



CareWhen Lite Training

Billing Setup



CareWhen Lite is a simplified version of CareWhen. Functionality and features discussed in this training may only be available by upgrading to the full version of CareWhen. Contact your DWIHN Administrator for upgrade options.

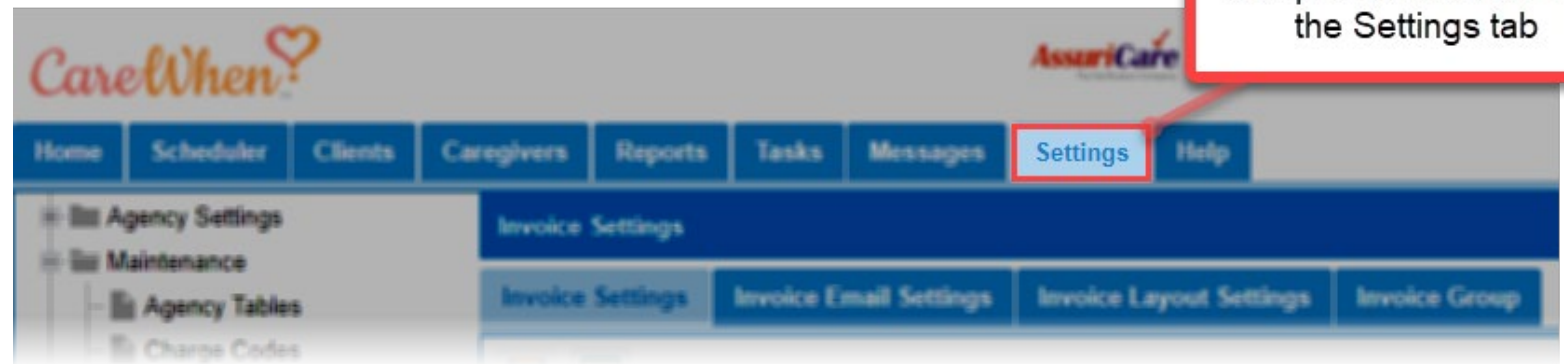
CareWhen Billing Setup

This training will provide an overview of the steps required to properly setup billing settings for a new agency within CareWhen.

When setting up a new Agency in CareWhen, a framework for Billing settings should be established early on, followed by a more thorough dive into options and settings specific to your Agency once the basics have been established.



Note: As billing options vary from Agency to Agency, please refer to the CareWhen Product Guide for more specific breakdowns of each option when needed and contact your AssuriCare representative for help if necessary.



Billing settings in CareWhen Lite will be pre-set in accordance with DWIHN billing practice. To customize these options, upgrade to the full version of CareWhen.



CareWhen Billing Setup – Overview

Setup of billing options within CareWhen involves touching on three primary settings areas. When establishing these settings, setup should occur in the following order:

Charge Codes: Used to create default rate templates specific to different types of care that will be required for billing. Custom charge codes may be set on a client level and an insurance company level.

Payors: Used to establish parties responsible for payment for a given set of services. Payors can include entities such as Medicaid, Private Insurers, and VA.

Insurance Companies: Used to add insurance providers that will display under Billing settings for each Client.

Charge Codes

Payors

Insurance Companies

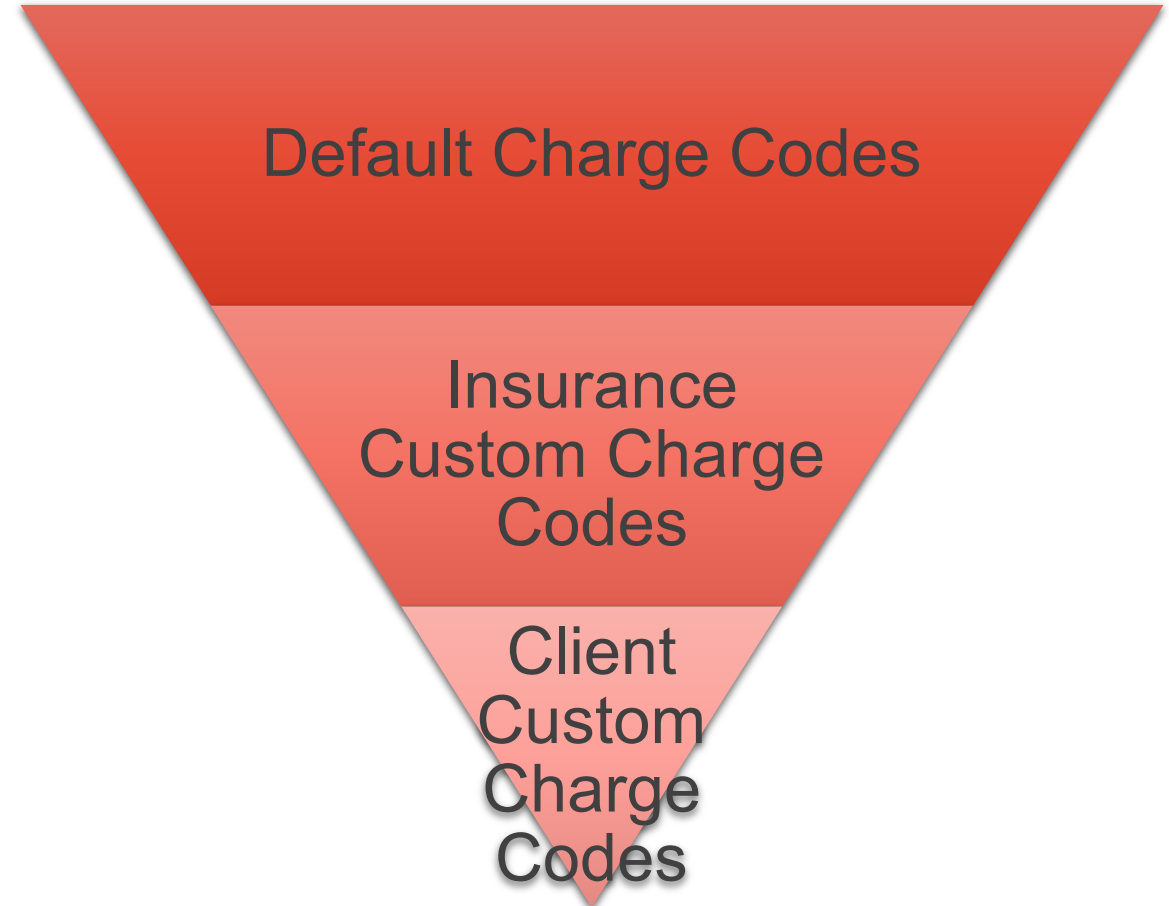
CareWhen Billing Setup – Overview

Understanding Charge Code Hierarchy

Charge Codes within CareWhen work in a hierarchy, beginning with default codes set in the previous page. If used, custom codes applied at both the individual client level (referred to as Fees) and insurance company levels will supersede the default codes.

For Example...

- If services are rendered for a Client with custom charge codes, the custom charge codes would be used for billing.
- If a Client does not utilize custom charge codes, but their insurance company does, the insurance charge code would be used.



CareWhen Billing Setup – Overview

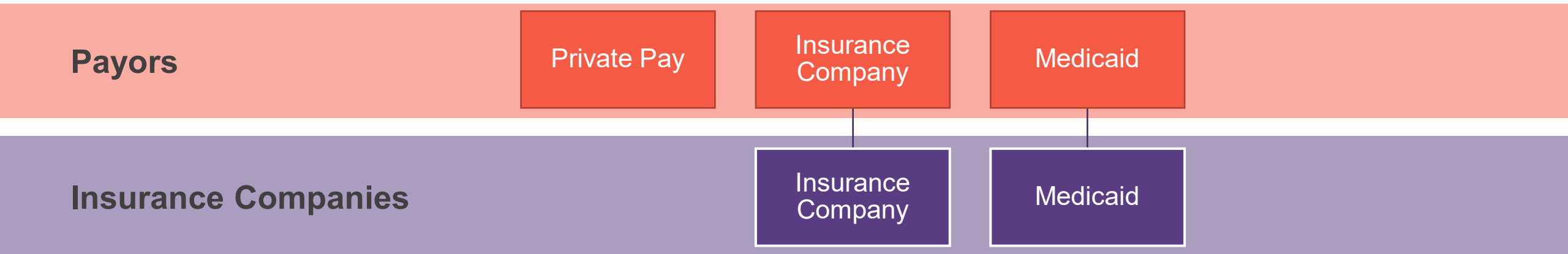


Understanding Payors vs. Insurance Companies

As they function as the foundation of billing within the system, it is important to understand the relationship between Payors and Insurance Companies.

A Payor can be a single entity (such as an Insurance Company or Private Pay), or an umbrella group that houses multiple Insurance Company entries (such as “Miscellaneous Insurance” covering multiple companies).

If a Payor is a single Insurance Company, all required information for that company must be entered on the Payors tab and the Insurance Companies tab.



Advanced Tip: An umbrella Payor can be used to house multiple Insurance Companies for specific reporting purposes.

CareWhen Billing Setup – Overview



Adding Charge Codes

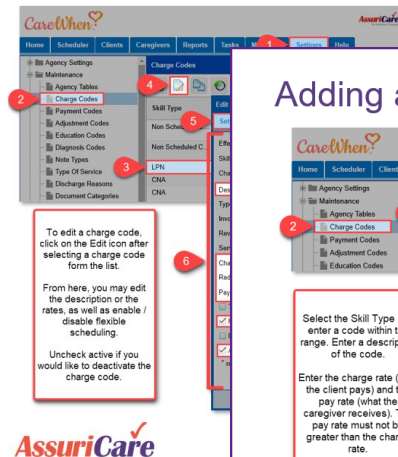
Charge Codes are default rate templates that are grouped by Skill Types that function as the basis of all billing within CareWhen. Later in the setup process, custom charge codes can be added at both a client and insurance company level.

When filling in initial billing settings, the first step is to ensure that Agency charge codes have been added. These are setup from the Charge Code maintenance table under Settings.

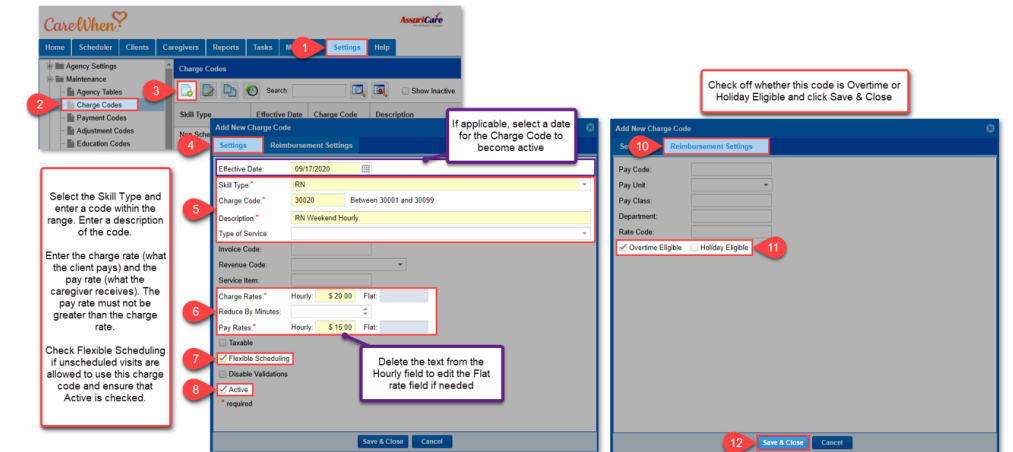
For More Information

- The complete process of adding and editing Charge Codes is covered in the **CareWhen Foundations** training guide.

Edit a Charge Code



Adding a New Charge Code



CareWhen Billing Setup – Overview



Adding Payors

Payors in CareWhen represent responsible parties that will pay for a given set of services. These are added from the Payors tab found under Invoice Settings, where Agencies should add all sources that they expect to receive payments from.

For Example...

- Common examples of Payors are Private Pay, Medicaid, and Private Insurance.

The screenshot displays the CareWhen Billing Setup interface. The top navigation bar includes tabs for Home, Scheduler, Clients, Caregivers, Reports, Tasks, Messages, **Settings** (highlighted with a red circle and number 1), and Help. The left sidebar shows a tree view of settings categories, with **Payors** (under Invoice Settings) highlighted with a red circle and number 2. The main area shows the **Payors** table with columns: Code, Description, Na..., Provider ID, Agency NPI, Taxonomy..., Can Invoice, Taxable, and Active. The table lists three payors: 1. Private Pay (PVT), 2. Virginia Medicaid (MDC), and 3. Medicaid (MDC). A red circle and number 3 points to the 'Add New Payor' button (a plus icon in a square). An 'Add New Payor' dialog box is open, showing the 'Payor Info' tab. The dialog has fields for Code (8), Description (Assured Medical Insurance), Short Name (AMI), Provider ID, Agency NPI, Taxonomy Code, and Alt Address (Use Default). There are checkboxes for Can Invoice, Is Taxable, and Active (checked). A red box highlights the 'Active' checkbox. A purple box points to the 'Active' checkbox with the text: 'Payors must remain Active in CareWhen to be used in future setup. Active is checked by default.' A red box highlights the 'Description' and 'Short Name' fields with the text: 'To add a Payor, select a new Code (generally the next number in the count of Payors), a Description containing the full name of the Payor, and a Short Name abbreviating the Description. Save your additions to add the Payor to the list.' A purple box points to the 'Private Pay' entry in the table with the text: 'Private Pay is a default Payor that will be pre-added in CareWhen'. The dialog has 'Save', 'Save & Close', and 'Cancel' buttons at the bottom.

Code	Description	Na...	Provider ID	Agency NPI	Taxonomy...	Can Invoice	Taxable	Active
1	Private Pay	PVT				✓		✓
2	Virginia Medicaid	MDC	123456789	4444444321	555E00000Z			✓
3	Medicaid	MDC						
4	Medicaid	MDC						
5	AARP							
6	PVT Insurance							
7	Shady							

Add New Payor

Payor Info | Approval Settings | EMC Settings | Claim Settings | Claim Layout | Auto Post Settings

Code: 8
Description: Assured Medical Insurance
Short Name: AMI
Provider ID:
Agency NPI:
Taxonomy Code:
Alt Address: Use Default
☐ Can Invoice
☐ Is Taxable
☒ Active

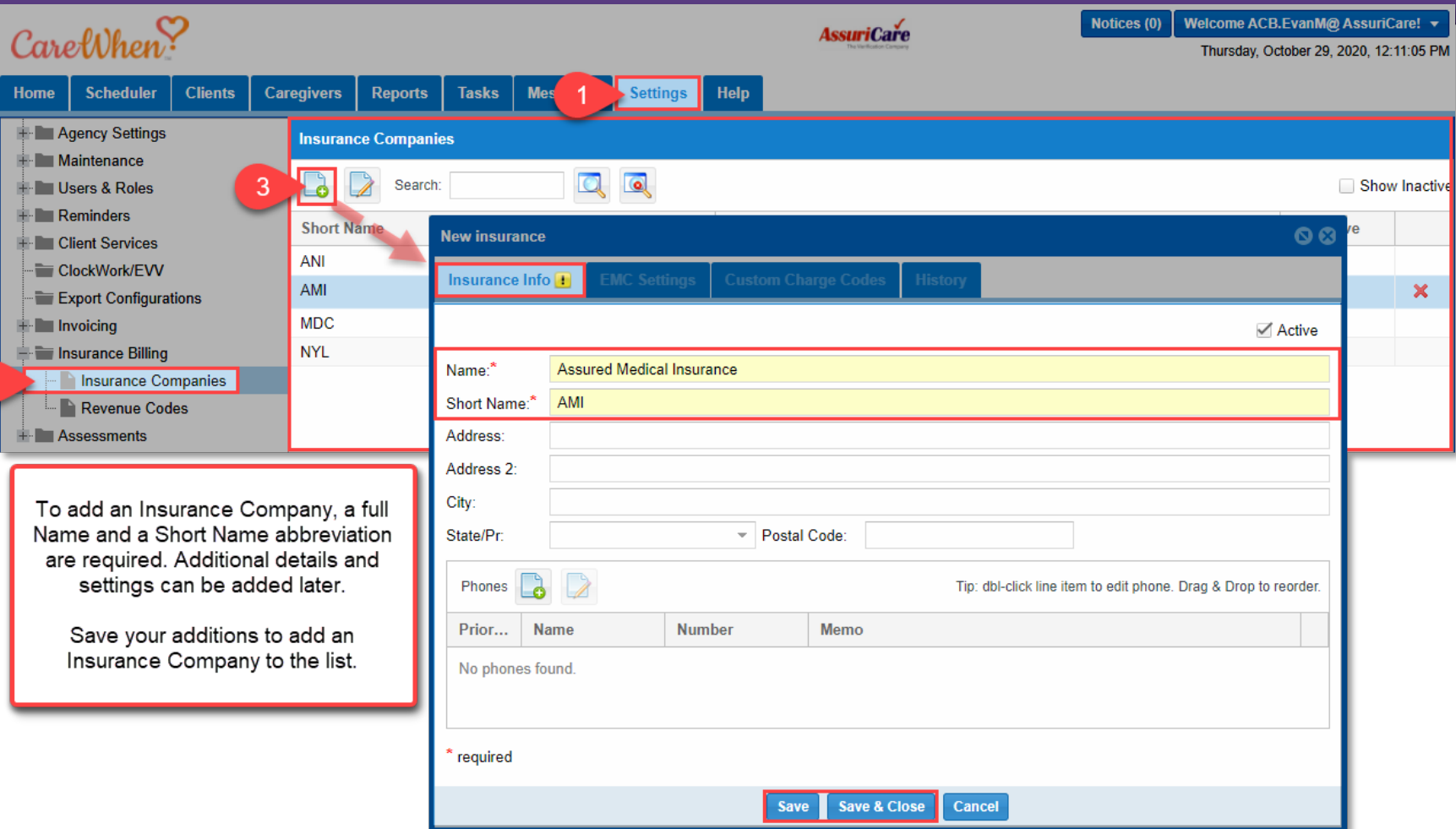
Save | Save & Close | Cancel

CareWhen Billing Setup – Overview

Adding Insurance Companies

The Insurance Companies area, found within the Insurance Billing tab, is used to input all managed care providers that the Agency will use for insurance billing purposes.

Note: As outlined previously, an Insurance Company can be the same as a Payor.



The screenshot displays the CareWhen Billing Setup interface. The top navigation bar includes tabs for Home, Scheduler, Clients, Caregivers, Reports, Tasks, Messages, Settings (highlighted with a red circle and number 1), and Help. The left sidebar shows a tree view of settings, with Insurance Companies highlighted under the Insurance Billing tab (marked with a red circle and number 2). The main content area shows the Insurance Companies section, which includes a list of existing companies (ANI, AMI, MDC, NYL) and a 'New insurance' form. The 'New insurance' form has tabs for Insurance Info (selected), EMC Settings, Custom Charge Codes, and History. The form fields include Name (Assured Medical Insurance), Short Name (AMI), Address, Address 2, City, State/Pr, and Postal Code. A 'Phones' section is also present, showing a table with columns for Prior..., Name, Number, and Memo. The form is marked as 'Active' and has 'Save', 'Save & Close', and 'Cancel' buttons at the bottom. A red box and number 3 highlight the 'Add' button (a plus icon) in the top left of the Insurance Companies section.

To add an Insurance Company, a full Name and a Short Name abbreviation are required. Additional details and settings can be added later.

Save your additions to add an Insurance Company to the list.

CareWhen Billing Setup – Overview



Subscribers

Subscribers are set up on the Client record to assign the appropriate Payor to any visits created. They are set up in Client Settings from the Billing tab. Common examples of Subscribers are:

- Private Pay
- Private Insurance Company (pictured)
- Medicaid

Reference the Client examples in this training to learn about setup for each common Subscriber type.

Add New Subscriber

Subscriber Info | Insurance Info

Contact: Charlie Demo (Self)

Name: Charlie Demo

Relationship: Self

Birth Date: 06/15/1942 Age: 78

SSN: 222-33-4444

Hold Dates: From: To:

☒ Is Active

* required

Add New Subscriber

Subscriber Info | Insurance Info

Payor: AMI - Assured Medical Insurance ☐ Is Medicaid

Insurance: AMI - Assured Medical Insurance

Subscriber #: 12345

Group #:

Comment:

* required

Add Cancel

Client Examples

The following pages will outline three client examples. For these examples, each client will utilize different billing methods within CareWhen.

The billing settings required to meet their billing needs will be outlined and discussed, as well as client-specific settings required to utilize the billing settings that have been established.



Martha
Private Pay



Katherine
Medicaid



Charlie
Private Insurance

Martha – Private Pay



Martha's CareWhen Billing Needs:

Martha will represent a common billing scenario within CareWhen. She will be receiving hourly services from a Home Health Aide and plans to pay for these services directly via the Private Pay option. Since she pays her caregiver more than the default rate, she will be using a custom charge code.

Charge Codes

- Homemaker Hourly - \$10
- Client custom charge code* - \$15

Payors

- Martha will be using the Private Pay payor option.

Insurance Companies

- As Martha plans to utilize Private Pay for her care needs, no Insurance Company is needed.

* Denoted as a "Fee" under Client Settings

Charge Codes

Payors

Insurance Companies



Agency Tables

- Charge Codes
- Payment Codes
- Adjustment Codes
- Education Codes
- Diagnosis Codes
- Note Types
- Type Of Service
- Discharge Reasons
- Document Categories
- GL Codes
- Users & Roles
- Reminders
- Client Services
- ClockWork/EVV
- Export Configurations
- Invoicing
- Insurance Billing
- Assessments

Skill Type	Effective Date	Charge Code	Description	Type of Servi...	Invoice Code	Revenue Code	Charge Rate Hourly	Charge Rate Flat	Pay Rate Hourly	Pay Rate Flat	RB...	Taxable	Flexible Sche...	GL R... Expe...	Acti...
Non Scheduling															
Non Scheduling															
LPN				SN											
CNA				PC											
CNA				AC		571 - Home Health									
CNA		35011	CNA PC	PC		571 - Home Health									
HMK		36010	Homemaker Hourly	HMK	S5130	571 - Home Health									
HMK		36011	Personal Care Hourly	PC	T1019	571 - Home Health									
CMP		37010	Companion Care Hourly	CC	S5131	571 - Home Health									

Martha's services will be utilizing the Homemaker Hourly charge code. This is a default charge code within CareWhen.

Martha's Homemaker charge code has simple requirements:

A skill type, charge code value, description, charge and pay rates.

Many of these will be pre-loaded in CareWhen, but the values can be changed from Agency to Agency based on billing needs.

For Martha, no changes need to be made to the default values.

Edit Charge Code [36010]

Settings Reimbursement Settings

Effective Date:

Skill Type: HMK

Charge Code: 36010

Description: Homemaker Hourly

Type of Service: HMK - Homemaker Services

Invoice Code: S5130

Revenue Code: 571 - Home Health Aide Visit

Service Item:

Charge Rates: Hourly: \$ 10.00 Flat:

Reduce By Minutes: 0

Pay Rates: Hourly: \$ 0.00 Flat:

☐ Taxable

☐ Flexible Scheduling

☐ Disable Validations

☒ Active

* required

Save & Close Cancel

Charge Codes

Payors

Insurance
Companies



Home Scheduler Clients Caregivers Reports Tasks Messages **Settings** Help

Agency Settings
Maintenance
Users & Roles
Reminders
Client Services
ClockWork/EVV
Export Configurations
Invoicing
Billing Settings
Invoice Settings
Payors
Approval Process
Insurance Billing
Assessments

Payors

Search: [] [] []

Code Description Name Provider ID Agency NPI Taxonomy... Can Invoice Taxable Active

1	Private Pay	PVT				✓		✓
2	Virginia Medicaid	MDC	123456789	4444444321	555E00000Z			✓
3	Medicaid PC							
4	Medicare Chore							
5	AARP LTC							
6	PVT Insurance							
7	Shady Pines ALF							
8	Assured Medical Insurance							

Edit Payor Record [PVT]

Payor Info Approval Settings EMC Settings Claim Settings Claim Layout Auto Post Settings

Code:* 1
Description:* Private Pay
Short Name:* PVT
Provider ID:
Agency NPI:
Taxonomy Code:
Alt Address: Use Default
☒ Can Invoice
☐ Is Taxable
☒ Active

Save Save & Close Cancel

Martha will be utilizing the Private Pay payor option.

For this example, a Payor Code, Description, and Short Name are required. "Can Invoice" and "Active" are the only required toggles.

All of this information will be present in CareWhen by default.

Charge Codes

Payors

Insurance
Companies



Home Scheduler Clients Caregivers Reports Tasks Messages **Settings** Help

Agency Settings
Maintenance
Users & Roles
Reminders
Client Services
ClockWork/EVV
Export Configurations
Invoicing
Insurance Billing
Insurance Companies
Revenue Codes
Assessments

Insurance Companies

☐ Show Inactive

Short Name	Active
ANI	✓
AM	✓
MDC	✓
NYL	✓

As Martha will be paying for her services via the Private Pay option, an Insurance Company is not required to meet her billing needs.



Martha's Client Settings – Fees

Additional setup is required on a client-by-client basis to custom tailor Agency billing settings to their needs. First, let's setup Martha's previously mentioned custom charge code. Custom client charge codes are entered in as Fees from the Billing tab under Client Settings.

As mentioned in the hierarchy, the modifiers in a custom charge code will supersede the Agency's default code values.

Edit Client Record [Martha Demo]

ate | **Scheduling** | Agency | **Billing** | Contacts | Location | Notes | Financial | Reminders | Orders

Fees | Subscribers | Invoice Settings

Add New Custom Fee

☒ Active

Effective Date: 11/23/2020

Charge Code*: 36010 - Homemaker Hourly

Current Rate: Hourly: \$10.00 Flat: \$0.00

New Rates: Hourly: \$ 15.00 Flat:

☐ Tax Code

Percent:

* required

Add Cancel

Page 0 of 0 | Page Size: 25 | No data to display

Using the Fees tab found under Billing in Client settings, a custom fee can be applied to Martha's account.

The effective date of a Fee is the date that the custom fee goes into effect.

Select a base Charge Code from the drop down that you wish to modify.

Input the client-specific rate you wish to apply and click Add.

Charge Codes

Payors

Insurance
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Martha's Client Settings – Subscribers

The Subscribers tab under Billing is used to manage client-specific entities responsible for payments. These can be private pay individuals, Medicaid, or insurance companies.

Martha, utilizing private pay, will serve as the sole subscriber. Private Pay subscribers are added by default within CareWhen, so no changes are needed on this page.

Edit Client Record [Martha Demo]

ate | **Scheduling** | Agency | **Billing** | Contacts | Location | Notes | Financial | Reminders | Orders

Fees | **Subscribers** | Invoice Settings

Display All

#.	Name	Relation	Payor	Insurance	Active
1	Martha Demo	Self	1 - Private ...		✓

Subscriber 1 Detail

Subscriber Name: Martha Demo SSN: 111-22-3333 Birth Date: 10/09/1946

Payor: 1 - Private Pay

Insurance Co:

Subscriber Id: Group #:

Comment:

Click the expand icon to reveal additional Subscriber details for the selected Subscriber.



Martha's Client Settings – Invoice Settings

For Martha's billing invoices, she would prefer to have invoices sent to her daughter, who will serve as her primary contact. This can be set from the Invoice Settings area within Client Settings.

Edit Client Record [Martha Demo]

Personal Private Scheduling Agency **Billing** Contacts Location Notes Financial Re

Fees Subscribers **Invoice Settings**

Responsible Party: Allison Demo

Email:

Email Invoice: ☐

Suppress Invoice Printing: ☐

Invoice Comment:

Invoice Group:

* required 📖 read only

Save Save & Close Cancel

To set a responsible party designation, a Responsible Party contact type must be set for the Client via the Contacts tab.

Without a Responsible Party set for invoice settings, the Client will be sent the invoice by default.

Add New Contact

Type:* Responsible Party Relationship: Daughter

First Name:* Allison Middle: Last: Demo Suffix:

OR

Company:* Address: 100 5th Ave Address 2:

City: Waltham State/Pr: Massachusetts Postal Code: 02451-8703

Email: test@email.com Late Alert Email: Late Alert Text:

Comment:

Charge Codes

Payors

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Companies



Martha's Summary

The CareWhen settings needed to accommodate Martha have been set accordingly and she is ready to begin paying for services. To accomplish this, we:

- Identified the correct charge code for Martha's care needs.
- Confirmed that Private Pay was available as a "payor".
- Established a custom charge code (Fee) for Martha's home care by modifying the rate applicable to the default charge code.
- Added her daughter as a Responsible Party for invoicing purposes.



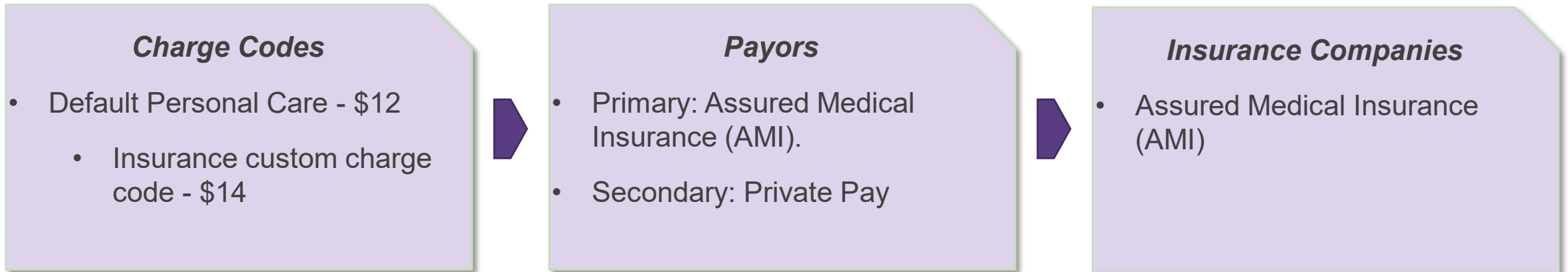
Charlie – Private Insurance



Charlie's CareWhen Billing Needs:

Charlie will be receiving personal care and paying for services with his private insurance. His insurance company has provided a billing companion guide that will be used to fill in their billing information.

Charlie's insurance company will reimburse up to 40 hours of personal care for Charlie each week. Anything above 40 hours Charlie will pay for directly. The initial 40 hours / week will be pre-authorized in CareWhen via the Preauths functionality.



Charge Codes

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Charlie will be using the default Personal Care Hourly charge code. No changes are required to enable the code for Charlie's services.

Note: Revenue Codes relating to Institutional Billing, primarily involving Hospitals and Skilled Nursing Facilities, can be accommodated by the "Revenue Code" field within charge code setup.

A revenue code in CareWhen can be used to map revenue codes with charge codes.

- Type of Service designations for a charge code are used when a payor plans to pre-authorize services for a client. These are controlled from the Type of Service settings table, and preauths are set up within Client settings..

Add New Preauth [Charlie Demo]

Type of Service:* PC - Personal Care
Subscriber:* 8 - Assured Medical Insurance, AMI - Assured Me
Unit Type:* ☐ Visits ☒ Hours ☐ Miles

- An Invoice Code is required in order to bill Private Insurance or Medicaid.

HMK	36010	Homemaker Hourly	HMK	S5130
HMK	36011	Personal Care Hourly	PC	T1019
CMP	37010	Companion Care Hourly	CC	S5131

Edit Charge Code [36011]

Settings

Reimbursement Settings

Effective Date:

Skill Type:* HMK

Charge Code:* 36011

Description:* Personal Care Hourly

Type of Service: PC - Personal Care

Invoice Code: T1019

Revenue Code:

Service Item:

Charge Rates:* Hourly: \$ 12.00 Flat:

Reduce By Minutes: 0

Pay Rates:* Hourly: \$ 0.00 Flat:

☐ Taxable

☐ Flexible Scheduling

☐ Disable Validations

☒ Active

* required

Save & Close

Cancel

Charge Codes

Payors

Insurance
Companies



Charlie's private insurance company is called Assured Medical Insurance (AMI). They have provided a billing guide outlining several details that must now be setup at the Payor level.

From the Payors area, click on the Add icon to begin setup of Assured Medical Insurance.

Input the Agency NPI and, if applicable, the Payor Taxonomy Code

Note: If the Agency does not have an NPI, input your agencies Provider ID instead.

Can Invoice pertains only to Private Pay scenarios and should remain unchecked for a claims-based payor such as private insurance.

Charge Codes

Payors

Insurance
Companies



As Assured Medical Insurance will function as both the Payor and Insurance Company, it must now be added to the Insurance Companies area.

Home Scheduler Clients Caregivers Reports Tasks Messages **Settings**

Agency Settings

From the Insurance Companies area, click on the Add icon to begin setup of Assured Medical Insurance.

Insurance Companies

Insurance Info EMC Settings Custom Charge

All basic contact information for AMI is input in the Insurance Info area.

Name:* Assured Medical Insurance

Short Name:* AMI

Address: 100 5th Ave

Address 2:

City: Waltham

State/Pr: Massachusetts Postal Code: 02451-8703

Phones

Tip: dbl-click line item to edit phone. Drag & Drop to reorder.

Prior...	Name	Number	Memo
1	Work	(555) 777-8888	

* required

Save Save & Close Cancel

Charge Codes

Payors

Insurance
Companies



AMI has supplied a custom rate for the Personal Care Hourly charge code.

This custom rate will be added at the Insurance Company level and will apply to all use instances of this charge code.

New insurance

Insurance Info | **EMC Settings** | Custom Charge Codes | History

Search:

Effective ...	Charge C...	Billing C...	Hourly Rate	Flat Rate	New Hourly R...	New Flat Rate	
11/03/2020	36011	T1019 U3	\$12.00	\$0.00	\$14.00	\$0.00	✖

Edit Charge Code [36011]

Effective Date: 11/03/2020

Charge Code:* 36011 - Personal Care Hourly

Billing Code: T1019

Modifier 1: U3

Modifier 2:

Modifier 3:

Revenue Code:

Standard Rates: Hourly: \$12.00 Flat: \$0.00

New Rates: Hourly: \$ 14.00 Flat:

* required

Save & Close Cancel

Per the insurance company's billing guide, make changes to the billing code, add a modifier, or change the rates if needed.

Charge Codes

Payors

Insurance
Companies



Charlie's Client Settings – Fees

Charlie will not be utilizing a Client custom charge code. His personal care will be billed using the default code that was previously modified at the Insurance Company level. As such, no custom Fees are required from the Fees tab.

Edit Client Record [Charlie Demo]

Personal Private Scheduling Agency **Billing** Contacts Location Notes Financial

Fees Subscribers Invoice Settings

Search: ☐ Show Inactive

E...	C...	D...	Hourly Rat...	Flat Rate	New Hourl...	New Flat ...	Percent	Active
No custom fees found.								

Page 0 of 0 Page Size: 25 No data to display

Charge Codes

Payors

Insurance
Companies



Charlie's Client Settings – Subscribers

Charlie's insurance company must be added as a Subscriber under the Subscribers tab within his client settings. Charlie occasionally elects to receive additional personal care that extends beyond the preauthorized time allowed by his insurance; in those instances, he will use the Private Pay subscriber.

Edit Client Record [Charlie Demo]

Personal Private Scheduling Agency **Billing** Contacts Location Notes Financial

Fees **Subscribers** Invoice Settings

Display All

#	Name	Relation	Payor	Insurance	Active
2	Charlie Demo	Self	1 - Private Pay		✓

Note: Private Pay is added as a subscriber by default to new Clients. This may be deleted from this list by clicking the "X" button.

Add New Subscriber

Subscriber Info Insurance Info

Contact:* Charlie Demo (Self) +

Name:* Charlie Demo

Relationship:* Self

Birth Date: 06/15/1942 Age: 78

SSN: 222-33-4444

Hold Dates: From: To:

☒ Is Active

* required

Charlie's private insurance company must be added as a Subscriber before proper billing can be begin.

Charlie's personal information serves as the general information for the subscriber, and AMI is used as both Payor and Insurance from the Insurance Info tab.

If applicable, an insurance group number can be entered in at this level in addition to the subscriber number.

Add New Subscriber

Subscriber Info Insurance Info

Payor:* AMI - Assured Medical Insurance ☐ Is Medicaid

Insurance: AMI - Assured Medical Insurance

Subscriber #: 12345

Group #:

Comment:

* required

Add Cancel

Charge Codes

Payors

Insurance
Companies



Charlie's Client Settings – Invoice Settings

For Charlie, no Invoice Settings are required. Insurance claims do not require settings to be entered here, and if Charlie decides to pay for services via private pay, he will receive invoices directly.

Edit Client Record [Charlie Demo]

Personal Private Scheduling Agency **Billing** Contacts Location Notes Financial Rer

Fees Subscribers **Invoice Settings**

Responsible Party: Select Contact...

Email:

Email Invoice: ☐

Suppress Invoice Printing: ☐

Invoice Comment:

Invoice Group:

* required 📄 read only

Save Save & Close Cancel



Charlie's Client Settings – Preauth

Pre-authorizations for a client, commonly used for insurance and Medicaid-based billing, are managed via the Preauths tab found within client settings. For this example, “AMI” has authorized 40 hours of personal care for Charlie.

Edit Client Record [Charlie Demo]

Navigation: Mail | Care Plans | Assessments | Holds | EVV | **Preauth** | Rates | Message His...

Icons: Add, Edit, Print, Refresh

Starts ↑	Ends	Type Of S...	Freq...	Allowed	S...	Subscriber
No items found.						

Add New Preauth [Charlie Demo]

Type of Service:* PC - Personal Care

Subscriber:* 8 - Assured Medical Insurance, AMI - Assured Medical In

Unit Type:* ☐ Visits ☒ Hours ☐ Miles

Allowed Value:* 40.00

Frequency:* Weekly

Date Range:* Start: 11/03/2020 End: 01/03/2021

Authorization #: 564978

Notes:

* required

Buttons: Save & Close, Cancel

- Select the applicable service type and subscriber. Select the appropriate unit type for the service, input an allowed value and frequency, and select a date range for the code.

- The authorization number is what will be reported in the claim for billing purposes.

Charge Codes

Payors

Insurance
Companies



Charlie's Summary

With Charlie's insurance company added to the system billing settings areas, and updated within his subscriber tab via client settings, we can now bill Charlie's insurance for his services. To accomplish this, we:

- Identified the correct default charge code for Charlie's care needs.
- Added Charlie's insurance company, Assured Medical Insurance (AMI), as a Payor option.
- Added "AMI" as an insurance company within the Insurance Companies settings area and created an insurance custom charge code.
- Added "AMI" as a subscriber to Charlie's client settings Billing tab and added a Preauth for Charlie's services.



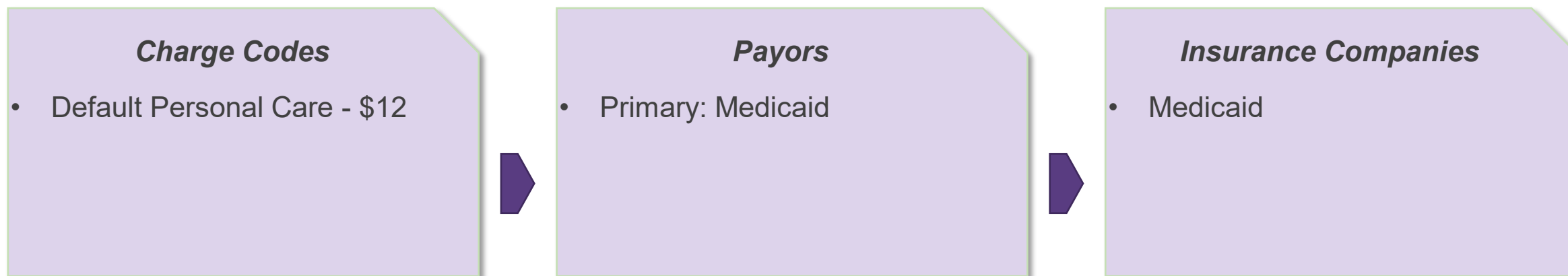
Katherine – Medicaid



Katherine's CareWhen Billing Needs:

Like Charlie, Katherine will be receiving pre-authorized personal care. Unlike Charlie, however, Medicaid will be paying for her services.

Billing settings required for Medicaid are largely like those required for private insurance. Instead of following a private insurance companion guide, reference your Medicaid companion guide for proper setup information.



Charge Codes

Payors

Insurance Companies



- Katherine will be using the default Personal Care Hourly charge code.
- No changes are required to this charge code to accommodate for Medicaid payments

- Setup considerations and practices for a Medicaid Payor are the same as that of a Private Insurance Payor. Payor Taxonomy codes and EMC settings will vary based on the values relayed by the corresponding companion guide.

egivers Reports Tasks Messages Settings Help

Payors

Search: ☐ Show Inactive

C...	Description	Name	Provider ID	Agency NPI	Taxonomy...	Can Invoice	Taxable	Active
3	Medicaid	MDC		9876543210	555E00000Z			✓

Ensure that the Medicaid payor for Katherine has the correct values for your Agency NPI and Medicaid Taxonomy codes.

Charge Codes

Payors

Insurance
Companies



After adding Medicaid as a payor, it must also be added as an insurance company from the Insurance Companies area. Setup is the same as setting up a private insurance company, with most settings configurations being derived from the applicable Medicaid companion guide.

Regivers	Reports	Tasks	Messages	Settings	Help
Insurance Companies					
		Search: <input type="text"/>			<input type="checkbox"/> Show Inactive
Short Name	Name			Active	
MDC	Medicaid			✓	

Ensure that the Medicaid insurance company for Katherine has the correct values for your Agency NPI and Medicaid Taxonomy codes.



Katherine's Client Settings

Fees:

- Katherine will not be utilizing a Client custom charge code. Her personal care will be billed through Medicaid using the default charge code. No changes are required on the Fees tab under Client settings.

Subscribers:

- Medicaid must be added as a Subscriber for Katherine. This process is largely the same as adding a private insurance company as a Subscriber, using a Medicaid ID as a Subscriber #.

Add New Subscriber

Add New Subscriber ⓘ **Insurance Info** ⓘ

Contact: * Katherine Demo (Self) +

Name: * Katherine Demo

Relationship: * Self

Birth Date: 05/09/1938 Age: 82

SSN: 333-44-5555

Hold Dates: From: To:

☒ Is Active

* required

Add Cancel

Add New Subscriber

Add New Subscriber ⓘ **Insurance Info** ⓘ

Payor: * MDC - Medicaid ☐ Is Medicaid

Insurance: MDC - Medicaid

Subscriber #: 123456789

Group #:

Comment:

* required

Add Cancel



Katherine's Client Settings

Invoice Settings:

- No additional Client invoice settings are required for Katherine's services. She does not plan to pay for any services directly.

Preauths:

- Medicaid will be pre-authorizing 20 hours of weekly personal care for Katherine. Similar to Charlie's example, this should be added from the Preauths tab under Client settings.

Edit Client Record [Katherine Demo]

< Detail Care Plans Assessments Holds EVV **Preauth** Rates Message Hist

Starts ↑ Ends Type Of Service Freque... Allowed S... Subscriber

No items found.

Page 1 of 1 Page Size: 25

Add New Preauth [Katherine Demo]

Type of Service:* PC - Personal Care

Subscriber:* 3 - Medicaid, MDC - Medicaid, Katherine Demo

Unit Type:* ☐ Visits ☒ Hours ☐ Miles

Allowed Value:* 20.00

Frequency:* Weekly

Date Range:* Start: 11/16/2020 End: 01/22/2021

Authorization #:

Notes:

* required

Add Cancel

Charge Codes

Payors

Insurance
Companies



Katherine's Summary

As Medicaid functions similarly within CareWhen to a private insurance company, setup for Katherine's needs was very similar to Charlie's. To have her Medicaid billing in place, we:

- Identified the correct default charge code for Katherine's care needs.
- Added Medicaid as a Payor option.
- Added Medicaid as an insurance company within the Insurance Companies settings area.
- Added Medicaid as a subscriber to Katherine's client settings Billing tab using her Medicaid ID as the Subscriber # and added a Preauth for Katherine's services.

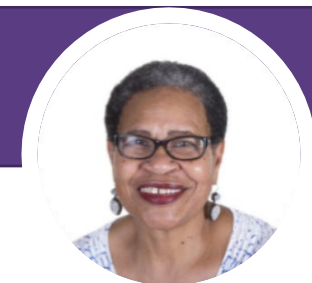


A note about scheduling...

When scheduling visits for any client, be sure to select the proper subscriber (party responsible for payment) for each visit. This will ensure proper billing for each scheduled order.



For more detailed information, see the **CareWhen Creating and Managing Visits** training.

Pictured Example: When scheduling a Personal Care visit for Charlie, select his insurance to bill “AMI” for the visit and count hours to his preauthorization. Select Private Pay to invoice him directly (this will not count towards his preauthorization).



Create Visit for [Demo, Charlie] start on [11/7/2020] code [36011]

Select charge code: 36011 : Personal Care Hourly

Search:  

Charge Code	Description	Effective Date
33010	Skilled Nursing- SN	
35002	Live In Day	
35010	CNA Hourly	
35011	CNA PC	
36010	Homemaker Hourly	
36011	Personal Care Hourly	
37010	Companion Care Hourly	

The Client zone is: North

Assign Caregiver: I will assign later

Subscriber.*

Charge Rate: Hourly: 8 - Assured Medical Insurance, AMI - Assured Medical Insurance, Charlie Demo

Pay Rate: Hourly: 1 - Private Pay, , Charlie Demo

Lock Rates: ☐

Back Finish

CareWhen Billing – Examples Summary

Available Charge Codes

Payors

Insurance Companies

Default Charge Codes

Client Custom Charge Code

Insurance Custom Charge Code

Private Pay

Subscriber

Insurance Company

Assured Medical Insurance

Subscriber

Medicaid

Medicaid

Subscriber





CareWhen Training

Billing Setup - Appendix

CareWhen Billing



Billing Settings and Approval Cycles

Once all Charge Codes, Payors, and Insurance Companies have been added to accommodate for Client's needs, a handful of final setup steps remain before billing can begin.

Billing Settings: A single page within the Settings area used to establish a billing start date for the Agency.

Approval Cycles: A settings area used to create windows of time where approvals can be made.

Payment Codes: Codes set up from the Settings area used in the payment process when making payments in CareWhen towards Invoices or Claims.

CareWhen Invoices and Claims



Billing Settings

For any billing to occur in CareWhen, a Billing Start Date is required from the Billing Settings tab.

Additionally, default Payors and applicable Billing File Types may be selected here.

The screenshot shows the 'Billing Settings' tab in the CareWhen application. The interface includes a top navigation bar with tabs: Home, Scheduler, Clients, Caregivers, Reports, Tasks, Messages, Settings (highlighted with a red circle and '1'), and Help. A left sidebar contains a tree view with folders: Agency Settings, Maintenance, Users & Roles, Reminders, Client Services, ClockWork/EVV, Export Configurations, Invoicing, Billing Settings (highlighted with a red circle and '2'), and Invoice Settings. The main content area is titled 'Billing Settings' and contains several fields: 'Billing Start Date' (03/01/2019, highlighted with a red circle and '3'), 'Default Payor' (1 - PVT), 'Billing Contact' (Biller Name), 'Open Item Start Date' (03/01/2019), 'Default Aging Preference' (empty), 'Provider One ID' (empty), 'Unique ISA13 for Electronic Files' (checked), 'Default File Format' (1500), and 'Billing File Types' (checkboxes for 1500, UB04, EMC, Provider One, Illinois DOA, Tellus, 837P, HHAXFL, HHAXPA, and MHWIN). A red circle and '4' points to the 'Billing Start Date' field. A red circle and '3' points to the 'Billing Start Date' field. A red circle and '2' points to the 'Billing Settings' folder in the sidebar. A red circle and '1' points to the 'Settings' tab in the top navigation bar.

Select the Billing File Types that apply to your Agency's invoice / claims needs.

"1500" (paper claim), "UB04" (paper claim), and "EMC" (digital claim) are the most commonly used types.

Note: The selectable file types are not configurable and must be added by AssuriCare

A Billing Start Date is required for billing to begin.

The "Default Payor" selects the automatically added "Subscriber" for each new client. PVT is set here by default.

This drop down list is populated by entries in the Payors area.

CareWhen Approval Process



Approval Process - Setup

Once visits have been completed, they must be approved before billing can take place.

For this to happen, an approval cycle must be set within the Approval Process area in Settings. The first step in this area is to establish Agency-specific approval settings from the Approval Setup tab.

Configuration Note

- The Approval Period will be determined by your Agency's billing cycle; Monthly is the most used option

The screenshot displays the 'Settings' tab in the top navigation bar. The left sidebar contains a tree view with 'Approval Process' selected. The main content area shows the 'Approval Process' setup form. The 'Approval Cycles' section has a 'Setup' tab selected. The form includes fields for 'Process Start Date' (03/01/2019), 'Approval Period' (Monthly), 'Multi Visits Per Day' (Not Used), 'Tasks Completed For Visit' (Not Used), 'Yellow Over/Under Limit' (30), 'Red Over/Under Limit' (60), and a checkbox for 'Use show no pay rate flag'.

A "Process Start Date" is required for approval cycles to be created. This Start Date date typically coincides with the Billing Start Date entered in the Billing Settings area.

If the Agency will be auto-generating Approval Cycles using an approval period, this is set here.

CareWhen Invoicing and Claims

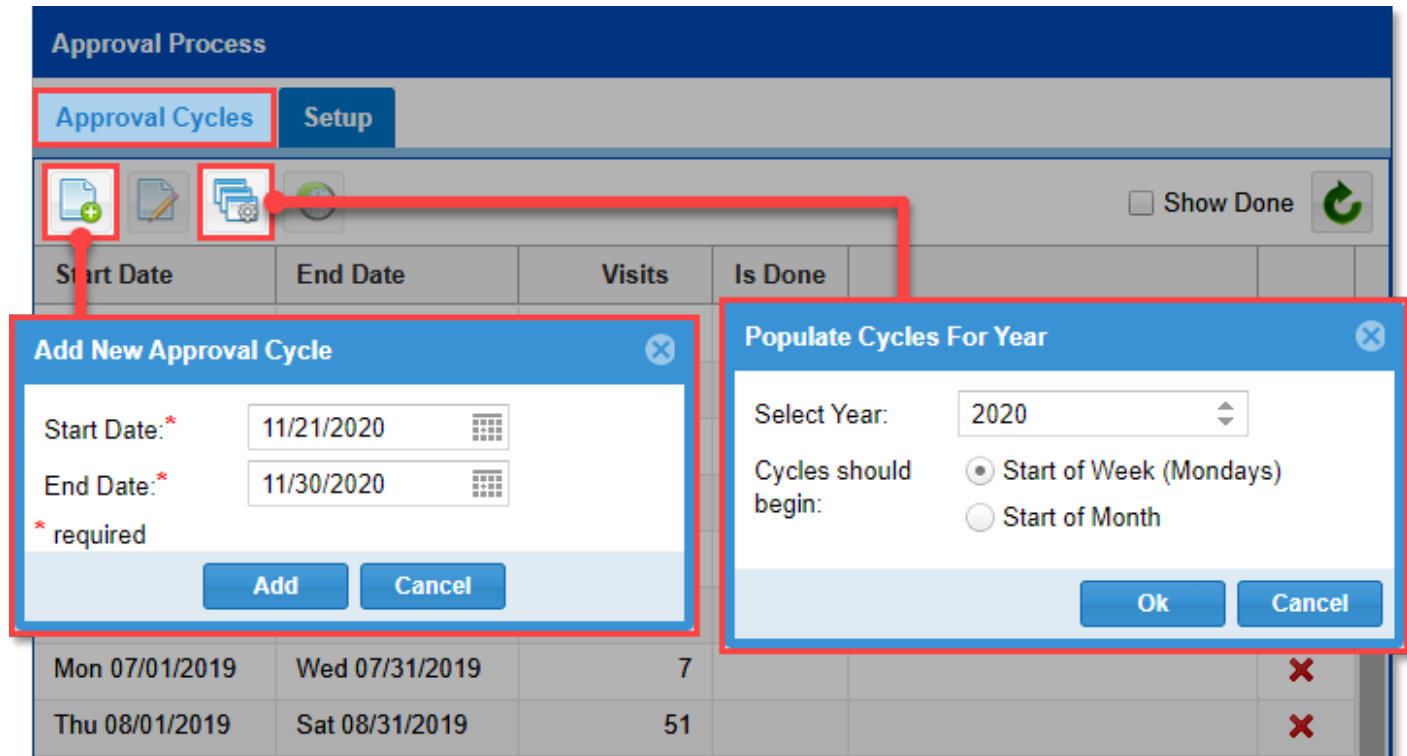
Approval Process – Approval Cycles

With Approval Process Setup complete, an Approval Cycle may now be added from the Approval Cycles tab.

Approval Cycles may be added manually or auto-added based on the previously entered Approval Period.

Configuration Note

- The most common approach is to use the “Populate Cycles For Year” option and select “Start of Month”



The screenshot displays the 'Approval Process' interface with the 'Approval Cycles' tab selected. Two modal windows are open:

- Add New Approval Cycle:** This window has fields for 'Start Date' (11/21/2020) and 'End Date' (11/30/2020), both marked as required. It includes 'Add' and 'Cancel' buttons.
- Populate Cycles For Year:** This window has a 'Select Year' dropdown set to 2020 and radio buttons for 'Cycles should begin:' with 'Start of Week (Mondays)' selected and 'Start of Month' unselected. It includes 'Ok' and 'Cancel' buttons.

Below the modals, a table shows approval cycles with columns for Start Date, End Date, Visits, and Is Done. The first row shows a cycle from Mon 07/01/2019 to Wed 07/31/2019 with 7 visits and a red 'X' in the 'Is Done' column. The second row shows a cycle from Thu 08/01/2019 to Sat 08/31/2019 with 51 visits and a red 'X' in the 'Is Done' column.

CareWhen Invoicing and Claims



Payment Codes

Payment Codes are used when adding Payments from the Pay / Adjust Task (covered in the Payment Tasks training). Payment codes typically represent all possible payor options present to Clients in CareWhen.

Payment Codes are selected when adding an item on the Pay / Adjust tab under Tasks.

A new Payment Code must receive a unique code; codes must be between 1 and 49.

Code	Description	GL Reven
1	Medicaid Payment	
2	LTC Insurance Payment	
3	Credit Card Payment	

Add Code

Code: 5 (1 - 49)

Description:

☒ Active

* required

Add Payments & Adjustments

Select Type: ☒ Payment ☐ Adjustment

Pay/Adj Code: Select Code...

- 1 - Medicaid Payment
- 2 - LTC Insurance Payment
- 3 - Credit Card Payment
- 4 - Check Payment