

AuthentiCare® New Mexico Turquoise Care Provider Agency Training

### Training Topics



- $\checkmark$  Getting started, logging in and navigating AuthentiCare  $^{\mathbb{R}}$
- ✓ Registering Users
- ✓ Adding Workers and Reviewing Client Information
- ✓ Authorizations
- ✓ Creating and Searching Claims
- ✓ Confirming Claims for Billing
- ✓ Mobile Application and Interactive Voice Response System
- ✓ Reports



#### **Getting Started**

### What is EVV and AuthentiCare<sup>®</sup>?



#### **EVV = Electronic Visit Verification**

- A method used to verify home healthcare visits.
- Based on the 21st Century Cures Act, EVV is necessary to receive full Federal Medical Assistance/Medicaid funding for qualifying programs/services.
- EVV records the following elements:
  - (1) Service provided
  - (2) Date of service
  - (3) Individual providing service

- (4) Individual receiving service
- (5) Location of service
- (6) Time service delivery begins/ends

#### AuthentiCare<sup>®</sup>

- Provides electronic scheduling, tracking, reporting, and billing of EVV Claims.
- Help states comply to EVV regulations to ensure funding for programs/services.

#### **Process Flow**

Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7
If applicable, service is authorized	Worker checks in	Service is provided	Worker checks out	Claim is generated	Provider must clear exceptions and confirm Claims for billing	Provider is paid





Type www.authenticare.com/nmcc into your browser.



The *Login* page will appear. Enter your **email address** and **password** and click **Submit.** 

Welcome to Authent	iCare	
Please enter your AuthentiCare email address and password to access the system.		
* Email Address:		
* Password:		
	Submit	

### How to Log in

2	
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	-

Create your user profile by typing in your **name**, **phone number**, **email address**, **username** and **security questions**. Type in the moving characters.

Click Save.



**Note:** Security questions secure account information and allow users to reset their passwords.



Type in the verification code sent to your **email address**. The email is sent from noreply@pingidentity.com.



Read the user agreement. Click **Accept** on the bottom of the page to access the web portal.

* Indicates a required ne	:iu.			
	* First Name:			
	Middle Name:			
	* Last Name:			
* M	obile phone number:			
	* Email Address:			
	* Username:			
*Security Questions:		~		
*Security Questions:	7	~ ~ ~	C	

Verify your email address
* Indicates a required field.
Enter verification code sent to your email address:
Please check your email for a verification code. Do not share the verification code with anyone.
Submit Resend Code



#### **Multi-Factor Authentication**



#### What is Multi-Factor Authentication?

Multi-factor authentication (MFA) helps keep your AuthentiCare<sup>®</sup> account secure by requiring an extra step when you log in.

#### Important Notes About MFA:

- If you get logged out of AuthentiCare® automatically because the session times out, you'll only need to complete MFA after 4 hours have passed since the last time MFA was completed.
- If you log out of AuthentiCare® by clicking **Logout** in the upper righthand corner of the screen, MFA is required the next time you log in.
- If you have more than one AuthentiCare® account, a unique email address must be listed within each account on your User Profile.

#### **Multi-Factor Authentication Steps**

- 1. Login to AuthentiCare by entering your email address and password and click Submit.
- 2. The Verify Your Email Address page populates.

Ve	rify your email address		
* Enter verification code sent to your email address:			
Please check your email for a verification code. Do not share the verification code with anyone.			
	Submit Resend Code Cancel		

3. Check your email address for an email from <u>noreply@pingidentity.com</u> to find the verification code. The email address that will receive this email is listed on your AuthentiCare<sup>®</sup> User Profile.



4. Enter the verification code and click **Submit**.

### Password Policy



#### Passwords must:

- Be at least 9 characters in length
- Cannot use the same previous 8 passwords
- Be changed every 60 days
- Contain at least one of each of the following:
  - Lower case letter
  - Upper case letter
  - Number
  - Special characters are @#\$%^&?!+=()
- Example: P@ssw0rd#



#### Notes:

- Do *not* share your password.
- Users are locked out after 3 incorrect login attempts.
- Agency administrators can unlock accounts.

### Home Page

The *Home* page provides access to all functions.

#### Main content sections:

- 1. Menu/Toolbar
- 2. User ID
- 3. Entities
- 4. Services and Authorizations
- 5. Claims

	in the providence of the provi	Lines   Logour	
Entities		Claims	
Add New > <u>Clier</u> Wor Rep	<u>it</u> <u>ker</u> r <u>esentative</u>	Add New > Cla	<u>im (Standard)</u>
Entity Type >	<b>~</b>	۲	Claim
Search >		Search Type: 🔾 🔿	Confirm Billing - View
	Go!	00	Confirm Billing - Bulk
		Claim ID:	
Services and Authoriz	ations		Go! Clear
	○ Service	Claim Status:	~
Search Ty	• Authorization	Claim Start:	MM/DD/YYYY
Servi	ce:	Claim End:	MM/DD/YYYY
Authorization 1	D:	Service:	
Service Ty	e: 🗸 🗸	Authorization ID:	
Authorization Sta	rt: MM/DD/YYYY	Client:	
	id: MM/DD/YYYY	Provider:	
Authorization Er		Worker:	
Authorization Er Clie	nt:		
Authorization Er Clie Provid	nt:	Representative:	
Authorization Er Clie Provid Work	nt:	Representative: Payer:	
Authorization Er Clie Provid Work Pay	nt:	Representative: Payer: Procedure Code:	

### Main Menu Toolbar

#### Home Create Reports Scheduling Dashboards Visits Administration My Account Custom Links Logout

Menu Option	Function
Home	Link to home page
Create	Allows creation of new entities
Reports	Link to report page
Scheduling	Allows creation of schedules and view of calendar
Dashboards	Access to three dashboards which display status of Claims, exceptions and the day's schedule
Visits	Shows late and missed visits
Administration	Allows upload of external files and access to the file layout designer
My Account	Link to change password
Custom Links	Link to resources
Logout	Exits the application

#### Update Email for Multi-Factor Authentication

1. Hover over *My Account* and click **Update User Profile**.

Home   Create   Reports   9	Scheduling	Dashboards	Visits	Administration	My Account	Custom	Links	Logout
					<u>Update Use</u>	<u>r Profile</u>		

2. Click **Edit** in the upper right-hand corner.

Update	User Profile
* Indicates a required field.	
	Edit
* First Name:	Admin
Middle Name:	
* Last Name:	Admin
* Mobile phone number:	111111111

**3.** Update the email address fields and click **Update**.

Update Contact Information				
* Indicates a required field.				
* First Name:	Admin			
Middle Name:				
* Last Name:	Admin			
* Mobile phone number:	111111111			
* Email Address:	Email Address required			
* Confirm Email Address:	Confirm Email Address required			
	Cancel Update			

### Updating User Profile and Changing Password

1	

## Hover over **My Account** and click **Update User Profile**.

Click corresponding **Edit/Change Password** button for the information that needs to be updated.

Edit
Change Password
Edit

### **Checking Provider Information**

	Entities	
	Add New >	<u>Client</u> <u>Worker</u>
	Entity Type >	~ ·
	Search >	
		GO:
<b>Provider Entity</b>	Settings	Entity Addresses/Phones
* Indicates a requ	ired field.	Add Address
ID:	65555555	
PIN:		Address Type: Other V Delete
Middle Name:		* Address Description: B
Last Name:		* Address Line 1: 800 N TELSHOR BLVD
* Company Name:	Vilas Heydi Mike NMCC Care LLC	Address Line 2: STE ABO 910
SSN:		* City: ALBUQUERQUE
FID:	*****5555	* State: NM * 7in: 97101
Gender:		State: My Zip: 0/101
Birth Date:		
Email:		
Begin Date:		Address Type: Other V Delete
End Date:		* Address Description: P
Language:	A star	
Status:	Active	* Address Line 1: 700 N TELSHOR BLVD
* Entity Oualifier:	Business 💙	Address Line 2: STE B
Extra Claim		* City: LAS CRUCES
Review:		* State: NM * Zip: 880068251
Mileage:		
NPI:	1999955555 Skilled Nursing BN	
	Skilled Nursing LPN	Address Type: Other X Delete
	Physical Therapy Visit Physical Therapy Assistant	# Address Description:
	Occupational Therapy Visit	Address Description: w
	Occupational Therapy Assistant Home Health Aide	* Address Line 1: 900 N TELSHOR BLVD
	Speech Language Therapy Visit	t Address Line 2: STE T 801
	Respite	* City: TAOS
* Provider	Respite LPN	* State: NM * 7in: 875711825

- 1. Go to the *Entities* section on the *Home* page.
- 2. Please click the drop-down menu for *Entity type*, choose **Provider**, and then click **Go!**
- 3. Review the *Provider Entity Settings* page information for accuracy.

**Note**: Email address listed will receive alerts for late or missed visits.



# Registering and Disabling Users

### Registering Users



#### Who are Users?

Users are administrators who can make updates and changes to the AuthentiCare<sup>®</sup> web portal.

#### Important Notes About Users:

- New users need to be trained on AuthentiCare<sup>®</sup> before getting access to the portal.
- Do not create login information for Workers.

### Register Users

- 1. On the *Provider Entity Settings* page, go to the *Registered Users* section.
- 2. Click Add User.

- On the *Register* page, type in the Email Address, Password, and Confirm Password for the new user.
- 4. Select the **User Role** for the user.
- 5. Click Register.

Registered Users			
Adding a user saves any changes to Add User	o this page and navigates	to a new page	
User Name	Role	Registered On	Ei
harishpuat2@nmcc.com	NM_Administrator	04/15/2024	

Register		
Use your assigned ID and PIN plus your e-mail address and	I a password you choose to register for access to th	e website.
* Email Address:		
* Password:		
* Confirm Password:		
* User Roles:	NM_AdminAssistant NM_Administrator NM_ClaimsMgt1 NM_ClaimsMgt2 NM_HumanResources NM_IntakeReferral NM_Payroll/Billing	Rights: Add Claims Edit Claims View Claims Delete Claims Edit Clients Add Workers Edit Workers Edit Workers Wiew Workers Wiew Workers

#### **Disable Users**

#### Why Disable Users?

If or when a user leaves an organization, they must be disabled as an AuthentiCare<sup>®</sup> user to protect your agency's information and data.

Do not delete a user. If an admin is deleted, they will not be able to register with AuthentiCare<sup> $\mathbb{R}$ </sup> again with the same email address.



- 1. On the *Provider Entity Settings* page, go to the *Registered Users* section.
- 2. Inactivate the user account by unchecking the **Enabled** checkbox.
- 3. Click **Save** on the bottom of the page.



#### Note:

 Username, role, registration date and status are displayed in the *Registered Users* section.

### Adding Negotiated Rates for Each Service by MCO

● Yes ○ No

Yes 
 No
 Yes 
 No
 Yes 
 No
 Yes 
 No
 Yes 
 No
 Yes 
 No
 Yes 
 No
 Yes 
 No
 Yes 
 No
 Yes 
 No
 Yes 
 No
 Yes 
 No
 Yes 
 No
 Yes 
 No

• Yes • No

rovider Entity	Settings	Entity A	Addresses/Ph	nones			
Indicates a requi	ired field.	Add	Address				
ID:	655555555 *****			-			
First Name:			Address Type:	Other 🗸	Delete		
Middle Name:		* Addre	ss Description:	В			
Last Name:		* /	Address Line 1:	800 N TE	LSHOR BLVD		
Company Name:	Vilas Heydi Mike NMCC Care LLC		ddress Line 2:	STE ABO	910		
SSN:		í í	* City		ROUE		
FID:	*****5555		city.	ALBOQUE	* 71 07101	1	
Gender:			* State:	INM	* Zip: [8/101	J	
Birth Date:							
Email:							
Begin Date:			Address Type:	Other 🗸	Delete		
End Date:		* Addro	se Description:	P		_	
Language:		Addre	ss Description.				
Status:	Active	* /	Address Line 1:	700 N TE	LSHOR BLVD		
* Entity	Business ¥	4	Address Line 2:	STE B			
Qualifier:			* City:	LAS CRUC	CES		
Extra Claim Review:			* State:	NM	* Zip: 880068251	1	
Mileage:						,	
NPI:	1999955555		Optional	Attrib	oute Data Co	llection	
	Skilled Nursing RN						
	Skilled Nursing LPN Physical Therapy Visit		000M1808		Service	Optional	Enabled:
	Physical Therapy Assistant	* Addre			Service	optional	Lindbredi
	Occupational Therapy Visit Occupational Therapy Assistant		000M1814		Service	Optional	Enabled:
	Home Health Aide	*,	42101522		Sanvica	Ontional	Enabled
	Speech Language Therapy Visit Social Worker Visit		42101522		Service	optional	chableu.
* Desuides	Respite		68069		Service	Optional	Enabled:
Services:	Respite RN		07706		Convice	Ontional	Enabled
			87720		Service	Optional	Enableu:
			EarlyVisitTh	reshold	d Client	Optional	Enabled:
			External Cili	ontID	Client	Ontional	Enabled
			ExternalClie	shub	Client	optional	chabled:
			LateVisitTh	reshold	Client	Optional	Enabled:
			MinnedMinte	Threak	dd Client	Ontional	Enabled
			misseavisit	inresho	Client	Optional	Enabled:

NoTechZone

Client

Optional

Enabled:

- On the *Provider Entity Settings* page, go to the *Optional Attribute Data Collection* section.
- Select the MCO you have a Negotiated Service Rate with:
  - 000M1808: Molina HealthCare of New Mexico
  - 000M1814: Presbyterian Health Services
  - 42101522: Blue Cross and Blue Shield of New Mexico
  - 87726: United HealthCare of New Mexico
- Click **Save** on the bottom of the page.

### Adding Negotiated Rates for Each Service by MCO



- After enabling the MCO(s) on the Optional Attribute Data Collection section, proceed to the Service and Authorizations section on the Home Page.
- Click on the Service radio button and click Go!
- Find the **Service(s)** the Negotiated Service Rate need to be added and enter them with their respective MCO.
- Click Save Rates on the bottom of the page.

### File Upload

- You can upload the 835 files they receive from the applicable MCO into AuthentiCare New Mexico Turquoise Care whenever they want to do so, 24/7.
- AuthentiCare will accept the 835 file with an ".edi" extension, as a zip file having a ".zip" extension or with an ".rsp" extension.
- Once uploaded, the 835 file will be queued in the background for the remittance data to be imported. You will be notified by email when the processing is complete.
- If the file is successfully processed, you will be able to run the remittance reports to see the data processed from the 835 files.
- If the file is unsuccessful, the reason will be provided in the email along with contact information for Customer Support for assistance in resolving the issue.

	<u>Fi</u>	ile Upload	
Entities	S	earch Payer History	Claims
To begin the	upload process,	hover over	the Administration tab on the tool
b	ar and click on th	e File Uplo	ad tab when it appears.
Do not close your browser o	r move away from this page	until vou get a co	nfirmation massage that the file has been successfully unloaded
oo not close your browser o	in move away from this page	until you get a co	minimation message that the file has been successfully dploaded.
File Upload			
File Upload * Indicates a required field.			
File Upload * Indicates a required field. * File Type:	835rsp,	.edi, .zip	
File Upload * Indicates a required field. * File Type: * Select File: Choose Fil	835rsp, No file chosen	.edi, .zip	✓ Attach It
File Upload  * Indicates a required field.  * File Type:  * Select File: Choose Fil  Please unload one file at a tim	835rsp, No file chosen	.edi, .zip riate extension For	Attach It 835 unload. Zin files ( zin) containing more than one of those files are also
File Upload * Indicates a required field. * File Type: * Select File: Choose Fil Please upload one file at a tim allowed.	835rsp, No file chosen Ne. Select a file with an approp	.edi, .zip riate extension. For	Attach It 835 upload, Zip files (.zip) containing more than one of those files are also
File Upload  * Indicates a required field.  * File Type:  * Select File: Choose Fil  Please upload one file at a tim allowed.  * Email Address:	835rsp, No file chosen e. Select a file with an approp	.edi, .zip riate extension. For	• Attach It 835 upload, Zip files (.zip) containing more than one of those files are also
File Upload  * Indicates a required field.  * File Type:  * Select File: Choose Fil  Please upload one file at a tim allowed.  * Email Address: Enter your email address abox joe@anymail.com,lisa@anymail.com,lis	835rsp, e No file chosen ie. Select a file with an approp ve to receive notification when ail.com,tim@anymail.com)	.edi, .zip riate extension. For your file is processe	• Attach It 835 upload, Zip files (.zip) containing more than one of those files are also ed. You can enter multiple email addresses separated by commas. (e.g.
File Upload  * Indicates a required field.  * File Type:  * Select File: Choose Fil  Please upload one file at a tim allowed.  * Email Address: Enter your email address abov foe@anymail.com,lisa@anyma For 835 upload, If email indica	835rsp, No file chosen Re. Select a file with an approp ve to receive notification when ail.com,tim@anymail.com) ates success you should be abl	.edi, .zip riate extension. For your file is process e to see remittance	Attach It 835 upload, Zip files (.zip) containing more than one of those files are also ed. You can enter multiple email addresses separated by commas. (e.g. data in the remittance advice and remittance data listing reports.

Chose file to upload and click on "**Attach It**" A 90-day rolling history will be displayed that shows details about the files uploaded



### Clients

#### **Client Overview**



#### Who are Clients?

Clients are the individuals who are receiving Medicaid services.



#### **Important Notes About Clients:**

- Clients are associated with provider agencies through authorizations or the association function in AuthentiCare®.
- View important demographic information.
- Add or edit Client Address and telephone information.
- Add an External Client ID unique to the Provider Agency.
- Client information cannot be edited in the Web Portal

### Viewing Clients

- From the Home page, click on the drop-down menu and select "Client"
- The *Entity Search Results* page will appear.
- Click on the Client's ID and the Client Entity Settings Page will appear.
- Address, Phone and External Client ID are the only editable sections within the page.

Entities		
Add New >	<u>Client</u> Worker	
Entity Type >		<u> </u>
Search >	Client Worker Benresentative	
	Representative	Entity Search Results

ID	Name	<u>User Type</u>	Information	Delete Selected
<u>3545527231</u>	BhopalBCBS, Pune A	Client	ŝ	
<u>3445527231</u>	BhopalPHS, Pune B	Client	£	
3444547231	BhopalWSCC, Pune	Client	<u>£</u>	
3455527231	MumbaiBCBS, Bell	Client	£	
3444577231	MumbaiWSCC, Bell Z	Client	<u>£</u>	
344444231	MumbaiWSCCALL9, Bell	Client	<u>£</u>	
3444527231	MumbiaPHS, Bell C	Client	£	

Client Entity Settings		Entity A
* Indicates a required field.		Address a
* ID:	3545527231	communic
PIN:	*****	services.A
* First Name:	Pune	not comm
Middle Name:	Α	services.
* Last Name:	BhopalBCBS	Add
Company Name:		
SSN:		Ad
FID:		
Gender:	Male	* Add
* Birth Date:	01/23/1960	Add
Email Address:		
Begin Date:		
End Date:		
Language:	English	Disable I
Status:	Active	DISADIEL
High Risk:	Vec	
Approve FVV		
Exception:		Add
Setting End Date:	12/31/2028	Phone Ty
Setting Of Care:		Home 🗸
Setting Start Date:	01/01/2023	
Payer Assignment:	BCBSNM	
		ID Card N
Case Manager:		Status:
Effective Date:		
Representative:		
Effective Date:		
Effective Date.		
External ClientID:		
	· · · · · · · · · · · · · · · · · · ·	
Cause / Casasta A and the		
Save/Create Another	Save Cancel Delete	

#### ntity Addresses/Phones

Address and phone number updates made in AuthentiCare are not communicated to external systems. To change the address or phone number on record, contact the MCO or Conduent member services.Address and phone number updates made in AuthentiCare are not communicated to external systems. To change the address or phone number on record, contact the MCO or Conduent member services.

#### Add Address

Address Type: Home Delete \* Address Line 1: 10 Queensland Rd Address Line 2: \* City: Clovis \* State: NM \* Zip: 88101 Longitude: -96.20644875 Latitude: 41.17731850 Disable Learn Mode: WiewMap Add Phone Phone Type Phone Number Home V (999) 555-0001 Delete



### **Creating Workers**

#### Workers Overview



#### Who are Workers?

Workers deliver services to Clients.



#### Important Notes About Workers:

- Workers *do not* have access to the Web Portal.
- Provider agencies must create Worker profiles before a successful check in or check out.
- Workers must use one of the approved methods to check in when service delivery begins, and check out when service delivery ends:
  - ✓ Mobile Application
  - ✓ Interactive Voice Response (IVR) System

### Steps to Create a Worker

- 1. In the *Entities* section of the *Home* page next to *Add New*, click **Worker**.
- 2. The Worker Entity Settings page will display.
- 3. Enter the first, last name, SSN, Gender, DOB, Begin Date, Language, Status (Active), Select Worker services, select **Yes** for Mobile Enabled, create a password, mobile phone number, device ID and office phone.
- 4. Click Search.
- 5. Click Save.
- After clicking Save, the AuthentiCare® Worker ID will generate in the ID field at the top of the page. The AuthentiCare® Worker ID is necessary for the Worker to check-in and check-out.

* Indicates a required field.			_					
ID:		Add Addre	255					
PIN:		Add Phon	1e					
* First Name:				•				
Middle Name:		us lister ( D						
* Last Name:		Holidays / Da	ays O					
Company Name:								<b>^</b>
* SSN:								
FID:								
Gender								
Birth Date:	MM/DD/YYYY W							-
Email Address						_		
* Begin Date:	MM/DD/YYYY	Add Holiday MM	I/DD/YY	<u> </u>	dd Rem	ove		
End Date:	MM/DD/YYYY	From Date		lo Date				
Language:		[MM/DD/YYYY]	iiii [MM∕	DD/YYYY	Add			
Status	Active 🗸	March Harris						
Mobile App Mode:	Standard 🗸	WORK HOURS						
Self Directed Worker:		Choose if the ent (Default), if the e	tity will entity ha	use the de as the dav	fault busir off (Off) (	ness hours or if the entit	tv	
	ABD Respite	has a custom hou	urs (Cu	stom).			·	
	ABD Respite Medical / Behavioral					Start Time		End Time
* Worker Services:	ABD PDMS Respite ABD CDS-Family Support/Respite	Sun Osfault	0	0				
	<	Deradic	0	0				
		Mon Default	off	Custom				
* Mobile Enabled:	O Yes 💿 No	тие 💿	0	0				
	Generate QR Code	Default	Off	Custom				
Mobile Locked	⊖Yes ● No	Wed Opfault	Off	Oustom				
Password		. O	0	0				
Worker Must Change Password:		Thu Default	off	Custom				
Mobile phone number:		Fri 🦲	0	0				
Device ID:		Default	Off	Custom				
0/(* 0)		Sat 🔘 Default	off	Custom				
Office Phone:								
Office Phone:								
Add Provider								
Add Provider Provider: Staphon Training	Delete							
Add Provider Provider: Staphon Training 🔄	Delete							



# Services & Authorizations

### Personal Care Service (PCS) Codes

Procedure Code	Service ID	Service Name	Activity Codes	Procedure Code	Service Identifier	Service Name
T1019	T1019	Personal Care –Consumer Delegated	1 Hygiene and Grooming 2 Individual Bowel and Bladder 3 Meal Preparation and Assistance	G9012	G9012	Consumer Directed Advertisement Reimbursement
99509	99509	Personal Care – Consumer Directed	4 Eating 5 Household Services and Support Services 6 Supportive Mobility Assistance 7 Hauling and Heating Water	99509	99509U1	Respite
S5110	S5110	Personal Care – Consumer Directed Training		T1003	T1003U1	Respite LPN
X9999	X9999	Supervisory Home Visit		T1002	T1002U1	Respite RN
S5125	S5125	EPSDT Personal Care	<ul> <li>10 Hygiene / Grooming</li> <li>11 Toileting</li> <li>12 Meal Preparation</li> <li>13 Eating</li> <li>14 Support Services</li> <li>15 Mobility Locomotion</li> <li>16 Transfers</li> <li>17 Dressing</li> <li>18 Minor Maintenance of DME</li> <li>19 Light Housekeeping</li> <li>20 Assistance With Taking</li> <li>Medications</li> </ul>	G9006	G9006U1	Stipend Service – 100%
G9006	G9006	Consumer Directed Administrative Fee		G9006	G9006U2	Stipend Service - 50%

### Home Health Service (HH) Codes

Revenue Code (PHP)	Procedure Code (BCBS, MHC, UHC)	Service Name	Service ID	Activity Code* (IVR & Web Portal)	Same Day Unit Restriction
0421	G0151	Physical Therapy Visit	G0151	N/A	6 units
0421	G0157	Physical Therapy Assistant	G0157	N/A	6 units
0441	G0153	Speech Language Therapy Visit	G0153	N/A	6 units
0431	G0152	Occupational Therapy Visit	G0152	N/A	6 units
0431	G0158	Occupational Therapy Assistant	G0158	N/A	6 units
0571	G0156	Home Health Aide	G0156	N/A	8 units
0551	G0300	Skilled Nursing LPN	G0300	21- LPN observation/assessment of patient 22- Skilled Nursing LPN – Training	8 units
0551	G0299	Skilled Nursing RN	G0299	23- RN (only) management of POC 24- RN observation/assessment of patient 25- Skilled Nursing RN – Training	8 units
0561	G0155	Social Worker Visit	G0155	N/A	6 units

#### What are Authorizations?



#### What are Authorizations?

Show the number of units and the service a Client is allowed to receive.

#### Important Notes About Authorizations:

- Only Provider Administrators with roles allowing search and view of Authorizations will be able to utilize this function in AuthentiCare.
- All authorizations are loaded into AuthentiCare by Turquoise Care MCOs.
- Providers CANNOT add new authorizations or edit an existing authorizations.
- Authorizations are used to associate Clients to providers in the Web Portal.

#### Search & View Authorizations



Click the **Authorization** radio button in the Services and Authorizations section of the *Home* page.

Enter search criteria in any of the fields, if desired and click **Go!** 





The search results display all authorizations which match the search criteria entered on the *Home* page.

Click on the **ID** hyperlink in the ID column to view the authorization.

Ithorizations									
Event Actions	ID	Service ID	Client	Provider	Worker	Payer	Service Period	Effective Dates	Information
Units Remaining: 36000	F555555555501	SDCB - Self Directed Personal Care (SDCB99509)	Client1, TCoETest A (311111101)		Worker1, TCoETest (185214)	BCBSNM (42101522)	Annual	06/01/2020 - 12/30/2099	8
Units Remaining: 36000	F555555555502	SDCB - Self-Directed Personal Care Exception (SDCB99509E)	Client1, TCoETest A (3111111101)		Worker1, TCoETest (185214)	BCBSNM (42101522)	Annual	06/01/2020 - 12/30/2099	8
Units Remaining: 36000	F55555555553	SDCB - Respite LPN (SDCBT1005LPN)	Client2, TCoETest B (311111102)		Worker2, TCoETest (161216)	Pres HP (000M1814)	Annual	06/01/2020 - 12/30/2099	8



The Authorization Settings page displays.

Authorizat	tion Settings				
* Indicates a	a required field.				
Service Info	rmation				
Service ID:	<u>S5125</u>		Service	e Type:	Time Based
Name:	EPSDT Personal	Care	Proced	ure Code	e: S5125
Description:	EPSDT Personal	Care			
	ID:	4101	2		
	Client:	SCAL	ABRINO,	FRANK	Ca.
	Provider:	FMS I	MCC PR		1 🔄
	Worker:				
Effec	tive Date Start:	02/0	1/2022		
Effe	ective Date End:	05/3	1/2023		
	Service Period:	Week	ly		
Authori	zation Number:				
Diag	nosis Qualifier:				
I	Diagnosis Code:				
	* Total Units:	4000			
	* Rate:	5.145	50		
Pay	ver Assignment:				
1 4 1	or rasignment.				Cancel
				_	cancel

### Attending Provider (Home Health Services Only)

Attending Provider information is mandatory for all Home Health Claims only.

The information will be captured in the Attending Provider field in AuthentiCare on Authorizations.

- 1. Attending Provider First Name
- 2. Attending Provider Last Name
- 3. Attending Provider National Provider Identifier (NPI) Number

The Authorization Settings for Attending Provider is not editable.

For any updates, contact the MCO the Agency is contracted with.

<b>Authorization Settings</b>					
* Indicates a required field.					
Service Information					
Service ID: G0151	Service Type: Time Based				
Name: Physical Therap	by Visit Procedure Code: G0151				
Description: Physical Therap	by Visit				
ID:	BG0151HHBCBS2				
Client:	VANCEBFITTDMS, HANNAHTDMS H				
Provider:	V1 Home Care LLC 🛃				
Worker:	Worker:				
Effective Date Start:	02/01/2023				
Effective Date End:	12/31/2028				
Service Period:	One Time 🗸				
Authorization Number:	G0151HHBCBS2				
Diagnosis Qualifier:	ABK				
Diagnosis Code:	R69				
-					
* Total Units:	1000				
* Rate:	75.0000				
Payer Assignment:	BCBSNM				
Attending Provider First Name:	Jo Ann				
Attending Provider Last Name:	Jones				
Attending Provider NPI:	1477506780				
Void Sa	ive Cancel Delete				



### Managing Claims

### Claim Overview

Claims
Add New > <u>Claim (Standard)</u>
Claim
Search Type: O Confirm Billing - View
O Confirm Billing - Bulk
Claim ID:
Go! Clear
Claim Status: 🗸 🗸
Claim Start: MM/DD/YYYY
Claim End: MM/DD/YYYY
Service:
Authorization ID:
Client:
Provider:
Worker:
Paver:
Procedure Code:
User Option:
Include Inactive Claims?
Go! Clear

#### What are Claims?

Every service captured by a Mobile Device, the IVR (Interactive Voice Response System), or entered via the Web Portal.



#### **Important Notes About Claims:**

- Worker must use one of two approved EVV methods to checkin/out:
  - EVV mobile method
  - Client's landline or Mobile phone on file
- Each Claim has its own unique Claim ID.
- Claims can be created in the web portal by a Provider Agency as a back up option to the mobile device and IVR.
### **Claim Search Options**

A. If you know the Claim ID, use the upper portion and enter the Claim ID in *Claim ID* field and click **Go!** 

B. Enter the **Claim Start** and **Claim End** dates. The search maxes out at 31 days.

Use the lower portion with 1+ filters:

- Claim Status
- Service
- Authorization ID
- Client
- Provider
- Worker
- Payer
- Service Code

 Important: Inactive Claims will only be included in search results if the checkbox is checked.

Claims
Add New > <u>Claim (Standard)</u>
Claim
Search Type: O Confirm Billing - View
Confirm Billing - Bulk
Claim ID:
Go! Clear
B Claim Status:
Claim Start: 02/01/2022
Claim End: 02/28/2022
Service:
Authorization ID:
Client:
Provider:
Worker:
Representative:
Payer:
Procedure Code:
🗘 🗆 Include Inactive Claims?
Go! Clear

### **Claim Search Result**

#### Claims

- Table headers allow sorting.
- Claim search results can display up to 300 claims.
- Click the Claim ID to display the Claim Details page.



ome Repo	rts   Scheduling   Administration   My Account   Custom Links   Logout		Logged	in as: heydi.correaence	arnacion@nmuat.co
Claims (total of 1	1 records)				
ID	<u>Status</u>	Client ID	Client Name	Date Range	Information
<u>94912</u>	ConfirmBillingForClaim, EventMatching, InvalidClientEnrollment, MissingActivityCode	3000001174	CLIENT1174, TEST T	04/01/2022 - 04/01/2022	8
<u>94916</u>	InfoExceptions	300000007	CLIENT7, TEST T	03/22/2022 - 03/22/2022	8
<u>94917</u>	InfoExceptions	300000007	CLIENT7, TEST T	03/23/2022 - 03/23/2022	8
94913	ConfirmBillingForClaim, EventMatching, MissingActivityCode	49457	Test, Client2	04/01/2022 - 04/01/2022	8
94905	ConfirmBillingForClaim, EventMatching	49457	Test, Client2	03/24/2022 - 03/24/2022	8

## Creating a Manual Claim

1. Click **Add New > Claim (Standard)** on the *Home* page.

2. Fill in the blank fields in the *Standard Claim* page. Click **Save**. The **fields** include:

- Client
- Worker
- Service
- Date
- Time(s)
- Activity Codes
- Reason Code



Entil			Claims			
Add New > Client				Add New > Q	laim (Standard)	
Standard Claim						
* Client		* Provide TEST PROV	VIDER 12 🔄			
* Worker		Payer Ass Current P	<b>gnment</b> ayer For Client	~		
* Service	Date MM/DI	D/YYYY	Amount ##:##	Date MM/DD/YYYY	Time	Scheduled Hours: Save Delete A Cancel
Mileage:	Ti Tablet Smar Landi Tablet Electr Autho Subst	Malfunction phone malfunction ne/IVR unavailable not delivered nent weather ical outage rization issue itute caretaker g Stipend Claim	Travel Time: Total Lines: Delete   Add	1 Total Claims: 1 Total Ar Lines Above   Add Line	Click here 1 more servic mount: \$0.00 Total Authorized: \$1 Is Below   Move Up   Move Do	re(s) 0.00 wvn
łote:						

## Editing a Claim

**Claim correction** allows provider agencies to edit the following fields of a Claim:

- 1. Client
- 2. Worker
- 3. Service
- 4. Date
- 5. Time
- 6. Activity Codes
- 7. Reason Code
- 8. Note Data





## **Clearing Critical Exceptions**

In most situations, claims are created by Workers calling through the IVR or checking in and out on the mobile application from the Client's home. Workers may forget to check in or check out when arriving at or leaving a Client's home. They may choose the wrong service in error and fail to correct it while on the phone. In such situations, the provider can edit the claim by completing or correcting it.

Edit the information about the claim as necessary. Click **Save** to save your changes.

#### OR

Click **Cance**I to cancel your changes and return to the *Claims* page.

Claim Details		Claim ID: 95488
* Client	* Provider	Filed On: Web
* Worker	Payer Assignment Pres HP V	Printer Friendly Show All Claims
* Service Physical Therapy Assistant Date Time A 04/07/2023 11:00 AM 0	mount         Date         Time           0:31         04/07/2023         11:31 AM	Total Claims: 1 Total Calculated Amount: \$100.00 Total Authorized Amount: \$100.00 Total Units: 2
Mileage: Trav	vel Time:       Click here 1 more service(s)         otal Lines: 1 Total Claims: 1 Total Amount: \$100.00 Total Authorized: \$100.00	Total Hours:       00:31         Scheduled Units:       0         Scheduled Hours:       00:00         ✓ Review Complete         □ Inactive Claim
Critical Exceptions  BhopalPHS, Pune B  - Billing has not been confirmed for t claim This claim does not have a matchin	Delete   Add Lines Above   Add Lines Below   Move Up   Move Down this ng event.	Delete All Cancel
<ul> <li>This claim exceeds the maximum n of units per day that are allowed cumulatively.</li> <li>Payer Review Accepted</li> </ul>	lumber	
Note Data		
No note data was found.		

**Note:** More information about clearing critical exceptions can be found in the appendix of the User Manual.

### What are Exceptions?

#### What are critical exceptions?

- Critical exceptions prevent a Claim from being submitted for payment.
- Every Claim has a critical exception before confirm for billing.

#### What are informational exceptions?

- A notice of some problem associated with the visit creation which warrant further investigation.
- Informational exceptions do *not* prevent a Claim from being submitted for payment.

Claim Details	
* Client  * Worker	* Provider Payer Assignment
* Service	nount Date Time
Activity Codes: 41 (ex: 3,5,8) * Reason Code : v	
	Click here 1 more service(s) Total Lines: 1 Total Claims: 1 Total Amount: \$20.48 Total Authorized: \$20.48
Critical Exceptions	Add Lines Above   Add Lines Below   Move Up   Move Down

Claim Details	
* Client  * Worker	* Provider Payer Assignment
* Service	
Date Time A	mount Date Time
Activity Codes: 41 (ex: 3,5,8	)
* Reason Code :	
	Click here 1 more service(s)
	resolvensee a secondanter a rever concents, queer to reser costil/016565, 4,0570
Into Exceptions	

### Payer Review

All claims created via the AuthentiCare® Web Portal will require Payer Review.

Claims will not be able to be confirmed for billing until the Payer approves the Claim.

Contact the Contracted Payer if the Claim is denied.

Claim Details					Claim ID:	96140
* Client BhopalBCBS, Pune A * Worker Awesome, Heydi			* Provider Vilas Heydi Mike NMC Payer Assignment BCBSNM	C Care LLC	Filed On: Printer Friendly Show All Claims	Web
* Service Physical Therapy Ass	istant 💽				Total Claims: Total Calculated Amou	1 int: \$200.00
Date 01/17/2024	<b>Time</b> 03:00 PM	<b>Amount</b> 01:00	Date 01/17/2024	<b>Time</b> 04:00 PM	Total Authorized Amo	unt: \$200.00 4
					Total Hours: Scheduled Units:	01:00 0
Mileage:	ons	Travel Time: Total Lines: 1 Delete   /	Total Claims: 1 Total Amo Add Lines Above   Add L	unt: \$200.00 Total Authorized: ines Below   Move Up   Move	\$200.00 Inactiva Delete A	00:00 te
BhopalBCBS, - Billing has no claim. - This claim do Payer Review - EVV not used	Pune A t been confirme es not have a m Required	d for this atching event.			Cancel	

## Maximum Units Per Day (Home Health Services Only)

The maximum number of Units that are allowed to be billed for a Client per day for a given Service will be restricted in AuthentiCare.

If multiple Claims for a Client for the same Service on the same day exist, this restriction would consider the maximum number of Units that are allowed cumulatively.

Client CHARLESCTSQA, CARTER I	F (2005694021)			Provider AMBERCAR	RE HOME HEALTH (8504	19028)	
<b>Worker</b> Awesome, Heydi (815958)					Payer Assignment BCBSNM		
Claim ID	Service						
95975	Physical Therapy	Visit (G0151)					
Authorization	Start	End	Rates		Units	Amount	
BUG23250DPW-001	Oct 16, 2023 11:00:00 AM	Oct 16, 2023 12:00:00 PM	Normal	75.0000	ActualNormal AuthorizedNormal	4 ActualNormal 4 AuthorizedNormal	\$300.0 \$300.0
exceptions							
Critical     Silling has no     Payer Review     This claim exe	t been confirmed fo Required ceeds the maximun	or this claim. n number of units p	er day that a	re allowed c	umulatively.		
Informational     o This claim do	es not have a matc	hing event.					

## **Claims Processing**



#### What is claims processing and billing?

After a Claim has no other Critical Exceptions, the provider agency must confirm the Claim for billing in AuthentiCare®.

#### **Important Notes About Claims:**

- Providers must confirm claims for billing in AuthentiCare® before they export for payment. Once there are no other critical exceptions, claims can be confirmed for billing.
- Claims are exported Monday Friday in the early morning for adjudication by the payer.
- Claims are paid on the contract payment schedule with each MCO.
- Check on the status of claims on the *Claim Data Listing* report.

## Ways to Trigger Claims for Billing



## Confirming Individual Claims For Billing

Once a Claim has no critical exceptions, it can be confirmed for billing. Claims can individually be confirmed for billing by selecting the checkbox next to **Billing Confirmed** Billing Confirmed on the Claims Details page.

Claim Details		Claim ID:	95246
* Client	* Provider	Filed On: Printer Friendly Show All Claims	Mobile
* Service Personal Care - Consumer Delegated	UHC NM V	Total Claims: Total Claims:	1 unt: <b>\$0.00</b>
Date         Time         Amount           04/17/2024         10:25 AM         00:02	Date         Time           04/17/2024         10:27 AM	Total Authorized Amo Total Units: Total Hours:	ount: \$0.00 0 00:02
Activity Codes: 2,4,8 (ex: 3,5,8) Check-in Latitude:41.247392 Check-in Longitude:-96.02 Check out Latitude:41.247392 Check out Longitude: 96	5680	Scheduled Units: Scheduled Hours:	0 00:00 med
Check-out Coordinates         Check-in Coordinates         Mileage:         Travel Time:		Save Delete Al Cancel	
Total Lines	Click here 1 more service(s) and Claims: 1 Total Amount: \$0.00 Total Authorized: \$0.00		
Critical Exceptions Delete   A	dd Lines Above   Add Lines Below   Move Up   Move Down		

## Confirming Claims in Bulk

- 1. Select the **Confirm Billing View** option from the Claims section of the Home page and click Go!.
- 2. The Confirm Billing page displays all Claims that can be confirmed for billing. Click Approve Billing for Claims (#) or Check All/Uncheck All.
- 3. Once all Claims are selected, click **Confirm Billing** at the bottom of the screen.

	Claims			
	Add New >	<u>Claim (Standard)</u>		
	Search Type: *Claim ID:	Claim Confirm Billing - View Confirm Billing - Bulk Go! Clear	]	
				Print
First Data	<b>)</b> .		AuthentiCare New Mexico 1	<sub>9</sub> ⊚ 「urquoise Care
		Confirm Billing November 19, 2024		
Client AceHooperlala, Confirming Claims	( 95246 ) Provider sin Bulk (0001) VILTEK PCS A	AND HOME CARE SERVICES LLC (533344	W 1444) P(	lorker STester, Mike (764296)
Claim ID Ser 95246 Pers	vice sonal Care - Consumer Delegated (T	1019)		
Authorization Start UT1019UHC3272024 Apr 17, 2 10:25:00	End Rates Units 2024 Apr 17, 2024 AM 10:27:00 AM Authoriz	Amount ormal 0 ActualNormal 0 zedNormal0 AuthorizedNormal0		
Exceptions				
<ul> <li>Critical         <ul> <li>Billing has not bee</li> </ul> </li> </ul>	en confirmed for this claim.			
Informational     o This claim does no	ot have a matching event.			

## Confirming Claims – Provider Dashboard

- 1. Go to the Provider Dashboard.
- 2. Click **List** next to "Needs Confirmation" in the *Unsubmitted Claim Status* section.
- 3. On the *Confirm Billing* page, check the box next to each visit that needs to be approved.
- 4. Click **Confirm Billing** at the bottom once all the visits are selected to confirm for billing.



### Successfully Billed Claims

Successfully billed Claims can be viewed individually, or in bulk.

Claim Details						Claim ID:	95242
* Client	aikablala B 🕞		* Provider		5	Filed On:	Mobile
* Workor			Bayer Accignment	THE CARE SERVICES LEC	2	Printer Friendly	
PCSTester, Mike 🔄			UHC NM	~		Show All Claims	
* Service						Total Claims:	1
Personal Care - Cor	nsumer Delegated	<b>B</b>				Total Calculated Amo	unt: \$15.42
Date 04/17/2024	<b>Time</b> 09:14 AM	<b>Amount</b> 00:27	Date 04/17/2024	<b>Time</b> 09:41 AM		Total Authorized Amo	unt: \$15.42
						Total Units:	2
Activity Codes:						Total Hours:	00:27
2,4 (ex: 3,5,8)						Scheduled Units:	0
						Scheduled Hours:	00:00
Check-in Latitude:4 Check-out Latitude: <u>Check-in Coordin</u>	1.247200 Check-ir :41.247238 Check- ates <u>Check-out C</u>	n Longitude:-96.02 out Longitude:-96 oordinates	25656 .025657			Cancel	
Mileage:		Travel Time:					
		Total Lines:	1 Total Claims: 1 Total A	mount: \$15.42 Total Authoriz	ed: \$15.42		
🚹 Billed (04/19)	/2024)	A	dd Lines Above   Add	Lines Below   Move Up   M	ove Down		



## Creating Schedules

## Scheduling



#### What is Scheduling?

Schedules are created and used to manage where a Worker will be, at what time, at what place, and with whom. This is an optional functionality.

### Q- Impo

#### Important Notes About Scheduling

- A scheduled visit is called an event.
- Providers can schedule visits as one-time and recurring.

## Creating a Schedule

1. Click Schedule Event.

2. Search for the **Client** for whom you would like to schedule an Event(s). Click **Continue**.

3. Fill in all the required fields. Click **Save**.

4. Review the schedule and click **Discard, Accept**, or **Change**.

**Note**: If the service of the schedule is unauthorized, an error message will display on the *Event Acknowledgement* page. Clicking **Accept** will save the schedule even with the error message.



## Viewing Schedules

							<u>View C</u> Schedu	<u>alendar</u> ıle Event	
ent So	cheduling			_			Create New	Event Gener	rate Rej
Gearch S Date: MM/DD/	Schedules	Client:			Provider: Test Provid	ler 🛃			
Vorker:	1	Service:		2	Search	Clear			
ime Zo	ne CT 🗸								
endar V TAD Ke /iew Evi	<b>/iew: <u>Monthly</u>   <u>We</u> y to move across Da ents (Mountain Time)</b>	ekly   Daily ys, continue with TAB key )	to navigate to events						
endar V TAD Ke /iew Ev	/iew: <u>Monthly   We</u> y to move across Da ents (Mountain Time)	ekly   Daily ys, continue with TAB key )	to navigate to events						
ndar V IAD Ke iew Ev	/iew: <u>Monthly</u>   <u>We</u> y to move across ba ents (Mountain Time) <u>Mon</u> May 24	ekly   Daily (s, conunce with TAB key ) Tue 25	to navigate to events Jr Wed	ne 2021 26	Thu 27		Fri 28	Sat/Su	n 29
ndar V TAD Ke iew Evo	/iew: <u>Monthly   We</u> y to nove across ba ents (Mountain Time) Mon May 24	ekly   Daily (s, continue with TAB key ) Tue 25	to navigate to events Jr Wed	ine 2021 26	Thu 27		Fri 28	Sat/Su	n 29 30
iew Ev	Aiew: Monthly   We y to move across bar ents (Mountain Time) Mon May 24 31	ekly   Daily (5, conunue with TAB key ) Tue 25 Jun 1	to navigate to events	ne 2021 26 2	Thu 27		Fri 28	Sat/Su	29 30 5 6
endar V	Aiew: Monthly   We by to move across bar ents (Mountain Time) Mon May 24 31 7	the transformation of	to navigate to events	nne 2021 26 2 9	Thu 27 3 10		Fri 28 28 4 11	Sat/Su	29 30 5 6 12
endar V	Tiew: Monthly   We y to nove acloss bar ents (Mountain Time) Mon May 24 31 7 7	ekly   Daily (7, continue with TAB key ) Tue 25 Jun 1 8	to navigate to events Wed	ne 2021 26 2 9 16	Thu 27 3 10		Fri 28 28 4 11	Sat/Su	29 29 30 5 6 12 13 13
ndar V	Arew: Monthly   We y to have all oss bar ents (Mountain Time) Mon May 24 31 7 7 14	ekly   Daily (5) continue with TAB key Tue 25 Jun 1 8 15	to navigate to events	ne 2021 26 2 9 16	Thu 27 3 10		Fri 28 28 4 11 11 18	Sat/Su	n 29 30 5 6 12 13 19 20
endar V	Arew: Monthly   We y to have access bar ents (Mountain Time) Mon May 24 31 7 14 21	ekly   Daily Fy continue with TAB key Tue 25 Jun 1 5 15 22	to navigate to events Wed	ne 2021 26 2 9 16 23	Thu 27 3 10 17 24		Fri 28 28 4 11 18 25	Sat/Su	n 29 30 5 6 12 13 19 20 26
lendar V View Event 222 23 23 25	/iew: Monthly   We y to nove across ba- ents (Mountain Time) Mon May 24 31 7 7 14 21	ekly   Daily Fr continue with TAB key Tue 25 Jun 1 3 15 22	to navigate to events	nne 2021 26 2 9 16 23	Thu 27 3 10 17 24		Fri 28 28 4 11 11 18 25	Sat/Su	

1. Hover over Scheduling and click View Calendar.

2. Filter your calendar by **Date**, **Client**, **Worker**, or **Service**. Click **Search**.

3. Once you click **Search**, the *Calendar View* will appear at the bottom of the screen. The calendar can either be a *Monthly*, *Weekly* or *Daily* calendar view.

## **Editing Schedules**

1. Hover over Scheduling and click View Calendar.

2. Filter your calendar by **Date**, **Client**, **Worker**, or **Service**. Click **Search**.

Iome Create Reports Scheduling Dashboards View Calendar Schedule Event nt Scheduling Create New Event oarch Schodu Date: Client Provider: Test Provider 🛃 MM/DD/YYYY Worker: Search Clear Service Time Zone CT 🗸

3. Once you click **Search**, the *Calendar View* will appear at the bottom of the screen.

Double click the event needing changes. When the *Scheduled Event* page comes up, adjust the information you would like to change and then click **Save**.





### Dashboards

### Dashboards Overview



#### What are Dashboards?

Visual tool that provides a consolidated view of data.



#### **Important Notes Regarding Dashboards**

 AuthentiCare provides three dashboards: Provider, Worker, and Exceptions.

## Provider Dashboard- Unsubmitted Visit Status

- 1. Ready to export:
  - Provides number of Claims that have been confirmed and are ready for export. These Claims may have informational exceptions, but they do have any critical exceptions.
  - Waiting for routine system export.
- 2. Needs Confirmation:
  - Represents the number of Claims that are ready to be confirmed for export. These Claims cannot be exported until confirmation.
- 3. Critical Exception:
  - Represents the number of Claims with one or more critical exceptions.



## Provider Dashboard- Today's Schedule Status

- 1. Checked-in on time:
  - Represents the number of events (Claims) where the Worker has checked-in on time.
- 2. Scheduled Not Due:
  - Represents the number of events scheduled for later in the day.

- 3. Late or Missed:
- Late: Worker checked-in later than 30 minutes after the scheduled start time of the event but before 11:59pm that calendar day
- Missed: Worker did not check-in by 11:59pm on the calendar day of the event.



### Worker Dashboard

1. Worker Dashboard provides quick access to information about the current day's schedule.

Scheduling	Dashboards   Visits   Ad	ministration   My Ac	count
	Provider Dashboard		
	Worker Dashboard		
	Exceptions Dashboard		Ciai

2. If the provider does not utilize the scheduling functionality in AuthentiCare®, or if there are no scheduled events for the selected date, this dashboard will not appear.

Vilas Heydi Mike Provider No.: 65	NMCC Care 5555555	e LLC				March 19, 2024 10:59 AM
	1					
<u>Today's</u> <u>Scheduled</u> <u>Workers</u>	<u>Worker</u> <u>ID</u>	<u>Scheduled</u> <u>Check-In Time</u>	<u>Actual</u> <u>Check-In</u> <u>Time</u>	<u>Client Name</u>	<u>Client ID</u>	<u>Status</u>
<u>Awesome,</u> <u>Heydi</u>	<u>608557</u>	<u>03:00 PM</u>		<u>BhopalBCBS,</u> <u>Pune</u>	<u>3545527231</u>	Scheduled Not Due
Heydi				Pune		✓ Not Due

### Exceptions Dashboard

1. The Exceptions Dashboard displays the number of Claims with critical exceptions, organized by the type of critical exception.

2. If there are no records, the **List** button remains gray. If there are items associated with the exception, the **List** button becomes blue and is clickable

VILTEK Provide	PCS AND HOME CARE SERVICES LLC ar No.: 533344444		November 19, 2024 1:24 PM
* Claim D	Dates: Current Month		Refresh
	No Authorization	0	List
	Authorized For Different Service	0	List
	Outside Of Authorized Period	0	List
$\bullet$	Authorized Units Exhausted On	0	List
$\bullet$	Authorized Units Exhausted Before	0	List
$\bullet$	Incomplete Claims Outside Check Out Window	0	List
•	Incomplete Claims Within Check Out Window	0	List
•	Eligibility Exceptions	0	List
$\bullet$	Duplicate Exceptions	0	List
$\bullet$	Unenrolled Provider Service Exception	0	List
•	Claim Review Needed	0	List
$\bullet$	Payer Review Required	0	List
	Payer Denied	0	List
	Other	0	List

Test	, JOSE A (1000138)	-		Total Nut	ober of Vis	its: 10		Total Arrest	ant: \$ 525.0	80		
Prov	ider: Test Provider (1988	19-010						Total Numb	er of Units	222		
Viet	Roter	<b>Service</b>	Annia Type	Vail Darf	VALUE	Tetal	-	Total	A.0	Exporting a	Deceptions	Payer Name
-	File Apart (2010)	GLASSIA TOP	finedatori	1081/2021 08107.408	1081/2821 1835.485	10	1	\$7.50	6.00	0	1,E1	Long Term Care Mits
**	Shift, Adard? (2020)	All Community 1 Attendent Tercology 15248 J.H. 12 (LTCTD-80125)	indext	KER AN	GEN CELEN MILLER AM	*	,	81.00	36.00	10	C1.01	Long Term Care FFS
8108	Init Ased: (2122)	PAD Generality To Mitrodent Devices N2NE CVL 12 CTCTD-delices	- :	ROUND IN	01.0001 100.466	*		**		010	2.01	ing Terri Care 75
89	Dolt. Adamit (2020) / A A S	ND Community Tone Rendert Services RNB URL 12 TUPO-RELED	front Sci H	100 10 AB (21)	12(2) 0.76	2	12	120.00	121.00	VID	E 14	y Terri Care
100	Sealt, Alland's (2020) Fac Alla 1927 1927	Community Timeli reduct Services # 135, 12 70-801(8)	and 100	N2" 1004 W 12.0	22) Pe	<i>z</i> .		***	***	ALCI,C	2.81	
	Shift, Adam(1 (25225) - PAB Allan 1019 6707	Constantly Treatment and Services 1246, 12 T-001281	N 1052	E1 10052 M 02007	ur a		10	1.0 G	-	D.GLEY	Lorg	fem Care
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Reports

### Reports



#### What are reports?

Reports are used to summarize information from the web portal.

#### )- Important Notes About Reports:

- AuthentiCare<sup>®</sup> offers 20+ reports with various filtering and sorting options.
- Reports do not automatically refresh.
- Reports can be downloaded in the following formats: PDF, Excel, CSV, and XML.
- Reports can be created as templates.

## Reports Page

- Click **Reports** on the Main Menu.
- There are three sections on the *Reports* page:
- 1 **Report Templates** Edit or run a report template.
- 2 Create Reports Create a report.
- 3 View Report View and download previously run reports.

Report Templates [Delete Selected Templates] View Re	eports	[Refres	h] [Delete Selected Repor
	Name	Submit Time	<u>Status</u>
Create Reports			
Authorizations			
Service Authorizations			
Authorization History			
Service Authorization History			
Billing Invoice			
Billing Invoice Report			
<u>Calendar</u>			
Scheduled AuthentiCare Calendar Events			
Claim Data Listing			
Claim Data Listing Report			
<u>Claim Details</u>			
Claim Details			
<u>Claim History</u>			
Claim History			
Eligible Client Data Listing			
Eligible Client Data Listing Report			
Exception			
Exception Report			
Late and Missed Visits			
Late and Missed Visits for Scheduled Authenticare Events			
Master Worker Hours Penort			
Overlapped Claim By Client			
Overlapped Claim By Client Report			
Overlapped Claim By MasterWorker			
Overlapped Claim Master Worker Report			
Overlapped Claim By Worker			
Overlapped Claim By Worker Report			
Provider Activity			
Provider Activity Report			
Remittance Advice			
Remittance Advice Report			
Remittance Data Listing			
Remittance Data Listing Report			
Time and Attendance			
Time and Attendance Report			
Unauthorized Location			
Unauthorized Location Report			
Unauthorized Phone Number			
Unauthorized Phone Number Report			
Worker Activity			
Worker Activity Report			
Worker By Provider			

## **Creating Reports**



**Select Report** 

Select a report from the *Create Reports* section.

#### **Create Reports**

Authorizations AuthentiCare Service Authorizations Authorization Data Listing Authorization Data Listing Report Billing Invoice Billing Invoice Report Calendar Scheduled AuthentiCare Calendar Events



**Enter Report Criteria** 

# Enter report criteria and click **Run Report**.

Authorizations Report * Indicates a required field.					
* Deport Name	Authorizations Report				
Report Names					
Description:					
	Include Visit Details				
	Summary Only				
	+ At least one of the date	e ranges must be selected.			
+ Effective Dates:	<b>~</b>				
+ Last Update Dates:	~				
Authorization Status:	~				
Payer:					
Client:					
Provider:	Test Provider 🔄				
Worker:					
Service:					
So	rt 1:	~			
So	rt 2:	~			
So	rt 3:	~			
ReportType(s): Z PDF 🗆 Excel					
Save As Temp	lat Run Report	Cancel			



#### **View Reports**

Download a report by clicking on the icon beneath the report name.

View	Reports	[Refresh]	Delete Selected Reports]
	Name	Submit Time	<u>Status</u>
	Authorizations Report	7/8/2021 2:05 PM	Completed

**Note**: Reports in *View Reports* are only visible and can be downloaded 5 days from the *Submit Time*.



## AuthentiCare 2.0 Mobile Application

## Provider Setup for Mobile Application Use

1	

Search for your provider profile from the *Entities* section.

Entities		
Add New >	<u>Worker</u> <u>Representative</u>	
Entity Type >		~
Search >	Provider Agency Name	
		Go!



On the *Providers Entity Settings* page select **Yes** for **Mobile Enabled**.

3		
5	7	
	5	,

Click **Save** at the bottom of the page.

* Mobile Enabled:	O Yes ○ No		
Messaging Enabled:	○Yes ○No		
	Number	Device Id	Assignment
			•
			-
Mobile phone number:			
Device ID:			
Assignment:			
Add	Remove		

### Getting Started with AuthentiCare 2.0

AuthentiCare<sup>®</sup> 2.0 is the mobile application and is available in Google Play or the Apple App Store.

**Note**: Step by step set up instructions are available in the Worker Manual.

Miniı Operating Capa	mum g System ability
iOS	13.0 +
Android	6.0 +

Home   Create   Reports   Scheduling   Dashboards   Visits   Administration   My Ac	count	Custom Links	Logout	Logged in as:
		AuthentiCare	NMTC User M	lanual
Entities	Clai	AuthentiCare SDCB Tr in	<u>NMTC Provid</u> g Video	er Documents



#### Worker Manual AuthentiCare\* New Mexico Turquoise Care

### Getting Started with AuthentiCare 2.0



## Getting Started – Downloading AuthentiCare 2.0



Download AuthentiCare 2.0:

- 1. Open the Google Play/Apple App Store on the mobile device.
- 2. Search for and select **AuthentiCare 2.0** for download.
- 3. Tap **Allow** for the app to access the mobile device's location.

### Getting Started – Enter Setup Code

AuthentiCare®
Worker ID
Password
Sign In
Forgot Password? Settings
K Back Settings
See Device Identifier >
Reset and Change Setup Code
AuthentiCare®
Setup Code
NMCCPRD
SUBMIT



Tap **Settings** at the bottom right of the screen.

Tap **Reset and Change Setup** Code.

3

2

Enter the setup code: **NMCCPRD**. Tap **Submit**.

## Getting Started – Find the Device ID

Tap Settings at the bottom right of
the screen.



Tap See Device Identifier.

3 Tap to copy the device ID of the mobile device.

Authent	tiCare®
Worker ID	
Password	
Sign In	
Forgot Password?	Settings




# Worker Setup for Mobile Application Use

Providers must complete the mobile section on *the Worker Entity Settings page* including:

- Yes for Mobile Enabled
- No for Mobile Locked
- Password
- Mobile phone number
- Device ID
- Office Phone

Г	-4.

**Note**: The Workerwill need their Worker ID and Password to sign into

the mobile application.

orker Entity Settings						
Indicates a required field.						
ID:	764296					
PIN:	****					
* First Name:	Mike					
Middle Name:						
* Last Name:	PCSTester					
Company Name:						
SSN:						
FID:						
Gender:	Male 🗸					
Rirth Date:						
Empil Addross						
Endir Address.						 
Begin Date:	MM/DD/YYYY		* Mobile	Enabled:	● Yes ○ No	
End Date:	MM/DD/YYYY		* Mobil	e Locked:		
Language:	<b>~</b>		HODI	e Locked.		
Status:	Active 🗸		P	assword:		
* Mobile App Mode:	Standard 🗸	Worker M	lust Change P	Password:		
External Worker ID:			Mobile phone	e number:		
Deceive Stipende			C	Device ID:		
Receive Superios:	No		Offic	ce Phone:		
Related to Client:						
Worker Services:	Skilled Nursing RN Skilled Nursing LPN Physical Therapy Visit Physical Therapy Ass	Provider	FMS NMCC PF	ROVIDER1	Delete	
					- 65	 ancol

# Logging In and Forgot Password

### Log into the mobile application:

- 1. Enter the Worker ID and Password.
- 2. Tap Sign In.

### Forgot Password:

- 1. Tap Forgot Password?.
- 2. Type in the **Worker ID** and tap **Request Password** to receive an email with the Passcode.
- 3. Enter the **passcode** sent through email and **New Password** and **Confirm New Password**.
- 4. Tap Submit.



				Passcode	Show
🕂 AuthentiCa	are®	<b>く</b> Back	Forgot Password	New Password New Password	Show
Worker ID	1	To recover to the emai account	password, a passcode will be sent I address associated with this	Password must consist of 9 to 50 characters, and include: •At least one number •At least one uppercase letter	
Password		Worker ID		At least one lowercase letter     At least one special character(@#\$%^&?!+=)     Confirm New Password	
			Request Passcode	Confirm New Password	Show
Sign In				Confirm Password must match New Password	
Forgot Password?	Settings			Submit	
				Request New Passcode	



K Back

Passcode

Change Password

## Check-in: Scheduled Visit

Malaik	xahlalaMHC AceHooperl 68 School Lane 999-555-0002 DON'T SEE YOUR SCI	6:00 pm - alaMHC HEDULED APPOINTMENT ?	7:00 pm
	🕻 Back	Check-In	
	MalaikahlalaMHC A	ceHooperlalaMHC	
	68 School Lane New Delhi, NM 79934 999-555-0002		<ul> <li>♦</li> </ul>
	Service	Home Heal	th Aide
	Scheduled Check-C	Dut 7	:00 pm
	Su	bmit Check-In	
	Success		
	Location	-74.660388	
	Check-Out Time	1:42 pm	
	V	Vorker Hours	

- 1. Open and log into AuthentiCare 2.0.
- 2. Tap the **Client Card** with the scheduled visit information.
- 3. Tap Submit Check-In.
- 4. The *Check-In Success* screen displays when check-in is complete.

# Check-in: Unscheduled Visit

Done

You have 0 appointment(s)					
You have no appointments			Back	Select Services	
New Check-In			Personal Care - Directed Trainir	- Consumer ng	Authorized
ck Lookup Client			Personal Care - Directed Visit	- Consumer	Authorized
t Name or Enter Client Id					
Lookup	5 / 50	<	Back	Check-In	
Line Bala			Ralph Kiner		
KINEF, RAIPN 11211 Cornell Park Dr Ste 300 Blue ASH, OH 45242			123 TEST AVENU SUITE 100	JE NM 87108	
<b>Kiner, Ralph</b> 23 test avenue Juite 100 ILBUQUERQUE, NM 87108			513-555-5555	NW 67106	
(iner, Ralph			Service	Personal Care - Co	onsumer Deleg
				Submit Check-Ir	1
ck Cneck-in					
Kiner					
T AVENUE				Success	
QUE, NM 87108			Location	1	40.500059, -74.660388
55	$\sim$		Check-Ir	n Time	1:32 pm
	Select >			Done	
Delete					

- Open and log into 1. AuthentiCare 2.0.
- Tap New Check-In. 2.
- Select the Client. 3.
- Tap the Services field. Select 4. the appropriate service(s). Tap Done.
- Tap Submit Check-in. 5.
- 6. The Check-In Success screen displays when check-in is complete.

## Check-in: Lookup Client

🗸 Back	Select Client	
No clients fo	und	
	Lookup Client	
[		ર્ેટ
	/isits	Settings
🕻 Back	Lookup Client	
Enter Last	Name or Enter Client Id	
Client Last	Name or Client ID	
	Lookup	0 / 50
K Back	Lookup Client	
Enter L kiner	ast Name or Enter Client Id	
	Lookup	5 / 50
R	Kiner, Ralph 11211 Cornell Park Dr Ste 300 Blue ASH, OH 45242	
R	Kiner, Ralph 123 TEST AVENUE SUITE 100 ALBUQUERQUE, NM 87108	
R	Kiner, Ralph Location Not Available	

Select this client if the service location is at "1234 Main St".

Select this client if the service location is at a location not listed on the screen.

- 1. If the mobile application does not detect a client near its' location, the Worker will see a message on the mobile application "No clients found".
- 2. Tap Lookup Client.
- 3. Enter the client's last name or enter the client's ID.
- 4. Tap Lookup.
- 5. Tap the client's name that has the correct service location listed beneath their name.

## Check-out

- 1. Tap the **Client Card** with the check-in information.
- 2. Select the Place of Service.
- 3. Select the correct **Activities**.
- 4. Tap **Done**.
- 5. The Check-out Success screen displays when check-in is complete.



## Mobile Application Demonstration



### Service Zones

No data conne	ction
n Progress - Pending Check-Out	3:30 pm -
9999900975	
Pending Check-Out	Not Synced
NEW CHECK	(-IN
	<u><u></u></u>
Visits	Settings



In a *Standard Service Zone*, GPS coordinates of the check-in and check-out service location are displayed to the Worker on the check-in and check-out success screens.



In a *Limited-Service Zone*, check-in and checkout data is stored in the mobile app. The data will be automatically upload to the system when cellular or Wi-Fi signal is restored on the mobile device.

|--|

**Note:** Before logging out, the Worker needs to ensure all check-ins and check-outs are synced. When a mobile device connects to cellular or Wi-Fi, the *Not Synced* icon and message will disappear. At this point, the Worker can log out of the mobile application.



Interactive Voice Response System (IVR)

## Interactive Voice Response System (IVR) Overview



### What is the IVR?

The Interactive Voice Response system (IVR) lets Workers record services provided to the client by calling into the system when service begins and ends.



- The phone number for the IVR is (800) 944-4141.
- The Worker will need their Worker ID (and the client's AuthentiCare ID) to check-in and check-out.
- Workers should check-in and check-out from an authorized home phone landline listed on the *Client Entity Settings* page. If the Worker calls from an unauthorized phone number, they will hear the phrase, "You are calling from an unauthorized phone number". The IVR will allow check-in and check-out, but the claim will be flagged with an exception.
- Step-by-step instructions on how to use the IVR system can be found under the Custom Links tab of the Main Menu toolbar.

## Worker Setup for the IVR

- The Worker will need to know their own AuthentiCare ID to check-in and check-out using the IVR.
- On the *Worker Entity Settings* page, the *Language* field can be entered for "English" or "Spanish".

orker Entity Settings	
Indicates a required field.	
ID:	761000
PIN:	****
* First Name:	Mike
Middle Name:	
* Last Name:	PCSTester
Company Name:	
SSN:	
FID:	
Gender:	Male V
Birth Date:	MM/DD/YYYY
Email Address:	
Begin Date:	MM/DD/YYYY
End Date:	MM/DD/YYYY
Language:	~
Status:	Active 🗸
* Mobile App Mode:	Standard 🗸
External Worker ID:	
Receive Stipends:	No 💙
Related To Client:	No 🗸
Worker Services:	Skilled Nursing RN Skilled Nursing LPN Physical Therapy Visit Physical Therapy Assistant

## Client Setup for the IVR

- The Worker may need to know the client's AuthentiCare ID to checkin and check-out using the IVR.
- The IVR system confirms that the Worker is calling from a phone number listed on the *Client Entity Settings* page.

Entity Addresses/	Phones	
Add Address		
Address Type:	Work Delete	
Address Line 1:		
Address Line 2:		
City:		
State:	Zip	
Longitude:		
Latitude:		
Disable Learn Mode:		
	ViewMap	
	_	
Add Phone		
Phone Type	Phone Number	
Other		Delete
* Phone Description:	Home	



### Part 1: Instructions to Check-In Using the IVR

- 1. Dial (800) 944-4141 using a verified client phone number. "Welcome to AuthentiCare New Mexico Turquoise Care."
- "Please enter your Worker ID followed by the pound (#) sign." Enter your Worker ID and press pound (#).
- "To check-in, press 1. To check-out, press 2. To select language preference, press 8." Press 1 to check in.

#### 4. "If the client is <Client Name>, press 1."

If the client is correct, press 1. If you call from an unverified phone number, you will hear, "Please enter your client ID followed by the pound (#) sign". Reach out to your provider administrator with questions.

### 5. "If the service is <Service Name> press 1, < Service Name > press 2, etc." You will hear a list of services for the client selected. Choose the service you are providing by pressing the associated number on the phone keypad.

- 6. "If you are <Worker Name> and you work for <Provider Name> and you are providing <Service Name> for <Client Name>, press 1. If this is not correct, press 2." AuthentiCare will repeat back your name, service and client's name for whom you are providing services. If this information is all correct, press 1. If the information in not correct, press 2 and you will be able to correct the information.
- "Your check in was successful at <Time>. To return to the main menu, press 1. To end this call, press 2. Thank you for calling the AuthentiCare New Mexico Turquoise Care system. Goodbye"

Press 2 to end the call





### Part 2: Instructions to Check-Out Using the IVR

- Dial (800) 944-4141 using a verified client phone number. "Welcome to AuthentiCare New Mexico Turquoise Care."
- "Please enter your Worker ID followed by the pound (#) sign." Enter your worker ID and press pound (#).
- "To check-in, press 1. To check-out, press 2." Press 2 to continue the check-out process.
- 4. "Please Enter your Client ID followed by the pound (#) sign."

If you call from a verified phone number, you will not hear this prompt. If you call from an unverified phone number, you must enter the Client ID and then press pound (#). Reach out to your provider agency administrator with any questions.

5. "Please enter your activity codes followed by the pound (#) sign."

If the service performed allows activity codes to be selected, you will hear this prompt. After the entry of each code, press the pound (#) sign. A list of activity codes are available in Part 3 of these instructions.

"<Service Name>, press 1 if this is correct. Press 2 to re-enter. Press the pound sign (#) if you
would like to skip "

If you would like to skip adding an activity code or do not know the code, press the pound sign (#).

- 7. "If you are <Worker Name> and you work for <Provider Name> and you have provided providing <Service Name> for <Client's Name>, press 1. If this is not correct, press 2." Press 1 if the information is correct. Press 2 if the information is not correct.
- "Your check out was successful at <Time>. To return to the main menu, press 1. To end this call, press 2. Thank you for calling the AuthentiCare New Mexico Turquoise Care system. Goodbye."

Press 2 to end the call.



## Activity Codes

### ▶□

#### Part 3: Activity Codes

The table below lists EVV services that allow activity code entry. Although an EVV service might have this feature, using activity codes may be optional. If an EVV service is not listed in the table, selecting activity codes is not available for that particular service.

#### PCS Service Name & Activity Code Number

- Personal Care Consumer Delegated (T1019) & Personal Care – Consumer Directed Visit (99509V)
  - Hygiene and Grooming: 1
  - Individual Bowel and Bladder: 2
  - Meal Preparation and Assistance: 3
  - Eating: 4
  - Household Services and
  - Support Services: 5
  - Supportive Mobility Assistance:
     6
  - Hauling and Heating Water: 7
  - Support Services: 8
- EPSDT Personal Care (S5125)
  - Hygiene / Grooming: 10
  - Toileting: 11
  - Meal Preparation: 12
  - Eating: 13
  - Support Services: 14
  - Mobility Locomotion: 15
  - Transfers: 16
  - Dressing: 17
  - Minor Maintenance of DME: 18
  - o Light Housekeeping: 19
  - o Assistance With Taking
    - Medications: 20

#### Home Health Service Name & Activity Codes

- Skilled Nursing LPN (G0300)
  - LPN observation/assessment of patient: 21
  - Skilled Nursing LPN Training: 22
- Skilled Nursing RN (G0299)
  - RN (only) management of POC:
     23
  - RN observation/assessment of patient: 24
  - Skilled Nursing RN Training: 25

# Support Information



### Under Custom Links:

- AuthentiCare NMTC User Manual
- AuthentiCare NMTC
   Provider Documents
- SDCB Training Video

### AuthentiCare® Support:

- <u>Authenticare.Support@Fiserv.com</u>
- 1-800-441-4667, Option 6. Monday-Friday 6:00 AM – 6:00 PM MST,

### Contact Contracted MCO for all Policy & Billing Questions:

- Blue Cross and Blue Shield of New Mexico: <u>EVVBCBS@bcbsnm.com</u>
- Presbyterian Health Plan: <u>phpevvinquiry@phs.org</u>
- Molina Healthcare of New Mexico: <u>mhnm.providerServices@molinahealthcare.com</u>
- United Healthcare of New Mexico: <u>EVV\_mailbox@uhc.com</u> or

EVV\_LateMissed\_Visits@uhc.com

### Questions and Answers

