

Our Webinar Will Begin Shortly

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My speaking language: English >

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Q&A



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Record



More

MN ENT Providers – Migration to Linked Payer Process

November 2025

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George Marquez



- **Role: Senior Training Specialist**
- **Tenure at HHAeXchange: 7 Years**
- **Areas of Expertise: State Implementations**
- **Fun Fact: Cheese curds are my ultimate Minnesota comfort food.**



Who is this session for?

This session is specifically designed for ENT Providers who use HHAeXchange and are transitioning to the use of Linked Contracts to capture and report EVV to the State of Minnesota

Note: The use of Linked Contracts to track and report EVV data to the state of Minnesota will be **required as of 1/1/2026.**

Today's Objectives

You will be able to:

- **Identify** and verify key placement details .
- **Apply** the process of accepting and merging linked placements.
- **Create** and update schedules.
- **Confirm** UMPI, NPI, and taxonomy configurations at the service code level.



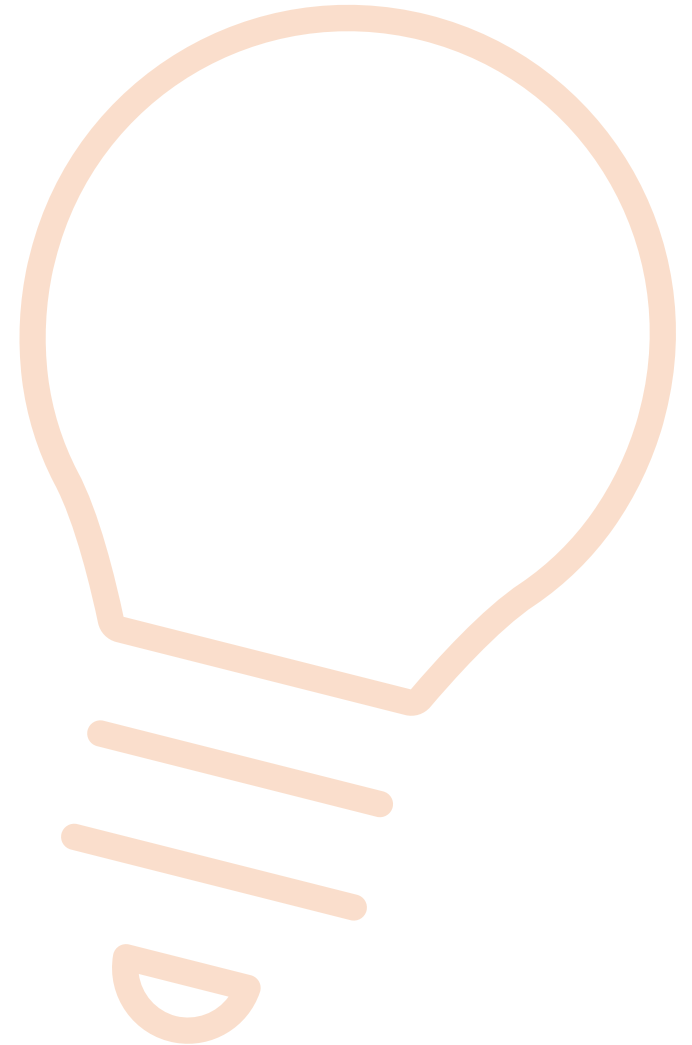
Knowledge Check

You'll see these throughout the presentation!



What is my favorite MN dish?

- A. Tatter tot hot dish
- B. Wild rice
- C. Cheese curds
- D. Swedish meatballs





Agenda

- EVV Overview
- Housekeeping
- Contract Setup Search
- Patient Placements
- Scheduling
- Updating Service Codes
- Key Takeaways
- Resources
- Questions



EVV Tracker



**AGENCY
CONFIGURATION**



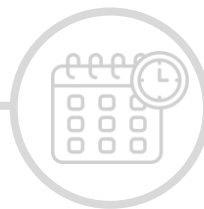
**CAREGIVER
MANAGEMENT**



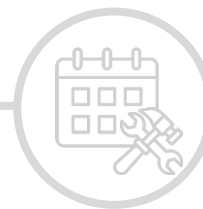
**PATIENT
MANAGEMENT**



SCHEDULING



VISIT CAPTURE



VISIT
VERIFICATION
&
MAINTENANCE



BILLING



REPORTING
&
COMPLIANCE
MONITORING

> 6 Elements of a Cures Compliant Visit



Who

Patient



Who

Caregiver



What

Type of
Service



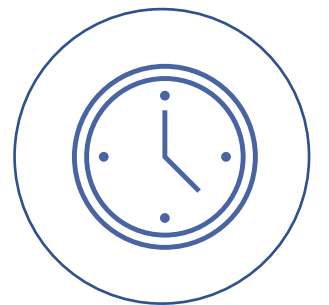
Where

Location
of Service



When

Date of
Service



When

Time of
Service

Note: If any of these EVV elements of a visit are missing or incorrect, the visit will be considered an **Exception.**

Housekeeping

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Starting Jan 1, 2026, Minnesota requires linked contracts for EVV with 50% EVV compliance.

Why use Linked contracts ?

- Single Source of Truth
- Accurate & Consistent Data
- EVV & Billing
- Correct Payer Setup



Tip: Linked contracts are an easy one-time setup.

Stay On Track With Linked Contracts



Prevents:

- EVV not counted towards 50% threshold.
- Linked placements allow EVV to aggregate automatically. **Internal placements will NOT aggregate after Jan 1.**
- Missing authorizations!
- Duplicate patient records!
- Missing linkage = missing payer updates (auth changes)



Before You Begin



To prepare for **Linked contracts**, be sure to:

1. Make sure the UMPI, and NPI are added to the office.
2. Review the prerequisites email that includes steps to add the UMPI and NPI in the [Linked Contract 101](#).



Tip: If NPI , UMPI information are missing linking will fail.

> Services in Scope for EVV in Minnesota



1. Navigate to the [MN State Info Hub](#)
2. Click on “Services in Scope”
3. Scroll through this page to see services in scope for Waiver, CFSS, FMS, and Home Health

HHAExchange Homecare Software Technology Resources Company [Request Your Demo](#)

[Office of the Minnesota Secretary of State - Safe at Home](#)

- [Office of the Minnesota Secretary of State - What does a Safe at Home address look like?](#)

Waiver Services in Scope

- Payer Managed Placement - The payer sends a member to an agency via HHAExchange.
- Provider Managed Placement - The agency sends the member to the payer in HHAExchange.

Service Name	HCPC	Timeline
Crisis Respite, 15 minutes	T1005	Current
Crisis Respite, Specialized, 15 minutes	T1005:TG	Current
Crisis Respite, Daily	S9125	Current
Homemaker, Assistance with Personal Care, 15 minutes	S5130:TG	Current
Individual Community Living Support, In Person, 15 minutes	H2015:U3	Current
Night Supervision, 15 minutes	S5135:UA	Current
Respite Care Services, In Home, 15 minutes	S5150	Current
Respite Care Services, In Home, Daily	S5151	Current
Individualized Home Supports with Training, Daily	H0043:UC:U3	Current
Individualized Home Supports with Training, 1:1, 15 minutes	H2014:UC:U3	Current

Before You Begin: 4 Things to Prepare



Step 1: Portal readiness!



Step 2: Identify contract types.



Step 3: Prepare for merging.

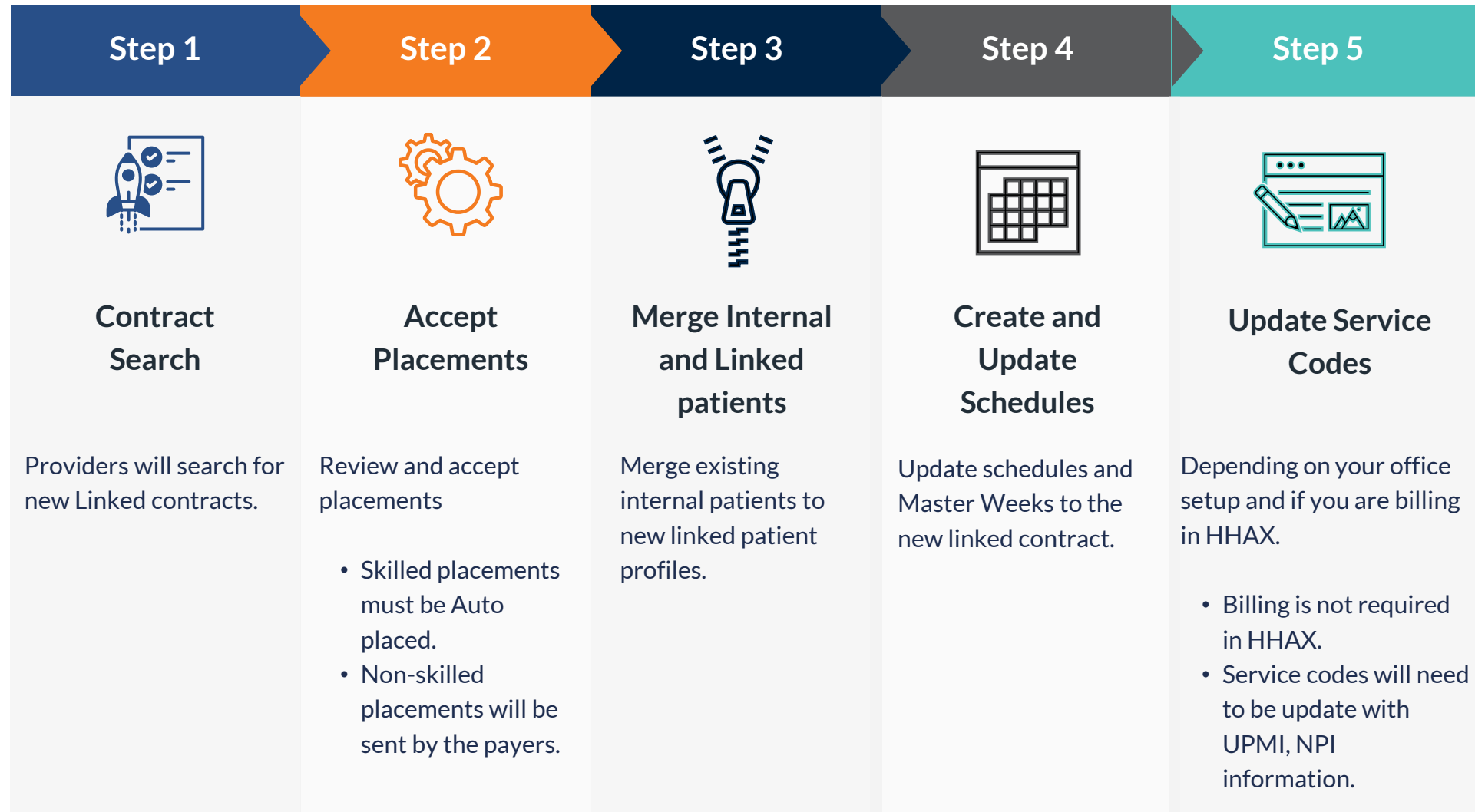


Step 4: Prepare for scheduling and optionally billing



Tip: Please review the Linked Contracts 101 video.

Linked Contract Workflow



Contract Setup Search

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Step 1: Contract Search

Identify Linked Contract.



Reviewing the linked contract :

- In the **Contract setup search**, filter to view Linked (UPR) contracts.
- **Internal** = Provider-created
- **Linked** = Payer-created
- For multi-office setups, ensure all offices are attached to the linked contract.

Search Contracts (2)											
Contract Name	Office	Invoice Type	Auth Required	Required Compliance	Status	Effective	Expires	Contract Type	Linked Contract Type	Service Codes	Action
Life Care Demo Payer (UMA)	Offices (UMA MI office)	invoiceformat	Yes	No compliance	Active				Linked (UPR)	Service Codes	
Life care INT	Offices (UMA MI office)	invoiceformat	No	No compliance	Active	03/01/2024	05/22/2040	Internal		Service Codes	

Hello georgem

[Placements \(9 Pending\)](#)
[System Notifications](#)
[Direct Messages](#)
[Tasks](#)
[Linked Communication](#)

Search System Notifications

Priority

Status

From

To

Patient Placements

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➤ Non-Skilled vs Skilled Workflow - What's The Difference?



Non-Skilled (Payer Managed)

- Payer sends placement.
- Appears as a placement that needs to be accepted.
- Single office placements will automatically be confirmed.



Skilled (Provider Managed)

- Provider creates patient profile.
- Link contract > Auto placement occurs.
- Identifiers must match



Linked placement only needs to happen once.



Step 2 : Review and Accept Placements

Pending Placements



Placement Process for Non-Skilled Services

1. Payers send placements, which appear on the **Home** screen > **Placements** > **Pending**.
2. Review and accept each placement by selecting the **Office**, **Coordinator**, and selecting **Save**.
3. Single office providers will review **Accepted with No Master Week** for confirmed placements.

Pending (1) Accepted with Temp Caregiver (9) Staffed (0) Accepted with No Master Week(0)											
Patient ^	Admission ID ⇅	Office ⇅	Start Date ⇅	Stop Date ⇅	Frequency ⇅	Service Category ⇅	Service Type ⇅	Request Sent At ⇅	Status ⇅	Cut Off Time ⇅	Contract Name ⇅
XXXXX	2131412	UMA MI office	11/01/2025			Home Health	PCA	11/24/2025 12:22:55 PM (Eastern)	Pending	11/27/2025 12:22:55 PM (Eastern)	Life Care Demo Payer
										Previous	1 Next



Make sure the placement is sent to the correct office!

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Placements (11 Pending)

System Notifications

Direct Messages

Tasks

Linked Communication

Placements

Pending (1)

Accepted with Temp Caregiver (9)

Staffed (0)

Accepted with No Master Week(1)

Member ▲	Admission ID ◆	Office ◆	Start Date ◆	Stop Date ◆	Frequency ◆	Service Category ◆	Service Type ◆	Request Sent At ◆	Status ◆	Cut Off Time ◆	MCO Name ◆
XXXXX	256454654	Unspecified Office	09/01/2025			Home Health	PCA	9/23/2025 2:41:19 PM (Eastern)	Pending(Broadcast)	9/24/2025 4:01:19 AM (Eastern)	Life Care Demo Payer

Previous
1
Next



Step 2: Review and Accept Placements

Auto placement



Placement Process (Skilled)

1. Create the **Patient record** and confirm key details (**First Name, Last Name, DOB, Medicaid ID, SSN**).
2. Link the new contract to the patient.
3. The HHAX will then Auto place the matching linked patient profile the matching placement profile.

Contract *

Life Care Demo Payer (434)

Service Start Date *

11/01/2025

mm/dd/yyyy

Alt. Patient ID

Service Code

--Select--

File

Choose File

 No file chosen

File size must not exceed 20 MB

☐ Update Master Week ⓘ

Save

Cancel

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Placements (11 Pending)

System Notifications

Direct Messages

Tasks

Linked Communication

Search System Notifications

Priority

All ▾

Status

All ▾

From

mm/dd/yyyy



To

mm/dd/yyyy



Search

Knowledge Check

Placements



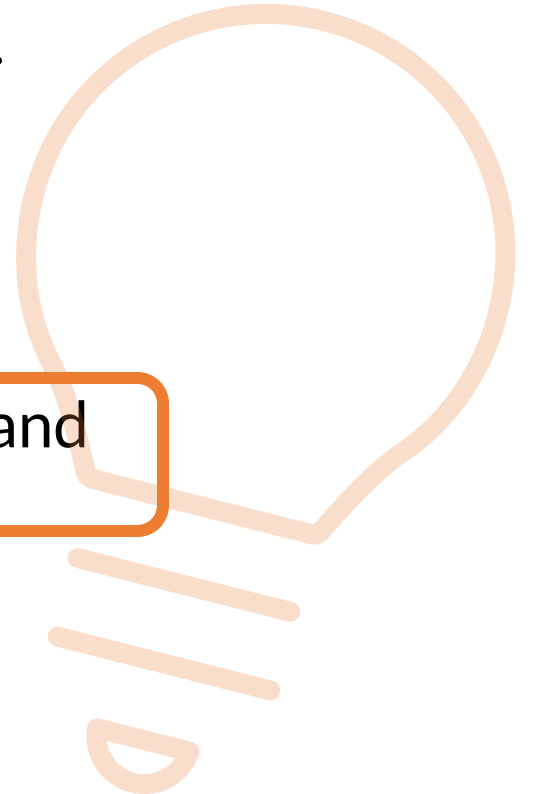
You're ready to accept a new placement in HHAX, but the system asks you to add a coordinator. What should you do?

A. Skip adding a coordinator — it can be done later if needed.

B. Add the caregiver who will be servicing this patient.

C. Add the coordinator responsible for the patient's service and scheduling.

D. Add the biller.





Step 3: Merge

Patient Merge



Merging Patient Records:

1. Go to the **Patient General** tab.
2. Click **Edit**.
3. Select **Patient Merge** to combine the records.
4. Click **Save**.



Tip: Patient Identifiers must match to merge.

- SSN
- Medicaid ID
- Full Name + DOB

Merge Patient Record

History

Merge Patient

Admission ID	Alt. Patient ID	Patient Name	Contracts	Status	Action
UMA-900191		Bethune Issac	Life care INT	Completed	Action

Hello georgem

[Placements \(9 Pending\)](#)
[System Notifications](#)
[Direct Messages](#)
[Tasks](#)
[Linked Communication](#)

Search System Notifications

Priority

All

Status

All

From

mm/dd/yyyy

To

mm/dd/yyyy

Search

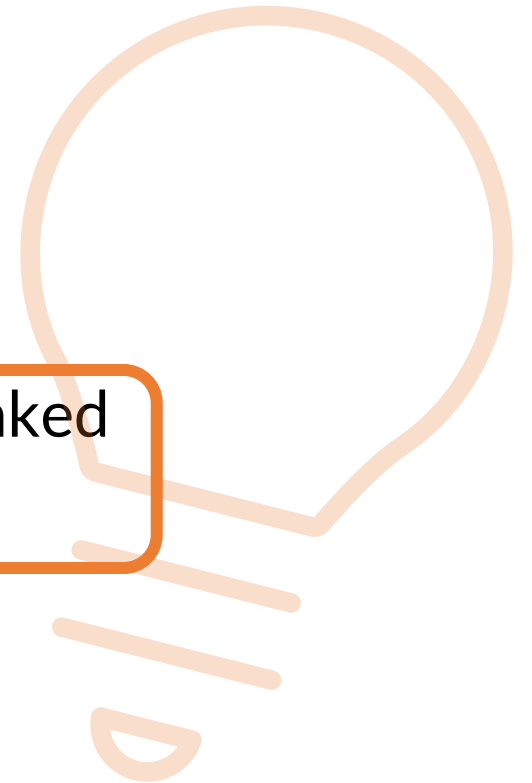
Knowledge Check

Merging Placements



Why should you merge an internal patient record with a linked patient record in HHAX?

- A. To keep both records, separate for tracking.
- B. To delete the old record so only the linked one remains.
- C. To keep visit and authorization history together under the linked record for EVV and billing compliance.
- D. To wait for a third profile to merge.



Scheduling

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Step 4: Scheduling



• Single Schedule

Schedules should be updated to prevent service interruptions.

- Steps for updating schedules:
 1. Go to **Visits**
 2. Search **Scheduled visits**
 3. Update **Bill to & Service code**



IMPORTANT NOTE:

Make sure the caregiver has the correct discipline before scheduling!

Masterweek

End the current Master Week, then create a new one for the new contract

- Step for creating Master Week.
 1. **Patient > Master Week**
 2. **Add Master Week**
 3. Select **Hours** – Create Master Week schedule
 4. **Select Save**
 5. **Select Update**

Bethune Issac ActiveHome Phone
465-854-3746 ▼Address
123 Main St, NEW YORK, NY, 10036Languages
--Date of Birth
10/15/1965Patient [Alt ID]
-- [5346274]Admission ID
UMA-900096Contract
Life Care Demo Payer (UMA), Life care INTCoordinators
DefaultOffice
UMA MI office

> Patient Search

- General
- Contracts/Insurance
- Profile
- Eligibility Check
- Auth/Orders
- Special Requests
- Master Week

Calendar

- Visits
- POC/PCP
- Caregiver History
- Rates

Authorizations

Contract	Auth. #	From Date	To Date	Discipline	Service Code	Max Auth.	Type	Period	Max Period	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Remaining Auth.	Notes	Actions
Life care INT	6545466546	10/01/2025	12/31/2025	PCA	T1019	N/A	Hourly	Entire Period	0 hrs								0 hrs		...
Life Care Demo Payer (UMA)	454811155156	04/01/2025	12/31/2025	PCA	T1019	N/A	Hourly	Entire Period	500.00 hrs								0 hrs		...
Life Care Demo Payer (UMA)	5356535435	05/01/2024	01/01/2025	HMK	S5130	N/A	Hourly	Entire Period	50000.00 hrs								0 hrs		...

Calendar

History Legend

Month Year

< >

November 2025

Go

Add Weekly Variable Schedule

Add a Visit ▼

Monday

Tuesday

Wednesday

Thursday

Friday

Saturday

Sunday

Calendar

History Legend

Month

Year

October

2025

Go

Add Weekly Variable Schedule

Add a Visit

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
29	30	1	2	3	4	5
6	7	8	9	10	11	12
<div><div></div><div>S: 10:00 AM - 11:00 AM</div><div>V:</div><div>Billed: N</div><div>Reynolds Sam</div></div>	<div><div></div><div>S: 10:00 AM - 11:00 AM</div><div>V:</div><div>Billed: N</div><div>Reynolds Sam</div></div>	<div><div></div><div>S: 10:00 AM - 11:00 AM</div><div>V:</div><div>Billed: N</div><div>Reynolds Sam</div></div>				
13	14	15	16	17	18	19
<div><div></div><div>S: 10:00 AM - 11:00 AM</div><div>V:</div><div>Billed: N</div><div>Reynolds Sam</div></div>	<div><div></div><div>S: 10:00 AM - 11:00 AM</div><div>V:</div><div>Billed: N</div><div>Reynolds Sam</div></div>	<div><div></div><div>S: 10:00 AM - 11:00 AM</div><div>V:</div><div>Billed: N</div><div>Reynolds Sam</div></div>				
20	21	22	23	24	25	26
27	28	29	30	31	1	2

Knowledge Check

Scheduling



What should you do to keep services going after merging a patient's records?

- A. Wait for the patient to perform EVV.
- B. Ask the caregiver to verbally confirm visits.
- C. Create a Master Week on the linked record to generate ongoing, recurring visits.
- D. Ask the caregiver to keep track of future visits until the schedule is built out.



Updating Service Codes

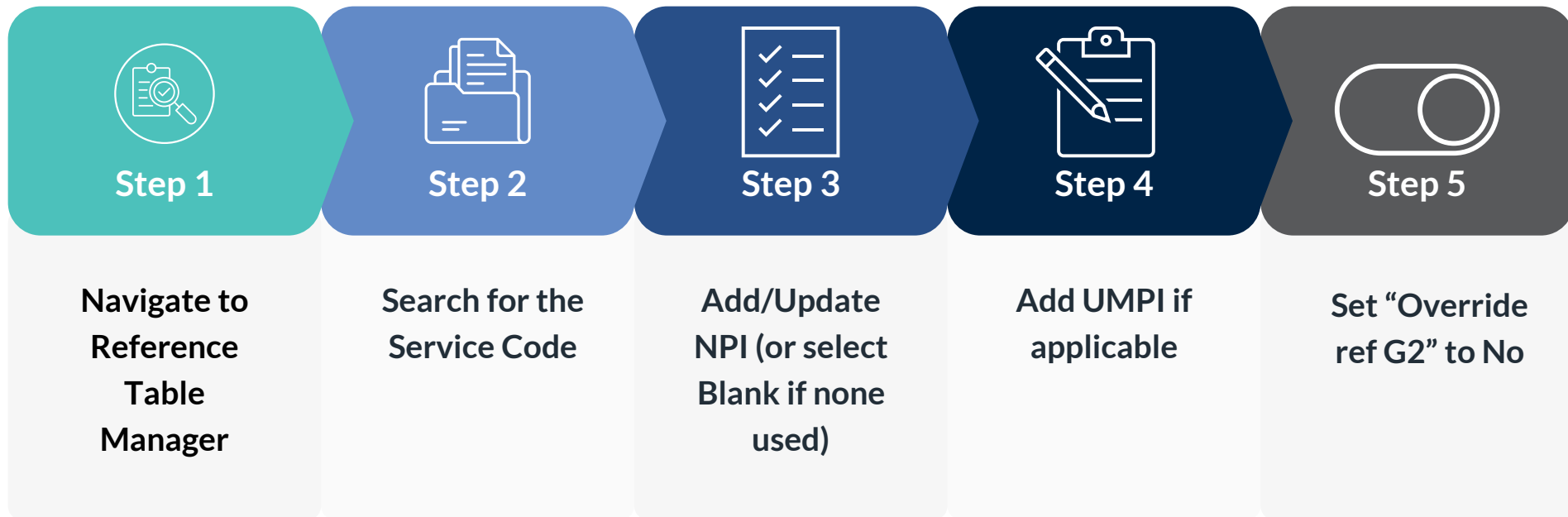
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Step 6: Updating Service Codes



IMPORTANT: You **do not** need to bill on the linked contract to be EVV compliant, but EVV **must** be captured under the linked contract.

How to Update Service Codes



Note: This is only required if you're billing a linked contract.
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Reference Table Management

Reference Table

Contract Service Code ▾

[View](#)[Reference Table User Guide \(PDF\)](#)

Page Loaded in 0.139 second(s).

Service Code

Discipline

Contract

Rate Type

All selected

All

All

[Search](#)[Add Contract Service Code](#)

Contract Services Results (50)

Service Code	Discipline	Contract	Rate Type	Visit Type	Mutual	Allow Patient Shift Overlap	Bypass Prebilling Validations	Bypass Billing Review Validations	Auto-Schedule Service Type ID	Mileage Code	Export Code	Revenue Code	Taxonomy Code	HCPCS Code	Live-in Units for Export	Hourly Rounding
T1019	PCA	Life Care Demo Payer (KHC)	Hourly	Hourly	Yes	Yes	No	No		No	T1019	23423423	251E00000X	T1019		
T1019:U2	PCA	Life Care Demo Payer	Hourly	Hourly	No	No	No	No		No	T1019:U2		251E00000X			

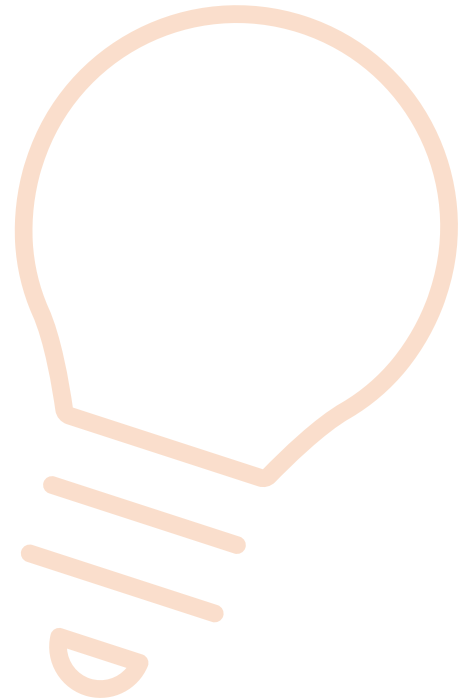
Knowledge Check

Updating Service codes



Before going live, you review the service code configuration for Linked contracts. What's the next step?

- A. Ignore it.
- B. Delete and recreate the service code to avoid configuration issues.
- C. Validate the service code based on applicable NPI, UMPI updates.
- D. Proceed with scheduling; billing will auto-correct the missing info later.





Key Takeaways

MN ENT Linked Contract

Checklist :

- ☐ Make sure linked contracts are added in Contract Setup.
- ☐ For agencies with multiple offices, make sure contracts are linked to those offices.
- ☐ Review placements based on services in scope and send them to the correct office.
- ☐ Check new authorizations and confirm caregivers are assigned to the right discipline.
- ☐ Merge internal patient profiles with their new linked profiles.
- ☐ Update schedules and create Master Weeks.





Key Takeaways



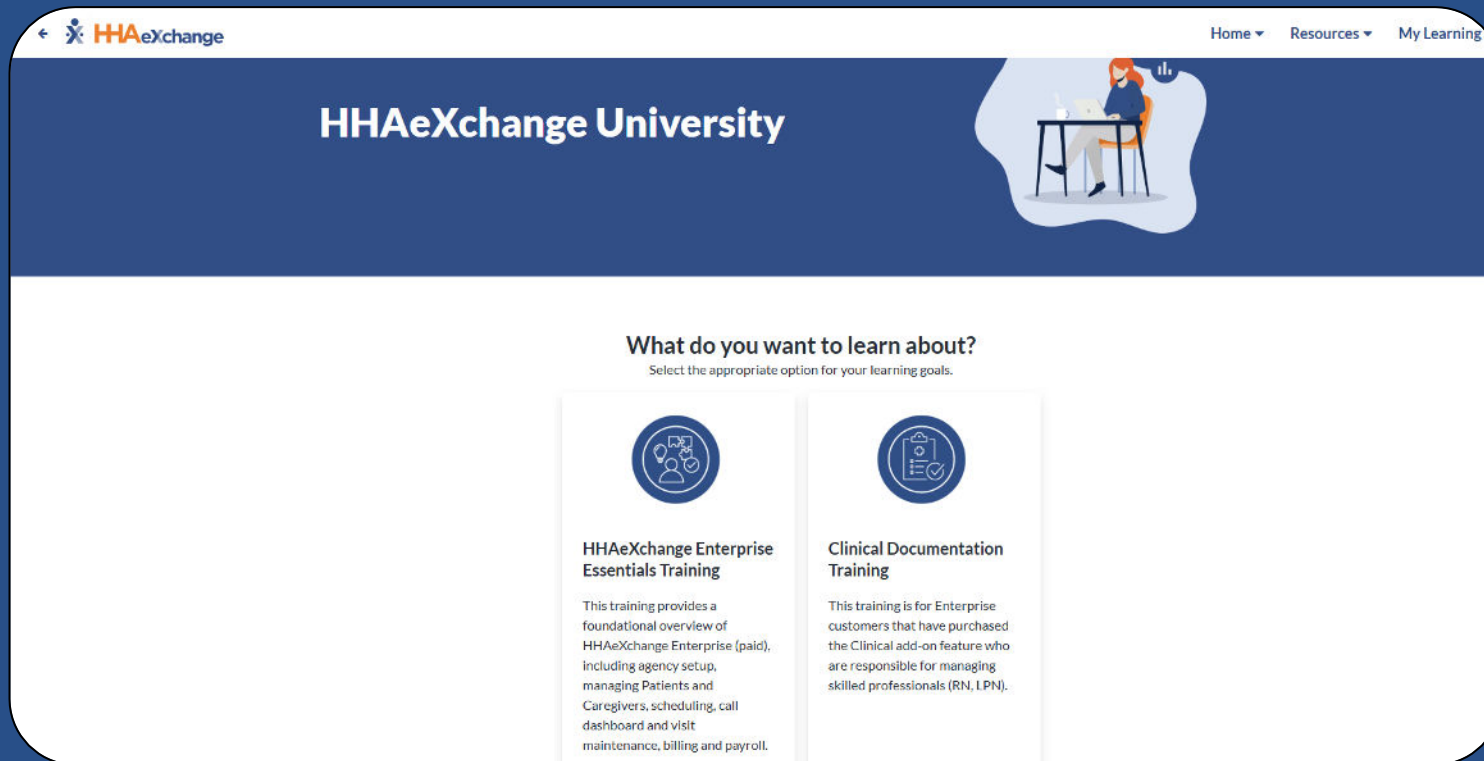
- Linked contracts and reviewed in the contract setup.
- Make sure pending placements are sent to the correct office.
- Skilled Services in scope should be created manually and linked.
- Internal and linked patient profiles should be merged.
- Schedules and Master Weeks should be updated to reflect the new linked contract.
- Check your setup to update service codes based on office configuration.



Resources

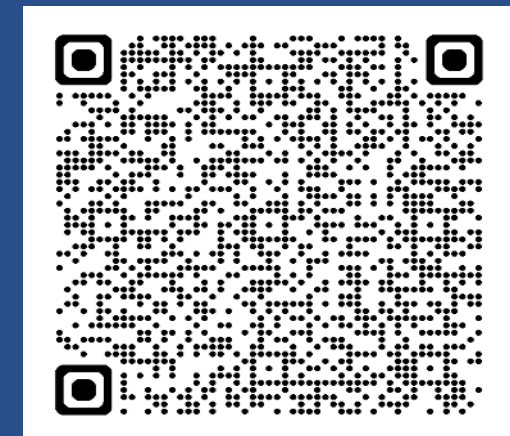


New Onboarding Program Available!



HHAeXchange University is now available for providers to have a foundational overview of key topics such as:

- Patient & Caregiver Management
- Agency Setup
- Visit Maintenance
- Billing



<https://university.hhaexchange.com>

HHAEExchange University Sign In

HHAEExchange University credentials are not the same as platform credentials.

Don't have an account? [Create one here.](#)

Work Email

Password

Sign In

[Forgot Password?](#)

HH AeXchange Knowledge Bases!



What best describes you?



Agency / Provider

Administrators of day-to-day
homecare business operations.



Caregiver

Experts in providing in-home
care services.



Payer

Organizations responsible for
claims and billing governance.



Third-Party EVV Integration

Partners in connecting agency
data to payers using API or EDI.

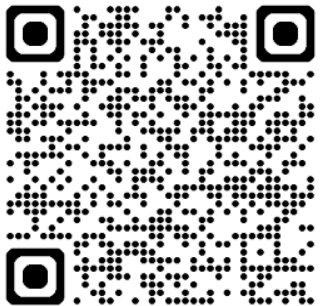


Texas

Texas Program Providers and
Financial Management Services
Agencies (FMSA)

Providers have access to our new knowledge bases.

- Provider can learn how to use our system.
- Caregivers can learn how to use our EVV tools.
- Review troubleshooting information.
- Use Caree our new Virtual assistant!



<https://www.hhaexchange.com/knowledge-base>



Request Your Demo

Got questions? Check out these resources!

What best describes you?

Agency / Provider
Administrators of day-to-day homecare business operations.

Caregiver
Experts in providing in-home care services.

Payer
Organizations responsible for claims and billing governance.

Third-Party EVV Integration
Partners in connecting agency data to payers using API or EDI.

Texas
Texas Program Providers and Financial Management Services Agencies (FMSA)

Trending Topics

×

Hi there 🙋
How can we help out today?





Resources



Getting Started

- [Contract Search](#)
- [Patient Placement](#)
- [Auto placement](#)
- [Auto placement Skilled services codes](#)
- [Office Move](#)
- [Patient Merge](#)
- [Reviewing and Adding your missing NPI or UMPI](#)

Scheduling

- [Manage Schedules and Master Week](#)

Reports

- [List of Patients ENT report](#)
- [Patient placement reports](#)



Questions?

**THANKS FOR
ATTENDING!**



*Please provide us your feedback
after exiting the webinar.*