



AuthentiCare® Training



***The Innovative Solution for
Home and Community-Based Care***



Agenda

- Welcome
- Introductions
- Overview of the Day
- What is AuthentiCare?
- Glossary & Service Codes
- Using KS AuthentiCare
- Next Steps

AuthentiCare®

Pioneer in EVV / Home Based Care Solutions



First Data's AuthentiCare® solution was highlighted as a Promising Practice by the U.S. Centers for Medicare and Medicaid Services (CMS) based on South Carolina's Care Call implementation which provides automated in-home provider monitoring for over 12,000 providers and drove big increases in service quality and payment accuracy for the state

First state-wide solution focused on Electronic Visit Verification for home-based services and care was developed under a grant from CMS (Centers for Medicare and Medicaid Services) to South Carolina, in partnership with First Data, in 2002

AuthentiCare has evolved from a custom implementation to a configurable, feature rich product offering

- 3rd Major Version of AuthentiCare has been published
- Product Roadmap is active and evaluates technical advancements in authentication/verification, along with CMS, State & Provider requirements

AuthentiCare®

Benefiting States and Providers

Annual Results of a statewide implementation

Over 4.5M billed claims

Over \$153.6M in claim billings

7.2M IVR calls

2,050 providers and workers

13,600 consumers

8% growth per year in billed claims

13% growth per year in dollars billed

18% growth per year in self-directed dollars billed

“It has saved the state money ... This is working out great for the providers.”

“We do not have to do any billing; the program actually bills the state on our behalf, and we are paid within two weeks of providing services.”

-Care Pro Home Health

“Participants are now getting more hours of care ...

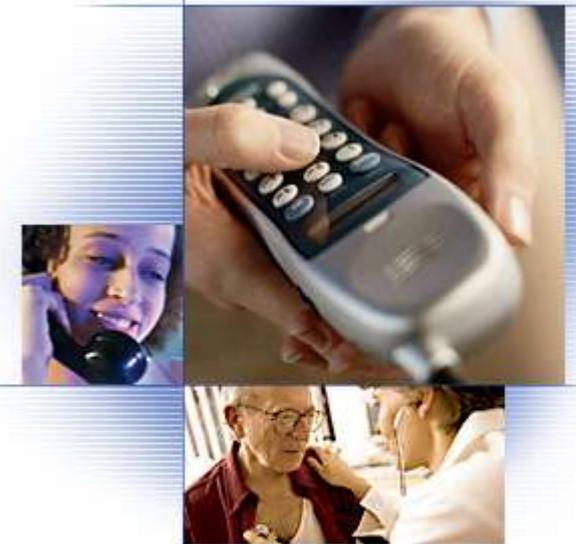
the amount of service provided has increased and that is very important in the participants’ ability to stay in their own home and not seek institutional care.”

-Roy Smith, South Carolina

What is AuthentiCare®?

Electronic Visit and Verification Solution (EVV) for automated scheduling, time/attendance tracking and claim submission that:

- Maintains a repository of authorized services
- Verifies a workers' location and length of service visit
- Identifies late or undelivered services
- Issues alerts to providers/case managers for missed visits
- Provides flexible reporting in real-time



AuthentiCare®

Ensuring Quality of Care

1 A Service has been Authorized



2 Worker Visits Customer and Checks-in



3 Service is Performed



4 Worker Checks-out



5 Claim is Automatically Generated

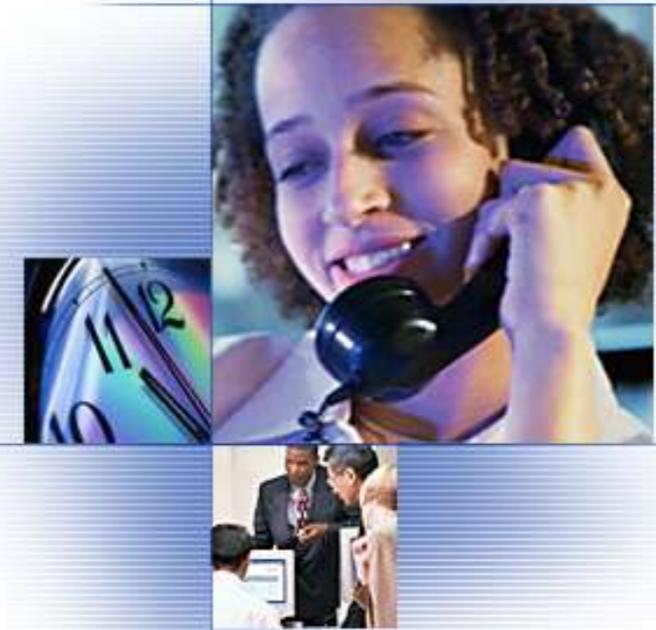


6 Provider is Paid



Why AuthentiCare®?

- **Easy to use!**
- **Less than 2 minutes total to check in and check out**
- **Incorporates state-specific business rules**
- **Transparency to state agencies, providers and clients**
- **Improved program integrity**
 - Reduced fraud and errors
 - Proactive monitoring tools
- **Reduced program cost**
- **Improved program administration**
 - Electronic system reduces paper
 - Accelerated claims processing
- **Improved quality of care**
 - Alerts notify case managers/providers when critical services are missed or late
 - Maximize responsiveness to clients



Before KS AuthentiCare Implementation

HCBS/FE Comprehensive Support and Attendant Care Services Log

Provider Name: _____ Customer Name: _____

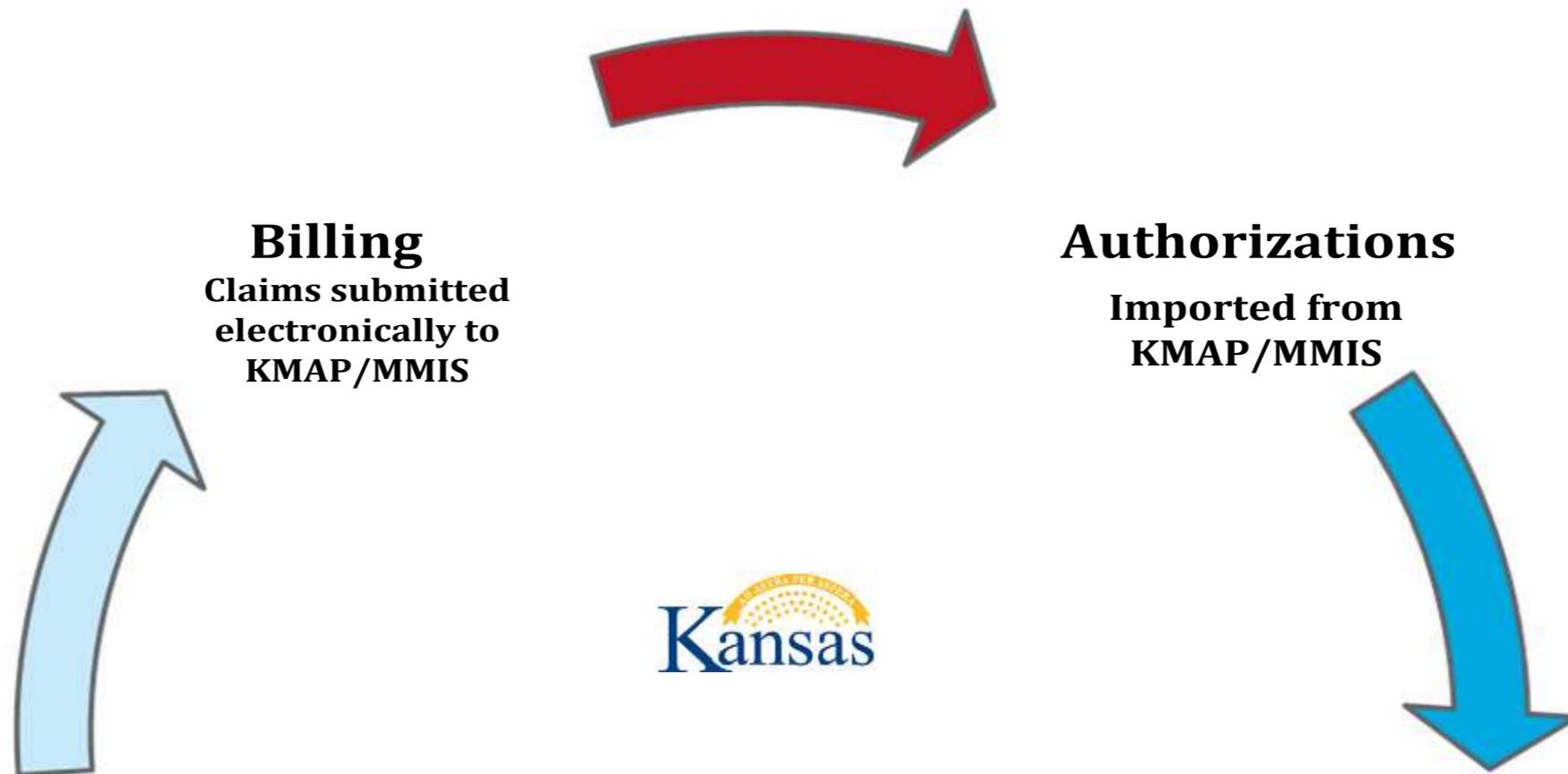
Date: (MM/DD/YY)	Circle Service:	Start Time:	End Time:	Total Time:	ATCR Duties Provided: (See below)	Attendant Initials:	Customer Initials:
	ATCR COMP SUPP	AM / PM	AM / PM				
	ATCR COMP SUPP	AM / PM	AM / PM				
	ATCR COMP SUPP	AM / PM	AM / PM				
	ATCR COMP SUPP	AM / PM	AM / PM				
	ATCR COMP SUPP	AM / PM	AM / PM				

Worker completes timesheet and gives to office staff to input data into backend system or directly into KMAP/MMIS for creation of a claim for payment. Manual process until data is entered.

After KS AuthentiCare Implementation

* Client	* Provider	* Worker				
Mouse, Minie Z  	ARROWHEAD WEST INC 	Mouse, Mickey 				
* Service	Date	Time	Amount	###:##	Date	Time
Personal Assistant Services 	11/8/2011 	04:30 AM	00:15	###:##	11/8/2011 	04:45 AM
Click here <input type="text" value="1"/> more service(s)						
Total Lines: 1 Total Claims: 1 Total Amount: \$3.63 Total Authorized: \$3.63						

- Worker used the IVR or mobile device at beginning and end of service delivery to contact KS AuthentiCare
- Information from worker matched to information in KS AuthentiCare to create a claim for that service visit
- Provider office staff click one time to confirm claim
- Claim automatically submitted for payment



Claim Life Cycle and System Integration

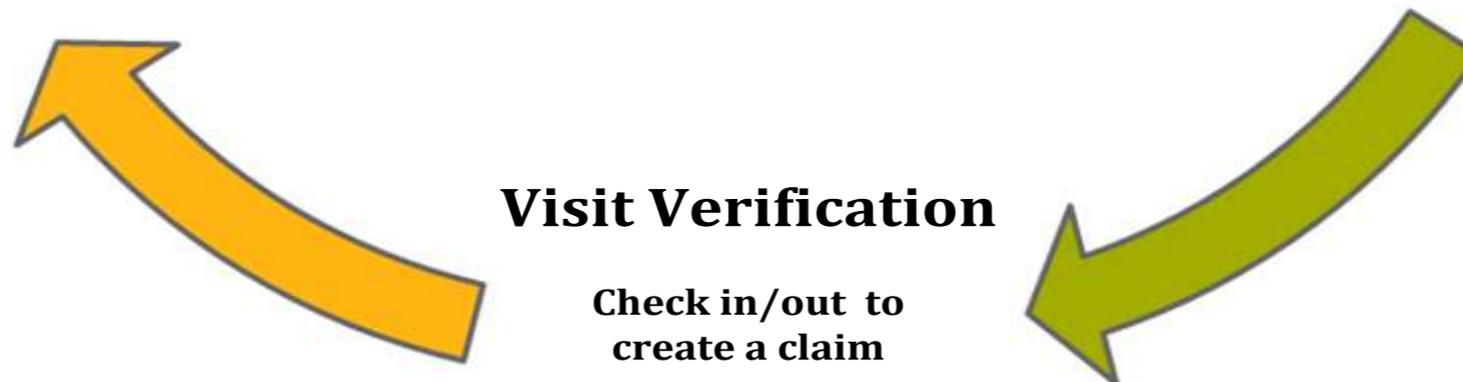
Monitoring

Provider reviews and confirms claims



Scheduling

Visits to clients (optional)



Terms/Acronyms & Service Codes

Separate Handouts Provided

To highlight a few:

- Client – the consumer, customer or beneficiary
- Provider - provider agency or FMS provider
- Worker - Attendant, PA (Personal Assistant) or Direct Support Worker (in self-directed care)
- Claim - each episode of service
- Service - procedure provided for the client

Getting Started (Chapter 2)

- Web site = www.authenticare.com/kansas
- First Data will assign the first Administrator user login and password for each provider location.
- That person will assign other web users.

Welcome to AuthentiCare

Please enter your AuthentiCare email address and password to access the system.

Register for Access

* Email Address:

Password:

Submit

Add Other Users

- Each provider staff member who will be using the web must be registered and assigned a sub-role by an Administrator user.

Register
Use your assigned ID and PIN plus your e-mail address and a password you choose to register for access to the website.

* Email Address:

* Password:

* Confirm Password:

* User Roles:

- KS_AdminAssistant
- KS_Administrator
- KS_ClaimsMgt1
- KS_ClaimsMgt2
- KS_HumanResources
- KS_IntakeReferral
- KS_PayrollBilling

Rights

- Add Claims
- Edit Claims
- View Claims
- Delete Claims
- View Clients
- Add Workers
- Edit Workers
- View Workers

Home Page (Chapter 3)

- Three Sections
 - Entities = provider, client & worker
 - Services and Authorizations
 - Claims
- Main Menu
- Links

Everything is accessible from the
Home Page



Kansas AuthentiCare



Entities

Add New > [Client](#)
[Provider](#)
[Worker](#)
[CaseManager](#)
[Representative](#)

Search >

Go!

Services and Authorizations

Add New > [Service](#)

Search Type: Service
 Authorization

Service:

Authorization ID:

Service Type:

Authorization Start:

Authorization End:

Client:

Provider:

Worker:

Procedure Code:

Claims

Add New > [Claim \(Standard\)](#)
Add New > [Claim \(Express\)](#)

Claim
Search Type: Confirm Billing - View
 Confirm Billing - Bulk

Claim Group ID:

Claim ID:

Claim Status:

Claim Start:

Claim End:

Service:

Authorization ID:

Client:

Provider:

Worker:

CaseManager:

Representative:

Procedure Code:

User Option:

Go! Clear



Demonstration

- Log-in
- Assign another user
- Un-assign (disable) a user
- Home Page (including searching – Chapter 4)
- Links
- Dashboards – provider & worker

Summary

- First Data will assign the first Administrator web user for each provider location.
- We recommend that more than one person at each location have the Administrator role.
- The Provider Administrator users control who has access to their data and functionality in KS AuthentiCare.
- Provider users can only see information specific to their provider location and no other provider can see your information.
- KS AuthentiCare is accessible via the Internet so it is important to disable users who no longer need access to the system.

Providers (Chapter 5)

- KMAP/MMIS provides the data on each provider to KS AuthentiCare.
- Please check your information and if it is incorrect, contact KMAP/MMIS.
- You will need to add one piece of information – an email address that KS AuthentiCare will use to alert you to late and missed visits.

Demonstrate Provider Screen

835 Remittance (Chapter 5)

- KS AuthentiCare submits claims to KMAP/MMIS in a HIPAA compliant 837 electronic file. KMAP/MMIS provides adjudication results to the provider in a HIPAA compliant 835 remittance advice electronic file.
- The provider may load the 835 into KS AuthentiCare using the 835 Import process.
- If the 835 is loaded, the provider will have a complete history of each claim; from the worker's IVR call, mobile device contact or claim web entry through adjudication with the amount paid linked to each service episode.

Demonstrate 835 Upload Process

Managing Workers (Chapter 6)

- Each worker must have a Worker ID. That is auto assigned when the worker is entered into KS AuthentiCare.
- First Data will pre-load your existing workers into KS AuthentiCare if you return the Excel spreadsheets that have been emailed to you.
- After to that pre-loading, it is your responsibility to
 - Edit worker information
 - Add new workers
 - Suspend/Inactivate workers

Demonstrate Worker Screen

Clients (Chapter 7)

- Client information is loaded into KS AuthentiCare via daily file transfer from KMAP/MMIS.
- **You must verify or add the client's telephone number.**

Demonstrate editing clients

Authorizations (Chapter 8)

- All service information and authorizations are loaded via daily file transfer from KMAP/MMIS.
- The provider cannot add or edit authorizations.
- A claim cannot be submitted to KMAP/MMIS for payment without a valid authorization.
- Service can be captured via IVR, mobile or web without a valid authorization. The claim will remain in the system until a valid authorization is received from KMAP/MMIS or the provider takes other action to resolve the situation.

Demonstrate searching and viewing

Summary

- Provider and Client data is populated in KS AuthentiCare via file transfer from KMAP/MMIS. The provider must add:
 - Provider email address for late/missed visit alerts
 - Client's telephone number
- Initial worker data will be loaded by First Data if you return the Excel spreadsheet.
 - After implementation, the provider must maintain all worker information.
- Authorizations are populated via daily file transfer from KMAP/MMIS.

Scheduling (Chapter 9)

- A visit can only be scheduled if there is an authorization for that service and client.
- Providers can schedule visits to clients one time and re-occurring.
- A warning message pops up if the visit conflicts with another.
- A scheduled visit is called an “event”.
- You can schedule back up workers.
- You can search on events.



Late and Missed Visits (Chapter 9)

- An email alert is sent to the provider if a scheduled visit is late or missed
 - Late = worker does not check in within 60 minutes of scheduled start time
 - Missed = worker does not check in within 120 minutes of scheduled start time
- The provider must acknowledge (give a reason for) a missed visit.

Demonstrate

Missed Visit Codes

Description	Code
Hospital	1
Nursing Facility temporary	2
Consumer refusal	3
Consumer not available – justify in notes	4
Family voluntarily provided temporary service instead	5
Other (consumer driven) – justify in notes	6
Consumer deceased	7
No staff available	A
No staff willing	B
Natural disaster	C
Late plan from Case Manager	E
Other (provider driven) – justify in notes	F
Not a Missed Visit	N

Interactive Voice Response (IVR) (Chapter 10)

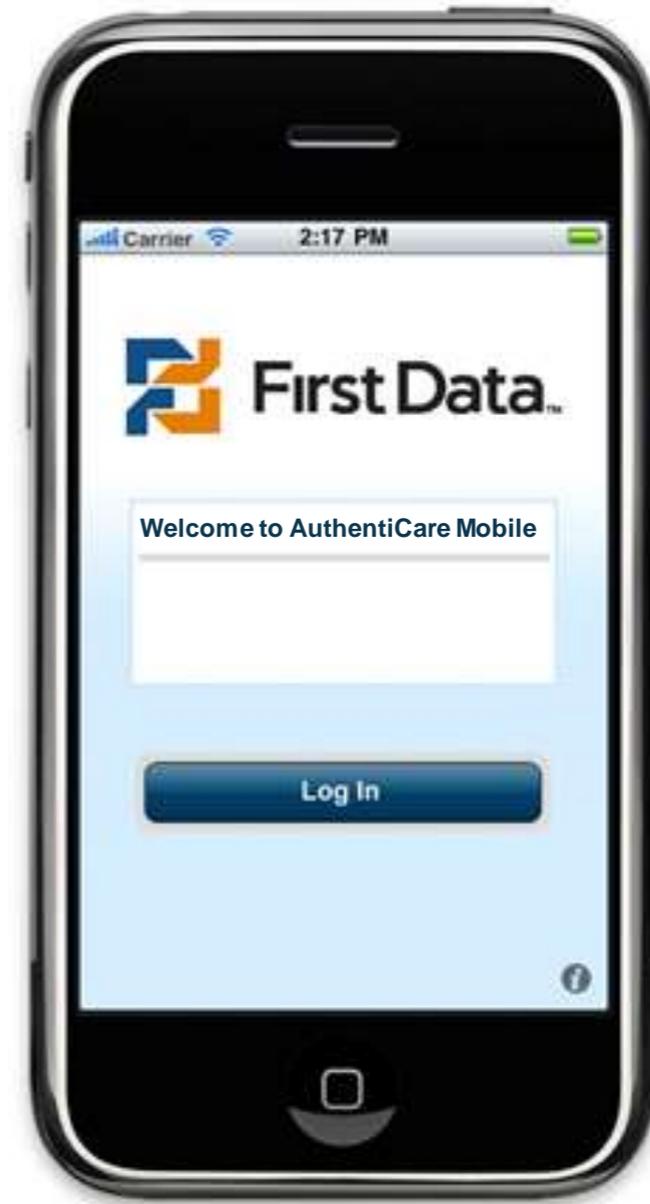
- Toll-free number available 24/7 = 800-903-4676
- Worker calls from the client's touch tone phone
- KS AuthentiCare matches the phone number calling from to the client's phone number of record to verify that the worker is in home
- IVR is in English and Spanish
- Worker calls in before beginning service
- Worker calls out when service completed
- Some services require specifying activity codes
- Calls are immediately reflected on the web.



Demonstrate

Mobile Device (Chapter 11)

- Single solution for use in standard and limited-service zones
- Provides GPS location authentication
- Real time communication to KS AuthentiCare backend upon Check-in and Check-out
- Advanced real time scheduling capabilities
- Ability to Store and Forward
- Alerts and Emergency Messaging



Summary

- The scheduling function of KS AuthentiCare is to assist providers in managing their workers in providing services for their clients. Its use is not required.
- Workers can use the IVR or a GPS enabled mobile device to report into KS AuthentiCare prior to and after providing services for a client in the home.
- If the worker cannot use the IVR or mobile device, information can be entered into KS AuthentiCare via the web by the provider's office staff.
- As an added quality monitor, First Data staff will make occasional calls to clients' homes to verify the presence of a worker and/or that service was provided.

Claims (Chapter 12)

- Every service captured by the IVR, mobile device or entered via the web creates a claim that is assigned a unique claim ID
- Claims can be entered on the web
 - One at a time (standard)
 - Multiple lines at a time (express)
- When claims are entered on the web, activity codes must be entered, too, if required

Claims (Chapter 12) #2

- The provider must confirm claims before submitted to KMAP
 - Individually
 - By After Hours Bulk Files
- Behind the scenes editing occurs continuously based on KDOA/SRS business rules and KMAP/MMIS billing requirements (including rounding)
- Editing identifies and assigns “exceptions” to a claim as appropriate

Claim Exceptions (Chapter 12)

- Exceptions are classified as
 - Critical – things that prevent a claim being submitted for payment (example – not confirmed for billing)
 - Informational – things that do not prevent submission but also do not comply with business rules (example – called from a phone number not associated with the client)
- Complete Exception List – Appendix A.3
- Some critical exceptions are automatically corrected when files are received from KMAP/MMIS
- Many critical exceptions can be corrected by the provider

Demonstrate – editing, adding, confirming

Summary

- Claims are created in KS AuthentiCare via IVR, mobile device or web entry.
- There is continuous behind the scenes editing of claims based on KDOA/SRS and KMAP/MMIS business rules.
- The provider must confirm claims prior to submission to KMAP/MMIS for adjudication.
- Claims that do not meet requirements (have critical exceptions) may be corrected by upload of additional information from KMAP/MMIS or may need manual intervention by the provider.
- Confirmed claims are submitted to KMAP/MMIS automatically each weekday at 5 AM.

Reporting (Chapter 13)

- 17 reports are available 24/7 via the web
 - Note – Remittance Advice Report is only available if the provider uploads the 835 remittance advice to KS AuthentiCare
- Information is current as of the time the report is created by the user



Reporting (Chapter 13) #2

- Wide variety of filtering and sorting options are provided
- User must choose to display the report in PDF, Excel, CSV, or XML format
- Without choice, reports default to PDF except the List reports that default to Excel

AuthentiCare Reports

- Authorization Report
- Authorization Report with Claim Detail
- Claims Detail Report
- Claim History Report
- Calendar Report
- Late and Missed Visit Report
- Exception Report
- Unauthorized Phone Number Report
- Billing Invoice Report

AuthentiCare Reports #2

- Time and Attendance Report
- Overlapped Claim Report
- Workers by Provider Report
- Provider Activity Report
- Remittance Advice Report
- Claim Data Listing Report
- Remittance Data List Report
- Eligible Client Report

Reporting Demonstration

- Creating reports
- Sorting and filtering options
- Viewing reports
- Creating a template
- Samples of various reports

Assignment of Sub-Roles

- The provider Administrator user must assign sub-roles for staff to use KS AuthentiCare on the web.
- Each sub-role allows the user to view certain data and perform certain functions.
- A person's sub-role may be changed at any time.
- A person may have more than one sub-role but must have a different login and password for each.

Demonstrate creating sub-roles

Provider Sub-Roles (Appendix A.4)

Name	Rights
KS_Administrator	Rights to do all functions for that provider except those functions restricted to First Data (add, edit, delete services; add/edit/delete authorizations and delete providers). Can view the Provider and Worker Dashboards. [NOTE: First Data assigns a log in and initial password for the first Administrator for the provider who can then add/manage other users (including other administrators)]
KS_AdminAssistant	Rights to do all function Administrator can do except the ability to add/edit registrations and upload 835 files
KS_Payroll/Billing	Activities associated with billing KMAP/MMIS and using KS AuthentiCare information for employee payroll. Includes adding, editing, deleting claims as well as confirm billing. This role has primary responsibility for resolving claims with critical exceptions. Can view the Provider and Worker Dashboards.
KS_Human Resources	Activities associated with managing workers – adding, editing, and deleting workers and the Worker by Provider Report.

Provider Sub-Roles (Appendix A.4) #2

Name	Rights
KS_Payroll/Billing/ Human Resources	Combination of Payroll/ Billing and Human Resources roles which may be more appropriate for smaller providers
KS_Scheduler / Coordinator	Activities necessary to schedule visits for clients. Includes view and search of clients, workers, authorizations and services as these are needed to accomplish the tasks. This role will acknowledge missed visits and run Late and Missed Visit and Provider Activity Reports. This role can also view the Worker Dashboard.
KS_Claims Mgt 1	Can add, edit and delete claims
KS_Claims Mgt 2	Can add, edit, delete and confirm claims for submission to KMAP/MMIS
KS_Intake & Referral	Ability to edit client information

User Support (Chapter 14)

- **User Manual**

<https://ext.fdgs.com/kansas/KSAuthentiCareUserManual.pdf>

- **First Data Client Support** 1-800-441-4667, Option 6 or

clientsupport@firstdata.com

- **Kansas Support** KSAuthentiCare@aging.ks.gov

- **Training Website** <https://ext.fdgs.com/kansas>

- **Training IVR** (866) 388-2367; application identification#: 60

Next Steps

- First Data will provide a login for an Administrator:
 - Training web site
 - Production web site
- Providers will assign users to sub-roles and begin using Training Website
- Begin training workers using Worker IDs assigned by First Data
- Participate in Training and Support Conference Calls

Questions?



Please complete the evaluation

