

Our Webinar Will Begin Shortly

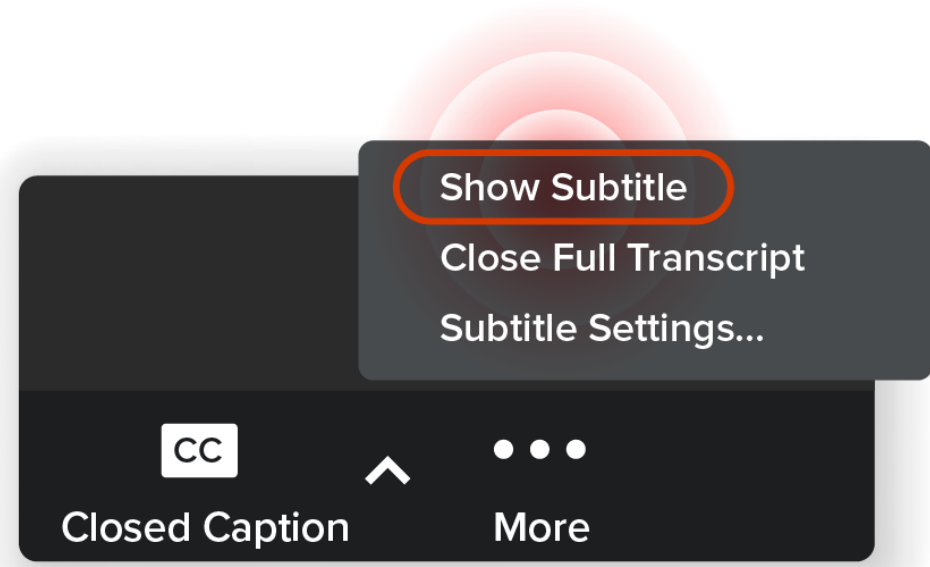
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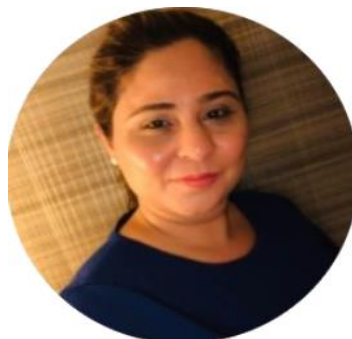




Meet the Trainers!



Janny Sachani



- **Role:** Senior Training Specialist
- **Areas of Expertise:** Billing
- **Fun Fact:** The New Dashboard feature is my favorite!

Nevada Providers Training Billing Basics & Beyond – Mastering the Foundation

August 2025

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This training will provide an overview of the updated Sandata billing process for Nevada providers, covering what's new, the improved workflow, and key changes from the previous system. By the end, you'll be ready to navigate the updated system and keep your billing on track.

Who should take this training?

- Anyone who will be managing Billing function in Sandata EVV portal.
(Example: Providers, Billing Manager & Coordinators, Agency Users)

Objectives of Today's Training

You will be able to:

- **Identify** key differences between the previous and enhanced Sandata billing module.
- **Navigate** the enhanced billing workflow in the updated user interface.
- **Complete** essential billing tasks using step-by-step guidance.



> Knowledge Check – What's the Nickname?



What's the official state nickname of Nevada?

- A. The Golden State
- B. The Lucky State
- C. The Silver State
- D. The Jackpot State





Agenda

➤ Revenue Cycle 101

➤ Billing Overview

➤ Old vs. New Billing Module

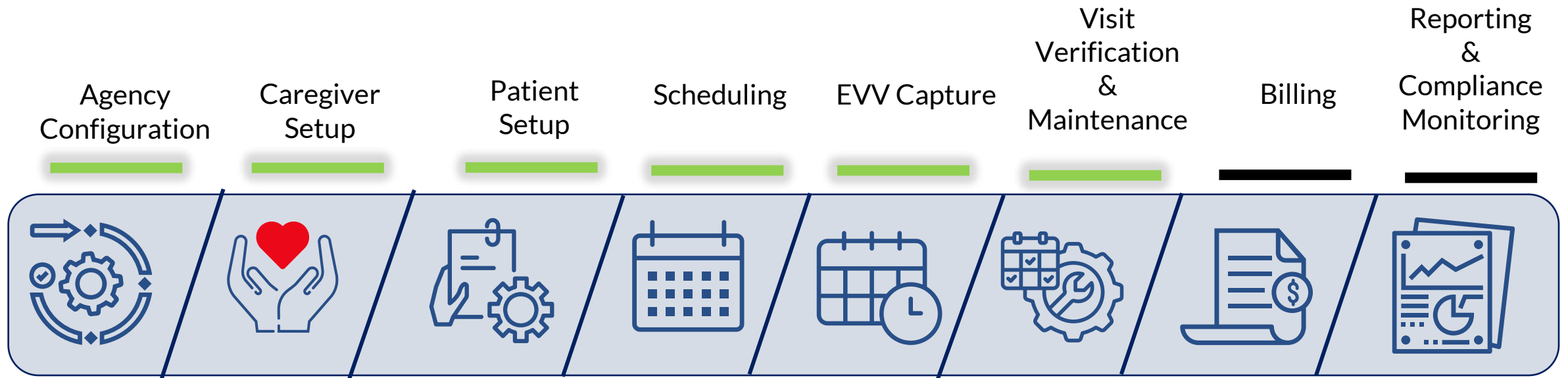
➤ Before You Bill

➤ New Billing Process

➤ Key Takeaways

➤ Support Resources

➤ Questions



Revenue Cycle 101

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Revenue Cycle Overview

Revenue is a Cycle



1. Patient Intake

Gathering a patient's information such as name, birthdate, insurance, authorizations, etc.

2. EVV/Charge Capture

Providing services to a patient and capturing EVV and billing information

3. Claim Validation

Ensuring all billing information is accurate



6. Reporting/Claim Follow-Up

Reviewing reports and determining next steps for claims follow-up

5. Remittance Posting

Recording claim rejections, denials, and payments

4. Claim Submission

Submitting claims to payers and insurances for reimbursement



 **Patient Intake** is the first step of accepting a patient and documenting their information and insurance details.

 **EVV Capture:** Capturing and Performing Approved Services for Timely Reimbursement.

 **Claim Validation** is when claims are checked to ensure accuracy before submitting to the payer

 **Claim Submission** occurs once claims are checked for accuracy and are ready to be sent to payers for claims adjudication

 **Remittance Posting** occurs when a payer sends an EOBs explaining which claims were paid and/or denied

 **Reporting** happens after claim responses are received and tracks cash flow and/or **Accounts Receivable (AR)**

Billing Overview

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The Billing Process is a systematic approach used by healthcare providers to submit claims, receive payments, and resolve denied or unpaid claims to ensure accurate revenue collection.



Old vs New Billing Module

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Old vs New Billing Module



Old Billing Module

Billing (Archive)

Create Invoices

Submit Invoices

Submitted

Payers

New Billing Module

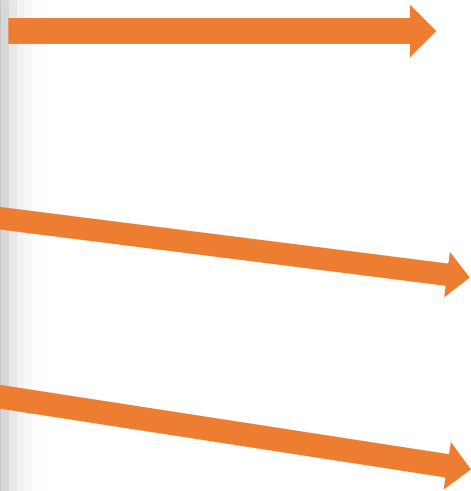
Billing

Dashboard

Visits

Batches

Settings



Feature Comparison

	Old Billing Module	New Billing Module
Billing Dashboard	✗	✓
• Date Range Filters	✗	✓
• Tiles Overview	✗	✓
• Total Visits & Claims	✗	✓
• Claim Responses	✗	✓
• Unbilled Visits & Rejected Claims	✗	✓
• Overdue Claims	✗	✓
• Reports Access	✗	✓
• Upload X12 Files	✗	✓
Visits (Create Invoices)	✓	✓
Batches (Submit Invoices/Submitted)	✓	✓
Billing Transactions	✗	✓



Billing Dashboard



The Billing Dashboard provides a quick view of your account information across tiles.

Sandata
Home Care

≡

🔍 Navigate Modules

🏠 Dashboard

👤 Clients ▾

👥 Employees

📅 Scheduling ▾

⚙️ Visit Maintenance

📄 Billing (Archive) ▾

📄 Billing ▴

Dashboard

Visits

Batches

DashboardVisitsBatchesClaimsClaim ResponsesTransactions

Billing / Dashboard

Account: [LOG OUT](#)

Dashboard

From
mm/dd/yyyy📅

To
mm/dd/yyyy📅

Payer

Total Visits
564

Total Claims
28 \$6,215.92

Total Claim Responses
3

Total Files
0

Reports
[Click to see reports](#)

Visits with Billing Exceptions
! 0

Unbilled Visits
! 506

Rejected Claims
! 11 \$5,183.79

Overdue Claims
! 28 \$6,215.92

UPLOAD X12 FILE

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New Dashboard

Future Rollout (ETA- Sept 25th)

Self-Explanatory: Designed with intuitive visuals for easy navigation and understanding.

Enhanced Insights: Provides a more detailed view of operational and performance data.



DashboardPayers SettingsVisitsBatchesClaimsClaim ResponsesTransactionsOld UI

Dashboard

From

mm / dd / yyyy

×

To

mm / dd / yyyy

×

Clear

Today

Current Week

Last Week

Current Month

Last Month

Payers

All Payers

Upload X12 File

Upload EDI 835 remittance files for processing

Choose File

Pre-Billing Alerts

Total Visits

922

Visits With Billing Exceptions

Total

355

Warning

0

Critical

355

Ready-to-Bill Visits

Total

312

Aging:

0 - 30 days

0

31 - 60 days

0

61 - 90 days

0

91 - 120 days

0

121 - 150 days

169

151 - 180 days

119

181 days and more

24

Ready-to-Bill Visits for

NVANT

Total

51

Aging:

0 - 30 days

0

31 - 60 days

0

61 - 90 days

0

91 - 120 days

0

121 - 150 days

28

151 - 180 days

20

181 days and more

3

Unsubmitted Visits in Batches

29

Upcoming Billing Days

NVFFS

in 8 days (8/20/2025)

216 visits

Total Files

0

Total Patients

0

Total Coverages

0

Billing Alerts

Claims By Status

Draft

26 | \$2,912.09

Sent

16 | \$1,013.51

To Review

95 | \$18,236.44

Payment In Progress

2 | \$100.00

Balanced

0 | -

Errored

45 | \$3,441.11

Rejected Claims

95 | \$18,236.44

Overdue Claims

Total

184 | \$25,703.15

Aging:

0 - 30 days

7 | \$859.64

31 - 60 days

0 | -

61 - 90 days

0 | -

91 - 120 days

0 | -

121 - 150 days

95 | \$11,833.85

151 - 180 days

82 | \$13,009.66

181 days and more

0 | -

20



New Batch

Create Invoices is now Visits



Create Invoices:

Sandata
EVV

Navigate Modules

Dashboard

Clients

Employees

Scheduling

Visit Maintenance

Billing

Create Invoices

Submit Invoices

Billing / Create Invoices

Account: LOG OUT

Select a Visit

CLIENT

Type 3 letters of the Client's name

PROGRAM

Select Program

FROM DATE

05/01/2025

TO DATE

05/02/2025

PAYER

Select Payer

SERVICE

Select Service

TYPE

Select Type

EVENT

Select Event

VISIT STATUS

Select Visit Status

NOT OK TO BILL REASON

Select NOT OK To Bill Reason

SHOW ONLY ITEMS OK TO BILL

SHOW ONLY ITEMS NOT OK TO BILL

SHOW AS SUMMARY

SEARCH

CLEAR

No search performed yet

UPDATE

CREATE INVOICES

Visits:

Sandata
Home Care

Navigate Modules

Dashboard

Clients

Employees

Scheduling

Visit Maintenance

Billing

Dashboard

Visits

Dashboard Visits Batches Claims Claim Responses Transactions

Account: LOG OUT

Billing / Visits

← Visits

Sync visits from

05/02/2025

Sync visits to

mm/dd/yyyy

Sync

From

To

Last Name

First Name

Billing Exceptions

Payer

Member ID

Clear filters

Total Items: 0

<

>

	CLIENT NAME	SERVICE BEGIN DATE	SERVICE END DATE	UNITS	SERVICE	PAYER	BILLING EXCEPTIONS	STATUS	ELAPSED DAYS
No records found									

Total Items: 0

<

>



The Batches screen displays the batches that you have created.

DashboardVisitsBatchesClaimsClaim ResponsesTransactions

Billing / BatchesAccount:

LOG OUT

+ NEW BATCH

LINK	#	BATCH DATE	PAYERS	SERVICE DATES	NUMBER OF VISITS	BATCH TOTAL	TOTAL BILLED	TOTAL UNITS
	9	04/28/2025	NVFFS	03/28/2025 - 03/28/2025	3	\$4,157.11	\$4,157.11	102
	8	04/23/2025	NVANT, NVHPN	03/27/2025 - 03/27/2025	4	\$340.96		16
	7	04/23/2025	NVHPN, NVFFS	03/12/2025 - 03/13/2025	5	\$163.61	\$163.61	17



Transactions



The Batches is now listed as a set of claims under the **Transaction** tab to view the status of the claims.

DashboardVisitsBatchesClaimsClaim ResponsesTransactions

Billing / Batches / Batch / TransactionsAccount: LOG OUT

←Batch #1103/26/2025 - 03/28/2025

Visits11

Units44

Batch total\$756.92

Total billed\$756.92

PayersNVANT NVHPN

⏪

Refresh Batch

VisitsClaimsTransactionsExceptions (0)

Transactions

all837835277999

Date	Type	Payer	Total	Connection	Claim Type	Status
05/14/2025 7:13:47 PM	837	NVANT	\$290.96	changehealthcare	institutional	errored
05/08/2025 11:36:36 AM	837	NVHPN	\$50.00	changehealthcare	professional	processed
05/08/2025 11:35:59 AM	837	NVHPN	\$25.00	changehealthcare	professional	processed



You can access the **Claim responses** tab from the Dashboard.

DashboardVisitsBatchesClaims**Claim Responses**Transactions

Billing / Claim Responses / 71683OITSIZDVWM ResponseAccount: LOG OUT

835 | Claim Response

Member ID70001100012StatusActive

UseClaimTypeProfessional

Claim Number71683OITSIZDVWMEligible\$0.00

Created2025-04-04Submitted\$25.00

Payer1798Write Off\$0.00

Provider ID1427138338Reversal\$0.00

Provider NameNV Training Sandbox TestTransfer Write Off\$0.00

Paid\$0.00

TRACE NUMBER	SERVICE	MODIFIER	SERVICE DATE
> NVFFS71683OITSIZDVWM1	S5125	-	03/28/2025

Claim adjudication

CATEGORY	REASON CODE	DESCRIPTION	AMOUNT	TYPE
benefit			0	manual
CO	161	Provider performance bonus	25	manual

CLOSE

Note: Provider need to complete the enrollment process to receive the 835 Remittance files.



Billing Reports

Dashboard -> Reports



There are new reports in the billing module, which you will not find in the EVV Reports module.
You will access these reports via the Billing Dashboard.

Q

Navigate Modules

Dashboard icon

Dashboard

Client icon

Clients

Employee icon

Employees

Dashboard

Visits

Batches

Claims

Claim Responses

Transactions

Billing / Reports

	DESCRIPTION
	Visits report
	Claims report

Total Items: 2

Knowledge Check – New Billing Module



You've been asked to give leadership a high-level view of billing activity and trends. This wasn't something easily done in the old module.

Question:

Which new feature should you use for this purpose?

A. Submitted

B. Dashboard

C. Payers

D. Batches



Before You Bill

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Required for Billing

Dx code is required to bill.



Clients / Edit Client

Account: [LOG OUT](#)

[BACK](#)

Huang, Danny D.

PCS | Active

[HISTORY](#)

[NOTES](#)

Client ID: 151652 | Medicaid ID: 12111511411 | Main Address: 7111 Danny Ave | Phone No: (234) 562-3462 | Main Emergency Contact: --

Personal

Program

Health Records

Schedules

Invoices

Diagnosis

Add Diagnosis

NEW DIAGNOSIS

Type here for a quick search...

5

 of 1 entries

<<

<

1

>

>>



Adding a Diagnosis Code



Required for Billing

Physician is required for services with program code = HH



Adding a Physician to the System



Adding a Physician to a Client's Health Records

Clients / Edit Client

< BACK

Huang, Danny D.

PCS | Active

Client ID: 151652 | Medicaid ID: 12111511411 | Main Address: 7111 Danny Ave | Phone No: (234) 562-3462 | Main Emergency Contact: --

Personal

Program

Health Records

Schedules

Invoices

Diagnosis

NEW DIAGNOSIS

CODE	DESCRIPTION
F69	Unspecified disorder of adult personality and b

5 of 1 entries

Physicians

ADD PHYSICIAN

Did you know?

A client's physician is required when billing for clients with HH program eligibility or services.

Start by adding the Physician in the Client's Health Records tab. This information will be relayed in the billing claim.

Personal

Program

Health Records

Schedules

ADD PHYSICIAN

1 of 2

Next Step



Common Visit Exceptions

- Missing Client
- Missing Employee
- Missing Date/Time of Service
- Missing Type of Service

Typical Billing Exceptions

- Missing Client Date of Birth
- No Authorization Match
- Missing Diagnosis Code



Creating a Batch



Creating an invoice to be billed is known as creating a batch. A batch is a group of verified visits that you will bill for in the claims process.

 Navigate to Billing → Visits

 Select Date Range → Sync Visits

 Apply Visit Filters

☒ Choose 'Visits without Exceptions'

☒ Select Visits → Checkboxes

 Click 'Save Batch'



> Knowledge Check – Before you bill



Scenario:

You are preparing to submit a claim for a patient's visit. When you try to generate the bill, the system flags missing information and prevents submission.

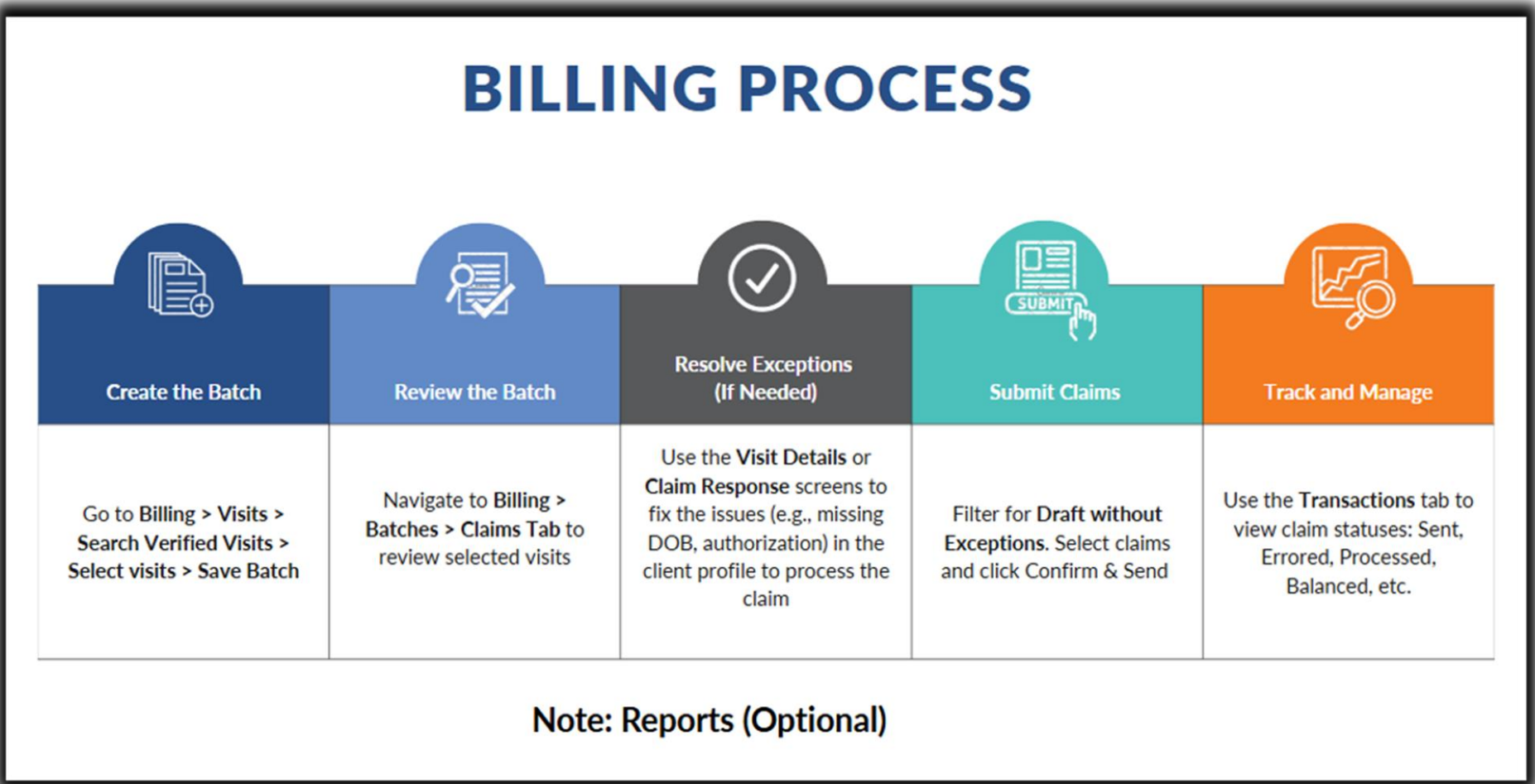
Question: Which of the following needs to be added to the patient's record before billing can proceed?

- A. Insurance policy number only
- B. Diagnosis (Dx) code and physician information
- C. Authorization number only
- D. Service location details



New Billing Process

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Step 1

Create the Batch



1. Go to **Billing > Visits** and set the date range, then click **Sync**.
2. Use filters to find visits; batches can include multiple payers.
3. Filter by **Visits without Exceptions (Ok to Bill)** for clean claims.
4. Select visits using checkboxes or **Select All**.
5. Click **Save Batch** to prepare visits for claim submission.



Note: Use **Visits without Exceptions** to create batches, and **Visits with Exceptions** to review and resolve issues before batching.



Step 2

Review the Batch



- 1. Navigate to the **Billing module** and select **Batches**.
- 2. Click the **Eye Icon** to review the **Visits** added on the batch.
- 3. If needed, add additional **Visits** to the batch.

DashboardVisitsBatchesClaimsClaim ResponsesTransactions

Billing / Batches / BatchAccount: LOG OUT

Batch #1703/27/2025 - 03/27/2025

Visits2

Units5

Batch total\$49.50

Total billed-

PayersNVFFS

Refresh Batch

VisitsClaimsTransactionsBilling Exceptions (0)

Visits

DELETE VISITS+ ADD VISITS

Search

Frommm/dd/yyyyTo mm/dd/yyyyBilling ExceptionsSelect exceptions typeClear filters

	CLIENT NAME	SERVICE BEGIN DATE	SERVICE END DATE	UNITS	SERVICE	PAYER
☐		03/27/2025 12:00:00 PM	03/27/2025 1:00:00 PM	1	T1001	NVFFS
☐		03/27/2025 9:00:00 AM	03/27/2025 10:00:00 AM	4	S5125	NVFFS



Step 3

Resolve Exceptions (If Needed)



- 1. Use the **Billing Exceptions** screen to resolve the Exceptions **(IF needed)**.
- 2. Fix Issues such as **Missing DOB, Authorization** in the client profile to process the claim.

DashboardVisitsBatchesClaimsClaim ResponsesTransactions

Billing / Batches / Batch / Exceptions

←Batch #303/28/2025 - 03/28/2025

Visits2

Units8

Batch total\$170.48

Total billed\$145.48

PayersNVANT NVHPN

VisitsClaimsTransactionsBilling Exceptions (4)

Exceptions

MESSAGE	NUMBER OF VISITS	LINKS
No matched amp authorization	1	Visit #32629
No matched amp authorization	1	Visit #32629
Pre-auth # is required	1	Visit #32629
Pre-auth # is required	1	Visit #32629



Step 4

Submit the Claims



1. Navigate to the **Billing module** and select **Batches**.
2. Find and open the **Batch** you wish to make the claim for.
3. Open **Claims tab** inside of the **Batch**.
4. Use the **filters** to help sort the claim info & status.

All (1)

Draft without exceptions (1)

Draft with exceptions (0)

Sent (0)

To review (0)

Payment in progress (0)

Balanced (0)

Errored (0)

5. Select **Draft without exceptions** & select each visit that is to be billed in this batch.
6. Select **Confirm & Send**.

In this table, each Claim Status is defined.	
All	View all claims that are in the batch.
Draft without exceptions	Claims in draft form not yet submitted.
Draft with exceptions	Claims with billing exceptions in draft form not yet submitted
Sent	Claims that have been sent for payment.
Errored	Claims that have been previously submitted but need to be revised before resubmitting.
To review	Claims that need to be reviewed before re-submitting; there is an action that needs to be taken.
Processed	Claims that have been submitted for payment: the clearinghouse has received the claim.
Balanced	Claims that were paid.
Payment-in-progress	Claims submitted awaiting payment we have received a message back from the clearinghouse that the payer has received the claim.



Step 5

Track & Manage Claims



Use the **Transaction** tab to view **Claim Statuses**.
Example: Sent, Errored, Processed, Balanced

Dashboard Visits **Batches** Claims Claim Responses Transactions

Billing / Batches / Batch / **Transactions**

←

Batch #12	Visits	Units	Batch total	Total billed	Payers
03/28/2025 - 03/28/2025	1	1	\$63.61	\$63.61	NVFFS

Visits Claims **Transactions** Exceptions (0)

Transactions

all 837 835 277 999

Date	Type	Payer	Total	Connection	Claim Type	Status
05/08/2025 1:22:50 PM	837	NVFFS	\$63.61	changehealthcare	institutional	processed
05/08/2025 1:11:25 PM	837	NVFFS	\$63.61	changehealthcare	institutional	processed
05/08/2025 1:08:34 PM	837	NVFFS	\$63.61	changehealthcare	institutional	errored
05/08/2025 12:59:48 PM	837	NVFFS	\$63.61	changehealthcare	institutional	errored
05/08/2025 12:39:16 PM	837	NVFFS	\$63.61	changehealthcare	institutional	errored
05/07/2025 3:33:36 PM	837	NVFFS	\$63.61	changehealthcare	institutional	errored

Knowledge Check – New Billing Workflow



After submitting claims, your supervisor wants a status update on claim processing.

Question:

Which tool should you use to view the status of submitted claims?

- A. Dashboard
- B. Visit Maintenance
- C. Transaction Tab
- D. Reports





New Billing Process **DEMO**

Q Navigate Modules

Dashboard

Clients

Employees

Scheduling

Visit Maintenance

Billing (Archive)

Billing

Reports

Authorizations

Security

Visit Counts By Exceptions

Visit Counts By Status

Date Range

Today

Visit Exceptions

Unknown Clients	0
Unknown Employees	0
Visits Without Any Calls	1
Visits Without In-Calls	1
Visits Without Out-Calls	1
Missing Tasks	1
Late In-Call	0
Early Out-Call	0

Visit Exception Count Per Day





Key Takeaways



Key Takeaways



- The **Old Billing Module** can be used for claims dated through **May 22, 2025**. All claims dated **May 23, 2025** and after must be submitted using the **New Billing Module**.
- Prevent billing holds with simple, proactive checks such **Diagnosis code, Physician info, authorization** etc.
- The New **Billing Dashboard** helps you see all billing activity, bill faster, and prevent errors.



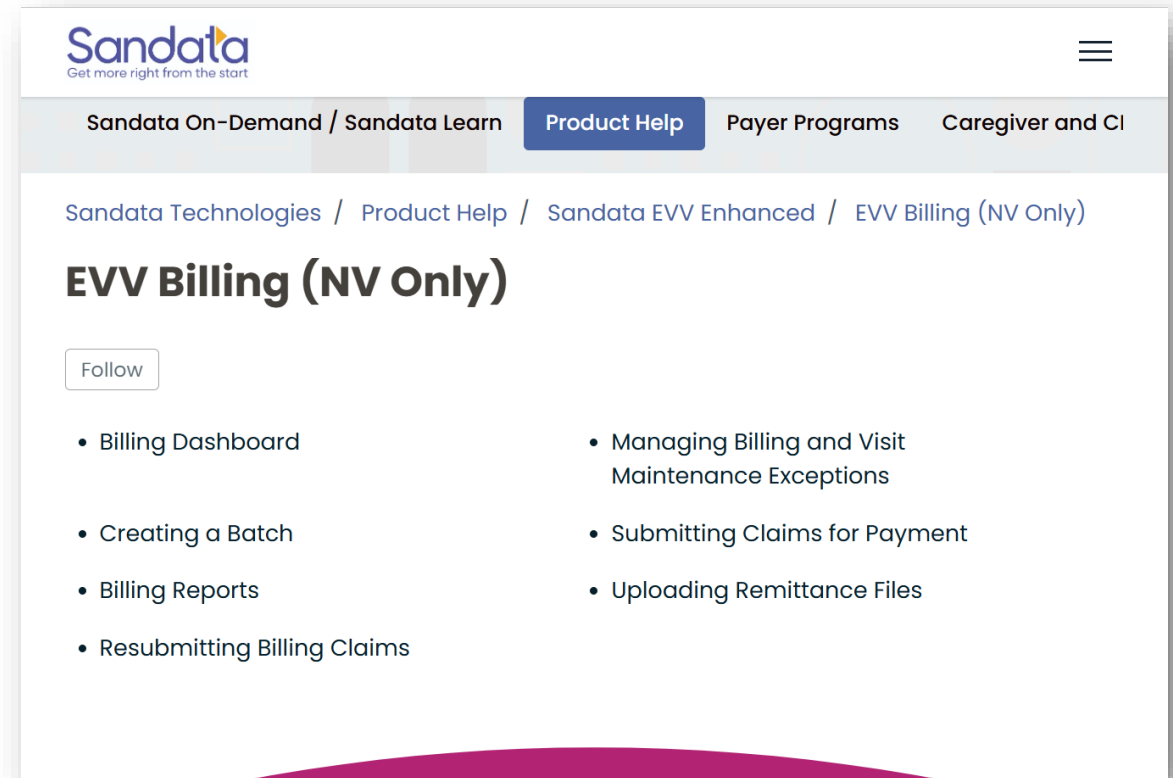
Resources



Resources



- [Nevada \(NV DHCFP\) Billing](#)
- [Managing Exceptions: Billing and Visit Maintenance Exceptions](#)
- [Billing Dashboard](#)
- [Creating a Batch](#)
- [Submitting Claims for Payment](#)
- [NV Billing: Not Okay to Bill Reasons Guide](#)
- [Uploading Remittance Files](#)
- [ConnectCenter Navigation](#)



The screenshot shows the Sandata website interface. At the top is the Sandata logo with the tagline 'Get more right from the start'. Below the logo is a navigation bar with links: 'Sandata On-Demand / Sandata Learn', 'Product Help' (highlighted in a blue box), 'Payer Programs', and 'Caregiver and CI'. Below the navigation bar is a breadcrumb trail: 'Sandata Technologies / Product Help / Sandata EVV Enhanced / EVV Billing (NV Only)'. The main heading is 'EVV Billing (NV Only)'. Below the heading is a 'Follow' button. A list of resources is displayed in two columns:

- Billing Dashboard
- Managing Billing and Visit Maintenance Exceptions
- Creating a Batch
- Submitting Claims for Payment
- Billing Reports
- Uploading Remittance Files
- Resubmitting Billing Claims

Program, Policy, & General Information



Program, policy, or general EVV questions?

- ▶ Contact Nevada Department of Health and Human Services Division of Health Care Financing and Policy (DHCFCP) via email at NVEVV@dhcfp.nv.gov



Questions?

**THANKS FOR
ATTENDING!**



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