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# HHSC Electronic Visit Verification

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**Module 11**

**Summary of EVV Changes – Part 1**

**June 15, 2019**

# Introduction

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This is Module 11 of the Electronic Visit Verification (EVV) Tool Kit: Summary of EVV Changes – Part 1.

**EVV Tool Kit:** A collection of resources that will help prepare program providers, Financial Management Services Agencies (FMSAs), and Consumer Directed Services (CDS) employers in the use of EVV.

Click here for information on the [21<sup>st</sup> Century Cures Act – Texas Implementation](#).



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# EVV Tool Kit

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Previous modules are available in the EVV Tool Kit section of the [HHSC EVV website](#):

- Module 1: January 15, 2019:  
[EVV 101 - Introduction to EVV](#)
- Module 2: February 1, 2019:  
[EVV Roles and Responsibilities – Part I](#)
- Module 3: February 15, 2019:  
[EVV Roles and Responsibilities – Part II](#)
- Module 4: March 1, 2019:  
[EVV Visit Transactions](#)
- Module 5: March 15, 2019:  
[EVV Visit Maintenance](#)



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# EVV Tool Kit (Cont'd)

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Previous modules are available in the EVV Tool Kit section of the [HHSC EVV website](#):

- Module 6: April 1, 2019:  
[EVV Process Flow: Beginning to End](#)
- Module 7: April 15, 2019:  
[EVV Aggregator and EVV Portal](#)
- Module 8: May 1, 2019:  
[Submitting an EVV Claim](#)
- Module 9: May 15, 2019:  
[EVV Portal Standard Reports and Search Tools](#)
- Module 10: June 1, 2019:  
[EVV Visit Transaction Validation Enhancements](#)



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# Overview

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This module will discuss the following EVV topics:

- EVV changes effective Jan. 1 – June 1, 2019
- Upcoming EVV changes

**Note:** EVV does not replace any contract, program or licensure requirements regarding service delivery or service delivery documentation.



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# **EVV Changes Effective Jan. 1 – June 1, 2019**

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# Read-only Access to EVV Data

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**Jan. 25, 2019**

- Medicaid providers required to use EVV who are not active with a current HHSC-approved EVV vendor can request 30 days of read-only access to their historical EVV visit data by completing the [EVV Data Access Request Form](#).
- Refer to the [EVV alert](#) for more information.



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# EVV Mobile Application

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**April 1, 2019**

- The EVV mobile application became a standard option for clocking in and clocking out of the EVV vendor system for program providers and their attendants.
- HHSC EVV Operations published the [EVV Mobile Application Policy](#). This policy establishes clock in and clock out requirements, user requirements, and mobile device specifications.
- Refer to the [EVV Mobile Application alert](#) for more information.



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# EVV Provider Data Validation Process

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**April 1, 2019**

- HHSC implemented an EVV provider data validation process for all program providers required to use EVV. This improves data quality by standardizing EVV data within the Vesta EVV system, which helps reduce data element errors on visits.
- Refer to the [EVV Provider Data Validation Process alert](#) for more information.



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# EVV Visit Transaction Validation Enhancements

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**June 1, 2019**

- HHSC enhanced the EVV process by standardizing EVV visit data to improve accuracy and reduce data corrections required by program providers.
- Refer to the [EVV alert](#) and Module 10 of the EVV Tool Kit: [EVV Visit Transaction Validation Enhancements](#) for more information.



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# EVV Vendor System Changes

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## June 1, 2019

- HHSC made additional enhancements to the EVV provider data validation process that was implemented on April 1, 2019.
- These enhancements will improve data quality by standardizing EVV data within the Vesta EVV system.
- Refer to the [Changes to EVV Vendor System EVV News Release](#) for more information.



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# EVV Electronic Authorizations Pilot

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**June 1, 2019**

- Electronic authorizations will no longer be sent to the EVV vendor system by the MCOs as of May 31, 2019.
- Program providers will continue to receive authorizations from the MCOs by paper and must enter the data into the EVV system.
- Fee-for-Service (FFS) electronic authorizations will continue to be sent to the EVV vendor for those program providers participating in the pilot.



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# Upcoming EVV Changes

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# EVV Vendor Announcement

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## August 2019

- HHSC-approved EVV vendor(s) are scheduled to be announced.
- Information on how to onboard with an HHSC-approved EVV vendor will be available soon on the EVV vendor, Texas Medicaid & Healthcare Partnership (TMHP), HHSC, and MCO websites.



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# EVV Computer-Based Training (CBT) Will Be Available

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## August 2019

EVV computer-based training modules will be available in August on the:

- [HHS Learning Portal](#)
  - EVV Policy training
- [TMHP Learning Management System \(LMS\)](#)
  - EVV Aggregator, EVV Portal Standard Reports and Search Tools, Researching and Selecting an HHSC-Approved EVV Vendor, and EVV Claims training

Please contact your MCO for training availability.



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# EVV Aggregator

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## Effective Sept. 1, 2019

- The EVV Aggregator will store accepted and rejected EVV visit transactions for all payers, and will use accepted EVV visit transactions to match EVV-relevant claims.
- The EVV Aggregator is a centralized database that collects, validates, and stores statewide EVV visit data transmitted by an HHSC-approved EVV system.
- Refer to EVV Tool Kit Module 7: [EVV Aggregator and EVV Portal](#) to learn more about changes to the EVV system.



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# EVV Portal

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## Effective Sept. 1, 2019

- The EVV Portal will be available for users to conduct visit searches and pull EVV Portal standard reports for visits with dates of service Sept. 1 or after.
- The EVV Portal is an online system that allows users to perform searches and view reports associated with the EVV visit data in the EVV Aggregator.
- Refer to EVV Tool Kit Module 7: [EVV Aggregator and EVV Portal](#) to learn more about changes to the EVV system.



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# EVV Claims Submission

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## For dates of service on or after Sept. 1, 2019

- Program providers currently required to use EVV must submit all claims for EVV-relevant services in Fee-for-Service (FFS) and Medicaid Managed Care to TMHP via TexMedConnect or via Electronic Data Interchange (EDI) for the new claims matching process to be performed.
- All EVV-relevant claims must be submitted to TMHP (this includes MCO EVV-relevant claims). MCOs will reject or deny a claim if submitted to the MCO (and redirect the program provider to submit to TMHP.)
- Refer to Module 8 of the EVV Tool Kit to learn more: [Submitting an EVV Claim](#).



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# EVV Claims Matching

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## **For dates of service on or after Sept. 1, 2019**

- When a claim with EVV-relevant services has been received at TMHP, it will be matched against the accepted EVV visit transaction(s) previously sent by an HHSC-approved EVV system and accepted in the EVV Aggregator.
- Refer to Module 8 of the EVV Tool Kit to learn more: [Submitting an EVV Claim](#).



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# EVV Claims Matching (Cont'd)

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**For dates of service on or after Sept. 1, 2019**

If **any** of the following data elements do not match an accepted EVV visit transaction, the claim will be denied:

- Medicaid ID
- EVV visit date and claim date of service
- National Provider Identifier (NPI) or Atypical Provider Identifier (API)
- Healthcare Common Procedure Coding System (HCPCS) code
- HCPCS modifiers, if applicable
- Billed units



# EVV Claims Matching: Data Elements are Matched in Order

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- Data elements are matched in the order listed on the previous slide. If a data element cannot be matched, the claims matching process stops and the matching results and the associated claim are forwarded to the appropriate payer.
- The payer would deny the claim.

See an example on the next slide.



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# EVV Claims Matching Example

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For example:

- If **Medicaid ID** doesn't match, the EVV Aggregator stops the matching process. The program provider will receive an EVV claim match result code:
  - **EVV02** – “There are no EVV visits with the Medicaid ID; verify Medicaid ID, NPI/API, Date(s) of Service, HCPCS/Modifiers, Units match visit prior to submitting claim.”
- The program provider would then correct the Medicaid ID and resubmit the associated claim to TMHP.
- The EVV Aggregator would begin the matching process again.



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# EVV Claim Match Result Codes

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Here are some examples of other EVV claim match result codes program providers will receive if other data elements don't match:

- **EVV03** – “There are no EVV visits with the Medicaid ID on the Date(s) of Service; verify Medicaid ID, NPI/API, Date(s) of Service, HCPCS/Modifiers, Units match visit prior to submitting claim.”
- **EVV04** – “There are no EVV visits with the Medicaid ID and NPI/API on the Date(s) of Service; verify Medicaid ID, NPI/API, Date(s) of Service, HCPCS/Modifiers, Units match visit prior to submitting claim.”



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# EVV Claim Match Result Codes

(Cont'd)

Here are some examples of other EVV claim match result codes program providers will receive if other data elements don't match:

- **EVV05** – “There are no EVV visits with the Medicaid ID and HCPCS/Modifiers on the Date(s) of Service; verify Medicaid ID, NPI/API, Date(s) of Service, HCPCS/Modifiers, Units match visit prior to submitting claim.”
- **EVV06** – “EVV claim billed units do not equal unites total of matched visit(s).”
- **EVV71** – “EVV claim detail has dates of service before and after the EVV claims matching effective date of September 1, 2019.”



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# EVV Billing: Follow Payer Guidelines

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## **For dates of service on or after Sept. 1, 2019**

- Program providers and FMSAs can submit EVV claims with a range of service dates (span dates), or by single date of service.
- Follow the billing guidelines of your payer.
- Refer to Module 8 of the EVV Tool Kit to learn more: [Submitting an EVV Claim](#).



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# EVV Portal Standard Reports

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## For dates of service on or after Sept. 1, 2019

- Program providers, FMSAs, MCOs, and HHSC will have access to EVV Portal standard reports and search tools in the EVV Portal.
- EVV Portal standard reports in the EVV Portal will be considered the source of truth and the official reports used by payers.
- Refer to Module 9 of the EVV Tool Kit to learn more: [EVV Portal Standard Reports and Search Tools](#).



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# EVV Vendor Standard Reports

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## For dates of service prior to Sept. 1, 2019

- Program providers, MCOs, and HHSC will also have access to current EVV standard reports in the EVV vendor system.



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# Tip #1

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## **Submit EVV claim line items with correct data elements to avoid denial of EVV claims.**

- EVV claim line items will be matched with EVV visit data sent to TMHP by EVV vendor systems.
- All data elements must match.
- EVV claim line items without matching EVV visit transactions will not be paid.



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## Tip #2

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### **Access EVV resources to help you stay up-to-date on EVV information.**

- Bookmark the [HHSC EVV webpage](#) and check it frequently for updates.
  - Sign up for [GovDelivery](#) to receive email alerts when new information is posted.
  - Review the [EVV Tool Kit](#) (new modules are posted bi-monthly).
- Bookmark the website of your MCO and check it frequently for updates.





# What's Next?

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## **June 24, 2019: Live Webinar Q&A Session**

- Topic: EVV Visit Transaction Validation Enhancements
- [Register](#) for the webinar.
- Email questions ahead of time to [Electronic\\_Visit\\_Verification@hhsc.state.tx.us](mailto:Electronic_Visit_Verification@hhsc.state.tx.us).
- Include "Webinar Question" in the subject line.

## **July 1, 2019 Web Alert:**

- Module 12: EVV Training Requirements and Getting Started – Next Steps

## **July 15, 2019 Web Alert:**

- Module 13: EVV Compliance Oversight Policies



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# Thank you

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**Email EVV questions to:**

**[Electronic\\_Visit\\_Verification@hhsc.state.tx.us](mailto:Electronic_Visit_Verification@hhsc.state.tx.us)**