# Electronic Visit Verification (EVV) Townhall

## June 18, 2024

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# Housekeeping

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# EVV Statutes

## The Save Medicaid Access and Resources Together (SMART) Act (Public Act 97-0689)

- State legislation that became effective in July of 2012, impacting Illinois Department of Human Services (IDHS), Division of Rehabilitation Services' (DRS) Home Services Program (HSP) and Illinois Department on Aging's (IDoA) Community Cares Program (CCP)

- CCP required all Homemaker agencies, i.e., In-Home (INH) providers, to arrange and pay for their own EVV management systems. HSP contracted with an EVV vendor, Sandata.  HSP Individual Providers (IPs) are required to use Sandata.  Homemaker agencies and Home Health Maintenance agencies may transmit EVV data to Sandata from third-party EVV systems.

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# EVV Statutes cont.

**The 21st Century Cures Act (Provisions under Section 12006 )**

- Federal legislation enacted in December of 2019, requiring states to implement the use of EVV in all Medicaid-funded Personal Care Services (PCS) and Home Health Care Services (HHCS).

- The Act requires that state EVV systems verify the type of service performed, the individual receiving the service, the date of the service, the location of service delivery, the individual providing the service, and the time the service begins and ends.

- The Act mandated a compliance date of January 1, 2020, for all PCS, and January 1, 2023, for all HHCS.

- States were allowed to request a one-year "Good Faith Extension" with Federal CMS for HHCS implementation. Illinois requested the exemption; therefore, Illinois HHCS started on 12/31/23.

# Provider EVV Options in Illinois

1. **Free HHAeXchange Solution**
   - Does **NOT** include billing or payroll features.

2. **Third-Party EVV Systems**
   - Must collect all six elements required under the Federal 21st Century Cure's Act.
   - Providers must work with vendors to integrate EVV data to HHAeXchange.

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# Electronic Data Interchange (EDI)

Providers with third-party EVV systems capable of collecting all six elements required under the Cure's Act may elect to maintain those systems but are required to transmit EVV data to HHA for aggregation.

The State has begun outreach to EDI providers in-scope for 09/01/2023 or 12/31/2023 implementation who are not yet transmitting EVV data to HHA.  In collaboration with HHA, the State is working to assist EDI providers facing technical challenges through offering additional guidance, resources, and planning for additional EDI specific trainings.

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# Illinois Providers In Scope

**The 21st Century Cures Act requires EVV for all Medicaid-funded Personal Care Service (PCS) and Home Health Care Service (HHCS) providers, including PCS and HHCS providers billing traditional Illinois Medicaid (State Plan) and:**

## Managed Care Organizations (MCOs)

- Aetna HealthChoice Illinois (HCI) and Medicare-Medicaid Alignment Initiative (MMAI)
- Blue Cross Blue Shield HI and MMAI
- CountyCare HI
- Humana MMAI
- Meridian HI and MMAI
- Molina HI and MMAI
- Youthcare

## Home and Community-Based Waiver Service (HCBS) Operating Agencies

- Illinois Department on Aging (IDoA) Community Care Program (CCP)
- Illinois Department of Human Services Division of Rehabilitation Services' (IDHS-DRS) Home Services Program (HSP)
- IDHS Division of Developmental Disabilities (DDD)
- Division of Specialized Care for Children (DSCC)

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# Illinois EVV Implementation Timelines

1. **September 1, 2023:** Personal Support Workers (PSWs) under the Adult with Developmental Disabilities waiver and the Children and Young Adults with Developmental Disabilities waiver.

2. **December 31, 2023:** Home Health Care Services (HHCS) for providers billing Illinois State Plan Medicaid, Healthchoice Illinois (HCI) Managed Care Organizations (MCOs), Medicare-Medicaid Alignment Initiative (MMAI) MCOs, Division of Specialized Care for Children (DSCC), and Illinois Department of Human Services' (DHS) Division of Developmental Disabilities (DDD).

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# Implementation Timelines, cont.

3. **11/01/2024:** Revised date for IDoA In-Home Service (INH) provider agencies (Homemaker agencies) to switch to using HHAeXchange (HHA) as their primary vendor for collecting EVV data and for all INH agencies maintaining third-party EVV systems to send their EVV data to HHA. IDoA provider agencies that have completed their HHA enrollment form will receive credentials for logging into the HHA system and HHA's Learning Management System (LMS) closer to the go-live date. *originally scheduled for 06/03/2024*

4. **11/01/2024:** Target date for integrating EVV data from DHS DRS Individual Providers, Home Health Care Service providers billing DHS DRS, and Homemaker providers billing DHS DRS. Implementation will occur after completing a formal discovery process among DHS DRS, HHA, and HFS.

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# Managed Care and EVV

**IDoA and DRS:** All In-Home Service (INH) provider agencies (Homemaker agencies) and Home Health Care Service (HHCS) agencies serving DHS DRS or IDoA customers enrolled with either Healthchoice Illinois (HCI) or Medicare-Medicaid Alignment Initiative (MMAI) MCOs are required to use EVV.

**Non-Waiver:** All HHCS agencies billing HCI or MMAI MCOs for service provision to individuals not enrolled in a Home and Community-Based (HCBS) waiver, such as DHS DRS or IDoA, are required to use EVV.

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# Managed Care and EVV, cont.

**State, Vendor, and MCO Collaboration:** HFS and HHA are engaged in weekly meetings and regular communications with the MCOs to provide guidance necessary for HHA receipt of MCO authorization data.  Once EVV data is present in the system for in-scope providers billing MCOs, the State will work with HHA to facilitate provider compliance data to the MCOs.

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# Illinois EVV Compliance Policy

HFS, as the State Medicaid lead and entity responsible for ensuring statewide compliance with the Federal 21st Century Cure's Act, is in the process of finalizing policy that lays out processes for addressing EVV non-compliance among in-scope providers.  HFS is aware of the difficulties that a number of providers are facing with EVV adoption and Electronic Data Interchange (EDI). Until these difficulties are resolved, **the State will not be implementing any penalties/sanctions for EVV non-compliance.**

The State is working together with HHA to facilitate the guidance and resources necessary for all in-scope providers and third-party EVV systems to access or transmit EVV data to HHA. Outreach and technical assistance are currently, and will continue to be, offered to in-scope providers not yet using or transmitting EVV data to HHA.  When an effective date for EVV non-compliance penalties is determined, the State will notify providers via a Provider Notice.

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# Federal CMS EVV Certification

- States must submit evidence of EVV system compliance with the Cures Act and evidence of provider EVV adoption to Federal CMS.
- Federal CMS requires use of EVV for all in-scope providers for at least six months before scheduling a Certification Review of a state's EVV system.
- The State's EVV aggregator will undergo a system performance review.
- The State will address Federal CMS questions and concerns regarding in-scope provider adoption rates, EVV compliance rates, and State penalties for provider non-compliance.

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# State EVV Resources

**HFS**

- **HFS EVV Website**
- **HFS Provider Notices** *sign up for Home Health and Waiver to receive EVV updates*
- **HFS.EVV@illinois.gov** *for State Plan HHCS providers and general EVV inquiries*

**DHS DDD**

- **DHS DDD EVV Resources**
- **DHS.DDDEVV@ILLINOIS.gov** *for in-scope DDD providers*

**IDoA**

- **Aging.EVVSupport@illinois.gov** *for in-scope IDoA providers*

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# State EVV Resources

**DSCC**
- [DSCC EVV Resources](#)
- [O365-dscc-evv@UIC365.onmicrosoft.com](#) *for in-scope DSCC providers*

**DHS DRS**
- [DHS DRS EVV Resources](#)
- [DHS.EVV@illinois.gov](#) *for in-scope DRS providers*

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# Illinois Provider Townhall

June 18, 2024

# Agenda

> **Introductions**

> **IDOA Onboarding Update & System Usage Options**

> **Recent Hot Topics**

> **EVV Compliance Tracking**

> **HHAeXchange Customer Care & Other Resources**

# HHAeXchange Team

# Team Introductions

**Shawn Bowen**

Sr. Project Manager, State Implementations

**Colby Ward**

Director, Customer Success

**Decree Sweeney**

Director, Customer Success

# IDOA Onboarding Update

# Updated IDOA Onboarding Timeline - Tentative

| Milestone | Description | Date |
|-----------|-------------|------|
| LMS Credentials | Credentials will be e-mailed to the person who completed the survey from your agency. These credentials can be shared with others to take the self-paced courses. | Week of 9/16/24 |
| Portal Credentials | The person who completed the survey will be the first user in the system. This person will be receiving an e-mail with their HHAeXchange credentials. These should NOT be shared; this person can set up additional user access after logging in. | Week of 9/16/24 |
| System User Training Webinars | Webinar based user training, where as many folks from your agency as you'd like are welcome to attend. Attendees will be able to ask questions to HHAeXchange staff. | Week of 9/23/24 |
| Technical Go-Live | Members and Authorizations are loaded into provider portals. | 10/1/24 |
| EVV Go-Live | Agencies are expected to either fully utilize HHAeXchange or be integrated. | 11/1/24 |

# HHAeXchange System Usage

# Member Management by Contract

| Contract | Program | Member Placement Responsibility |
|---|---|---|
| Division of Developmental Disabilities | HHCS & PCS (Personal Support Worker) | Provider Agency |
| Division of Specialized Care for Children | HHCS | Provider Agency |
| Department of Health & Family Services (State Plan) | HHCS | Provider Agency |
| IL MCOs | HHCS (when authorization is not required yet) | Provider Agency |
| IL MCOs | HHCS (when authorization is required) | Payer (MCO) |
| IL MCOs | PCS (Homemaker) | Payer (MCO) |

# Authorization Management by Contract

| Contract | Program | Authorization Entry Responsibility |
|---|---|---|
| Division of Developmental Disabilities | HHCS & PCS (Personal Support Worker) | Not Required |
| Division of Specialized Care for Children | HHCS | Not Required |
| Department of Health & Family Services (State Plan) | HHCS | Provider Agency |
| IL MCOs | HHCS (when authorization is not required yet) | Not Required |
| IL MCOs | HHCS (when authorization is required) | Payer (MCO) |
| IL MCOs | PCS (Homemaker) | Payer (MCO) |

**\*\* Note: Where authorization entry is Not Required or is required by the Provider Agency, member placement will be required by the Provider Agency. Refer to previous slide.**

# HHAeXchange System Usage Options

- HHAeXchange system can be utilized directly, through the **State Sponsored EVV** set up

- A third party EVV system can also be used, through Electronic Data Interchange (**EDI) with HHAeXchange** and the agency's primary EVV vendor. This is done using **Application Programming Interface (API)** between HHAeXchange and the agency's primary EVV vendor

HHAX Providers

Member Management, Schedules, and Confirmed Visits

HHAX | Primary EVV System

Visit Confirmation Documentation and Compliance Review

HHAX | HHAX

EDI Providers
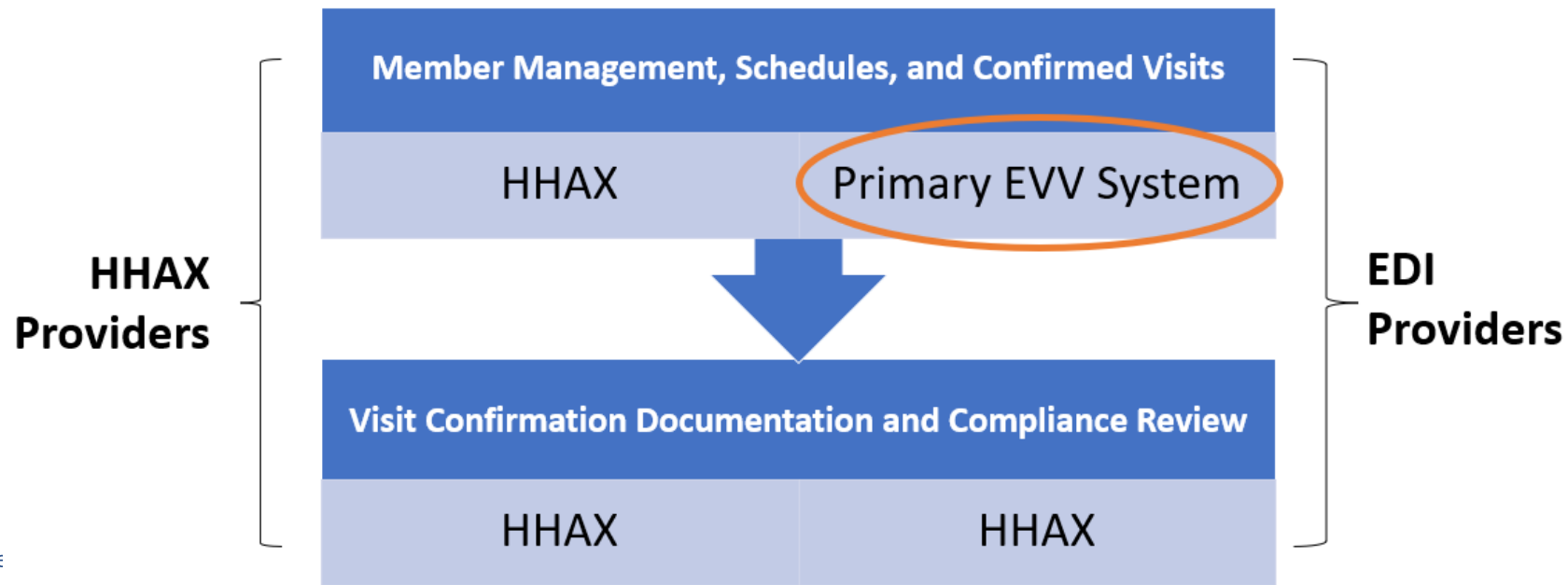
# Acronyms Library

- API – Application Programming Interface

- EDI – Electronic Data Interchange (also referred to as 'Third-party')

- ESD – EDI Support Desk

- EVV – Electronic Visit Verification

- HHA/HHAX – HHAeXchange

- LMS – Learning Management System

- QA – Quality Assurance

# Setup Steps – HHAX State Sponsored EVV

1. Complete Illinois EVV Enrollment Survey to have your agency's portal set up

2. Receive HHAeXchange portal credentials and Learning Management System (LMS) credentials
   a. Credentials are granted for HHAeXchange portal to the person who submits the Enrollment Survey, and these credentials should not be shared
   b. LMS credentials can be shared across the agency for any user who needs to access the training videos

3. User who receives the initial credentials should set up additional system users using this job aid

# Setup Steps – HHAX State Sponsored EVV

4. Agency should set up Caregiver (Provider) profiles using this job aid and ensure caregivers download the HHAeXchange+ Mobile Application

5. Add Members (Patients/Customers) to the portal *for applicable programs* by navigating to Patient > New Patient and filling out the form presented.
   a. Ensure First Name, Last Name, DOB and Medicaid ID are entered accurately, so we can match the member to the State portal to report your data

6. Add Contract (Payer) to the member using this job aid

# Setup Steps – HHAX State Sponsored EVV

7. Add Authorization(s) to the member using this job aid
   a. Note: This is applicable for State Plan HHCS services only

8. Link Caregiver to Member on the Member's "General" tab in the field labeled "Caregivers with Mobile Patient Info Access"
   a. Caregiver will be able to record an unscheduled visit from the Mobile App and select the correct Member

9. Manage Calls which were unable to link to the calendar from the Call Dashboard
   a. This job aid explains the Call Dashboard exceptions and how to resolve them.

# Setup Steps – EDI (Third-party EVV) Providers

1. Complete [Illinois EVV Enrollment Survey](#) to have your agency's portal set up

2. Receive HHAeXchange portal credentials and Learning Management System (LMS) credentials
   a. Credentials are granted for HHAeXchange portal to the person who submits the Enrollment Survey, and these credentials should not be shared
   b. LMS credentials can be shared across the agency for any user who needs to access the training videos

3. User who receives the initial credentials should set up additional system users using this [job aid](#)

# Setup Steps – EDI (Third-party EVV) Providers

4. Provider reviews <u>Business Requirements document</u>, <u>EVV API Specification</u>, and <u>Auth API Specification</u> (note: provider can create auths manually via this <u>job aid</u> if the vendor is unable to build out auth API)
   a. Provider reviews and completes <u>IL Attestation</u> with vendor and provider contact included
   b. HHAeXchange support ticket (with label: ESD) is created on the provider's behalf with next steps for integration

5. HHAX Provider EDI Integrations analyst creates an implementation portal for provider testing
   a. Environment is linked to QA payer for IL for testing purposes
   b. Implementation EVV API credentials generated and shared with provider
   c. Testing data generated and shared with provider
   d. Provider to complete test scenarios included in <u>EVV API Test Document</u>

# Setup Steps – EDI (Third-party EVV) Providers

6. HHAX Provider API Integrations team creates auth API testing credentials (for Auth API) and shares with provider (*through HHAeXchange support ticket with EISD label*)
   a. Note: This only applies for State Plan HHCS services

7. Once vendor/provider have completed testing, they are expected to create a ticket with the Provider EDI Integrations team to indicate testing has been completed

8. HHAX Provider EDI Integrations analyst reviews test transactions. Once confirmed, all providers linked with this vendor are approved to move to production and credentials are shared with the provider
   a. Note: Providers utilizing Epic must all test individually, as they act as a proprietary software

# Recent Hot Topics

# MCO Client Rejections for HHCS EDI Providers

- Eligibility data issue identified for MCO clients, which causes "Patient Not Found" rejections for EDI providers.

- Provider Notice was distributed by HFS outlining the situation: https://hfs.illinois.gov/medicalproviders/notices/notice.prn240510a.html
  - EDI providers who are experiencing these rejections do NOT need to resubmit data
  - HHAeXchange will reprocess data <u>on your behalf</u> once the issue is resolved
  - Resolution is expected on 7/1/2024
    - **After 7/1 if you still have a large number of rejections, please send an e-mail to HFS.EVV@illinois.gov so we can troubleshoot

# G0156 Service Code

- An issue was brough to HFS & HHAeXchange that the G0156 service code was not available in the system

- HHAeXchange has rectified this issue and added it back to the documentation

- If you are an EDI provider who experienced rejections due to "Procedure Code Not in Scope"; HHAeXchange will reprocess these rejections <u>on your behalf.</u>
    - If you still have a large number of rejections related to this, please send an e-mail to <u>HFS.EVV@illinois.gov</u> so we can troubleshoot

# Advance Scheduling

- Scheduling in advance is NOT required in order to be successful with EVV in the HHAeXchange system

- Follow these steps to ensure your agency is set up for success:
  - Link the caregiver to the members they are servicing from each member's "General" tab in the field labeled "Caregivers with Mobile Patient Info Access".
  - Enter the service code either on the Contract or navigate to your Office Setup, and enable the feature on the next slide to allow the caregiver to select an authorized service code when clocking out of the visit.
  - Note: The service code is a key component of a visit and one of the six required data elements of the Cures Act.

# Advance Scheduling Cont.

- This setting should be enabled to facilitate the caregiver selecting the correct service code when clocking out of an unscheduled visit
- This can be found in your "Office Setup" screen

# Provider Driven Placement

## HHAX Providers

No Member & No Auth from Payer Data Workflow:

1) Create a new member via HHAeXchange portal
2) Add Medicaid ID
3) Add Payer Contract
4) Add Service Code

**Adding the above items will lead to a successful connected placement without authorization.

## EDI/3rd Party Providers

- **No Manual Entry Required**

- **Member is automatically created upon visit import from the 3rd Party API**

- Refer to the Illinois API Technical Specifications for visit import details.

- For inquiries or further assistance, please create a support ticket via the Provider EDI Integrations help desk.

This applies to the following programs:
- IDDD Personal Care
- State Plan, DSCC and IDDD Skilled Nursing & Home Health Care Services
- MCO Home Health Care Services when prior authorization is not required

# EDI Code Table – Payer Initials Inquiries

- Providers have reached out requesting **payer initials** to be used in the API transmission.  Payer initials are found on page 21 in the IL Technical Specifications

  ** NOTE: ONLY INITIALS REQUIRED*

## Appendix B - Code Information

| MCO/Payer | Initials |
|---|---|
| Aetna Better Health of Illinois | ABHI |
| Aetna MMAI | AEMM |
| Blue Cross Community Health Plan IL | BCCI |
| CountyCare Health Plan IL | CCHI |
| Meridian Health Plan IL | MHPI |
| Molina Healthcare IL | MOHI |
| Humana IL | HUIL |
| IL Division of Developmental Disabilities | IDDD |
| IL Division of Specialized Care for Children | DSCC |
| Illinois Department of HFS | IHFS |

# Tracking EVV Compliance

# The 21ˢᵗ Century Cures Act

Passed by Congress in December 2016, the 21st Century Cures Act requires that providers of Personal Care Services confirm visits via Electronic Visit Verification (EVV) by January 1, 2021.

**The six data elements required to be collected to meet the Cures Act EVV requirement:**

**Type of Service Performed**

**Location of the Service**

**Individual Receiving the Service**

**Individual Providing the Service**

**Date of the Service**

**Time the Service Begins and Ends**

# What is EVV Compliance?

- EVV Compliance is a metric, which tracks the number of visits without missing data elements or manual edits compared to the total number of visits in a given time period

- As part of CMS's requirements for the State, the State must report EVV Compliance % across the entire provider network

- Best practice: Each agency should know its EVV Compliance %. EVV Compliance should be included as policy for workers and a part of regular re-training activities

# What is an Exception?

- **Exception**: A visit with a missing electronic data element or manual edit after it was electronically captured

- **Reasons for Exceptions**:
  1. Missing Clock In
  2. Missing Clock Out
  3. Missing Clock In & Out
  4. TEMP Caregiver Assigned
  5. Missing Latitude & Longitude (when confirmed via GPS)
  6. Missing Caller ID (when confirmed via Telephony)
  7. Manual Edit (Visit Start/End Times do not match EVV Start/End Times)

# Examples of Compliance vs Non-Compliance

## Compliant Visit

**August 22, 2023** `Non Skilled Visit`

### Member Test

| Admission ID | Assignment ID | Visit Date | Patient Phone Number |
|---|---|---|---|
| WBX-900002 | 100002 | 08/22/2023 | 847-707-3397 |

Schedule   **Visit Info**   Billing Info   Verification

#### Visit Information

*All fields marked with an asterisk (*) are required.*

**Scheduled Time**
0830-0845

**TT/OT (hh:mm)** ⓘ

**Visit Start Time**
0851   08/22/2023

**Visit End Time**
0925   08/22/2023

**EVV Call In**
08:51   08/22/2023

**EVV Call Out**
09:25   08/22/2023

## Non-Compliant Visit

### Doe John

| Admission ID | Assignment ID | Visit Date | Patient Phone Number |
|---|---|---|---|
| WBX-900001 | 100001 | 08/11/2023 | -- |

Schedule   **Visit Info**   Billing Info   Verification

#### Visit Information

*All fields marked with an asterisk (*) are required.*

**Scheduled Time**
1000-1200

**TT/OT (hh:mm)** ⓘ
00   00

**Visit Start Time**
1000   08/11/2023

**Visit End Time**
1200   08/11/2023

**EVV Call In**
10:00   08/11/2023

🏠 Add Service Location

# How can I Reduce my Exceptions?

1. **Missing clock in / out**
   - Discuss workflow with caregivers, discuss expectations if visit goes long or they arrive early to a visit

2. **TEMP Caregiver Assigned**
   - Create master week schedules with assigned caregivers for each member

3. **Additional Areas to Review:**
   - Review GPS coordinates for all members – *are they accurate where the member lives or receives services?*

   - Review phone number associated with each member – *is this the member's home phone number?*

   - *Confirmed visit times do NOT need to be exact and only should be updated if the recorded time differs from what was provided by caregiver*

# Tracking Compliance in HHAeXchange

- Regardless of whether the worker used EVV on a shift, all shifts for EVV required services should be entered in HHAeXchange.

- Key reports in HHAeXchange for tracking compliance & exceptions:
    - Exceptions Summary by Agency
    - Exception Detail Report
    - Exceptions by Caregiver
        - The reports are located by clicking Reports > Exception Reports

- EDI providers should ensure they are reviewing the reports in HHAeXchange, not just reports in their source system. State sources EVV Compliance from what is in HHAeXchange.

# Exception Report Example

**Exception by Caregiver**
- Report can be used to identify Caregivers with high exception rates for EVV re-training

**HHAeXchange**

**Exception By Caregiver (New)**

Page 1 of 1
Report Date: 04/01/2024 08:12

| | | | | |
|---|---|---|---|---|
| **Office(s):** IL ORR Demo | | **From Date:** 7/1/2023 | | **To Date:** 4/1/2024 |
| **Caregiver:** All | | **Type of Service:** Non-Skilled | | **Coordinator:** All |
| **Discipline(s):** All | | | | **Contract(s):** All |
| **Caregiver Location(s):** All | | **Caregiver Team(s):** All | | **Caregiver Branch(es):** All |

| Sr.# | Caregiver Code | Caregiver Name | Contract | Confirmed Visits | Billed Visits | Missed Visits | Exceptions | % Exceptions |
|---|---|---|---|---|---|---|---|---|
| **MI Demo** | | | | | | | | |
| 1 | WBX-1003 | Bob Kristen | Demo Payer Cloud (WBX) | 1 | 0 | 0 | 0 | 0.00% |
| 2 | WBX-1001 | Doe Jane | Demo Payer Cloud (WBX) | 7 | 0 | 0 | 2 | 28.57% |
| 3 | WBX-1002 | Hassfurther Colby | Demo Payer Cloud (WBX) | 10 | 0 | 0 | 3 | 30.00% |
| 4 | WBX-1005 | Johnson Elliot | Demo Payer Cloud (WBX) | 2 | 0 | 0 | 0 | 0.00% |
| 5 | 1000 | Temp Temp | Demo Payer Cloud (WBX) | 1 | 0 | 0 | 1 | 100.00% |
| | | | **Total:** | 21 | 0 | 0 | 6 | |
| | | | **Grand Total:** | 21 | 0 | 0 | 6 | |

# HHAeXchange Provider Resources

# Client Support Portal



https://www.hhaexchange.com/supportrequest

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# HHA Technical Customer Care

Client Support Portal: **https://hhaexchange.com/supportrequest**

- Recommended to always enter a ticket here first, so we can get as much information as possible about what you're experiencing
- Include relevant details to help us solve your issue!
  - Agency Tax ID
  - Explanation of issue and steps taken to reproduce the issue (if applicable)
  - Examples/screenshots
  - Anything else you think might help us
- Select the Right Team:
  - **Technical Customer Care** – HHAeXchange portal technical assistance (e.g. navigation, error messages within portal, login help, etc.)
  - **Provider EDI Integrations** – Assistance with setting up a new EDI integration with your vendor, questions about rejections or specifications, etc.

# Knowledge Base



[HHAeXchange Provider Knowledge Base](#)

# State Info Hub



**Illinois Information Center**

Provider Enrollment Form

**TABLE OF CONTENTS**

OVERVIEW

ILLINOIS DEPARTMENT ON AGING (DOA)

ILLINOIS DIVISION OF DEVELOPMENTAL DISABILITIES (DDD)

ILLINOIS HOME HEALTH (HH)

HHAEXCHANGE EVV PORTAL

TRAINING

EDI PROCESS

**Overview**

Illinois has partnered with HHAeXchange to help Illinois providers become compliant with state and federal Electronic Visit Verification (EVV) requirements and ensure a simplified, user-friendly, and seamless experience.

The first step will be to fill out the Illinois – HHAeXchange Provider Enrollment Form, linked below, to identify yourself as an Illinois provider agency.

● Click here to complete the form: Illinois – HHAeXchange Provider Enrollment Form

**Illinois Waivers and Managed Care Organizations in Scope**

Illinois Division of Developmental Disabilities (DDD)

Illinois Department on Aging (DOA)

Illinois Home Health (HH)

https://hhaexchange.com/info-hub/illinois

## HHAeXchange Support

**State Info Hub**
https://hhaexchange.com/info-hub/illinois

**Client Support Portal**
https://hhaexchange.com/supportrequest

**Email**
ILSupport@hhaexchange.com

**Phone**
833-961-7429

## Illinois Home Health Support

**Email**
HFS.EVV@illinois.gov

# Provider Resources

# Q&A

State Info Hub

Client Support Portal

# Thank you!