



CAREBRIDGE

TRAINING GUIDE

CareBridge Payer Portal Electronic Visit Verification (EVV)



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INTRODUCTION

OVERVIEW

This Training Guide is intended to help MCO employees understand how to best utilize the CareBridge Payer Platform to manage provider agencies and the members they serve on a day-to-day basis. If at any point you have questions, please reach out to your CareBridge Client Engagement Director.

If you have questions, our team is always here to help. Just hit the Support button in the lower right corner of the portal or contact us directly via email: tnevv@carebridgehealth.com or call us at 1 (844) 482-0256.

WHAT IS ELECTRONIC VISIT VERIFICATION (EVV)?

EVV uses technology to record the times and locations that Caregivers or Direct Service Workers (DSRs) Check-In and Check-Out of an Appointment. EVV has proven to accurately log Caregiver's/ DSW's times and minimize or eliminate inappropriate claims.

Under the federal 21st Century Cures Act, EVV is required to be used by Providers, Caregivers, Attendants, and Homemakers that deliver personal care, attendant care, and homemaker services (in 15-minute increments or daily) to Medicaid beneficiaries. The 21st Century Cures Act requires that EVV systems must collect and verify the following 7 items:

- Type of service performed
- Beneficiary receiving the service
- Caregiver providing the service
- Date of the service
- Location of the service
- Time the service begins
- Time the service ends



WHAT IS CAREBRIDGE?

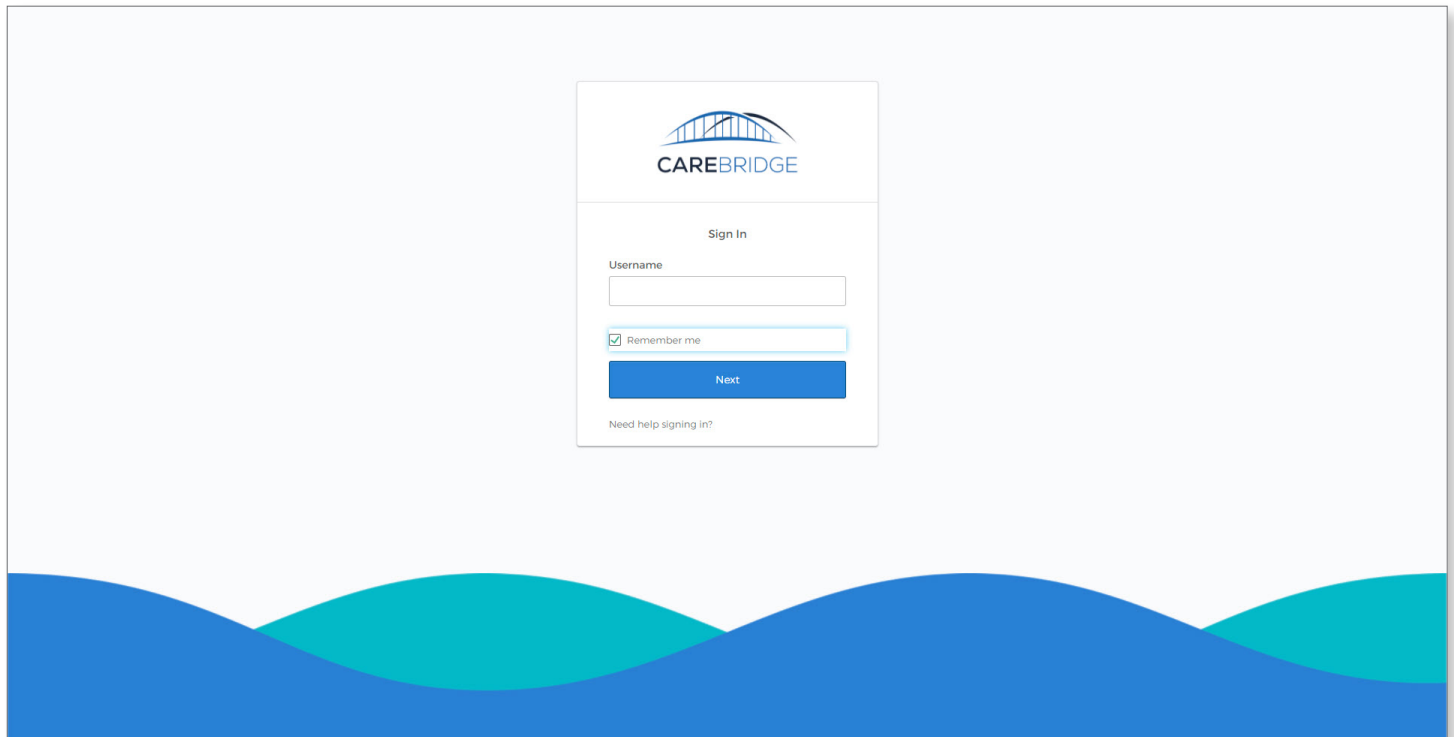
CareBridge is an EVV and EVV aggregation company formed to improve the processes that enable caring for people (members) who receive Long-Term Services and Supports (LTSS). We offer LTSS solutions including Electronic Visit Verification (EVV) that can be utilized via a mobile phone, tablet, landline,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

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

PLATFORM OVERVIEW AND SETUP

OVERVIEW

The CareBridge Payer Portal is a conduit between your organization, provider agencies, and caregivers. In an intuitive and user-friendly solution, it brings together all the relevant information about members, authorizations, providers, visits, and claims to effectively manage providers and ensure members receive the highest quality care.



The following pages will provide an overview of the basic features of the CareBridge Payer Portal.

SIGNING IN

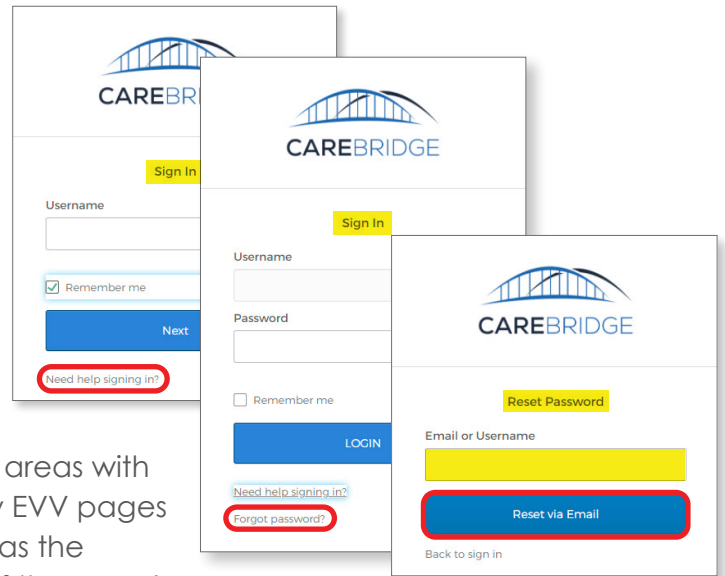
1. Navigate to <https://tnmco.carebridgehealth.com>
2. Enter your username and click **Next**
3. Enter your password and click **LOGIN**

SIGNING IN FOR THE FIRST TIME

1. Your organization's administrative user will create a profile and a temporary password and communicate both to the new user
2. The new user will navigate to <https://tnmco.carebridgehealth.com>
3. They will enter their username and click **Next**
4. They will enter their temporary password and click **LOGIN**
5. They will then be prompted to create a permanent password
6. After creating a permanent password, their account will be active

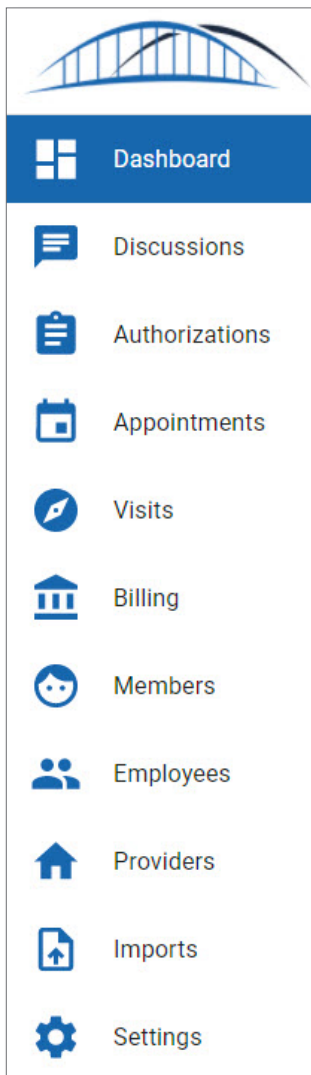
RESETTING YOUR PASSWORD

If you forget and/or need to reset your password, go to the 'Sign In' page. Immediately below the large blue **Next** button, click the **Need help signing in?** link, then the **Forgot password?** link when it appears. On the 'Reset Password' screen, enter your email address and click **Reset via Email**. You will then receive an email with instructions on how to finish resetting your password.



NAVIGATION

The CareBridge Payer Portal is organized into 10 main areas with buttons in the left navigation pane. The seven primary EVV pages display data in a table format with the **Personal Filter** as the default view. The **Personal Filter** is an unfiltered view of the page's entire data table. Most pages have additional views that are pre-filtered to help you quickly view important subsets of data. 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 your organization and externally with providers and caregivers
- **Authorizations:** Displays the details and critical information for all authorizations, including status and scheduled utilization percentage
- **Appointments:** Displays upcoming scheduled appointments and allows employees to view late and missed appointments
- **Visits:** Shows completed visits and important details such as whether it was 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 members and their critical information
- **Employees:** Lists your organization's employees and allows you to create and manage employee profiles
- **Providers:** Lists all providers and their relevant information
- **Imports:** Allow employees to upload/download files directly to/from the portal
- **Settings:** Allows employees to 1) create groups that you can assign providers and members to for more efficient business management and 2) view and manage imported authorization, member, and provider data files

EMPLOYEES PAGE

The Employees page provides a table of all your organization's employees and their profile information. From the Employees page, you can view, modify, and create new employee profiles.

The screenshot displays the 'EMPLOYEES' page in the CareBridge Payer Portal. The page features a sidebar on the left with navigation options: Dashboard, Discussions, Authorizations, Appointments, Visits, Billing, Members, Employees (highlighted), Claims, Providers, and Settings. The main content area shows a table of employees with columns for EMPLOYEE, USERNAME, EMAIL, PHONE, ROLE, and STATUS. The first row is for 'Ronald' with status 'Active'. A red circle highlights the 'Employee Details' link in the first row. A green button labeled '+ CREATE EMPLOYEE' is located in the top right. The page also includes a search bar at the top and a 'PERSONAL FILTER' section with 'Sort by' and 'Saved Filters' options. At the bottom, there is an 'EXPORT TO FILE' button and pagination information: 'Rows per page: 10', '1-10 of 140', and page numbers '1 2 3 ... 14'.

To view or edit details in an employee's profile, click the **three dots** on the far right of the row and select **Employee Details**. To enable editing in the Employee Details screen, click the **pencil icon** next to their name. When finished, click **Save**.

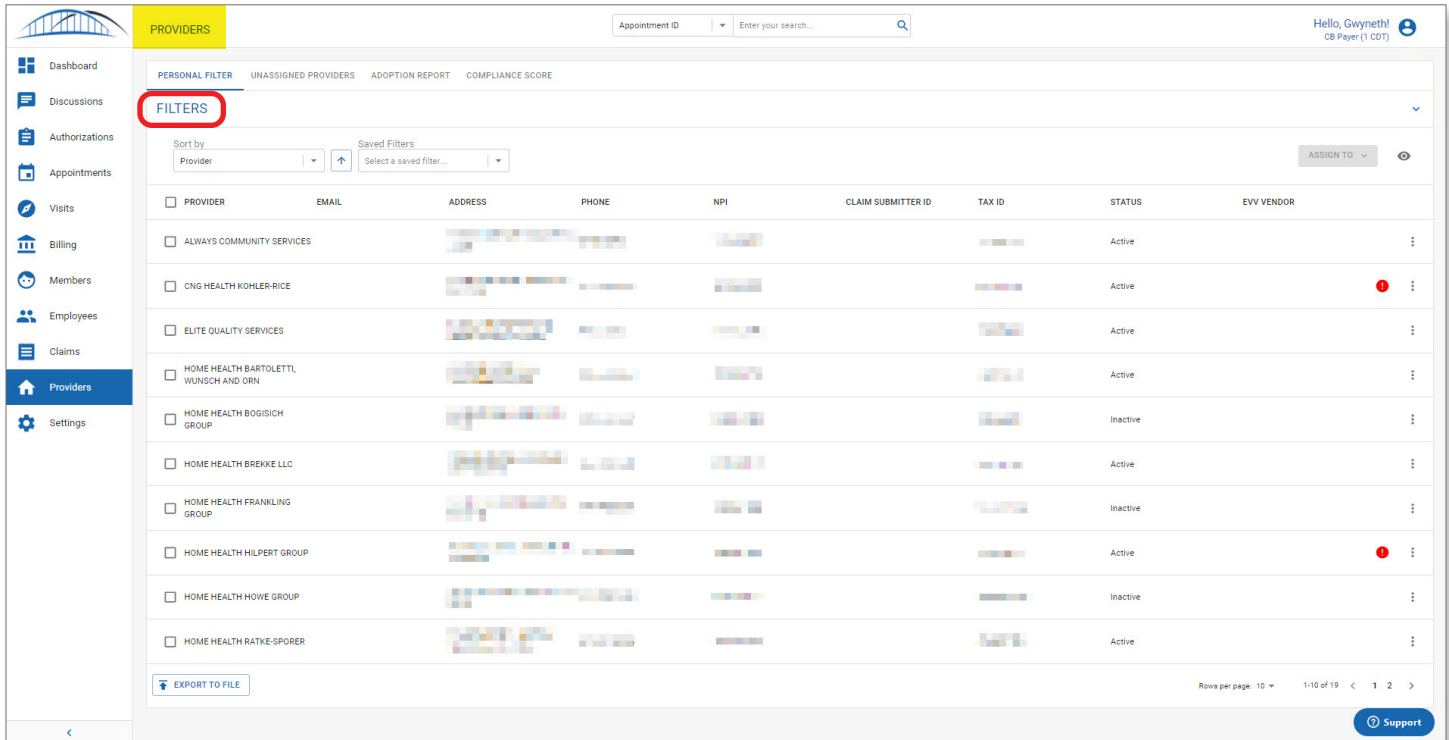
To add an employee to your organization's CareBridge account, navigate to the Employees page and click **Create Employee** in the top right. *The administrative user will manually create the employee's profile, including their username and a temporary password and **must communicate the username and temporary password to the new user.***

When the new user logs in for the first time, they will be prompted to create a permanent password. After that process is complete, their profile will be active, and they can perform their functions within the Payer Portal.

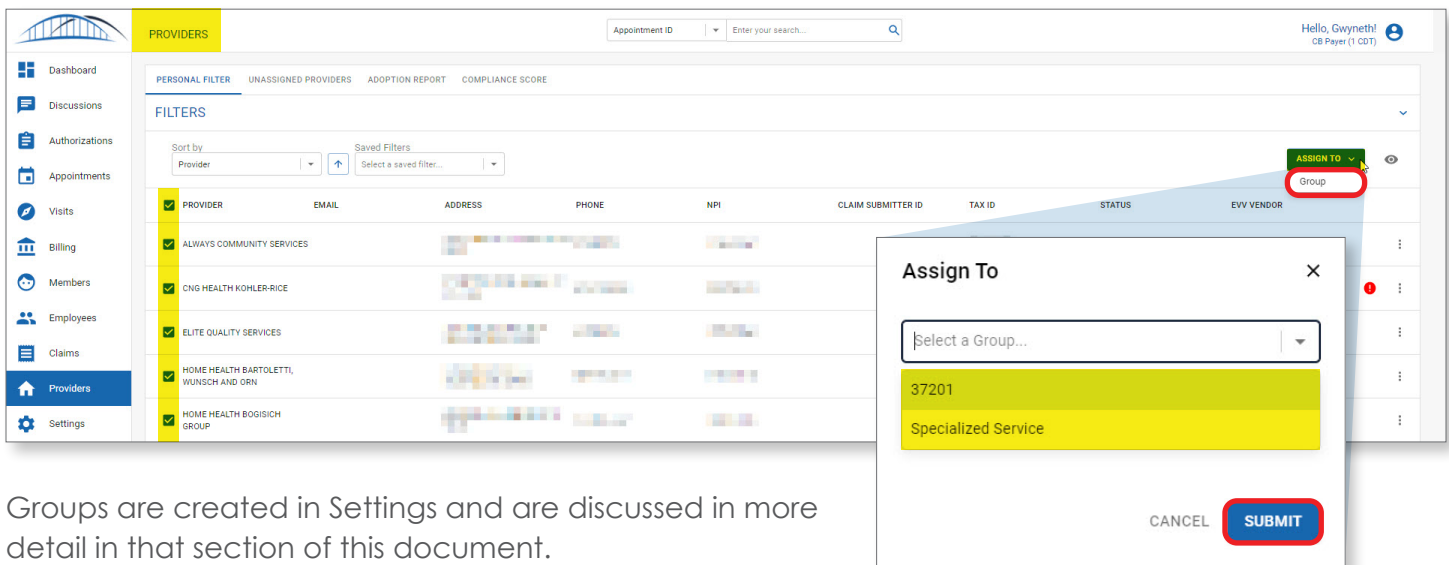
The screenshot displays the 'Employee Details' page for 'Ronald'. The page shows a form with fields for Username, Email, First Name, Last Name, Phone Number (optional), and Role. A red circle highlights the pencil icon next to the name 'Ronald'. A green button labeled 'SAVE' is at the bottom. The page also includes an 'Active' toggle switch.

PROVIDERS PAGE

The Providers page is unique to the Payer Portal and is a list of all the providers in your network. Provider files automatically update weekly through SFTP. Click **FILTERS** to find specific providers or use any combination of variables to create custom lists.



To help manage providers, you can assign them to groups. To assign one or many providers to a group, click the **check box** to the left of the provider, click the **ASSIGN TO** button in the top right of the table, click the **Group** link, then choose the appropriate group. Click **SUBMIT**.



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

IMPORTS PAGE

FILE IMPORT AND EXPORTING REPORTS

CareBridge receives 3 files from health plans through automatic secure file transfer protocol (SFTP), a Member file, an Authorizations file and a Provider file. The files for members and authorizations update daily, and the provider file updates weekly. Health plan employees can view the import history, including any errors and warnings, in the CareBridge portal by navigating to the Settings page and selecting the **Imports** tab. Note the key details: Imported date and time, file type, status, # of records, warnings, and errors. To view the individual files and any warnings or errors, click the **three dots** on the right of the table and select **Import Details**.

The screenshot shows the 'IMPORTS' tab in the CareBridge portal. The table contains the following data:

IMPORTED DATE/TIME	FILE NAME	FILE TYPE	SOURCE	STATUS	# OF RECORDS	WARNINGS	ERRORS
2022-03-23 14:45:52 CDT	Payer Portal Example Claim Report.csv	Clearinghouse Claim Response	Manual Upload	Failed	0	0	0

A dropdown menu for the first row shows the following options: **Import Details**, **Download File**, and **Download Response File**.

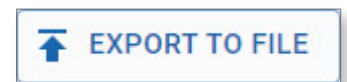
Users can send a file to be processed from the *Exports* tab within the *Imports* page. Users are also able to download and view exported files.

The screenshot shows the 'EXPORTS' tab in the CareBridge portal. The table contains the following data:

IMPORTED DATE/TIME	FILE NAME	FILE TYPE	STATUS	# OF RECORDS
2022-03-20 06:00:01 CDT	TEST_100013234_Overlaps_Amerigroup_Iowa_...	Appointment Overlap	Generated	0

A dropdown menu for the first row shows the following options: **Download File** and **Send File**.

Data tables can be exported from the CareBridge portal as comma-separated value files. When viewing data in the portal, on any of the main pages, use the **FILTERS** to create a table you need and click **EXPORT TO FILE** in the bottom left of the page. The generated file will be available in the **DOCUMENTS** sub-tab under *Settings*.



Export Successful ✕

Your document is being generated. 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

MEMBERS PAGE

The Members page allows users to view information for all members currently listed in the Payer Portal. The Member file is provided daily to the MCO(s) by the state, and to CareBridge by the MCO(s).

VIEW MEMBERS

From the Members page, you will see a table of all members. The table can be filtered on multiple parameters by clicking **FILTERS** or sorted using the **Sort by** drop-down at the top left of the table.

The screenshot shows the 'MEMBERS' page in the CareBridge Payer Portal. The interface includes a sidebar with navigation options like Dashboard, Discussions, Authorizations, Appointments, Visits, Billing, Members (highlighted), Employees, Providers, Imports, and Settings. The main content area has a 'MEMBERS' header with a search bar and a 'Select a filter' dropdown. Below this, there are tabs for 'PERSONAL FILTER', 'ACTIVE MEMBERS', 'UNASSIGNED MEMBERS', and 'COMPLIANCE SCORE'. The 'FILTERS' tab is selected, showing a 'Sort by' dropdown set to 'Member Name' and a 'Saved Filters' dropdown. A table of members is displayed with columns: MEMBER, MEMBER ID, ADDRESS, PROVIDER, EVV VENDOR(S), ACTIVE AUTHS, STATUS, GROUP(S), and LAST VISIT. The table lists members such as MAWI, RAM, DANIELA, KIRBY, MICHAEL, EMILY, JAMIE, and KELSEY. A 'Support' button is visible in the bottom right corner.

VIEW MEMBER DETAILS

To view or edit more details about a member, select the menu icon (3 dots) on the right side of the member's row and select Member Details.

This screenshot is similar to the previous one but highlights the process of viewing member details. A red circle is drawn around the three-dot menu icon on the right side of the first member row (MAWI). A dropdown menu is open, showing 'Member Details' and 'Provider Details' as options.

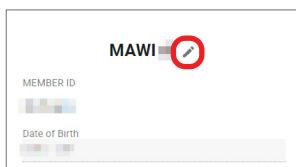
From the Member Details screen, you can view general member demographic information, a **CALENDAR** of the member's schedule, all **ALERTS** that are attached to the member, a list view of all upcoming **APPOINTMENTS** and completed **VISITS** as well as any **Discussions** and **Authorizations**.

The screenshot displays the MAWI Member Details interface. On the left is a yellow sidebar with member information: MEMBER ID, Date of Birth, Additional Identifiers (None), Eligibility Dates (06/01/2020 - 12/31/2199), Primary Address (None), and Secondary Address(es). The main area features a yellow header with tabs for CALENDAR, ALERTS, APPOINTMENTS, and VISITS. The CALENDAR tab is active, showing a weekly view for 20-26 MARCH 2022. A 'Discussions' list is expanded, showing a search bar, a 'RESET FILTERS' button, and a table with columns: CREATED BY, ASSIGNED TO, TYPE, SUBJECT, CREATED, and LAST UPDATED. Below this, an 'Authorizations' list is expanded, showing a table with columns: START DATE, END DATE, AUTH #, UNITS, SERVICE, MODIFIERS, STATUS, and EMPLOYEE. A red circle highlights the expand filter icon (a downward arrow) in the top right of the Discussions list, and another red circle highlights the 'Authorization Details' link at the end of a row in the Authorizations list.

The lists of **ALERTS**, **APPOINTMENTS**, **VISITS**, **Discussions**, and **Authorizations** can all be filtered by clicking the expand filter icon (▼) in the top right of each list. You can navigate to the details of any of them by clicking the **options menu (3 dots)** at the far right of the row.

MODIFY MEMBER DETAILS

In some instances it may be necessary for an employee to update a member's primary address or phone number to reflect more up-to-date changes than have been made within the Member file. Providers cannot modify the Member file, but they can request to add or change a primary phone number or address in the member's details within the CareBridge Solution. These changes will not affect the Member file as received by CareBridge and, must be approved by their MCO. Approval can be configured to happen automatically or require manual approval by MCO employees, and new primary phone numbers and addresses cannot be used by the provider until approved. To be clear, these changes are *in addition to* information in the Member file and exist *only within the CareBridge Solution*.



In order to modify member details, the user must select the **pencil icon** next to the member's name on the *Member Details* screen. After selecting the **pencil icon**, the user may then begin modifying member information by selecting the edit icon next to the field.

Upon selecting the **pencil icon**, the user will be presented with a dialog to input the new/corrected address or phone number (Figure 21). The **Address Type** drop-down provides a place to record where the member is staying if not at home - ie "Church", "Family Member's Home" or "Temporary Residence". Once **SUBMIT** is selected by the provider, the address or phone number will be sent to the Payer (MCO) for approval. Until it is approved, the address or phone number will not be available

to use for the purposes of scheduling an appointment or completing a visit. The request can be viewed at any point in the *Discussions* section of *Member Details*.

ASSIGN TO A GROUP

To help manage members, users can assign them to **Groups**. **Groups** is an open-ended tool designed to help manage members and providers. To assign one or many members to a group, click the check box to the left of their name, click the **Assign To** button in the top right of the table, then choose the appropriate Group and click **SUBMIT**.

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

MEMBER REPORTS

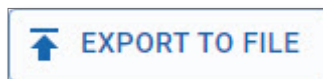
By default, the **PERSONAL FILTER** is selected when navigating to the Members page. It can be used to filter and sort the members table in a variety of ways to return the subset of members that is most useful. In addition to the **PERSONAL FILTER**, the Members page has three pre-filtered lists to help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

- **ACTIVE MEMBERS** shows all active members.
- **UNASSIGNED MEMBERS** shows all members who have not been assigned to a **Group**.
- **COMPLIANCE SCORE** returns a list of all members sorted by compliance score (*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 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.

Figure 7. Export to File



CREATE OR MODIFY MEMBER CARE PLANS

From Member Details, an agency employee is able to create a Care Plan for a member. A Care Plan is a list of activities to be performed by a caregiver with the member. By selecting the 'Add Activity' button (Figure 18), the Care Plan Activity modal will open and the activity and frequency can be selected along with a comment, if applicable (Figure 19). These Care Plan activities can be edited at any time by selecting the menu icon in the row of the activity, and selecting 'Edit Activity'. Additionally, it is possible to view previous versions of the Care Plan by selecting the drop-down on the top right of the table. You can view the 'Check-in & Check-out' section below for more information on how the Care Plan is presented to caregivers for completion as a part of a visit.

Figure 8. Member Care Plan screen

The screenshot shows the 'Member Care Plan' screen for a member named Camille Ace. The interface includes a sidebar with navigation options like Dashboard, Discussions, Authorizations, Appointments, Visits, Billing, Members (selected), Employees, and Settings. The main content area is divided into sections: Member Details (Primary and Secondary Address, Email, Primary Phone Number), a navigation bar (CALENDAR, APPOINTMENTS, VISITS, CARE PLAN), a table of activities, and a Discussions section.

ACTIVITY	FREQUENCY	COMMENT	LAST PERFORMED
Apply/ Remove (Specify)	3x per week		
Change Linens	2x per week		
BP	3x per week		
Bathing	1x per week		
Bed Bath	1x per week		

The 'Edit Primary Address' modal form contains the following fields and options:

- Street Address Line 1: 5 VILLAGE STREET
- Street Address Line 2 (optional): 272
- City: MEMPHIS
- State: TN
- Zip Code: 38181
- Address Type: Select..
- Share with Payer: CB Payer
- Buttons: CANCEL, SAVE

ASSIGN MEMBERS TO OFFICES AND/OR GROUPS

Use the check boxes next to Member names to select them, then select the 'Assign To' button in the top right of the table to assign Members to Offices or Groups (Figure 22 and Figure 23). (See the 'Settings' section for more info on the functionality that Offices and Groups provide.):

Figure 9. Member 'Assign To' Drop-down

MEMBER NAME	MEMBER ID	ADDRESS	PAYER(S)	ACTIVE AUTHS	STATUS	OFFICE(S)	LAST VIS
<input checked="" type="checkbox"/> Camille Ace	1052	5 VILLAGE STREET 272 MEMPHIS, TN 38181	CB Payer	No	Active	Main Office	04/01/2020
<input checked="" type="checkbox"/> Nelson Ashfield	1018	0 WAUBESA PARK NASHVILLE, TN 37240	CB Payer	No	Active	Main Office	01/01/2020
<input checked="" type="checkbox"/> Shae Baiss	1074	2 MEADOW VALE PLAZA KNOXVILLE, TN 37931	CB Payer	No	Active	Main Office	03/29/2020

MEMBER REPORTS

By default, the 'Personal Filter' is selected upon navigating to the Members page (Figure 23). The 'Personal Filter' can be used to filter and sort the Members table in a variety of ways to return the subset of Members that is most useful.

In addition to the 'Personal Filter', there are three Reports that have predefined filters to help quickly navigate to useful Member data (Figure 24).

- **Active Members Report:** This report returns a list of all active Members.
- **Unassigned Members Report:** This report returns a list of all Members who have not been assigned to an Office.
- **Compliance Score Report:** This report returns a list of all Members (ascending order) by Compliance Score.

Figure 24. Member Reports

PERSONAL FILTER	ACTIVE MEMBERS	UNASSIGNED MEMBERS	COMPLIANCE SCORE
FILTERS			

In order to export any of the data on the Members Page to a PDF, XLS, or CSV file, select the 'Export' button on the bottom of the page (Figure 25). Upon selecting the file type, the document will begin downloading and will be available on the Settings page under the 'Documents' sub-tab.

ELECTRONIC VISIT VERIFICATION (EVV) WORKFLOWS

OVERVIEW

The following will help introduce the features and functionality associated with EVV in the CareBridge Platform and how it can be used as a tool to help easily manage day-to-day workflows.

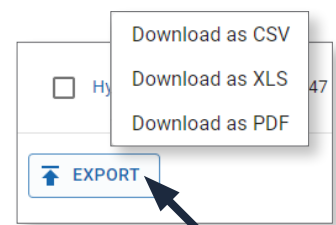
AUTHORIZATIONS

The Authorizations page in the CareBridge Provider Portal allows Agency Employees to view, acknowledge, and manage Authorizations that are available to the Provider. The Authorizations page (Figure 26) is populated with data from the Authorizations file which updates on a recurring basis with the most recent information.

Figure 26. Authorizations page

MEMBER	RECEIVED DATE	START DATE	END DATE	UNITS	AUTH #	SERVICE	MOD	SCHEDULED UTILIZATION %	PAYER	STATUS	EMPLOYEE
Nelson Ashfield	06/04/2020	10/11/2019		814	1016	S5130		97.3	CB Payer	✓ Acknowledged	Bob Frapples
Hurley Pioll	06/04/2020	01/08/2020		57	1055	S5135		98.2	CB Payer	✓ Acknowledged	Gwyneth Mceuen
Radcliffe Tillot	06/04/2020	10/22/2019	04/27/2020	686	1070	S5130		60.35	CB Payer	✓ Acknowledged	Paige Turner
Moyra Napthine	06/04/2020	12/13/2019	09/05/2020	52	1014	S5135		103.85	CB Payer	✓ Acknowledged	Gwyneth Mceuen
Hube Vardie	06/04/2020	12/11/2019	05/24/2020	299	1045	S5125		76.3	CB Payer	✓ Acknowledged	Shane Miller
Ingamar Horley	06/03/2020	12/08/2019		917	1076	S5150		474.2	CB Payer	✓ Acknowledged	Todd Leri
Wayne Luscott	06/03/2020	12/09/2019	06/14/2020	636	1054	T1019		78.6	CB Payer	✓ Acknowledged	Sal Monella
Orren Van Hault	06/03/2020	11/03/2019	10/10/2020	114	1053	S5135		98.2	CB Payer	✓ Acknowledged	Matt Jones

Figure 25. Member 'Export' Options



VIEW AUTHORIZATIONS

The Authorizations page, contains a tabular view of all Authorizations that are currently available in the Provider Portal (Figure 26). This table can be filtered and sorted with a number of parameters by selecting the expand arrow in the 'Filters' component (Figure 27) or the 'Sort by' drop-down at the top left of the table (Figure 28).

Figure 27. Authorizations

PERSONAL FILTER LOW UTILIZATION HIGH UTILIZATION UNACKNOWLEDGED UNASSIGNED

FILTERS

Search By Name or Member ID: Name or ID

Search By Auth#: Auth #

Received Dates: 05/07/2020 - 08/07/2020

Start Date: Start Date - End Date

End Date: Start Date - End Date

Payer: Select Payer

Status: Select...

Assigned To: Select...

Service: Select...

Utilization: Utilization

Pre-Billing Check(s): Select...

Office(s): Select...

Figure 28. Authorizations 'Sort by' Options

Sort by

Received Date

Member

Received Date

Start Date

End Date

Units

Auth

Service

Scheduled Utilization %

Acknowledge Receipt of an Authorization

When Authorizations are made available to a Provider, they will display on the Authorizations Page with a status of 'Received'. The user will need to acknowledge the Authorization by clicking the 'Received' button and selecting 'Acknowledge' or 'Decline Authorization' from the drop-down (Figure 29). This will update the status in the table and will be communicated to the MCO for that Authorization.

Figure 29. Acknowledge Authorizations

MEMBER	RECEIVED DATE	START DATE	END DATE	UNITS	AUTH	SERVICE	MOD	SCHEDULED UTILIZATION %	PAYER	STATUS	EMPLOYEE
Edi Spargo	04/14/2020	12/31/2019		447	1099	S5130		0	CB Payer	Received	Select...
Aleta Massy	04/14/2020	12/29/2019	04/12/2020	111	1011	S5130		0	CB Payer	Acknowledge	Pete Sariya
Gerik Foucar	04/14/2020	10/29/2019		399	1100	T1019		0	CB Payer	Acknowledged	Adam Schroeder

ASSIGN EMPLOYEE TO AN AUTHORIZATION

To assign an Employee to an Authorization, select the drop-down and choose the Employee from the list (Figure 30). This will update the assignment in the table.

Figure 30. Assign Authorizations Drop-down

MEMBER	RECEIVED DATE	START DATE	END DATE	UNITS	AUTH	SERVICE	MOD	SCHEDULED UTILIZATION %	PAYER	STATUS	EMPLOYEE
Gusti Pond	04/13/2020	11/26/2019		252	1097	S5135		73.02	CB Payer	Acknowledged	Select...

- Unassigned
- Adam Schroeder
- Alan Huffman
- Amber Gooch
- Andres Boga
- Andres Puig
- Anna Mull
- Anna Sthesia
- Ave Marouka
- Barb Ackue

SCHEDULE APPOINTMENTS

When viewing an Authorization on the Authorizations Page, a user can navigate directly to the appointment scheduling workflow. By selecting the calendar icon on the Authorizations Page (Figure 30), they can view the Appointment Scheduling dialog. For more information about scheduling appointments, refer to the 'Appointments' section.

Figure 31. Figure 31 Schedule Appointments from Authorizations

MEMBER	RECEIVED DATE	START DATE	END DATE	UNITS	AUTH	SERVICE	MOD	SCHEDULED UTILIZATION %	PAYER	STATUS	EMPLOYEE
Ker Yoakley	04/12/2020	12/08/2019		489	1086	S5150		31.08	CB Payer	Acknowledged	Sam Pita

AUTHORIZATION DETAILS

In order to view more details about an Authorization, select the menu icon (3 dots) on the right side of the row for the Authorization and select 'Authorization Details' (Figure 32).

Figure 32. Figure 31: Authorizations Menu

MEMBER	RECEIVED DATE	START DATE	END DATE	UNITS	AUTH	SERVICE	MOD	SCHEDULED UTILIZATION %	PAYER	STATUS	EMPLOYEE
Ker Yoakley	04/12/2020	12/08/2019		489	1086	S5150		31.08	CB Payer	✓ Acknowledged	Sam Pita
Pippo Dudeney	04/12/2020	11/20/2019		629	1089	S5150		36.25	CB Payer	✓ Acknowledged	Anna Sthe

From the Authorization Details page (Figure 33), the user can view start/end dates, service codes, modifiers, units, limits, schedules, utilization percentages, as well as upcoming appointments and completed visits associated with the Authorization.

Figure 33. Authorization Details

Authorization 1086
12/08/2019 - None

Employee: <input type="text" value="Sam Pita"/>	Auth Number: <input type="text" value="1086"/>
Start Date: <input type="text" value="12/08/2019"/>	End Date: <input type="text" value="None"/>
Service Code: <input type="text" value="S5150"/>	Modifiers: <input type="text" value="None"/>
Units: <input type="text" value="489"/>	Weekly Limit: <input type="text" value="None"/>
Units Scheduled / Authorized: <input type="text" value="458.000/ 489 - 93.66%"/>	Units Billed / Authorized: <input type="text" value="12.000/ 489 - 2.45%"/>

Leave notes here...

Attach file

CANCEL SAVE

	APPOINTMENTS	VISITS
	05/31/2020 Prashanth Donepudi	5 hour(s)
	01/22/2020 Alan Huffman	3 hour(s)
	05/01/2020 Diane Seloff	8 hour(s)
	02/11/2020 Joe Lynch	7 hour(s)
	05/21/2020 Prashanth Donepudi	3 hour(s)
	06/15/2020 Randy Smith	8 hour(s)
	01/27/2020 Alan Huffman	7 hour(s)
	04/01/2020 Randy Smith	6 hour(s)
	05/26/2020 Prashanth Donepudi	5 hour(s)
	03/17/2020 Prashanth Donepudi	3 hour(s)

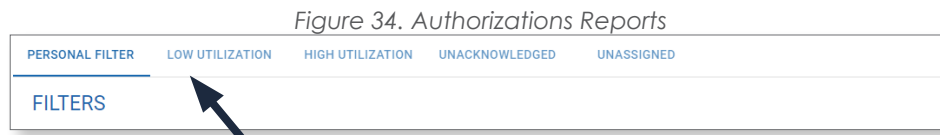
1-10 of 21 < >

AUTHORIZATIONS REPORTS

By default, the 'Personal Filter' is selected on the Authorizations Page (Figure 33). The 'Personal Filter' can be used to filter and sort the Authorizations table in a variety of ways to return the subset of Authorizations that is most useful.

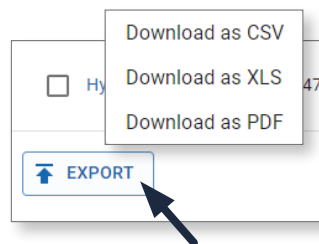
In addition to the 'Personal Filter,' there are three Reports that have predefined filters to help quickly navigate to useful Authorizations data (Figure 34).

- **Low Utilization Report:** This report returns a list of all authorizations that have less than 25% of the authorized units scheduled. This helps to focus attention on authorizations that may need appointments scheduled for them.
- **High Utilization:** This report returns a list of all authorizations with greater than 75% authorized units scheduled.
- **Unacknowledged Auths Report:** This report returns a list of all authorizations that have not yet been acknowledged or declined.
- **Unassigned Auths Report:** This report returns a list of all authorizations that have not yet been assigned an employee.



In order to export any of the data on the Authorizations Page to a PDF, XLS, or CSV file, select the 'Export' button on the bottom of the page (Figure 35). Upon selecting the file type, the document will begin downloading and will be available from the Settings Page under the Documents sub-tab.

Figure 35. Authorizations 'Export' Options



There are also several actions that can be utilized directly from the Authorization Details page:

- Assign an Employee to the Authorization.
- Add notes to the Authorization.
- The 'Add Appointment' button will take the user to the Appointments Scheduling dialog. For more information about scheduling appointments, refer to the 'Appointments' section.
- The 'Manual Entry' button takes the user to the Manual Entry dialog. For more information about manual entries, refer to the 'Check-In & Check-Out' section.
- The 'Save and Close' button will close Authorization Details.

APPOINTMENTS

The Appointments page in the CareBridge Provider Portal allows Agency Employees to view upcoming, scheduled appointments as well as identify and act upon late or missed visits.


Figure 36. Appointments Page

MEMBER	DATE	START TIME	END TIME	APPT ID	EMPLOYEE	AUTH #	SERVICE	MODIFIERS	STATUS	PAYER
Camille Ace	06/04/2020	09:00 am	12:00 pm	549849	Randy Smith	1051	S5150		Scheduled	CB Payer
Camille Ace	05/25/2020	09:00 am	01:00 pm	549858	Andres Pulig	1051	S5150		Scheduled	CB Payer
Camille Ace	05/20/2020	12:00 pm	04:00 pm	549861	Monya Hunter	1051	S5150		Scheduled	CB Payer
Camille Ace	06/09/2020	10:00 am	05:00 pm	549846	Monya Hunter	1051	S5150		Scheduled	CB Payer
Nelson Ashfield	05/17/2020	08:00 am	12:00 pm	549120	Prashanth Donepudi	1016	S5130		Scheduled	CB Payer
Nelson Ashfield	05/29/2020	12:00 pm	08:00 pm	549131	Diane Seloff	1016	S5130		Scheduled	CB Payer
Nelson Ashfield	06/01/2020	09:00 am	04:00 pm	549136	Sam Pita	1016	S5130		Scheduled	CB Payer
Nelson Ashfield	06/04/2020	12:00 pm	03:00 pm	549139	Diane Seloff	1016	S5130		Scheduled	CB Payer

SCHEDULE APPOINTMENTS

For appointments to appear on the Appointments page they must first be scheduled. To schedule an appointment, first navigate to the Authorizations page (see the 'Authorizations' section) and select the calendar icon next to the Authorization for which it is necessary to schedule an appointment (Figure 37).

Figure 37. Authorization Calendar

MEMBER	RECEIVED DATE	START DATE	END DATE	UNITS	AUTH	SERVICE	MOD	SCHEDULED UTILIZATION %	PAYER	STATUS	EMPLOYEE
Ker Yoakley	04/12/2020	12/08/2019		489	1086	S5150		31.08	CB Payer	✓ Acknowledged	Sam Pita 

Upon selecting the calendar icon, the user is taken the Schedule Appointment dialog (Figure 38).

Figure 38. Schedule Appointment

On the left side of the Schedule Appointment dialog, view any current authorizations for the Member and choose the authorization needed to schedule appointments by clicking the 'Select For Scheduling' check box.

On the right side of the dialog the Start Time and End Time details can be added for all of the upcoming appointments to be created. If you have multiple appointments with different start/end times, you will need to schedule them individually.

To select dates for appointments, choose one of the following two options:

- Click the calendar icon in the 'Individual Date Collection' card to select individual dates for appointments. The user can individually select as many dates as necessary from the 'Individual Date Collection' card. Once the dates are selected, they will display in the 'Dates Selected' card (Figure 39).
- Recurring appointments can be selected using the 'Repeat Schedule' card by entering the following fields:
 - **Start Date:** This is the date on which the repeated schedule will begin.
 - **Repeat Every:** This is the frequency with which the repeated schedule will generate appointment dates. Example: Repeat Every 3 Weeks.
 - **Repeat On:** These are the days of the week that the repeated schedule will generate appointment dates.
 - **End:** Choose to end the repeated schedule after a certain number of visits or after a certain date by selecting one of the radio buttons.

Upon completion of the fields listed above, the 'Dates Selected' card will populate with the appropriate dates based on the Repeat Schedule fields.

The user can also choose to remove any previously selected dates by clicking the 'X' icon next to the date in the 'Dates Selected' card, or click on the "Trash Can" icon to delete all the selected dates.

Once the desired dates are displayed in the 'Dates Selected' card, select the 'Schedule Appointments' button to generate newly scheduled appointments.

Figure 39. Appointment Dates Selection

VIEW APPOINTMENTS

On the Appointments page, the user can see a tabular view of all Appointments that are currently scheduled (Figure 40). This table can be filtered and sorted with a number of parameters by selecting the expand arrow in the 'Filters' component (Figure 41) or the 'Sort by' drop-down at the top left of the table (Figure 42).

Figure 40. Appointments Page

MEMBER	DATE	START TIME	END TIME	APPT ID	EMPLOYEE	AUTH #	SERVICE	MODIFIERS	STATUS	PAYER
Camille Ace	06/04/2020	09:00 am	12:00 pm	549849	Randy Smith	1051	S5150		Scheduled	CB Payer
Camille Ace	05/25/2020	09:00 am	01:00 pm	549858	Andres Puig	1051	S5150		Scheduled	CB Payer
Camille Ace	05/20/2020	12:00 pm	04:00 pm	549861	Monya Hunter	1051	S5150		Scheduled	CB Payer
Camille Ace	06/09/2020	10:00 am	05:00 pm	549846	Monya Hunter	1051	S5150		Scheduled	CB Payer

Figure 41. Appointments Filters

Figure 42. Appointments 'Sort by' Options

APPOINTMENT DETAILS

In order to view more details about an Appointment, select the menu icon (3 dots) on the right side of the row for the Appointment and select 'Appointment Details' (Figure 43).

Figure 43. Appointments Menu

MEMBER	DATE	START TIME	END TIME	APPT ID	EMPLOYEE	AUTH #	SERVICE	MODIFIERS	STATUS	PAYER	
Camille Ace	06/04/2020	09:00 am	12:00 pm	549849	Randy Smith	1051	S5150		Scheduled	CB Payer	⋮
Camille Ace	05/25/2020	09:00 am	01:00 pm	549858	Andres Puig	1051	S5150		Scheduled	CB Payer	⋮
Camille Ace	05/20/2020	12:00 pm	04:00 pm	549861	Monya Hunter	1051	S5150		Scheduled	CB Payer	⋮

From the Appointment Details page (Figure 44), associated data in the 'Appointment' and 'Billing' cards can be found, as well as a Notes card to add notes and attach files to the appointment. A user may move between all upcoming appointments and completed visits for a Member by selecting them from the list on the left. Finally, the user has the ability to see a calendar view of all appointments and visits for a Member and can view the Member's care plan by selecting each of those options from the tabs on the right.

Figure 44. Appointment Details

The screenshot displays the Appointment Details page for a member named Camille Ace. The page is divided into several sections:

- Member Information:** Member ID: 1052, Primary Phone: 9011521425, Primary Address: 5 VILLAGE STREET, 272, MEMPHIS, TN 38181.
- Navigation Tabs:** APPOINTMENTS, VISITS, DETAILS (selected), CLAIMS HISTORY, CALENDAR, CARE PLAN.
- Appointment List (Left):** A list of appointments with columns for date, name, duration, and rate. The selected appointment is 06/04/2020, Randy Smith, 3 hour(s), \$5150.
- Appointment Details (Center):**
 - Appointment Card:** Appointment ID: 549849, Status: Scheduled, Authorization: Authorization 1051, Employee: Randy Smith, Start Date/Time: Jun 4, 2020 9:00 AM, End Date/Time: Jun 4, 2020 12:00 PM, Start Location: 5 VILLAGE STREET 272, End Location: 5 VILLAGE STREET 272, Expected Units: 12.000 (3.00 hours).
 - Billing Card:** Service Code: S5150 UNSKILLED RESPITE CARE NOT HOSPICE, Modifiers: (none), Billing Status: Pending, Units: 0.000.
 - Notes Section:** Includes a text area for notes and an 'Attach file' button.
- Actions (Bottom):**
 - ADD APPOINTMENT:** A blue button to add a new appointment.
 - MANUAL ENTRY:** A blue button to complete a manual entry.
 - RESCHEDULE:** A blue button to reschedule the appointment.
 - CANCEL APPOINTMENT:** A blue button to cancel the appointment.

From the bottom of the Appointment Details page, the user may choose to utilize three actions:

- **Manual Entry:** for non-EVV visits, complete a Manual Entry. (See the 'Visits' section for more information about Manual Entries.)
- **Reschedule:** for the appointment selected, choose a new date or modify any of the appointment details by selecting the Reschedule button.
- **Cancel Appointment:** For upcoming appointments, choose to cancel and provide a cancellation reason.

APPOINTMENTS REPORTS

By default, the 'Personal Filter' is selected upon navigating to the Appointments Page (Figure 45). The 'Personal Filter' can be used to filter and sort the Appointments table in a variety of ways to return the subset of Appointments that is most useful.

In addition to the 'Personal Filter,' there are two Reports that have predefined filters to help quickly navigate to useful Appointments data (Figure 45).

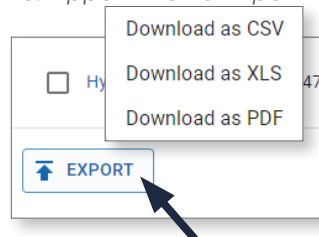
- **Late Appointments:** This report returns a list of all appointments that are late. An appointment is considered late when a Check-In has not occurred within one hour of the appointment start time.
- **Missed Appointments:** This report returns a list of all appointments that have been missed. An appointment is considered missed when a Check-In has not occurred within three hours of the appointment start time.

Figure 45. Appointments Reports



In order to export any of the data on the Appointments page to a PDF, XLS, or CSV file, select the 'Export' button on the bottom of the page (Figure 46). Upon selecting file type, the document will begin downloading and will be available from the Settings page under the 'Documents' sub-tab.

Figure 46. Appointments 'Export' Options



CHECK-IN & CHECK-OUT

Within the CareBridge EVV Platform, there are two primary ways for a caregiver to Check-In and Check-Out of an appointment with a member. The preferred method is by utilizing the CareBridge Mobile Application and the second is by utilizing CareBridge's Interactive Voice Response (IVR) functionality.

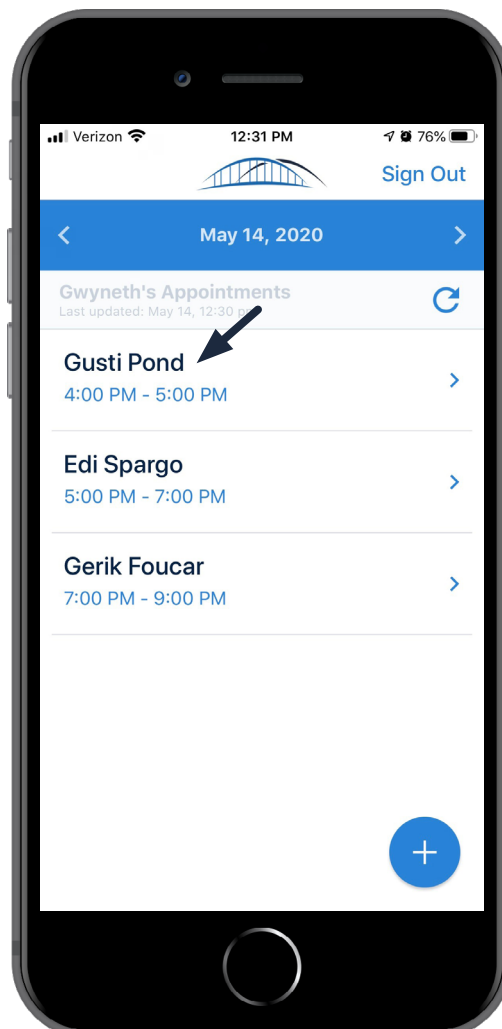
Even when there is no cellular coverage at a Member's home, the mobile app will store the Check-In and Check-Out information and forward it to the Portal when the Caregiver's mobile phone returns to an area with cellular coverage.

Next we'll walk through how to complete a visit in the CareBridge Mobile Application.

SCHEDULE

Upon logging into the CareBridge Mobile Application, the user will be presented with a schedule view (Figure 47). The schedule will allow the user to view any appointments that are scheduled for that day. If the arrow keys on either side of the date are selected, they can view past visits or tomorrow's schedule.

Figure 47. Mobile Schedule



CHECK-IN

In order to Check-In to a scheduled appointment, select the name of the Member. Once selected, appointment information for the Member, the GPS location for Check-In, and a calculation of the current distance from the scheduled location of the appointment is displayed (Figure 48).

Upon selecting 'Next,' the user is presented with Check-In Details including the current time, location, and differences between those and the scheduled time and location for the appointment (Figure 48). The user can Check-In to the appointment by selecting the 'Check-In' button and view the confirmation screen that Check-In is completed (Figure 49). *Please note:* when different services are scheduled in consecutive order, the Caregiver must Check-Out of the first service and Check-In for the second service in order for the visits to complete properly and billing to occur accurately.

Before continuing the process in the app, the Caregiver should proceed with their visit tasks. Once they are finished with their duties, they may move on to the Observed Changes Survey in the app.

Figure 48. Mobile Check-In Location

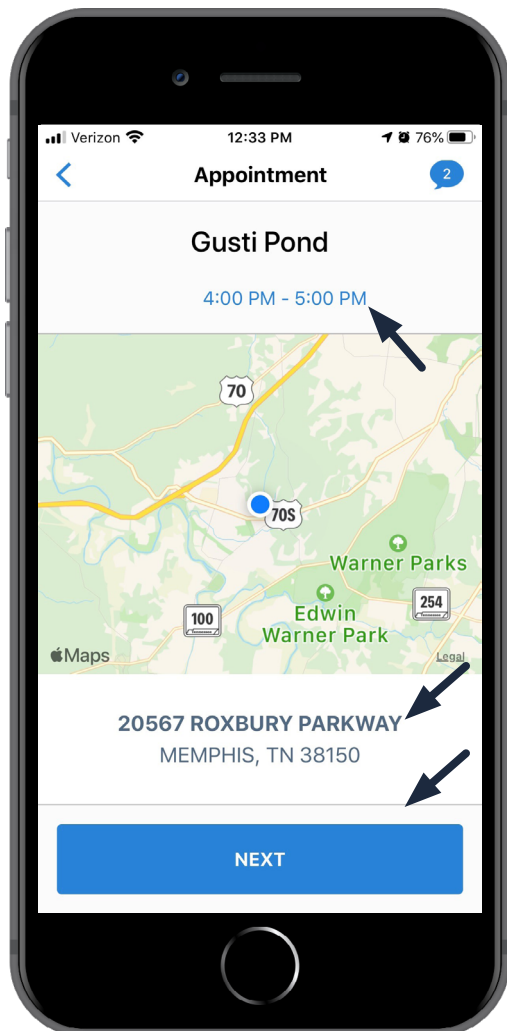
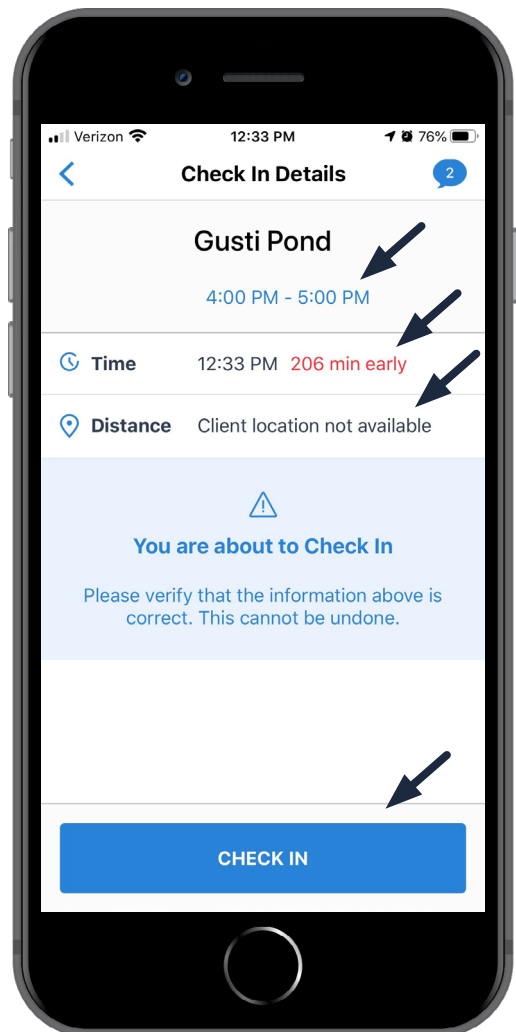


Figure 49. Mobile Check-In Details



OBSERVED CHANGES

Once Check-In is completed, the Caregiver is presented with important questions allowing them to indicate whether the Member has had any Observed Changes (Figure 51). **The Caregiver should keep these things in mind while performing their tasks during the visit. Once they are finished with their duties, they may begin filling out the Observed Changes Survey in the mobile app.**

All of the questions are “yes/no” questions and to answer a question “yes,” select the empty circle next to the question. If the answer is “no,” leave the circle empty. If there is an Observed Change, it will also trigger a Discussion that is sent to both Payer (MCO) and Provider. This Discussion can be accessed on the Portal Discussions page. Once all questions are answered, select the ‘Continue’ button.

Figure 50. Mobile Check-In Complete

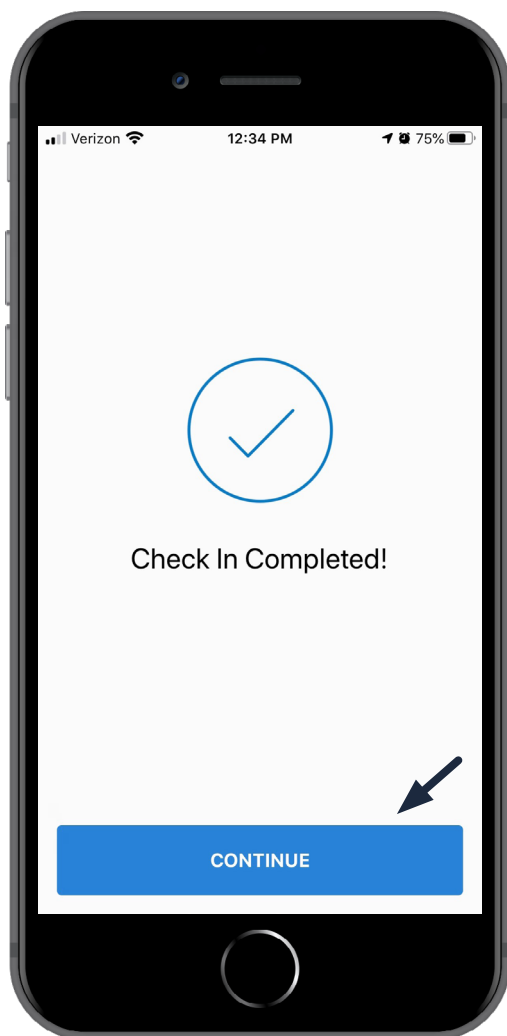
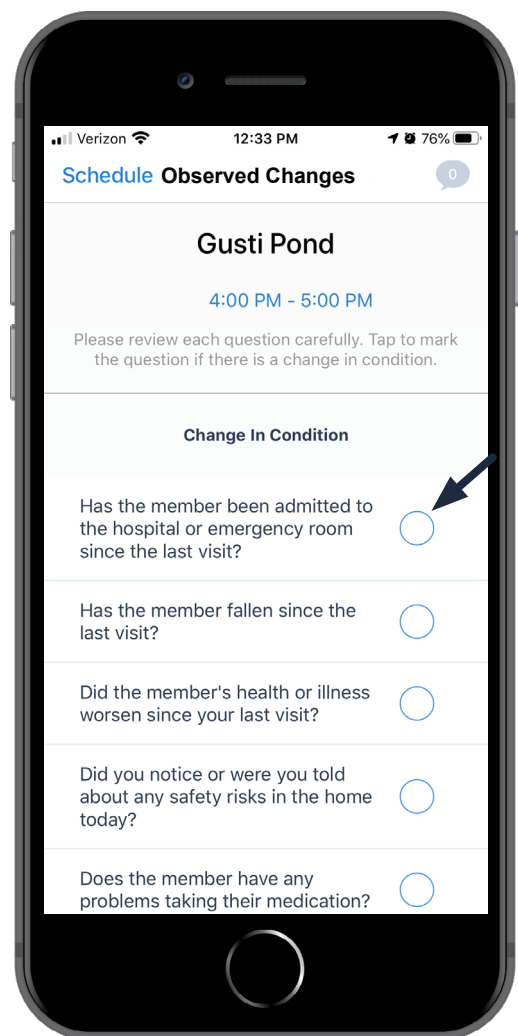


Figure 51. Mobile Observed Changes



CARE PLAN

Once the Observed Changes survey is complete, the Caregiver is shown the Member's Care Plan. The Care Plan is a list of activities to be performed with the Member. By selecting each Care Plan activity, the Caregiver will be able to indicate whether the activity was performed, skipped, or the Member refused (Figure 52). Once each activity has been documented, the Caregiver can select the 'Submit' button to begin Checking-Out (Figure 53).

Figure 52. Mobile Care Plan Activity

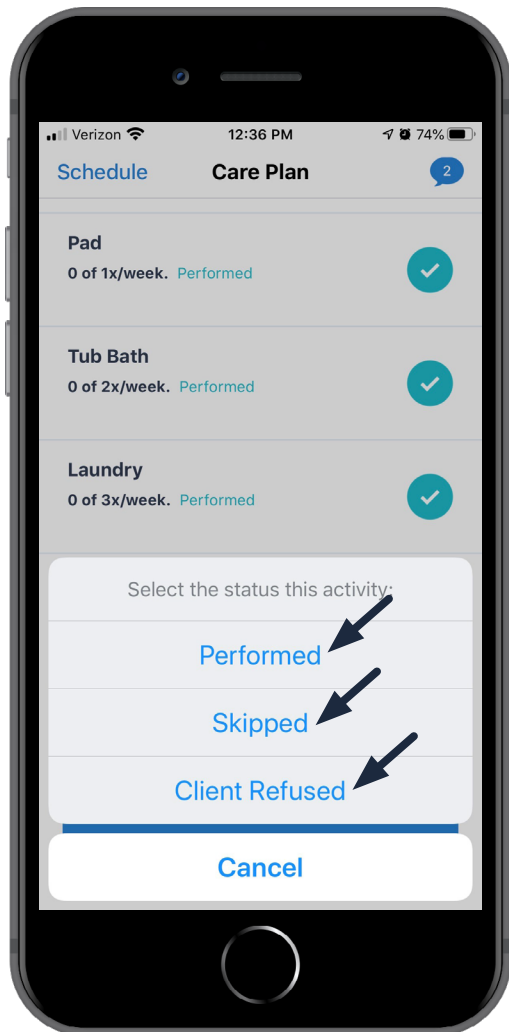
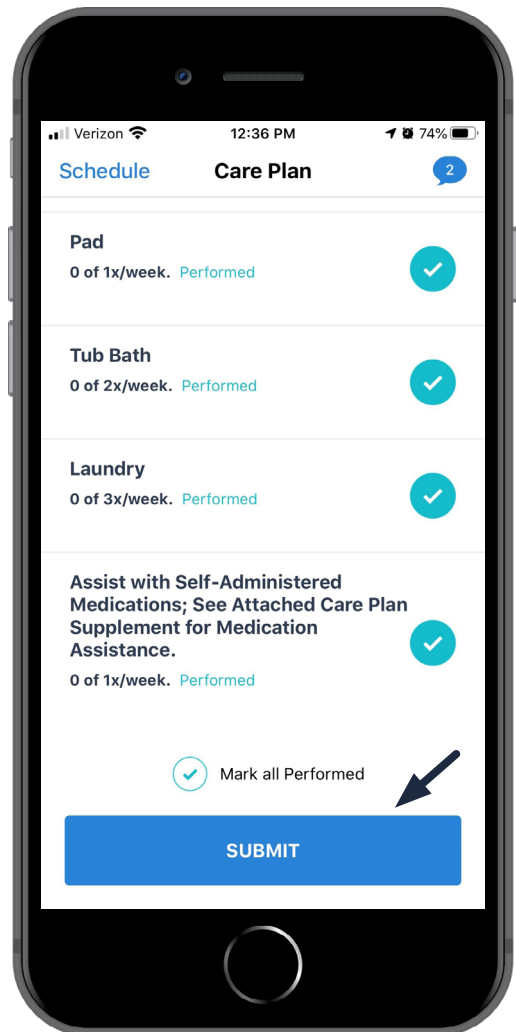


Figure 53. Mobile Care Plan Complete



CHECK-OUT

Once the Care Plan documentation is complete, the Caregiver is presented with Check-Out details and can confirm that all previous documentation is correct (Figure 54). Select the 'Collect Signature' button to continue. At this point, the Member has an opportunity to attest to the visit by providing their signature in the mobile app (Figure 55). Once a signature is added, select 'Approve' to complete the Check-Out workflow and the visit. (if 'Approve' is selected without a signature entered, the app will ask for a reason. For example, the Member was sleeping, or physically unable to sign.)

Figure 54. Mobile Check-Out Details

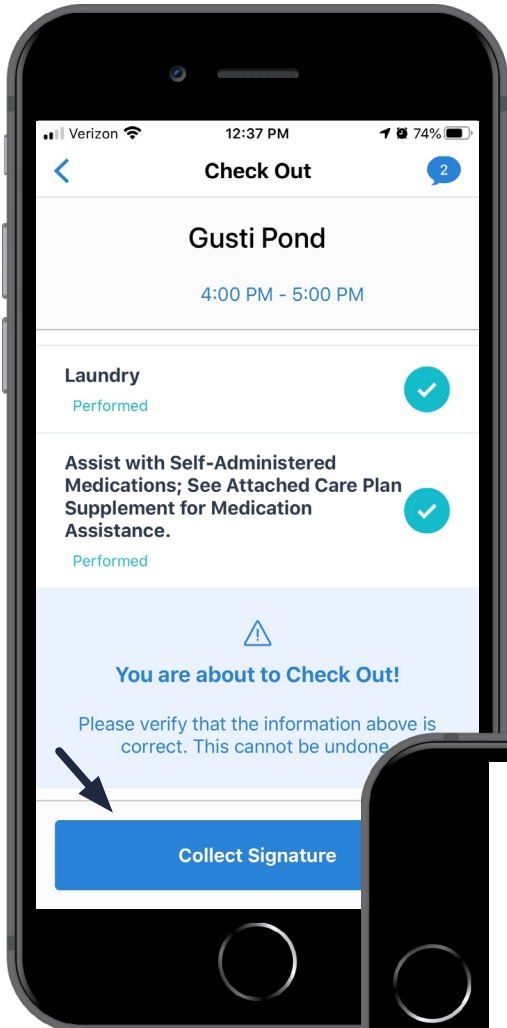
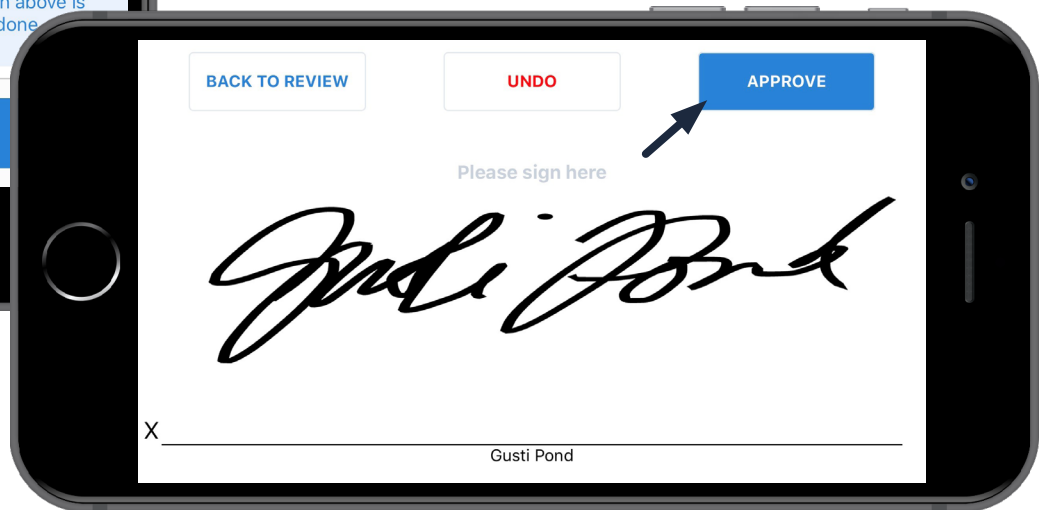


Figure 55. Mobile Member Attestation



AD-HOC VISITS

If there is not a scheduled appointment for a Member, a Caregiver can complete a visit by selecting the plus icon at the bottom right of the Schedule screen in the mobile app (Figure 56). The Caregiver will be presented with a search window to search for and select the Member for which they are completing an appointment (Figure 57). Once the Member is selected, the Check-In and Check-Out workflows are the same as outlined previously.

Figure 56. Mobile Ad hoc Visit

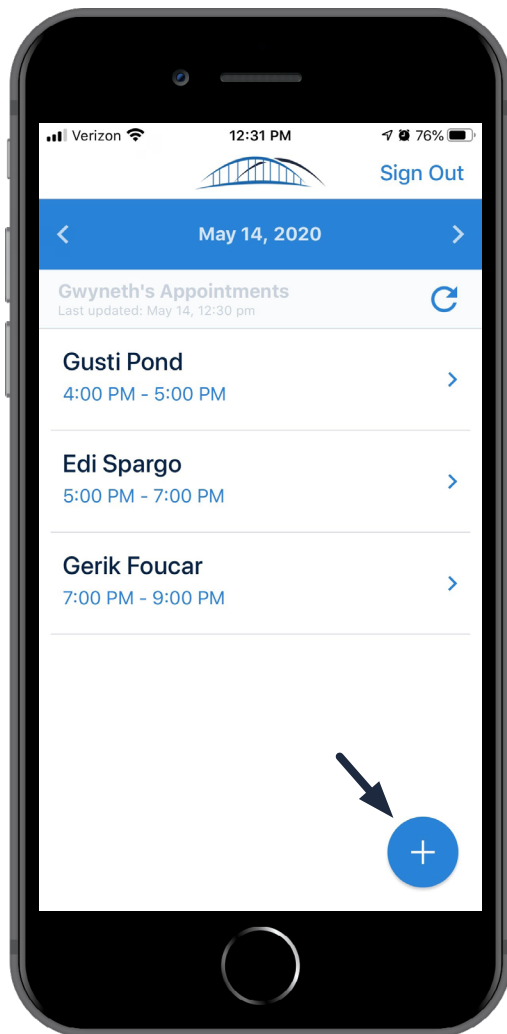
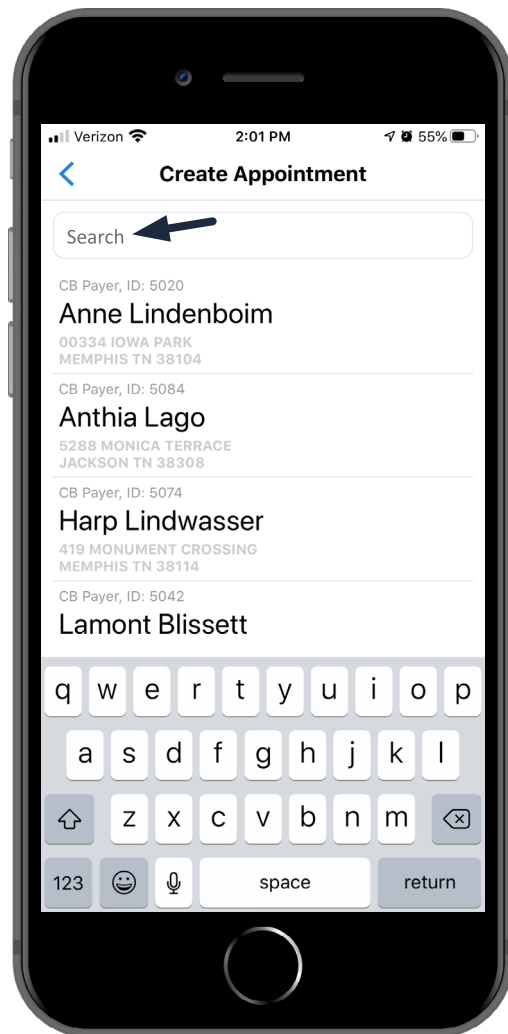


Figure 57. Mobile Member Search



Interactive Voice Response (IVR)

There will be instances when the Caregiver cannot utilize the CareBridge Mobile Application. In these instances, they can choose to use the Interactive Voice Response (IVR) functionality. To Check-In and Check-Out, the Caregiver will need to call the toll-free IVR phone number, (which is (201) 389-9638, and will also be provided to them as a part of their training), from the Member's landline. Additionally, the Caregiver will need to input a Provider ID and an IVR Pin to identify themselves during the IVR process. Both of these items will be provided as part of training.

The IVR system will walk the Caregiver through a series of interactive questions to complete the Check-In, Change In Conditions Survey, Care Plan, and Check-Out.

VISITS

The Visits page in the CareBridge Provider Portal allows Agency Employees to view completed visits, pre-claim checks, and to request claims.

VIEW VISITS

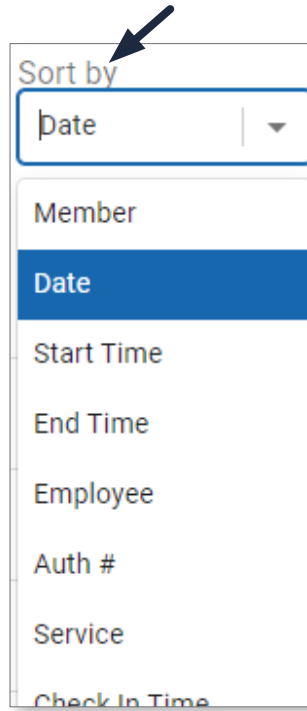
The Visits Page displays a tabular view of all Visits that have been completed (Figure 58). This table can be filtered and sorted with a number of parameters by selecting the expand arrow in the 'Filters' component (Figure 59), or the 'Sort by' drop-down at the top left of the table (Figure 60).

Figure 58. Visits Page

MEMBER	DATE	START TIME	END TIME	EMPLOYEE	AUTH #	SERVICE	CHECK IN TIME	CHECK OUT TIME	PAYER	APPT ID	STATUS
Roley Scotney	06/24/2020	10:33 am	10:34 am	Scott Test	754542789887636	S5131	10:34 am	10:34 am	Iowa Total Care	2434063	Completed
Dalis Stoppard	06/30/2020	02:00 pm	03:00 pm	Andres Puig	637583316303789	S5150	03:56 pm	04:00 pm	Amerigroup Iowa	2434204	Late and Completed
Carole Varga	06/30/2020	04:00 pm	05:00 pm	Monya Hunter	131939485669136	S5131	04:00 pm	04:00 pm	Iowa Total Care	2434208	Missed and Completed
Wynne Tasch	06/30/2020	04:30 pm	04:35 pm	Kristen Myers	273689650464802	S5130	04:30 pm	04:30 pm	Iowa Total Care	2434209	Missed and Completed
Wilhelmina Hebblethwaite	07/01/2020	12:00 am	01:00 am	Andres Boga (caregiver)	226263459771871	S5130	11:54 pm	11:55 pm	Iowa Total Care	2434227	Completed
Milo Rate	07/01/2020	10:00 am	11:00 am	Scott Test	706276689656078	S5130	03:43 pm	03:43 pm	Amerigroup Iowa	2434232	Missed and Completed
Kania Miguet	07/01/2020	02:00 pm	06:00 pm	Lane Abernathy	069316375069320	S5130	07:40 pm	07:40 pm	Iowa Total Care	2434129	Missed and Completed
Aarika Steane	07/02/2020	09:00 pm	10:00 pm	Andres Caregiver	275666769593954	S5150	08:35 pm	08:41 pm	Amerigroup Iowa	2434254	Completed
Dalis Stoppard	07/06/2020	04:00 pm	05:00 pm	Andres Caregiver	637583316303789	S5150	03:10 pm	03:10 pm	Amerigroup Iowa	2434271	Completed

Figure 59. Visits Filters

Figure 60. Visits 'Sort by' Options



VISIT DETAILS

In order to view more details about a Visit, select the menu icon (3 dots) on the right side of the row for the Visit and select 'Visit Details' (Figure 61).

Figure 61. Visits Menu

<input type="checkbox"/>	MEMBER	DATE	START TIME	END TIME	EMPLOYEE	AUTH #	SERVICE	EVV START TIME	PAYER	APPT ID	STATUS	
<input type="checkbox"/>	Ericka Stonbridge	04/11/2020	03:00 pm	07:00 pm	Diane Seloff	1004	S5125	10:03 am	CB Payer	548897	Completed	⋮
<input type="checkbox"/>	Joeann Greated	04/10/2020	03:00 pm	07:00 pm	Prashanth Donepudi	1092	T1019	09:12 am	CB Payer	550615	Completed	⋮

Below the table, a context menu is shown for the first row, with 'Visit Details' selected and 'Member Details' visible below it. An arrow points to the menu icon (three dots) on the right side of the first row.

From the Visits Details page (Figure 62), the user can view associated data with the visit in the 'EVV Visit' and 'Billing' cards as well as add notes to the visits. They also have the ability to move between all upcoming appointments and completed visits for a Member by selecting them from the list on the left. Finally, the user has the ability to see a calendar view of all Appointments and Visits for a Member and can view the Member's Care Plan by selecting each of those options from the tabs on the right.

Figure 62. Visit Details

The screenshot displays the 'VISITS > DETAIL > 548897' page for member Ericka Stonbridge. The page is divided into several sections:

- Left Sidebar:** Contains navigation links for Dashboard, Discussions, Authorizations, Appointments, Visits (selected), Billing, Members, Employees, and Settings.
- Top Navigation:** Includes tabs for APPOINTMENTS, VISITS, DETAILS (selected), CLAIMS HISTORY, CALENDAR, and CARE PLAN.
- Visits List:** Shows a table with one entry: 04/11/2020, Diane Seloff, 4 hour(s), S5125. A '+ ADD APPOINTMENT' button is located at the bottom left of this section.
- Visit Details Card:** Displays information for Appointment ID: 548897, Status: Completed, Authorization: 1004, Employee: Diane Seloff, Start Date/Time: Apr 11, 2020 3:00 PM, End Date/Time: Apr 11, 2020 7:00 PM, Start Location: 9 FOREST CROSSING 10, End Location: 9 FOREST CROSSING 10, and Expected Units: 16.000 (4.00 hours). A 'MANUAL ENTRY' button is at the bottom of this card.
- Billing Card:** Shows Service Code: S5125 ATTENDANT CARE SERVICES, Modifiers: (none), Billing Status: Pending, and Units: 0.000.
- EVV Visit Card:** Contains check-in and check-out dates/times, visit duration, and acceptable locations. A 'CANCEL SAVE' button is at the bottom right.
- Notes Section:** Includes a text area for notes and an 'Attach file' button.

From the bottom of the Visit Details page, the user may utilize one action:

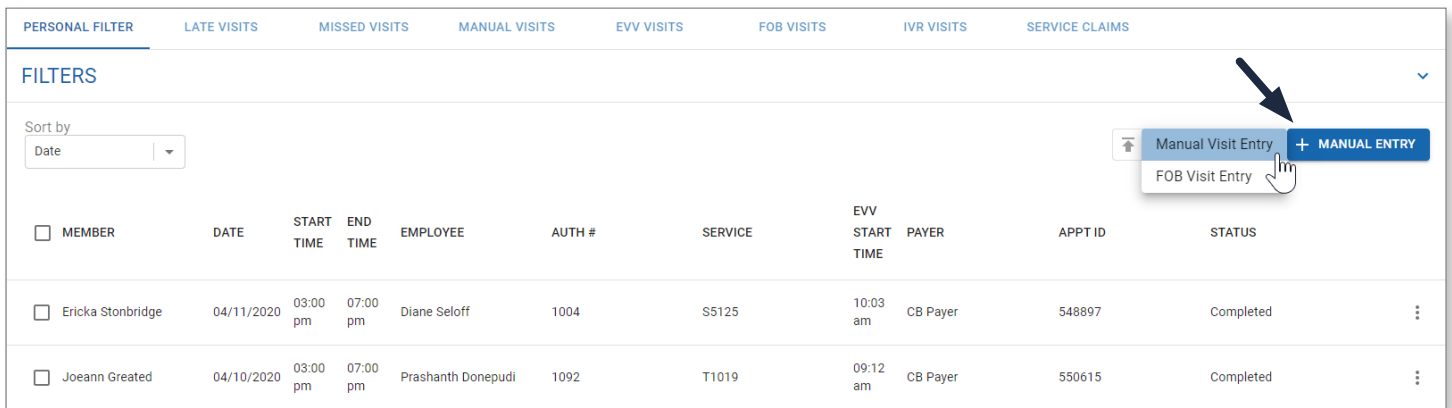
- **Manual Entry:** for non-EVV visits or edits to EVV visits, you can complete a Manual Entry

MANUAL ENTRY

In some cases when an EVV Check-In or Check-Out cannot be completed or there is a need to edit an EVV Check-In or Check-Out, an Agency Employee has the ability to complete a Manual Entry.

For a visit that does not have an EVV Check-In and Check-Out, navigate to the Visits page and select the 'Manual Entry' button from the top right of the table, then the 'Manual Visit Entry' option from the drop-down (Figure 63). The 'Manual Entry' dialog will open, allowing the user to enter information about the visit and a Manual Reason Code indicating why an EVV check-In or check-Out was not possible (Figure 64).

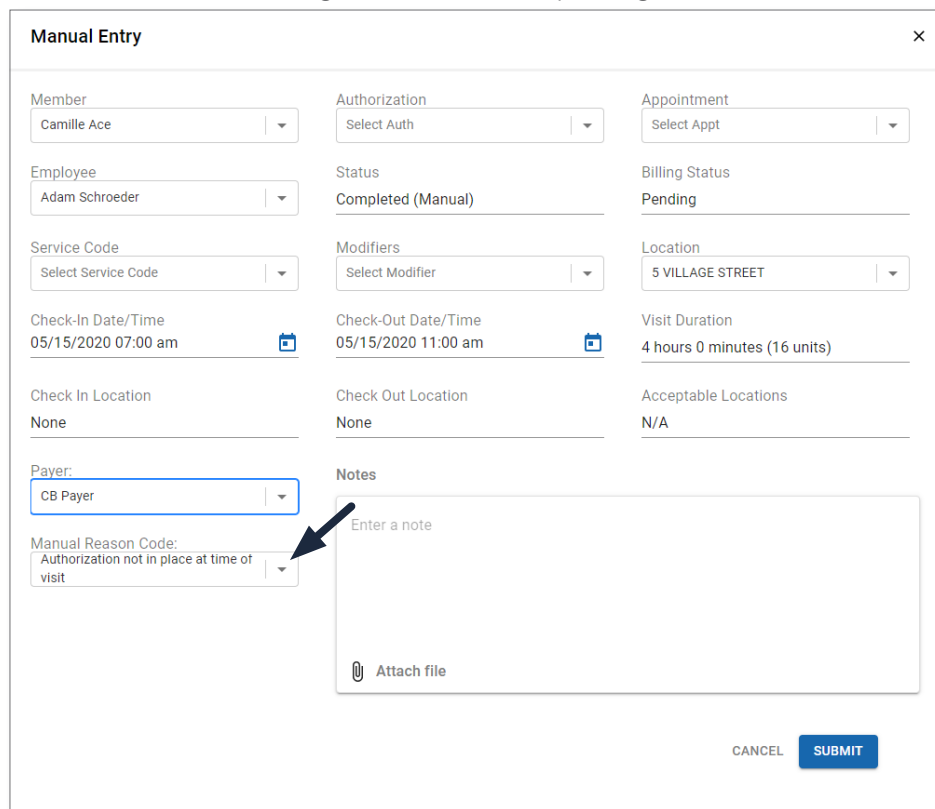
Figure 63. Manual Visit Entry



The screenshot shows a web interface with a navigation bar containing tabs: PERSONAL FILTER, LATE VISITS, MISSED VISITS, MANUAL VISITS, EVV VISITS, FOB VISITS, IVR VISITS, and SERVICE CLAIMS. Below the navigation bar is a 'FILTERS' section with a 'Sort by' dropdown set to 'Date'. A table of visits is displayed with columns: MEMBER, DATE, START TIME, END TIME, EMPLOYEE, AUTH #, SERVICE, EVV START TIME, PAYER, APPT ID, and STATUS. Two rows are visible: one for Ericka Stonbridge and one for Joeann Greated. A blue button labeled 'Manual Visit Entry' with a plus sign is positioned above the table, and an arrow points to it from the top right.

MEMBER	DATE	START TIME	END TIME	EMPLOYEE	AUTH #	SERVICE	EVV START TIME	PAYER	APPT ID	STATUS
<input type="checkbox"/> Ericka Stonbridge	04/11/2020	03:00 pm	07:00 pm	Diane Seloff	1004	S5125	10:03 am	CB Payer	548897	Completed
<input type="checkbox"/> Joeann Greated	04/10/2020	03:00 pm	07:00 pm	Prashanth Donepudi	1092	T1019	09:12 am	CB Payer	550615	Completed

Figure 64. Manual Entry Dialog



The 'Manual Entry' dialog box contains the following fields and options:

- Member: Camille Ace
- Employee: Adam Schroeder
- Service Code: Select Service Code
- Check-In Date/Time: 05/15/2020 07:00 am
- Check In Location: None
- Payer: CB Payer
- Manual Reason Code: Authorization not in place at time of visit
- Authorization: Select Auth
- Status: Completed (Manual)
- Modifiers: Select Modifier
- Check-Out Date/Time: 05/15/2020 11:00 am
- Check Out Location: None
- Notes: Enter a note (with an 'Attach file' icon)
- Appointment: Select Appt
- Billing Status: Pending
- Location: 5 VILLAGE STREET
- Visit Duration: 4 hours 0 minutes (16 units)
- Acceptable Locations: N/A

Buttons at the bottom: CANCEL, SUBMIT. An arrow points to the 'Manual Reason Code' dropdown.

In cases in which a visit does have an EVV Check-In or Check-Out, but has details that need to be edited, the user may navigate to 'Visit Details' (see 'Visit Details' section), and select the 'Manual Entry' button to edit the visit.

EXPORT FOR CLAIMS

Once a visit is completed and ready to be claimed, Agency Administrators may export by selecting the check box next to one or many visits and then selecting the 'Export to Claims' button at the top right corner of the table (Figure 65).

Figure 65. Export to Claims

MEMBER	DATE	START TIME	END TIME	EMPLOYEE	AUTH #	SERVICE	EVV START TIME	PAYER	APPT ID	STATUS
<input checked="" type="checkbox"/> Ericka Stonbridge	04/11/2020	03:00 pm	07:00 pm	Diane Seloff	1004	S5125	10:03 am	CB Payer	548897	Completed
<input checked="" type="checkbox"/> Isaac Crested	04/10/2020	03:00	07:00	Breanah Denevudi	1002	T1010	09:12	CB Payer	550615	Completed

Once the 'Export to Claims' button is selected, the CareBridge Provider Portal will assess the visits selected to be exported for potential claiming issues as defined by the MCO. Examples of pre-billing checks that are assessed are:

- Authorization units overages
- Overlapping visits
- Authorization date ranges
- Member eligibility

The user will be presented with a confirmation indicating that the visits they selected were successfully exported for claims or if they were not exported due to failing a pre-billing check (Figure 66).

Figure 66. Export Dialog

Export ✕

✔ 7 Visits will be exported for claims and will be available for viewing on the Billing Page

! The following Visits do not pass pre-billing checks and will not be exported for claims

Member	Date	Appt ID	Status	Pre billing Check
Towney Limeburn	04/06/2020	549568	Late and Completed	Late reason is missing on the appointment
Cassius Casone	04/02/2020	550588	Completed	Appointment exceeds the authorization max units
Venita Currm	03/30/2020	550448	Completed	Appointment exceeds the authorization max units


GO BACK EXPORT

In addition to being able to view Pre-Billing Checks when exporting visits for claims, Pre-Billing Checks are also visible on the Authorizations, Appointments, Visits, and Billing pages and are denoted with the red exclamation icon. By clicking the red exclamation icon, the Pre-Billing check is shown (Figure 67)

Figure 67. Pre-Billing Checks on Visits page

<input type="checkbox"/> MEMBER	DATE	START TIME	END TIME	EMPLOYEE	AUTH #	SERVICE	EVV START TIME	PAYER	APPT
<input type="checkbox"/> Radcliffe Tillot	04/16/2020	12:00 pm	08:00 pm	Todd Leri	1070	S5130	07:27 pm	CB Payer	5501

Missed reason is missing on the appointment.
Manual entry reason is missing on the appointment.



Additionally, Pre-Billing Checks can be viewed on each page by filtering using the Flagged Types filter (Figure 68).

Figure 68. Flagged Types filter on Visits page

PERSONAL FILTER
LATE VISITS
MISSED VISITS
MANUAL VISITS
EVV VISITS
FOB VISITS
IVR VISITS
SERVICE CLAIMS

FILTERS

Search By Member Name or ID:

Search By Appt ID:

Search By Auth #:

Search by Employee:

Payer:

Status:

Late and Completed x
Missed and Completed x
Completed (Manual) x
Completed x

Service:

Flagged Types:

- No Auth
- Ineligible Member
- Missed Manual Entry Reason
- Missed Late Reason
- Missed Missed Reason
- Exceeds Auth
- Outside Auth Dates
- Provider Inactive
- Pre Billing Issue
- Payer Data Issue

Date Range:

 -

RESET FILTER

Sort by

<input type="checkbox"/> MEMBER	DATE	START TIME	END TIME	EMPLOYEE	AUTH #	SERVICE	EVV START TIME	PAYER	APPT ID
---------------------------------	------	------------	----------	----------	--------	---------	----------------	-------	---------

The following is a full list of pre-billing checks performed in the CareBridge Platform and potential opportunities to resolve the pre-billing check in order to be able to submit the visit for a claim.

PRE-BILLING CHECK	POTENTIAL RESOLUTION
Late Visit Reason is missing on the appointment	Navigate to Visit Details and select the pencil icon in the 'Late Visit' card to document a Late Visit Reason.
Missed Visit Reason is missing on the appointment	Navigate to Visit Details and select the pencil icon in the 'Missed Visit' card to document a Missed Visit Reason.
Manual Entry Reason is missing on the appointment	Navigate to Visit Details and select the pencil icon in the 'Manual Entry' card to document a Manual Entry Reason.
Member is not eligible during appointment	Contact the MCO to change the eligibility dates for the Member. Once new eligibility dates are received, the pre-billing check will be removed.
No authorization for appointment	Navigate to Visit Details and select a valid authorization from the Authorization drop-down in the 'Visit' card.
Appointment exceeds the max units of the Authorization	Contact the MCO to resolve.
Appointment is outside of the authorization dates	Contact the MCO to resolve.
Pre-Billing Issue	Contact the MCO to resolve.
MCO Data Issue	Contact the MCO to resolve.

VISITS REPORTS

By default, the 'Personal Filter' is selected upon navigating to the Visits Page (Figure 69). The 'Personal Filter' can be used to filter and sort the Visits table in a variety of ways to return the subset of Visits that is most useful.

Figure 69. Visits Reports

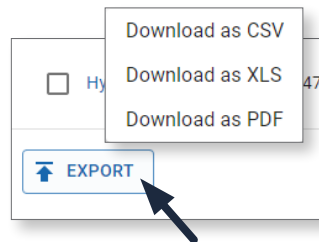


In addition to the 'Personal Filter', there are five Reports that have predefined filters to help quickly navigate to useful Visits (Figure 69).

- **Late Visits:** This report returns a list of all visits that have been completed but were started late. A visit is considered late when a Check-In did not occur within one hour of the appointment.
- **Missed Visits:** This report returns a list of all missed visits. A visit is considered missed when a Check-In did not occur within three hours of the appointment start time.
- **Manual Visits:** This report returns a list of all manual entry visits.
- **EVV Visits:** This report returns a list of all completed visits that have compliant EVV data.
- **IVR Visits:** This report returns a list of all completed IVR visits.

In order to export any of the data on the Visits Page to a PDF, XLS, or CSV file, select the 'Export' button on the bottom of the page (Figure 70). Upon selecting the file type, the document will begin downloading and will be available on the Settings Page under the 'Documents' sub-tab.

Figure 70. Visits 'Export' Options



BILLING

The Billing Page in the CareBridge Provider Portal allows agency employees to view completed visits that have been claimed, enabling them to address denials, rejections, and paid amounts.

VIEW BILLED VISITS

On the Billing Page, the user will see a tabular view of all Visits that have been claimed (Figure 71). This table can be filtered and sorted with a number of parameters by selecting the expand arrow in the 'Filters' component (Figure 72) or the 'Sort by' drop-down at the top left of the table (Figure 73).

Figure 71. Billing Page

MEMBER	DATE	START TIME	END TIME	UPDATED DATE	EMPLOYEE	AUTH	SERVICE	APPT ID	CLAIM #	PAYER	STATUS	BILLED AMOUNT	PAID AMOUNT	BILLING STATUS
Maisey Emanuelov	03/02/2020	09:00 AM	03:00 PM	04/16/2020	Prashanth Donepudi	1030	T1019	549495	728	CB Payer	Completed	\$115	\$0.00	Confirmed
Shae Baiss	03/02/2020	11:00 AM	07:00 PM	04/16/2020	Alan Huffman	1072	S5125	550234	779	CB Payer	Completed	\$170	\$0.00	Acknowledged
Wayne Luscott	03/03/2020	11:00 AM	03:00 PM	04/16/2020	Krista Pelensky	1054	T1019	549903	748	CB Payer	Completed (Manual)	\$75	\$75	Paid
Ferne Wittler	03/04/2020	08:00 AM	01:00 PM	04/16/2020	Diane Seloff	1085	S5130	550435	750	CB Payer	Completed	\$120	\$0.00	Acknowledged
Mathe Querree	03/04/2020	11:00 AM	07:00 PM	04/16/2020	Randy Smith	1024	S5130	549344	742	CB Payer	Completed (Manual)	\$170	\$0.00	Denied
Conny Inwood	03/07/2020	09:00 AM	05:00 PM	04/16/2020	Diane Seloff	1050	S5125	549835	754	CB Payer	Completed	\$180	\$0.00	Generated

Figure 72. Billing Filters

PERSONAL FILTER | REJECTED VISITS | DENIED VISITS

FILTERS

Search By Member Name or ID: Name or ID

Search By Appt ID: Appt ID

Search By Auth #: Auth #

Search by Employee: Search By Name or ID

Start Dates: 04/09/2020 - 07/09/2020

Update Dates: 04/09/2020 - 07/09/2020

Payer: Select Payer

Status: Select Status

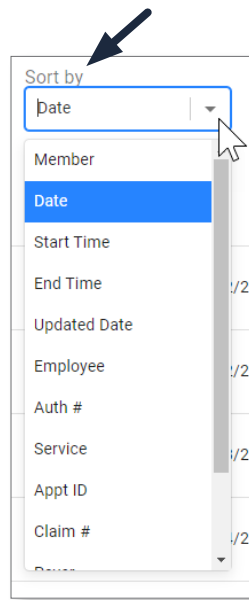
Service: Select Service

Billing Status: Select Billing Status

Flagged Types: Search By Name or ID

Office(s): Select...

Figure 73. Billing 'Sort by' Options



CLAIMS HISTORY

Once a completed visit has been exported for claims, the user will be able to view details about the Billing Status and Claim information by selecting the menu icon (3 dots) on the right side of the row for the Visit and select 'Visit Details' (Figure 74).

Figure 74. Billing 'Visit Details' Selection

<input type="checkbox"/>	MEMBER	DATE	START TIME	END TIME	UPDATED DATE	EMPLOYEE	AUTH	SERVICE	APPT ID	CLAIM #	PAYER	STATUS	BILLED AMOUNT	PAID AMOUNT	BILLING STATUS	
<input type="checkbox"/>	Maisey Emanuelov	03/02/2020	09:00 AM	03:00 PM	04/16/2020	Prashanth Donepudi	1030	T1019	549495	728	CB Payer	Completed	\$115	\$0.00	Confirmed	⋮
<input type="checkbox"/>	Shae Balss	03/02/2020	11:00 AM	07:00 PM	04/16/2020	Alan Huffman	1072	S5125	550234	779	CB Payer	Completed	\$170	\$0.00	Acknowledged	⋮
<input type="checkbox"/>	Wayne Luscott	03/03/2020	11:00 AM	03:00 PM	04/16/2020	Krista Pelensky	1054	T1019	549903	748	CB Payer	Completed (Manual)	\$75	\$75	Paid	⋮

Visit Details will provide information for the Billing Status in the 'Billing' card (Figure 75) as well as Claims information in the 'Claims History' tab.

Figure 75. Billing 'Visit Details' Options

Dashboard
Discussions
Authorizations
Appointments
Visits
Billing
Members
Employees
Settings

VISITS > DETAIL > 549495

Maisey Emanuelov
Member ID: 1032 Primary Phone: 8659030737 Primary Address: 15 WARRIOR PARKWAY, KNOXVILLE, TN 37924

APPOINTMENTS VISITS

02/02/2020 - 04/02/2020
Show All Appointments

Date	Employee	Duration
03/02/2020	Prashanth Donepudi	6 hour(s) T1019

+ ADD APPOINTMENT

DETAILS CLAIMS HISTORY CALENDAR CARE PLAN

Visit

Appointment ID: 549495
Status: Completed
Authorization: Authorization 1030
Employee: Prashanth Donepudi
Start Date/Time: Mar 2, 2020 9:00 AM
End Date/Time: Mar 2, 2020 3:00 PM
Start Location: 15 WARRIOR PARKWAY
End Location: 15 WARRIOR PARKWAY
Expected Units: 24.000 (6.00 hours)

Billing

Service Code: T1019 PERSONAL CARE SERVICES
Modifiers: (none)
Billing Status: Confirmed
Units: 23.000

EVV Visit

Check In Date/Time: Mar 2, 2020 9:04 AM (app)
Check Out Date/Time: Mar 2, 2020 3:17 PM (app)
Visit Duration: 6.22 (25.000 Units)
Check In Location: 15 WARRIOR PARKWAY, KNOXVILLE, TN 37924
Check Out Location: 15 WARRIOR PARKWAY, KNOXVILLE, TN 37924
Acceptable Locations: Yes

Notes
Attach file

CANCEL SAVE

MANUAL ENTRY RESCHEDULE CANCEL VISIT

The Claims History tab will display the Billed Amount, Accepted Amount, Rejected Amount, Paid Amount, and Denied Amount for the visit. You will also be able to access each individual claim request that was generated at the time the visit was exported for a claim, as well as the individual statuses, claim #(s), and dates associated with the status changes (Figure 76).

Figure 76. 'Claims History' Details

Lamont Blissett
 Member ID: 1042 Primary Phone: 4232961955 Primary Address: 1 MYRTLE PASS, CHATTANOOGA, TN 37450

CLAIMS HISTORY

Billing VOID

Billed Amount	\$55.00 (11 units)
Accepted Amount	\$55.00 (11 units)
Rejected Amount	\$0 (0 units)
Paid Amount	\$55.00 (11 units)
Denied Amount	\$0 (0 units)

Claim Request #783

CLAIM #	STATUS	DATE/TIME
2084	Queued	04/16/2020, 09:02 pm
2133	Generated	04/16/2020, 09:02 pm
2197	Confirmed	04/16/2020, 09:02 pm
2229	Paid	04/16/2020, 09:02 pm

EXPORT FOR CLAIMS

If a visit needs to be resubmitted for a claim, agency employees can export by selecting the check box next to one or many visits and then selecting the 'Export to Claims' button at the top right corner of the table (Figure 77).

Figure 77. 'Export To Claims' Button

Sort by: Date

EXPORT TO CLAIMS **+ MANUAL ENTRY**

MEMBER	DATE	START TIME	END TIME	EMPLOYEE	AUTH #	SERVICE	EVV START TIME	PAYER	APPT ID	STATUS
<input checked="" type="checkbox"/> Ericka Stonbridge	04/11/2020	03:00 pm	07:00 pm	Diane Seloff	1004	S5125	10:03 am	CB Payer	548897	Completed
<input checked="" type="checkbox"/> Joeann Greated	04/10/2020	03:00 pm	07:00 pm	Prashanth Donepudi	1092	T1019	09:12 am	CB Payer	550615	Completed

The following billing statuses are available in the CareBridge Platform 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 the MCO
Acknowledged	This visit has a claim that has been received by the MCO
Confirmed	This visit has a claim that was accepted by the MCO
Pre-billing Rejection	This visit was rejected due to insufficient or invalid data prior to claim creation
Rejected	This visit was rejected by the MCO due to insufficient or invalid data upon initial review of the claim
Paid	This visit was paid by the MCO
Denied	This visit was denied by the MCO due to insufficient or invalid data upon review of the claim
Voided	This visit claim was voided

BILLING REPORTS

By default, the 'Personal Filter' is selected upon navigating to the Billing Page (Figure 78). The 'Personal Filter' can be used to filter and sort the Billing table in a variety of ways to return the subset of Billed Visits that is most useful.

In addition to the 'Personal Filter', there are two Reports that have predefined filters to help quickly navigate to useful Billed Visits data (Figure 78).

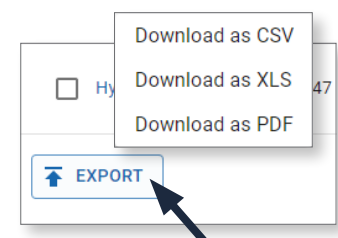
- **Rejected Visits:** This report returns a list of all visits that have rejected claims.
- **Denied Visits:** This report returns a list of all visits that have denied claims.

Figure 78. Billing Reports



In order to export any of the data on the Billing page to a PDF, XLS, or CSV file, select the 'Export' button on the bottom of the page (Figure 79). Upon selecting the file type, the document will begin downloading and will be available on the Settings Page under the 'Documents' sub-tab.

Figure 79. Billing 'Export' Options



COMMUNICATIONS

OVERVIEW

The following sections will help introduce you to the features and functionality within the CareBridge Platform that enable communication both within a provider agency as well as between a provider agency and MCOs.

DISCUSSIONS

The Discussions Page in the CareBridge Provider Portal allows agency employees to manage and prioritize inbound communications, take action on critical tasks, and communicate within the agency as well as with MCOs.

DISCUSSIONS NAVIGATION

Once on the Discussions Page, the user will see a list of all open Discussions that are currently unassigned (Figure 80). This list can be filtered by 'Assigned to', 'Status', and a number of other fields that are viewed by selecting the expand arrow next to the 'Status' drop-down (Figure 81).

Figure 80. Discussions Page

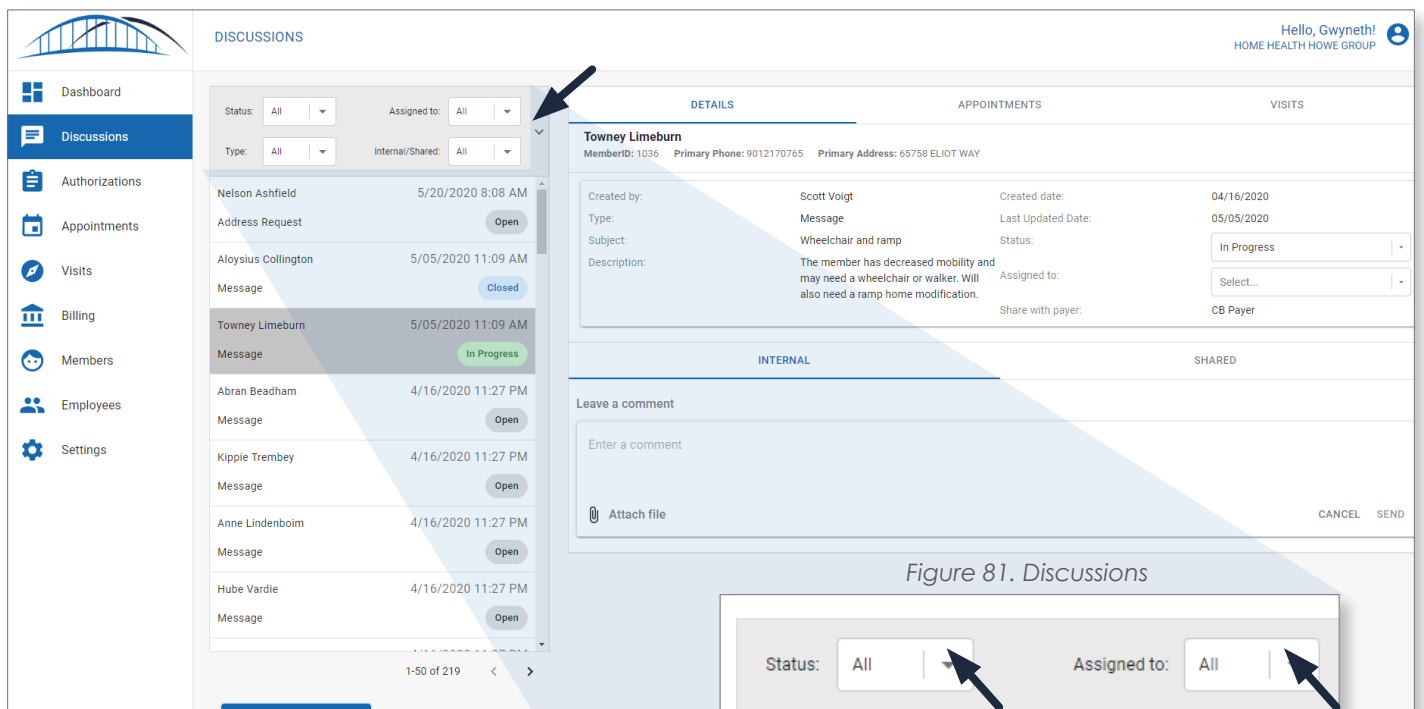
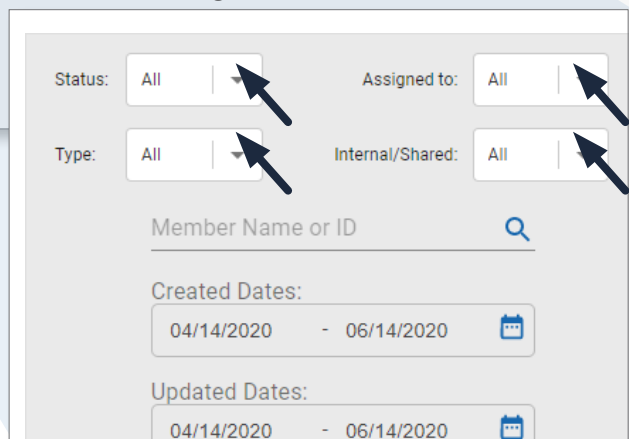


Figure 81. Discussions

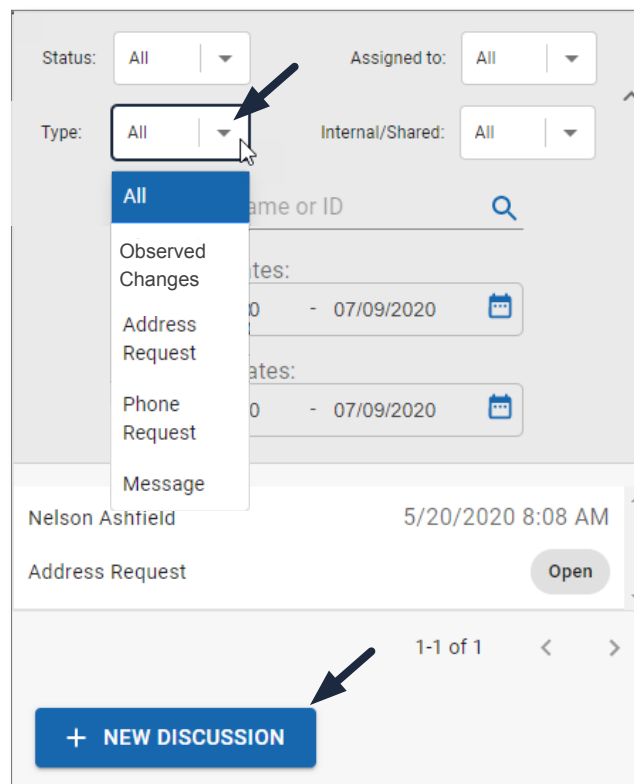


NEW DISCUSSION

Within Discussions there are five different types of Discussions that can be sent and received (Figure 82):

- **Observed Changes:** This Discussion type allows Caregivers to indicate if there have been any changes to the Member's condition. Observed Changes items are generated as part of the survey completed by Caregivers during a visit. When Observed Changes occur, a Discussion will be auto-generated and sent to the Discussions page for both the Provider and the MCO.
- **Address Request:** This Discussion type allows Providers to request a new or updated Member address from the MCO. When an Address Request occurs, a Discussion will be auto-generated and sent to the Discussions page for both the Provider and the MCO.
- **Phone Request:** This Discussion type allows Providers to request a new or updated Member phone number from the MCO. When a Phone Request occurs, a Discussion will be auto-generated and sent to the Discussions page for both the Provider and the MCO.
- **Message:** This Discussion type can be used for general messages between agency employees or between an Agency and a MCO.

Figure 82. Discussion 'Type' Drop-down



To create a new Message Discussion, select the 'New Discussion' button at the bottom of the page (Figure 81). The New Discussion dialog box will appear. After selecting a Discussion Type, the user will need to complete the required fields before sending (Figure 83).

Figure 83. New Discussion

New Discussion

Type: Message

Created by: Gwyneth Mceuen Member: Member Assigned to (optional): Unassigned

Status: Open Subject: Share with payer (optional): Share with payer

Description:

CANCEL SEND

DISCUSSION ITEM DETAILS

Upon selecting a Discussion, the user will see details about that Discussion in the 'Details' tab on the right (Figure 84). Optionally, the user may choose to view upcoming Appointments and past Visits for that Member by selecting the other tabs available at the top of the item.

Figure 84. Discussion Details

DISCUSSIONS

Status: All Assigned to: All

Type: All Internal/Shared: All

Member	Date	Status
Aloysius Collington	5/05/2020 11:09 AM	Closed
Towney Limeburn	5/05/2020 11:09 AM	In Progress
Kile Desborough	4/16/2020 11:27 PM	Open
Barbaraanne Slyford	4/16/2020 11:27 PM	Open
Hube Vardie	4/16/2020 11:27 PM	Open
Conny Innwood	4/16/2020 11:27 PM	Open
Wayne Luscott	4/16/2020 11:27 PM	Open

Aloysius Collington
MemberID: 1039 Primary Phone: 6157242682 Primary Address: 44481 CONTINENTAL HILL

Created by: Scott Voigt Created date: 04/16/2020
Type: Message Last Updated Date: 05/05/2020
Subject: Wheelchair and ramp Status: Closed
Description: The member has decreased mobility and may need a wheelchair or walker. Will also need a ramp home modification. Assigned to: CB Payer
Share with payer: CB Payer

INTERNAL SHARED

Leave a comment

Enter a comment

Attach file

CANCEL SEND

There are a number of actions that can be utilized from a Discussion:

- **Status:** To track progress on a given Discussion, the user can update the Status. Statuses available are 'Open', 'In Progress', and 'Closed'
- **Assigned to:** To better manage tasks across a Provider agency, the user can choose to assign Discussions to an Caregiver.
- **Internal/Shared:** If the user needs to send the Discussion to the Member's MCO, they can do so by selecting the 'Shared' option from this drop-down.
- **Comments:** At the bottom of the Discussion, there are two tabs: 'Internal' and 'Shared'. Both tabs allow for comment threads to communicate about the item. The 'Shared' tab will only be available if the 'Shared' option is chosen. Discussion with the MCO can be facilitated through entering comments in the 'Shared' tab.

DASHBOARD & REPORTING

OVERVIEW

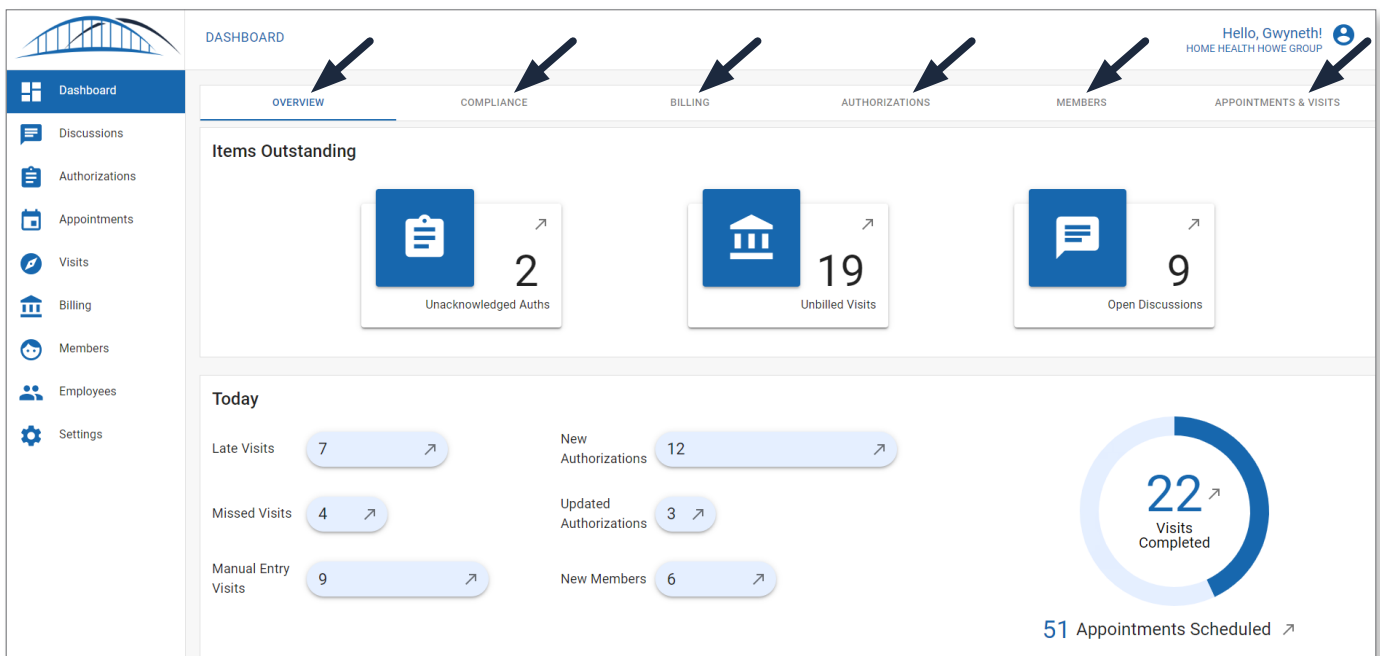
This section will introduce the features and functionality within the CareBridge Platform that enable Provider Agency Employees to view key graphs, metrics, and data related to operational efficiency.

DASHBOARD

The CareBridge Provider Portal Dashboard page allows Agency Employees to view key metrics in order to better prioritize and manage tasks on which action may need to be taken.

On the Dashboard page, there are tabs for each of the Dashboards available (Figure 85):

Figure 85. Dashboard Page



- **Overview:** This dashboard displays metrics related to items that are outstanding or may require action and metrics related to operational efficiency within the Provider Agency today.
- **Compliance:** This dashboard displays metrics to better understand how many completed Visits are EVV compliant and the sources of non-compliance.
- **Billing:** This dashboard displays metrics related to the revenue cycle of completed Visits in the CareBridge Platform.
- **Authorizations:** This dashboard helps Agency Employees better understand the number of active Authorizations and Authorizations by Service type.
- **Members:** This dashboard helps Agency Employees explore the number of active Members.
- **Appointments & Visits:** This dashboard displays metrics related to the number of Scheduled Appointments and completed Visits.

Each of the dashboards can be filtered by date range or Payer (MCO). By selecting the arrow icon on the top right corner of each metric or graph, the user will be taken to a report that displays the

data that makes up that metric or graph.

REPORTS

In addition to the 'Personal Filter' that is available on the Authorizations, Appointments, Visits, Billing, Members, and Employees pages, there are also Reports that have predefined filters to help quickly navigate to useful subsets of data. The following is a complete list of the Reports available in the CareBridge Provider Portal:

REPORT NAME	PAGE	DESCRIPTION (EVV DATA)
Payroll Report	Employees	Payroll data for a given time period for each Employee based on completed Visits in that time period.
Employees Compliance Score Report	Employees	All Provider Employees sorted in ascending order by Compliance Score. Compliance Score is configurable per MCO but is typically defined as the percentage of EVV Visits that are compliant (defined as EVV or IVR visits) relative to the total number of Visits. Examples of non-compliant Visits are manual entries, late, or missed.
Active Members Report	Members	All active Members.
Unassigned Members Report	Members	All Members who have not been assigned to an Office.
Members Compliance Score Report	Members	All Members sorted in ascending order by Compliance Score. Compliance Score is configurable per MCO but is typically defined as the percentage of EVV Visits that are compliant (defined as EVV or IVR visits) relative to the total number of Visits. Examples of non-compliant Visits are manual entries, late, or missed.
Low Utilization Report	Authorizations	All Authorizations in ascending order that have less than 25% of the authorized units scheduled. This helps to focus attention on Authorizations that may need Appointments scheduled for them.
High Utilization Report	Authorizations	All Authorizations in ascending order that have less than 75% of the Authorized units scheduled.
Unacknowledged Authorizations Report	Authorizations	All Authorizations that have not yet been acknowledged or declined.
Unassigned Authorizations Report	Authorizations	All Authorizations that have not yet been assigned an Employee.

REPORT NAME	PAGE	DESCRIPTION (EVV DATA)
Late Appointments	Appointments	All appointments that are late. An appointment is considered late when a Check-In has not occurred within one hour of the appointment start time.
Missed Appointments	Appointments	All appointments that have been missed. An appointment is considered missed when a Check-In has not occurred within three hours of the appointment start time.
Late Visits	Visits	All visits that have been completed but were started late, as an example, a Visit could be considered to be late when a Check-In has not occurred within 15 minutes of the appointment start time.
Missed Visits	Visits	All missed visits. A visit could be considered missed when a Check-In has not occurred within one hour of the appointment start time.
Manual Visits	Visits	All Manual Entry Visits.
EVV Visits	Visits	All completed Visits that have compliant EVV data.
Service Claims	Visits	All completed non-EVV Visits.
Rejected Visits	Billing	All Visits that have rejected claims.
Denied Visits	Billing	All Visits that have denied claims.

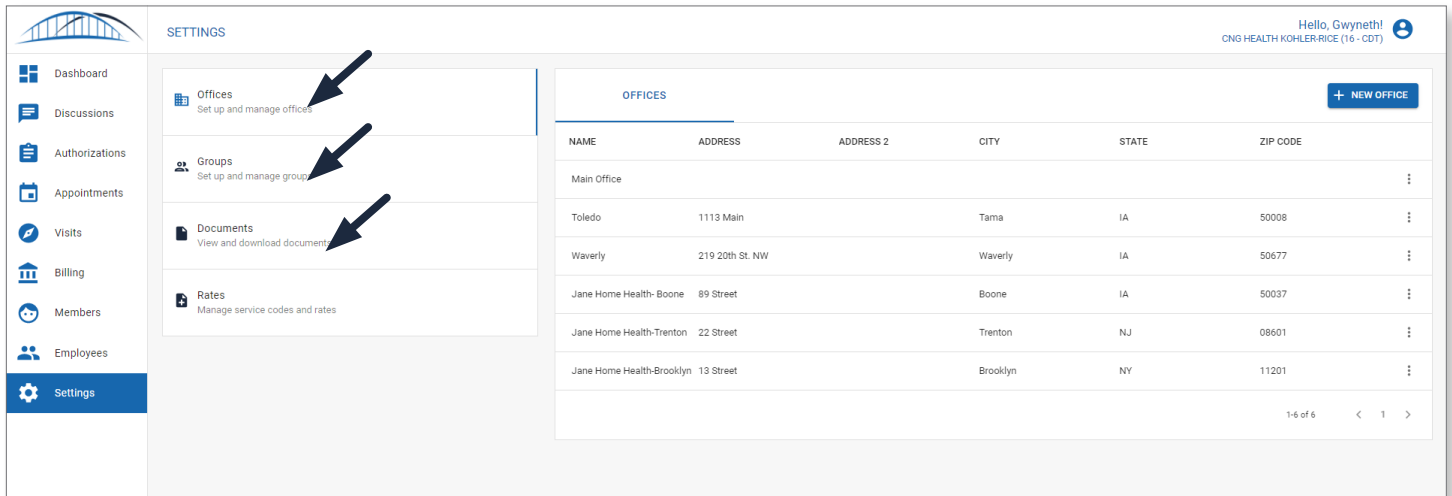
SETTINGS

OVERVIEW

The following will help introduce the features and functionality within the CareBridge Platform that enable Provider Agency Employees to configure the system to their workflows and preferences.

On the Settings Page, there are sub-tabs for 'Offices,' 'Groups,' and 'Documents' (Figure 86).

Figure 86. Settings Page

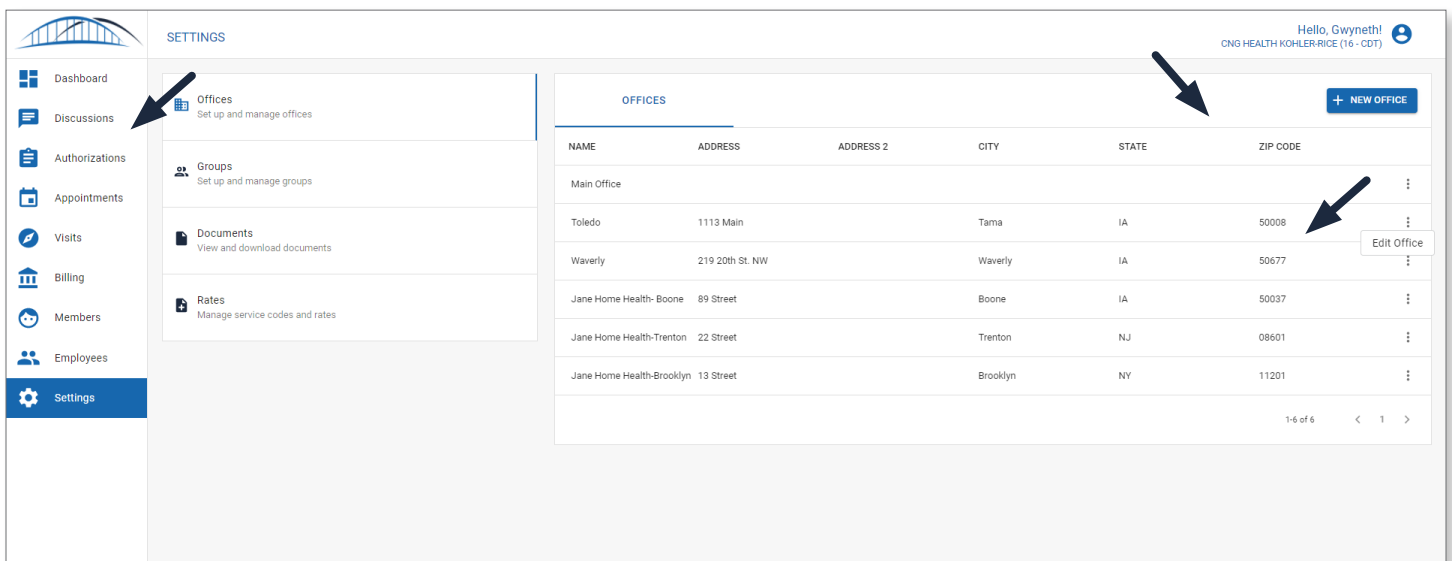


OFFICES

Offices are a way for Provider Agencies to configure multiple locations with the CareBridge Provider Portal. Employees/Caregivers and Members can be assigned to offices to better drive the scheduling of Caregivers to Members and to be able to run reports by agency location.

To create a new Office, select the 'New Office' button at the top of the Offices table. To edit an Office, select the menu icon (3 dots) next to the Office and select 'Edit Office' (Figure 87).

Figure 87. 'Offices'

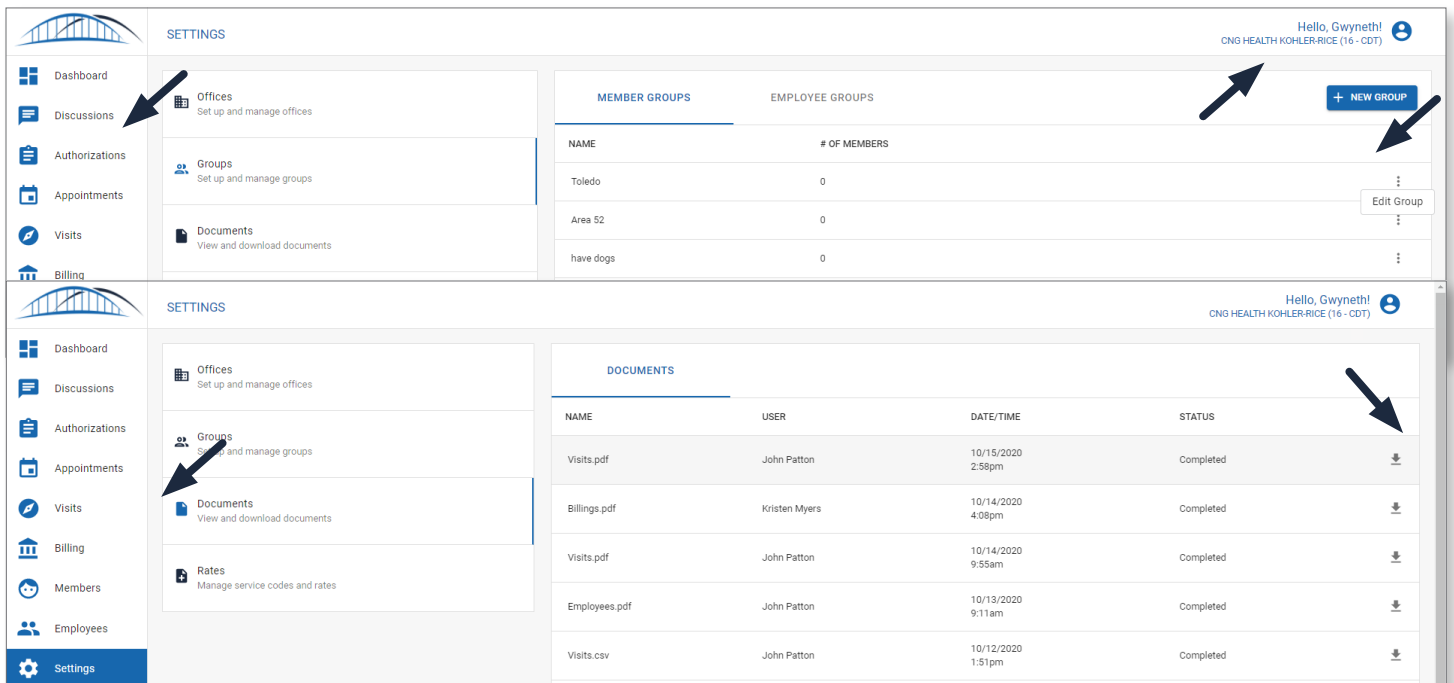


GROUPS

Groups are a way for Provider Agencies to organize their Employees/Caregivers and the Members they serve. By choosing to assign an Employee/Caregiver or a Member to a Group, the Agency can more easily run reports for specific populations of Caregivers or Members. As an example, an Agency may choose to create Member Groups based on Member characteristics such as “have dogs”, “have cats”, “prefer male Caregivers” to better inform the Caregiver when scheduling appointments.

To create a new Group, select the ‘New Group’ button at the top of the Groups table. To edit a Group, select the menu icon (3 dots) next to the Office and select ‘Edit Group’ (Figure 88). There are two types of Groups that can be created – Employee and Member.

Figure 88. ‘Groups’



ROLE DEFINITIONS

The following is a list of roles that have been referred to within the CareBridge Platform Training Guide. As this list evolves, the agency will be provided with updated lists.

Administrator – Provider agency employee with Administrator permissions in the EVV system.

Agency Employee – Provider agency office staff who will be using the EVV system for some type of operational function (i.e., managing authorizations, scheduling appointments, assigning caregivers to members, billing, etc)

Caregiver – The employee who works in the member's home providing authorized services.

Employee – Anyone who works for the provider agency.

Managed Care Organization (MCO) – The member's health plan.

Member – The person the provider agency supports who is enrolled in the LTSS program receiving services in their home.

Payer – The Managed Care Organization (MCO) that reimburses the provider agency for services rendered.

User – Anyone at CareBridge, the MCO or the provider agency who logs into the EVV system, via web portal or mobile app, to review data or do work.