

# Electronic Visit Verification

## Quick Reference Guide

Electronic Visit Verification (EVV) is a telephone- and computer-based system that electronically confirms a member has received a prior authorized service visit in their home. The system is used for STAR Kids, STAR+PLUS and UnitedHealthcareConnected® (Medicare-Medicaid Plan) members.

### The following services require EVV:

- Personal assistance services (PAS) and personal care services (PCS) provided in the home and in the community
- In-home respite care
- Community First Choice (CFC) services (habilitation and PAS/PCS)
- Flexible Family Support Services

## Vendor Information

Personal care attendants who provide services in the home or community must use the DataLogic (Vesta) Software, Inc. EVV system.

DataLogic (Vesta) Software, Inc.	
Phone	844-880-2400
Website	vestaevv.com
Information	info@vestaevv.com
Technical Support	support@vestaevv.com
Tokens	tokens@vestaevv.com
Training	training@vestaevv.com

## EVV Compliance

To serve UnitedHealthcare Community Plan members, you must have an EVV Initiative Provider Compliance Plan that meets the requirements of the EVV Compliance Plan.



For more information about compliance, go to [UHCprovider.com/evv](https://UHCprovider.com/evv) > Electronic Visit Verification > EVV Compliance Plan.



If you need help using the EVV system, contact your EVV vendor or Provider Advocate, or call **888-787-4107**.

## Visit Maintenance

In some cases, your administrative staff may need to edit your care agency's visit records by modifying and correcting visit information. Visit maintenance must be completed within 60 days of the service date. After 60 days, the system entry is locked for edit.

### Reason Codes

A reason code is an approved three-digit number with description that's used during visit maintenance to explain the reason a change was made to an EVV visit record. Most edits require at least one reason code. Some will require a comment as well. Reason codes fall into two categories:

- **Preferred Reason Codes** document visit maintenance necessitated by a situation in which the provider staff are delivering and documenting services in accordance with HHS expectations.
- **Non-Preferred Reason Codes** document visit maintenance that is necessitated by a situation in which the provider staff is not delivering and documenting services in accordance with Health and Human Services Commission (HHSC) expectations.

If we've already paid for a service that needs a reason code that wasn't entered within the 60 days, you may be asked to return payments. If we see patterns of consistently using inappropriate reason codes, we may need to take steps to address the situation, such as supportive education for you and your staff, a corrective action plan or an investigation of fraud, waste or abuse.



You can view a list of reason codes, including instructions and examples, at [UHCprovider.com/evv](https://UHCprovider.com/evv) > Electronic Visit Verification > Complete List of Reason Codes.

## Claims Submission

A visit can be billed once all EVV data has been entered and any necessary visit maintenance is complete. Please submit claims within 95 days of the date of service. You can submit claims online or by mail.

Here's how to submit claims for dates of service before Sept. 1, 2019:

- **Online:** Use the Claim Submission tool on Link. Sign in to Link by going to [UHCprovider.com](https://UHCprovider.com) and clicking on the Link button in the top right corner. Or, submit claims using a clearinghouse of your choice.
- **Mail** claims to:  
UnitedHealthcare Community Plan EVV  
14141 Southwest Freeway, Suite 800  
Sugar Land, TX 77478

For dates of service on or after Sept. 1, 2019, EVV claims must be submitted directly to Texas Medicaid & Healthcare Partnership (TMHP) in one of the following ways:

- TexMedConnect
- Electronic Data Interchange (EDI) using a C21 Submitter ID



For more information about billing directly to TMHP, go to [UHCprovider.com/evv](https://UHCprovider.com/evv) > Electronic Visit Verification > Training > Texas Health and Human Services Submitting an EVV Claim Training.

## Equipment Needed

Visits are documented using the member's home landline phone, a Health and Human Services (HHS)-approved small alternative device (SAD) or the EVV mobile application.

### Please note:

- A landline must be used to document the visit; cell phones cannot be used instead.
- If a landline is not available, you must use a SAD. You can then use a cell phone to report information from the SAD.
- Consumer Directed Services (CDS) employees may use their employer's personal cell phone to call in and out of the EVV system.



You can order a SAD electronically through the DataLogic Vesta EVV vendor system. If you have questions about the ordering process or the EVV mobile application, contact DataLogic Vesta at [info@vestaevv.com](mailto:info@vestaevv.com).

## Need Help?

If you have technical difficulties with the EVV system, please contact your EVV vendor. Be sure to get a ticket number for reference. If an incident isn't resolved within 24 hours, please report it to us so we can help keep the issue from affecting your compliance score or payments. You can notify us by phone, fax or email. Here's how:

- **Email:** [uhc\\_ew@uhc.com](mailto:uhc_ew@uhc.com)
- **Fax:** Your Provider Advocate or 855-500-3356
- **Call:** Your Provider Advocate or **888-787-4107**



To see what information to include in your report, go to [UHCprovider.com/ew](https://UHCprovider.com/ew) > Electronic Visit Verification > EVV Compliance Plan.