATUS

The aggregation status can be viewed through the **Visits** and **Billing** pages. There are three statuses:

- **Completed:** The visit data has been successfully sent to the aggregator
- **Pending:** The visit data has not been sent but will soon.
- **Failed:** CareBridge has sent the data and the aggregator has rejected it.

Aggregation History
×

Appointment ID: [REDACTED]
 Payer: Horizon
 Caregiver: [REDACTED]
 Member: [REDACTED]

HHAEXCHANGE
HORIZON AGG

EVENT TIME	ACTION	STATUS	ERRORS	TRANSACTION ID	FILE NAME
06/28/2023 10:49	New	Failed	101002 - Provider is not found based on Provider Tax ID	[REDACTED]	[REDACTED]
06/28/2023 10:04	New	Pending		[REDACTED]	[REDACTED]
06/28/2023 10:04	New	Pending		[REDACTED]	[REDACTED]

Rows per page: 10 1-3 of 3 < 1 >

CLOSE

Billed

Externally ⋮

Visit Details

Authorization Details

Member Details

Aggregation History

HHA AGG STATUS	HORIZON AGG STATUS
Failed	Completed

Additional details such as aggregator error descriptions, timestamps, transaction ID, and file names can be viewed by clicking the actions icon (**three vertical dots**) and select **Aggregation History**.

RESOLVING AGGREGATION ERRORS

If there are any aggregation errors, depending on the aggregator and error type, users will need to resolve them by either:

- Updating the EVV data in your third-party system and resubmitting to CareBridge
- Updating the information in the aggregator's system

If you have questions about any of the aggregator errors/error descriptions you will need to contact the aggregator.

FILE TYPES

There are three critical files that CareBridge generates and returns to third-party EVV for providers to access via their vendor system:

- 1) The Error Response File
- 2) The Appointment Error Report
- 3) The Appointment Status Report

The **Error Response File** functions as the receipt for providers when they submit appointment and visit data to CareBridge. This report will detail any errors and/or alerts triggered by any appointments and visits in the file. It will also include file-level errors that may prohibit the file from importing into CareBridge.

The **Appointment Error Report** is a daily report that displays all unresolved alerts that prevent data from passing through CareBridge's validations. This report is vital in the reconciliation process as any appointments and visits that have triggered alerts must be addressed by the provider to be billed and/or aggregated to their respective payer. The Error Report also includes aggregation errors.

The **Appointment Status Report** is a daily report that displays the status of the provider's appointments and visits (This information can also be viewed via the CareBridge portal). This includes claim information/ status, aggregation status, and an indication if an appointment or visit has an alert (alerts are detailed in full via the Error Report). Once a visit has reached a terminal claim status or has been successfully aggregated, it will be included in the report once and will no longer be present in future reports.