

Home and Community Based Services and Management

Improve efficiency and cost savings

Managing Long-Term Care waiver programs can be a complex, challenging process. But with Home and Community Based Services Management from Xerox, you can simplify the complexities of HCBS programs and manage them more efficiently. Our solution enables your program to offer innovation for participants, state program administrators, financial management services, providers and support providers and coordinators.

An effective LTC program addresses several areas of participant needs. Our solutions help you control their costs and improve their efficiency by automating functions that would otherwise be manually intensive. We not only reduce your labor costs; we also increase the accuracy and objectivity of your processes, ensuring appropriate care decisions for your participants.

Plan of Care/Individual Support Plan

Our web-based, automated solution is designed to support the electronic Plan of Care. It functions as a service authorization tool functionally connected to all parties involved in your LTC program, defining their roles, information access limitations and required actions. We use this information to develop Individual Support Plans for your participants, using historical tracking of denials, requests for review, requests for reconsideration, and Fair Hearing processes and outcomes to include continuation of care.

Because our solutions can integrate with all parts of your healthcare program, we enable you to approve ISPs in real time as well as track expenditures related to the Plan of Care. We also help you track plan expirations and budget percentages by service and provider allocations. We use this data to generate utilization reports reflecting all budget revisions from the entire or current plan period, providing the information you need to make better plan decisions.

Waiting List Management

Often, prospective participants will need to be put on a waiting list before being accepted to the program. We help you configure your waiting list to accommodate any waiver program's priority levels and statuses as well as track your participants' services and budget (per state and waiver rules) while on the list. And as spaces become available, we help you transfer applicants seamlessly.



Solution Benefits

- Reduce claim losses through control over:
 - Losses attributable to ineligibility and other inaccuracies
 - Overutilization of service units
 - Data input errors
- Reduce administrative costs through:
 - Reduction in paper processes
 - Process and work flow improvements
 - Electronic billing and claim control
 - efficiencies
 - Reporting accuracy

Provider Management

Credentialing is crucial for both plan approvals and building your participants' trust. Our solutions validate providers before submitting any plans, and perform caregiver background checks prior to any service. We also let your participants review and submit feedback about services they receive.

Billing and Claims Management

With multiple providers supplying services to your program, it can be a challenge to manage the resulting billing and claims processes. Not with our solutions. We enable tracking of multiple funding sources throughout your program, and produce 837p claims for submission for more accurate reimbursements. We also direct EDI billing against your state's approved Plan of Care and participant budget.

Systems and Security

As with any healthcare program, you work with participants' protected health information every day. In doing so, you need to ensure that your data systems are safe from unauthorized use. So our solutions use a 508 compliant interface and host the system in a secure data center. The system supports multiple levels of user access, enabling you to assign access for the different roles in your team—or even to participants for self-directed care. But these precautions don't make the system difficult to use: we employ a web-based GUI, ensuring intuitive use for any member of your team.

Reporting, Alerts and Notifications

Our solutions provide robust reporting capabilities to help you better manage your program, as well as alerts and notifications that offer tactical support. Our extensive audit reports include time and rate reporting that drill down to the participant, provider or service level for more accurate exporting to payroll systems. And we generate budget utilization reports in real time so you can better control participant direction and accountability. We also help streamline and automate processes by using email notification for multi-vendor processes and auto-population of forms and reports so your team doesn't waste time filling out the same information repeatedly.

Ongoing Supports

Standards, regulations, reform—health care and LTC management are complex and always changing. For your program to be successful, you need the flexibility to adapt quickly to new environments. So we provide ongoing configuration to support current and future business processes, ensuring that your program aligns with the latest standards. We also have online help tools, customer service centers and training and consulting services to help you understand new industry developments and learn how to implement them effectively.

HCBS programs are an effective option for managing LTC programs, but it helps to have a partner that not only understands the holistic view of your program, participants and providers, but can also bring them together effectively. When you partner with us, you can integrate information to control your costs and provide better quality service for your members. Both today and for the long term.

Long-Term Care for All People in All Settings

The Home and Community Based Services Management solution is part of our suite of integrated, end-to-end tools and services that help you manage your LTC programs effectively and efficiently and improve outcomes for participants, their families and caregivers whether in the home, the community, assisted living or nursing facilities. By improving access to appropriate services and reducing waste, fraud and abuse, our continuum of solutions integrates with your program to streamline processes, improve access and quality, and reduce cost, helping you provide optimal services in the appropriate setting at the right time.

Most LTC services help maintain or improve an individual's function and independence in a specific setting. But our LTC solutions work across medical and non-medical care environments, acute and chronic illnesses, the aging and individuals with disabilities. By following a person-centered model, we combine the right people, processes and technology to reduce the frustration of families struggling with the many options for service and support.

About Xerox

Xerox is the world's leading enterprise for business process and document management. Xerox technology, expertise and services enable workplaces – from small businesses to global enterprises – to simplify the way work gets done so they operate more effectively.

Our Experience

- Decades of experience with Medicaid programs, clinical services, care coordination and payment method reform.
- National provider of HCBS administration support solutions and services.
- Experts in gaining the most FFP and FMAP.
- Proven history of reducing costs and automating administrative processes.
- Continuum of care expertise.