

# CHRIS/HPG User Guide

March 2024

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#### What is CHRIS/HPG?

The Health Partner Gateway (HPG) provides a single electronic solution to securely exchange health information between Ontario's home healthcare agencies and their partners.

See the **Feature Overview** video for additional information.

And end to end **User Guide** on how to **use and operate the CHRIS/HPG module** can be found **here**.

### What are the benefits of Chris HPG V2?

Agencies using CHRIS/HPG Billing V2 can now expect the following:

- Optimized workflow that aligns with a unified billing vision for future improvements
- The ability to generate, send, reconcile, resubmit, and export invoice
- The ability to perform **bulk actions** on all tasks, saving time on repetitive tasks
- Improved performance and workflow efficiency over V1
- Improved error management, exportable grids, and more

# CHRIS/HPG Videos in ACU Foundations and AlayaCare University

Review the **videos** on CHRIS/HPG Billing in <u>ACU Foundations</u> to gain an understanding of the workflow

Additional tools, such as recaps and quizzes can be found in AlayaCare University.

# **Community Ideas Board**

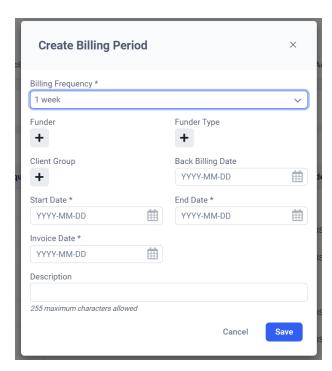
Have ideas on how to improve this feature? Post them on the **Community Ideas Board**.

#### **CHRIS/HPG Workflow**

### **Step 1. Billing Period Creation**

A **billing period** is used to capture visits within a **date range**. To help your agencies organize those invoices, **filters** can be applied when creating billing period. For example, filtering for all, or specific HCCSS funded visits will help separate those invoices from your private pay clients.

When creating a Billing Period:



Billing Frequency will determine how often your agency bills. For example, if your agency processes invoices weekly, select "1 week". It is important to ensure that this billing frequency matches the billing frequency that is set up at the client's service level.

Select any desired Funder, Funder Type, and Client Group filters for this bill period. Filters can be very helpful if your agency would like to run different billing period of the same billing frequency.

The Back Billing Date is a threshold of how many back dated visits, visits that were missed in previous billing runs, can be pulled into this current billing period. If the Back Billing Date is not selected, it will automatically be set to 6-months before the billing period's end date.

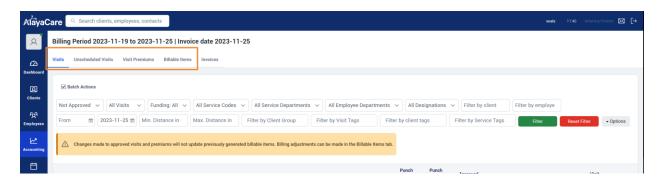
The **Start Date** is the start date of the billing period. It will be automatically prepopulated with the date after the end of the previous billing period of the same billing frequency.

The **End Date** is the end date of the period. This date can be adjusted so that agencies that use a 'bi-monthly' billing cycle can modify the end date when it should be changed between the 15th or 16th of a month. *Please note that the end date is inclusive.* 

The **Invoice Date** is the date that will appear on the invoice. As well, as the date that the transaction will be posted in your subledger.

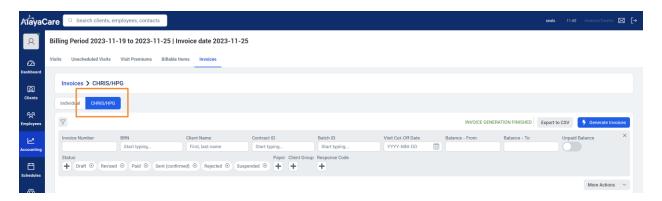
# Step 2. Review Visits, Unscheduled Visits, Visit Premiums, and Billable Items

After creating the Billing Period, the Visits, Unscheduled Visits, Visit Premiums, and Billable Items tabs can be reviewed. Reviewing these tabs are specific to different agencies.



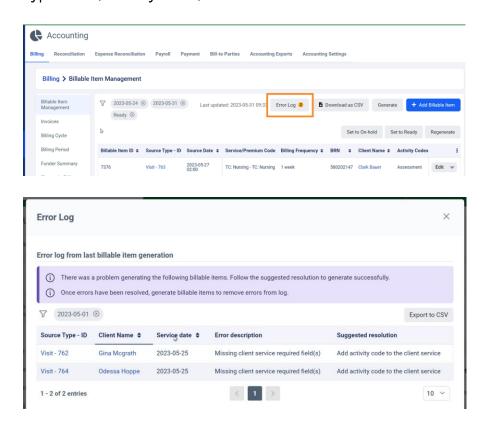
When ready, the invoices for this Bill Period can be generated.

In the Invoices tab, be sure to select the CHRIS/HPG market toggle.

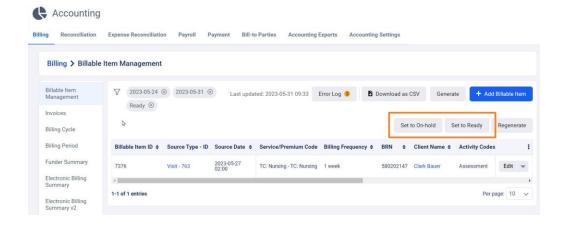


### **Billable Items Management (BIM)**

After visits have been approved, utilize Billable Items Management (BIM) to ensure that the visits contain the HCCSSS required data. BIM can confirm that the BRN, Service Type Code, Activity Code, and Bill Code are recorded within the Visit.



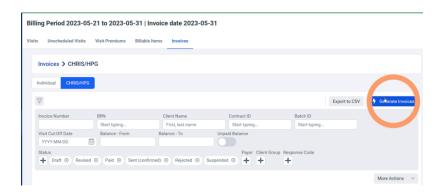
Using BIM, the **On-hold** status can also be utilized and prevent specific visits from being invoiced. This will help your agency control which visits are sent to CHRIS, at any given time.



After the visits have been validated and all data is included, you will be able to **create** the invoices.

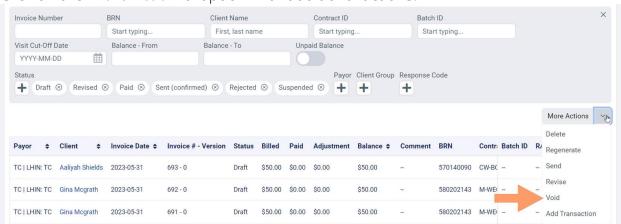
### **Step 4. Invoice Generation**

To generate the invoices, click Generate Invoices.



Newly generated invoices are always in **draft** status. This means that they are ready to be sent to HPG.

Click on the 'More Action' dropdown for additional actions.



**Deleting** an invoice could be helpful if your agency has a different team managing invoices for different groups of HCCSS or clients, and this billing period includes LHINs or clients of a different group. Only invoices in 'Draft' status can be deleted.

**Regenerate** is used to update invoice information. This is helpful if you are doing a prebilling check.

**Send** will allow you to select all or specific visits to send to HCCSS.

**Revise** is used after HCCSS reconciliation and feedback has been provided, revisions made, and invoices for the revisions are ready to be generated.

**Voiding** invoices that have been sent in error can be reversed by using the void function. For visits with invoices that have been voided, they will need to have their invoices generated again.

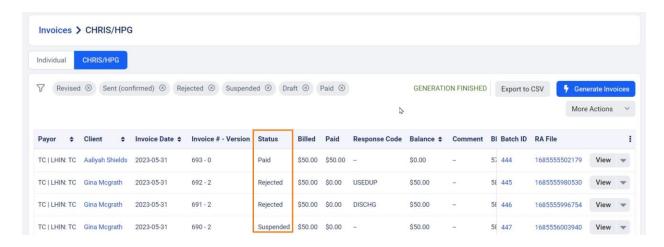
At this point, review the draft invoices, ensuring that they are correct and that the visits have bill codes, activity codes, and service codes. **Send** the desired invoices to the HCCSS.

### Step 5. Reconciliation, Revision, and Resubmission

After the HCCSS has received the invoice batch and completed their review, their responses will be **sent back** through **AlayaCare**.

Located in the **same** Invoices page of the Billing period, we can see that visits will have HCCSS statuses, such as **paid**, **suspended**, and **rejected**, in the status column.

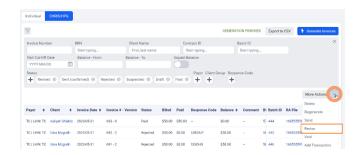
Additionally, the Response Code column will display any response codes that the HCCSS has attached to a **suspended** or **rejected** visit.



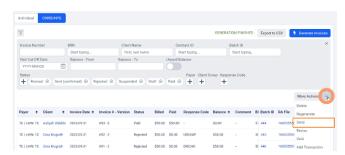
At this point, you will be able to revise the visit details, as per the HCCSS's feedback.

Some common revision scenarios include a change in the BRN, Updating the service type code, updating a visit's activity code, or perhaps even 'no revision', as the HCCSS is contacted, and a change is made on their end.

Update the visit or client service, as per the HCCSS's request, and you will be able to mark the selected visits as **revised**.



When ready, the revised visits can be **sent** to the HCCSS again, for review.



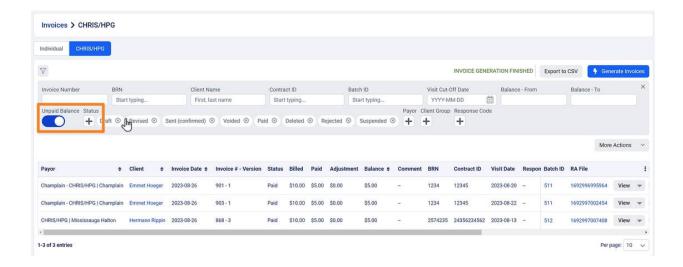
# **Voiding**

**Voiding** an invoice will **reverse all transactions**, including **allocations**, that were previously recorded against a previously **sent** invoice. The voided invoice will no longer be valid and so, the associated visits to that invoice will need to generate to a new invoice, with a new invoice number, or they can be written off, if required.

# **Writing-off Invoices**

For invoices sent to CHRIS-HPG with **outstanding balances** that the agency no longer expects to collect, they can be **'written-off'**.

To help identify only invoices with only outstanding balances, select the "Unpaid Balances" toggle. Only invoices in "paid", "rejected", or "suspended" status can be written off.



### **Batch management**

**Batch management** allows users to **view** batches across different billing periods, access invoices within a batch, and **export** batches into various formats.

The definition of a batch is the grouping of all invoices that were sent to the same LHIN or HPG funder, up to a limit of **8,000 invoices per funder**. For funders with over 8,000 invoices, AlayaCare will create multiple batches.

The "balance", "billed", "payments", and "adjustments" column will display the financial details for the batch. As well, you can easily see any outstanding payments for a batch, where you can follow-up if needed. To quickly see visits with an unpaid balance, select the Batch ID to see all visits and then select the "unpaid balance" toggle.

The last column on the list is the export function. This will allow you to export all the invoices within the batch to an available **export**.

