

AuthentiCare[®] Alabama

Frequently Asked Questions & Common User Errors

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AuthentiCare Alabama FAQs for Self-Directed Services

The AuthentiCare Alabama User Manual is the place to get questions answered. The PDF version of the manual allows the user to click on a topic in the Table of Contents and are immediately taken to the section selected. Users may also use the “Find” feature to go directly to pages that mention the topic. This document provides a list of key questions typically asked by users.

General Resource Information

The AuthentiCare Alabama User Manual can help you research any system questions you encounter because it fully explains all the functions you use in AuthentiCare Alabama. As with most documents of this type, searching by topic, using the PDF “FIND” feature, is often the first step. The User Manual is found in the Custom Links dropdown on the AuthentiCare Home page.

If you are unable to answer your question by using the AuthentiCare Alabama User Manual or the FAQs, you can contact First Data Client Support services by calling 1-800-441-4667 or by emailing AuthentiCare.Support@firstdata.com for assistance.

General Questions

1. What is AuthentiCare Alabama?

Answer:

It is an electronic visit verification (EVV) solution that:

- *Meets the requirements for Alabama to be compliant with the 21st Century Cures Act*
- *Collects time and attendance information for services provided via the AuthentiCare Mobile Application and the Interactive Voice Response (IVR) check-ins and check-outs*
- *Collects time and attendance information for services provided via creation of claims on the Web in AuthentiCare*
- *Electronically exports qualified claims for payment on behalf of providers*
- *Allows electronic access to information, claims status, reports, etc. via the Web*
- *Is required for billing self-direct and agency services for the State of Alabama*

2. As a worker, what are the requirements for using the system?

Answer:

1. *Workers must have the ability to access at least one of the following to complete the required check-in and check-out when delivering services to a Medicaid client:*
 - a. *A mobile application installed on a worker’s personal smartphone*
 - b. *The telephone landline at the member’s location of service*

2. *Be enrolled as a worker with a service provider and assigned an AuthentiCare worker ID*
3. *Have a client receiving Medicaid waiver services*

3. When the AuthentiCare Mobile Application is used, what if there is no cell phone coverage available or Internet access available?

Answer:

The worker should login to AuthentiCare Mobile Application in a location with Internet connectivity. Then travel to the client location. Once you complete initial login, you can process Check-Ins and Check-Outs in places where there is no Internet connectivity available. The mobile application stores the visit information, then forwards it to AuthentiCare when the mobile device returns to an area of Internet connectivity.

4. What if a Mobile Application or an IVR method is not available for Check-In/Check-Out?

Answer:

The worker will call the provider with the following information:

- *Time of service start and service end*
- *Activities provided (if required)*

*The provider will enter the information on the AuthentiCare website.
The employer will then attest to the service.*

5. What if I forgot my password?

Answer:

Workers – *Forgot Password can be found on the home page of the AuthentiCare Mobile Application. **NOTE:** You will need a valid email address connected to your Worker ID to access the passcode used to reset your password.*

Employers – *Contact the Help Desk to request a password reset.*

6. Will there be a help desk available after the implementation date?

Answer:

Yes, First Data/Fiserv currently hosts an AuthentiCare Alabama help desk to assist you with technical support and answers to questions. Support will be available 24 hours a day, seven days a week

To contact the Help Desk for assistance, please contact 1-800-441-4667, Option 5 or via email at authenticare.support@firstdata.com.

For user support regarding questions for the State, contact Alabama Medicaid.

Common Errors Using the Mobile App and IVR

The following are common errors users experience when using the AuthentiCare Mobile Application and telephone Interactive Voice Response (IVR) system.

1. What happens when a worker calls in from a non-registered telephone number?

Answer:

When the worker calls in to the IVR using a telephone number not entered on the Client Entity Settings page in AuthentiCare, the visit information is recorded, but the claim for the visit is marked with Informational Exceptions:

- *“Unauthorized Number at Check-In” and*
- *“Unauthorized Number at Check-Out”*

Informational Exceptions still allow Employer Attestation and Provider or Auto confirmation. They are, however, a definite “red flag” to a provider or State resource that the client profile may need to be updated or additional worker training is required.

2. What happens when a worker does a second Check-In on the IVR instead of the Check-Out?

Answer:

The AuthentiCare IVR allows the worker to provide a second Check-In. Both Check-Ins result in “orphan” Check-Ins as there is no corresponding Check-Out. These claims will display in a systems claims search with the status, “Pending Check-Out” and cannot be processed for payment until resolved.

The worker will need to contact the provider to resolve. A provider administrator would then be required to adjust the claim in AuthentiCare by adding the second Check-In time as the Check-Out time of the first claim. The provider can then save the second claim as “Inactive” after writing a note in the Note section of the claim.

3. What happens when a worker does not pay attention to rounding?

Answer:

Since AuthentiCare records real time Check-Ins and Check-Outs, workers will notice changes in their total time. It is important to remember:

- *Any time less than 7 minutes of a 15-minute unit service rounds down to the previous 15-minute mark.*
- *Time 8+ minutes of a 15-minute unit service rounds up to the next 15 minute mark*

4. What happens when a worker processes a Check-In from the IVR before the first worker processes the Check-Out from the previously delivered service?

Answer:

The claims for those service visits will display as overlapping.

- *There will be an Overlapping Claim Critical Exception.*
- *Alabama Medicaid may allow just one worker at a time to provide services to the client.*
- *If only one worker at a time is to deliver service, the provider can adjust one or both workers' claims:*
 - i. *The first worker's claim Check-Out time can be adjusted to a minute before the second worker's Check-In.*
 - ii. *Since the second worker checked-in early, the provider can adjust the start time of the second worker's Check-In time.*

5. What happens if a worker checks in and out more than once during the same time period?

Answer:

Each subsequent claim will create a duplicate and receive a Duplicate Claim Critical Exception.

- *If the employer did not attest at the time of check out, this will prevent the employer from attesting the claim after service is completed*
- *The worker will need to tell the provider which check-in/check-out was correct.*
- *The provider can then go into the duplicate(s), inactivate and add a note before saving.*
- *Then the provider must go into the accurate claim, add a note and save the claim so it can process and remove the Duplicate Critical Exception.*

6. What happens when the worker uses the wrong service code?

Answer:

The worker will need to notify the provider for correction. The provider can adjust the claim by entering the correct service code.

It is important to remember when checking in, to select the service code the worker is "authorized" to provide.

7. Sometimes workers process a Check-In and are either unable or forget to process a Check Out, or workers might process Check-Outs without Check-Ins. What happens to those claims?

Answer:

This leaves room for providers and clients to educate providers with the understanding that there are sometimes situations where these “orphan” claims occur due to emergency situations or interruptions. Providers are able to adjust claims by adding Check-In or Check-Out times, writing a note and saving those claims.

Providers will follow state and business guidelines for adding the adjustments, i.e. contacting the client and the worker, having a statement in writing from the client with the accurate time(s), etc.

8. If a claim is not attested by the employer at the time of visit and not attested using the web, what happens to the claim?

Answer:

Claims not “attested” by the Employer Attestation process remain in AuthentiCare for 30 days. On the 31st day, the claims are locked, and no longer available for edit.

General System Questions

1. Does AuthentiCare web have a screen view time out?

Answer:

For security purposes and Federal requirements, a user session will time out after 20 minutes of inactivity.

2. If I am a provider user, how do I get my login and password?

Answer:

First Data/Fiserv will set the initial login and password for the first Provider Administrator at your agency. This user can then create and assign other users at the agency.

NOTE: *For State Administrators, access to AuthentiCare can only be created by First Data/Fiserv.*

3. How do I change a temporary password or change my password later using AuthentiCare web?

Answer:

When a first login occurs, the user is instructed to change the temporary password by entering the temporary password, then setting a new password, and confirming it by writing the new password again.

Later, if the user wishes to change a password, or it is time to change the password, the user will click My Account in the Main Menu toolbar, and then click the dropdown "Change Password." The user will enter the current password, set a new password, and confirm it by writing the new password again.

4. How does a Provider see the information on their Provider Entity Settings page?

Answer: *On the Home page in the Entities section, the user can search two ways:*

- a. Enter the provider name in the Search field and select Go.*
- b. Enter the provider ID in the Search field and select Go.*

5. Can AuthentiCare include External (provider) Client ID's similar to External Worker IDs?

Answer: *Yes, for clients the system recognizes the Medicaid ID number. For workers and employers, the system recognizes the external ID assigned by the provider.*

6. How do workers that have hearing impairments, use the TTY system, or a relay system, use AuthentiCare?

Answer: *Workers have three options:*

- a. Workers can utilize the TTY system to call the Interactive Voice Response from the clients' phones.*
- b. Workers can utilize the AuthentiCare Mobile Application from a personal smart mobile device.*
- c. The worker can also record time on paper timesheets, and the provider will then input the visit information on the AuthentiCare website.*

7. What languages are available for using AuthentiCare?

Answer: *AuthentiCare Alabama is available in both English and Spanish.*

8. Do providers of self-directed services need to schedule service visits?

Answer: *No, but the feature is there if providers wish to use it.*

9. Does there need to be an authorization in AuthentiCare Alabama for a worker to use the Interactive Voice Response (IVR) to clock in/clock out?

Answer:

No. As long as the member is determined eligible for the service, then the Check-Ins and Check-Outs can occur.

10. As a provider, how do I set up additional users?

Answer:

Using your Provider Administrator login, you can create additional provider staff users. Follow the steps listed in Section 2.3 (beginning on page 21) of the AuthentiCare Alabama User Manual.

New workers and employers are added to AuthentiCare Alabama through data import files. These imports will create worker and employer profiles and assign an AuthentiCare ID.

To add new employer users, follow the steps listed in Section 2.3 (beginning on page 25) of the AuthentiCare Alabama User Manual.

Report Questions

1. Is there a report that will print out the notes we have written?

Answer:

Yes. The Worker Activity Report details Check-Ins/Check-Outs for workers lists any notes added to claims.

2. Can the Time and Attendance report be run by member name (alpha order) instead of by worker so that we are able to check and compare total units used to the authorized units on the authorization?

Answer:

Yes. Users can request the Time and Attendance report with the client's name in the client filter field.

3. Can the Time and Attendance report show all workers who logged time for each member as a total for that member rather than totals per worker? Can we have a total unit amount and dollar amount per client instead of a total unit amount and dollar amount per service attendant?

Answer:

The report groups by Worker and by Provider. If a report is needed that groups by member; you can use the Claim Detail report that has the option of “group by client” on the filter page. An alternative is the Claim Data Listing report that can be stored as an Excel spreadsheet allowing the user more flexibility to sort or filter as needed.

4. After completing a bulk confirmation, is there a report that can be run that shows providers what has just been confirmed to export with the client name and dollar amount?

Answer:

Claims are confirmed each evening and available to the provider the next morning. However, to make sure the requested claim report contains only those claims confirmed to export, it is recommended to run the report after they are exported.

If a claims report is run for the date range you will confirm or following a bulk confirm, the report will include claims more than those just confirmed. By waiting until export, the query with a date range of the day after your confirmations should reveal the claims confirmed the day before. A grand total is given when setting up the bulk confirm, but no individual client totals are available.

General IVR Questions

1. How do I set the IVR to Spanish for my Spanish-speaking workers?

Answer:

Updating worker information can be completed on the Worker Entity page in AuthentiCare. Please check Chapter 6 in the AuthentiCare Alabama User Manual for the instructions to update/edit worker information on the web.

2. What happens if a worker forgets to check out on the IVR, then checks in for their next shift with the same client? Will the IVR think that is a check out of the first shift?

Answer:

When using the IVR, after the worker enters their Worker ID, they are asked if they are Checking in or Checking out. At that time the worker can choose to Check Out of the previous visit or Check In for the new visit. If a Worker does not Check Out, the Check in recorded is considered “orphaned” and the claim will need to be corrected on the web to add the appropriate Check out.

NOTE: Most services are based on 15 minute per unit and any time less than 15 minutes is rolled up/down.

- a. If a worker checks in between 1-7 minutes after checking out of a previous visit, the system will roll down to the check out time. (Example: Check in at 11:05am will roll down to a Check in time of 11:00am).
- b. If a worker checks in between 8-15 minutes after checking out of a previous visit, the system will roll up. (Example: Check in at 11:09am will roll up to a Check in time of 11:15am).

Claims Questions

1. When working with critical exceptions on the Provider Dashboard to correct a worker-chosen option on a claim, is there a way to not start all over after inputting changes?

Answer:

When you save a claim, it takes you to the acknowledgement screen that reflects your changes. Click that link on the top left that says "Claim Search Results," and it will take you back to the Claim list rather than all the way out.

2. If information on a claim is incorrect after AuthentiCare exports the claim what can I do?

Answer:

If you need to edit the actual claim details, you will need to inactive the claim, create and resubmit the newly created claim through AuthentiCare. Once a claim has been exported either through "locking" an incomplete claim after 30 days or the nightly claim export process it is no longer editable. Inactivating a claim is the only way create and resubmit a correction.

3. I'm a worker and checked in and out for a service twice. Now my employer is trying to attest a claim and cannot see the Review Complete check box.

Answer:

A duplicate or overlapping claim exception is a Critical Exception that has to be addressed before claims can be attested and confirmed. To correct the issue:

a. Employer Role

1. Login using your AuthentiCare employer user name/password
2. Enter claim start date
3. Enter claim end date
4. Select GO
5. Identify the two claims you need to correct (copy down the claim numbers)
6. Select the claim to be attested
7. Select the Review Complete
8. Add a note stating that you are confirming the service was provided to the client as stated and select the Save button

9. A printer friendly version of the claim will display and at the top of the screen a box will appear indicated the save was successful and providing a claim number.
10. You or the worker will then contact the provider and notify them of the duplicate claim. Please give the provider the claim number of the duplicate so they can resolve the issue and process the attested claim for payment.

b. Provider Role

1. Login using the AuthentiCare Provider Administrator user name/password
2. Enter the claim number provided by the worker/employer of the claim to be inactivated
3. Select the Inactivate check box
4. Add a note stating why the claim is being inactivated
5. Select Save
6. A print friendly version will appear. Select Home.
7. Enter the claim number for the correct claim
8. Enter a note indicating why you are updating the claim
9. Select save
10. A print friendly version will appear and should show
 - i. The employers completed attestation
 - ii. Overlapped worker exception disappears
 - iii. Bill confirm is the only remaining Critical Exception

5. How do providers confirm claims?

Answer:

For self-directed services, as long as the only Critical Exception on a claim is “Billing Confirmation Needed” the claim will process for payment automatically using the Auto-Confirm. The claims export file listing all processed claims will then be sent to the Provider’s File Gateway Mailbox.

Individual Billing Confirm: Providers also have the option to manually confirm a single claim or bulk set of claims. Single claim bill confirm is uncommon and requires the provider to search and open an individual claim record. Once the claim record is open, the provider checks the “Billing Confirmation” box on the claim, enters a note to indicate why they confirmed the claim and Select save.

Confirm Billing - View: Move the radio button on the home page in the claim section from claim to Confirm Billing – View. Here you can enter filter criteria to get the claims you want that are ready to be confirmed. This option is limited to 300 claims per page. After reviewing claims, you can select all and confirm the number of claims you selected all at the same time. This process is typically used to review claims activity for a specific client at one time.

Confirm Billing – Bulk: To confirm larger claim batches, select the Confirm Billing – Bulk option. Enter dates of service and select Go. A total number of claims, units, and amount display. If you schedule the confirmation, all the claims reflected in the total will be scheduled to confirm that evening, prior to the nightly export run.

REMINDER: If an incorrect claim is confirmed and exported, you can no longer adjust it in AuthentiCare. AuthentiCare “locks down” submitted claims to read-only.

6. As a worker, when using the mobile application I sometimes get a duplicate check-in. How can I resolve this issue?

Answer:

We advise that after the worker Checks-In, prior to check-out, swipe the screen to perform a refresh. This should stop the creation of a duplicate check-in, since the screen refresh will then display the pending check-out.

7. As a worker, when I check-out my claims receive a Geofencing exception indicating I’m providing services in the wrong location. How do I resolve this issue?

Answer:

The following are options to troubleshoot and resolve the geofencing exception.

- Check your Wifi or the mobile data connection to make sure you are on the Internet
- Restart the phone or the AuthentiCare mobile app
- If all else fails, try to uninstall and then re-install the mobile app
- For further assistance, please contact First Data Client Support services at 1-800-441-4667, Option 5, or email authenticare.support@firstdata.com for assistance.