3c. EVV 101 and Upcoming Changes

Presented by:

Jordan Nichols, Director of EVV Operations, HHSC and
Tricia Barrett, Trainer at EVV Operations, HHSC

Thank you to our event Sponsor:
Electronic Visit Verification (EVV) 101 and Upcoming Changes

- Jordan Nichols, Deputy Associate Commissioner for Medicaid/CHIP Operations Management
- Tricia Barrett, HHSC EVV Training

Topics

- Electronic Visit Verification (EVV) 101
- EVV Proprietary Systems Overview
- EVV Compliance
- Upcoming Changes
- EVV Resources
Electronic Visit Verification (EVV) Definition

EVV is a computer-based system that electronically documents and verifies service delivery information for certain Medicaid service visits, such as:

• Date and time
• Service type, service recipient, and service provider
• Location
Example

• On Jan. 17, 2023, from 9-10AM
• Medicaid recipient Jan Jonas
• Received In-Home Respite services
• From service provider Maria Hernandez

Maria must use an approved EVV clock in and clock out method to document her time worked while providing In-Home Respite to Ms. Jonas.

EVV Clock In and Clock Out Methods

Mobile Method: The service provider can use an application downloaded to a smart phone or tablet to clock in and clock out in the home or in the community.

Alternative Device: The service provider can use an electronic device located within the member’s home to clock in and clock out (it must remain in the home). The device generates codes that must be called in within a specific timeframe.

Home Phone Landline: The service provider can use the member’s home phone landline to clock in and clock out.
Texas governing rules require HHSC to implement an EVV program.

Those required to use EVV must follow the rules and associated policies established by HHSC when delivering certain Medicaid services.

Links to EVV state statutes and rules are included in the EVV Policy Handbook and the HHSC EVV webpage.

The 21st Century Cures Act, Section 12006, enacted by the U.S. Congress in Dec. 2016, requires states to implement EVV for Medicaid personal care services and home health care services that require in-home visits.

To comply with federal law, HHSC is implementing the Cures Act in two phases for Medicaid:

- Personal care services
- Home health care services
EVV Implementations in Texas

2016 and Earlier
Jan. 1, 2021
Jan. 1, 2024

2016 and Earlier
- EVV is required in Texas per state law.
- HHSC implemented EVV for 90% of personal care services (PCS) in 2016.
**EVV Implementations in Texas: Jan. 1, 2021**

**Jan. 1, 2021**
- The 21st Century Cures Act, Section 12006, required Texas to expand EVV to all personal care services, including services provided through the Consumer Directed Services (CDS) option.
- Texas implemented EVV for the remaining 10% of PCS.

**EVV Implementations in Texas: Jan. 1, 2024**

**Jan. 1, 2024**
EVV will be required for home health care services on this date due to the Cures Act.
Programs and Services Required to Use EVV

Currently:
- Personal Care Services Required to Use EVV

By Jan. 1, 2024:
- Home Health Care Services Required to Use EVV (Draft)
  - E.g., Nursing, occupational therapy, speech therapy provided in the home

EVV Service Bill Codes Tables

The EVV Service Bill Codes Tables provide billing codes and details for EVV-relevant services in Long-term Care, Acute Care and Managed Care programs. Using the proper codes helps to prevent EVV visit transaction rejections and EVV claim match denials.

- EVV PCS Service Bill Codes Table – Version 11.1 (Excel)
- EVV HHCS Service Bill Codes Table – Version 1.0 (Excel)
How EVV Works:
EVV System Selection Requirement

State and federal law require program providers and FMSAs to use an EVV system for Medicaid services required to use EVV.

**EVV system:** electronically documents and verifies data elements related to the delivery of EVV-required services

- **EVV vendor system:** Provided by an EVV vendor at no cost
- **EVV proprietary system:** An HHSC-approved EVV system that is purchased or developed by a program provider or an FMSA

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HHSC’s contract for the current EVV vendor systems (AuthentiCare and Vesta EVV) is scheduled to expire on Aug. 31, 2023. EVV procurement is in process; HHSC will move to one EVV vendor system in 2023.

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How EVV Works (1 of 4)

Service Provider Clocks In and Out Using EVV System

**Captures:**

- Type of service provided
- Name of the recipient who had the service
- Date and times the provider began and ended the service delivery visit
- Location, including the address and geolocation, where the service was provided
- Name of the person who provided the service
How EVV Works (2 of 4)

EVV Aggregator
A centralized database that collects, validates and stores statewide EVV visit transaction data transmitted by an EVV system.

How EVV Works (3 of 4)

EVV Aggregator:
Performs **EVV Claims Matching Process**

**EVV Visit Transaction** ↔ **EVV Claim**
How EVV Works (4 of 4)

EVV Portal: Displays Claim Match Result Codes

- EVV01 – EVV Successful Match
- EVV02 – Medicaid ID Mismatch
- EVV03 – Visit Date Mismatch
- EVV04 – Provider (NPI/API) or Attendant ID Mismatch
- EVV05 – Service Mismatch (HCPCS and Modifiers if applicable)
- EVV06 – Units Mismatch
- EVV07 – Match Not Required
- EVV08 – Natural Disaster

Payment of EVV Claims

Important!

- All claims for services required to use EVV must match to an accepted EVV visit transaction in the EVV Aggregator before reimbursement of an EVV claim by the payer.
- Payers will deny or recoup an EVV claim that does not match an accepted EVV visit transaction.
Program providers and FMSAs interested in using an EVV proprietary system must submit an EVV Proprietary System Request Form and go through an approval process. Two onboarding paths available:

• **Standard Path:** When requesting approval to use an EVV system that has not been previously approved by HHSC
• **Expedited Path:** When requesting approval to use an existing operational EVV system that has been previously approved by HHSC

HHSC will offer a special expedited session for those transferring to an EVV proprietary system in preparation for the HHCS implementation. HHSC will publish a notice with more information.

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• HHSC reviews submitted EVV Proprietary System Request Forms to assign an Operational Readiness Review (ORR) session.

• **ORR session:** A validation process to determine if a program provider or FMSA is approved to operate an EVV proprietary system

• If HHSC approval is received to use the EVV proprietary system, the program provider or FMSA is considered a Proprietary System Operator (PSO).

**Resources:**

• TMHP EVV Proprietary Systems Webpage
• Section 5000 EVV Proprietary System in the EVV Policy Handbook
Questions?

EVV Compliance
EVV Compliance Requirements

**EVV Usage**
- Meet the minimum EVV Usage Score.
- Requirements: [11000 EVV Usage Policy](#)

**EVV Landline Phone Verification**
- Ensure valid phone type is used.
- Requirements: [7030 Home Phone Landline](#)

**EVV Required Free Text**
- Document required free text.
- Requirements: [9010 EVV Reason Code and Free Text Requirements](#)

Questions?
**Upcoming Changes**

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**Home Health Care Services (HHCS) EVV Expansion**

HHSC must implement the Cures Act for Medicaid home health care services by **Jan. 1, 2024**, due to federal law.

- **Home Health Care Services Required to Use EVV** (Draft)
  - E.g., Nursing, occupational therapy, speech therapy provided in the home
Home Health Care Services (HHCS) EVV Expansion: Exclusions

- Speech Therapy Services
- Early Childhood Intervention (ECI)
- HHCS delivered via telehealth
- HHCS performed in Place of Service other than Home
- Wheelchair Assessments
- Hospice

STAR Kids Services and Service Delivery Options Required to Use EVV for HHCS

<table>
<thead>
<tr>
<th>STAR Kids Services</th>
<th>Service Delivery Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>- RN Delegation and Supervision of PCS and CFC tasks provided in the home (does not include Private Duty Nursing (PDN))</td>
<td>- Agency</td>
</tr>
<tr>
<td>- Occupational Therapist services provided in the home</td>
<td>- CDS (MDCP FFSS and In-Home respite only)</td>
</tr>
<tr>
<td>- Physical Therapist services provided in the home</td>
<td>- Service Responsibility Option (SRO)</td>
</tr>
<tr>
<td>- Personal Care Services (PCS) provided by a home health aide in the home under the supervision of an RN, Occupational Therapist or Physical Therapist</td>
<td>(MDCP FFSS and In-Home respite only)</td>
</tr>
</tbody>
</table>

Medically Dependent Children Program (MDCP) Services

- RN Delegation and Supervision of PCS and CFC tasks provided in the home (does not include PDN)
- Flexible Family Supports Services (FFSS) performed by an RN, LVN, Specialized RN, or Specialized LVN in the home
- In-Home Respite performed by an RN, LVN, Specialized RN, or Specialized LVN
STAR Health Services and Service Delivery Options Required to Use EVV for HHCS

<table>
<thead>
<tr>
<th>STAR Health Services</th>
<th>Service Delivery Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>• RN Delegation and Supervision of Personal Care Services (PCS) and Community First Choice (CFC) tasks in the home (does not include PDN)</td>
<td>• Agency</td>
</tr>
<tr>
<td>• Occupational Therapist services provided in the home</td>
<td>• CDS (MDCP FFSS and In-Home respite only)</td>
</tr>
<tr>
<td>• Physical Therapist services provided in the home</td>
<td>• Service Responsibility Option (SRO) (MDCP FFSS and In-Home respite only)</td>
</tr>
<tr>
<td>• PCS provided by a home health aide in the home under the supervision of an RN, Occupational Therapist or Physical Therapist</td>
<td></td>
</tr>
</tbody>
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Medically Dependent Children Program (MDCP) Services

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</tr>
<tr>
<td>• In-Home Respite performed by an RN, LVN, Specialized RN, or Specialized LVN</td>
</tr>
</tbody>
</table>

Home Health Care Services (HHCS) EVV Expansion: Tentative Timeline

- **Summer 2023**: Onboarding Process Begins
- **Aug./Sept. 2023**: EVV System Changes, Practice Period Begins
- **Sept./Oct. 2023**: HHCS EVV MCO Claims Must be Submitted to TMHP
- **Jan. 1, 2024**: Home Health Care Services Required to Use EVV

*Dates in blue are tentative and subject to change.*
EVV System Changes: New and Revised Reason Codes

Effective August 1, 2023

- Changes based on previous stakeholder input
- HHSC simplified Reason Codes to decrease the number of:
  - Reason Codes
  - Reason Code descriptions
- Old reason codes will still be accepted by the EVV Aggregator
- Reason code for downward adjustment of Bill Hours will be optional
- No more preferred/non-preferred reason codes

Reason Code Change: Reason Codes Removed

<table>
<thead>
<tr>
<th>Reason Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>900</td>
<td>The program provider, PSMSA or CSS employer will select this EVV Reason Code when the EVV Reason Code number and the appropriate EVV Reason Code Description when the member’s home phone line was not available and prevented staff from clocking in and/or clocking out of the EVV system.</td>
</tr>
<tr>
<td>400</td>
<td>The program provider, PSMSA or CSS employer will select this EVV Reason Code when the member’s mobile device could not be used to clock in and/or clock out of the EVV system.</td>
</tr>
<tr>
<td>101</td>
<td>The program provider, PSMSA or CSS employer will select this EVV Reason Code when an advanced mobile device could not be used to clock in and/or clock out of the EVV system.</td>
</tr>
<tr>
<td>200</td>
<td>The program provider, PSMSA or CSS employer will select this EVV Reason Code when an advanced alternative device could not be used to clock in and/or clock out of the EVV system.</td>
</tr>
</tbody>
</table>
**Reason Code Change: New Reason Code Example (Effective August 1, 2023)**

<table>
<thead>
<tr>
<th>No Electronic Clock In or Clock Out</th>
<th>Reason Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>210</td>
<td>A</td>
<td>Failure to clock in, clock out or both</td>
</tr>
<tr>
<td></td>
<td>B</td>
<td>Mobile device not available</td>
</tr>
<tr>
<td></td>
<td>C</td>
<td>Landline phone not available</td>
</tr>
<tr>
<td></td>
<td>D</td>
<td>Landline phone not registered in EVV system</td>
</tr>
<tr>
<td></td>
<td>E</td>
<td>Alt device value incorrect</td>
</tr>
<tr>
<td></td>
<td>F</td>
<td>Alt device not available</td>
</tr>
<tr>
<td></td>
<td>G</td>
<td>Alt device value expired</td>
</tr>
<tr>
<td></td>
<td>H</td>
<td>Authorized services provided in the community</td>
</tr>
<tr>
<td></td>
<td>I</td>
<td>Emergency</td>
</tr>
<tr>
<td></td>
<td>J</td>
<td>EVV system down</td>
</tr>
</tbody>
</table>

Free text is required to document the nature of emergency when using description, I - Emergency.

**EVV System Changes: Bill Time In/Bill Time Out**

*Bill Time In and Bill Time Out* fields exist in the vendor systems today; but starting August 1, they will be transmitted to the EVV Aggregator and:

- Will be required data fields for EVV vendor and proprietary systems
- Will be auto-populated from the EVV clock in and EVV clock out when present on the visit
- Must be entered by the system user when an EVV clock in and/or clock out is missing from the visit

The EVV system will not export, and the EVV Aggregator will not accept, the visit transaction without these fields populated.
### Example 1: A Valid Clock In & Clock Out

<table>
<thead>
<tr>
<th>EVV Clock In &amp; Clock Out</th>
<th>Bill Time In Bill Time Out</th>
<th>EVV Hours</th>
<th>Bill Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Service provider begins work at 7AM and clocks in</td>
<td>7:00 AM</td>
<td>7:00 AM</td>
<td>2</td>
</tr>
<tr>
<td>2. Service provider ends work at 9AM and clocks out</td>
<td>9:00 AM</td>
<td>9:00 AM</td>
<td></td>
</tr>
</tbody>
</table>

- EVV Hours are calculated by subtracting EVV Clock In from EVV Clock Out
- Bill Time In and Bill Time Out fields are populated automatically with the EVV Clock In and EVV Clock Out
- Bill Hours are calculated by subtracting Bill Time In from Bill Time Out, rounded to the nearest quarter hour increment

### Example 2: No Clock In, Valid Clock Out

<table>
<thead>
<tr>
<th>EVV Clock In &amp; Clock Out</th>
<th>Bill Time In Bill Time Out</th>
<th>EVV Hours</th>
<th>Bill Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Service provider begins work at 7AM but does not clock in</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>2. Service provider ends work at 9AM and clocks out</td>
<td>9:00 AM</td>
<td>9:00 AM</td>
<td></td>
</tr>
<tr>
<td>3. System User enters Bill Time In and EVV System calculates Bill Hours</td>
<td>N/A</td>
<td>7:00 AM</td>
<td>N/A</td>
</tr>
<tr>
<td>4. A Reason Code is required</td>
<td>9:00 AM</td>
<td>9:00 AM</td>
<td></td>
</tr>
</tbody>
</table>
EVV System Changes: Free Text Requirement

Once the Bill Time In and Bill Time Out fields are implemented, if a service provider fails to clock in and/or clock out during service delivery, the entry of the missing clock in and/or clock out times in the free text field will no longer be required.

Example of a missing clock in and clock out time entered in free text in an EVV system:

<table>
<thead>
<tr>
<th>Date: 05/01/2020 12:51PM</th>
<th>User: <a href="mailto:FMSAname@FMSA.com">FMSAname@FMSA.com</a></th>
</tr>
</thead>
<tbody>
<tr>
<td>Reason code: 900 Non-Preferred</td>
<td></td>
</tr>
<tr>
<td>Description: C - Failure to call in and out</td>
<td></td>
</tr>
<tr>
<td>Notes: Actual clock in was 11:06AM, actual clock out was 11:50AM</td>
<td></td>
</tr>
</tbody>
</table>

Texas Medicaid & Healthcare Partnership (TMHP) Modernization

TMHP
A STATE MEDICAID CONTRACTOR

Accenture
Business Operations and Integration

Conduent
Claims Processing

Deloitte
Application Maintenance and Development

Contractor TBD
EVV System Management Services

Subcontractor
EVV Vendor
Training, customer support, and business operations of the EVV Aggregator/Portal and the new claims system will be handled by Accenture State Healthcare Services, LLC.

The EVV Aggregator/Portal will interface with the new claims system provided by Conduent State Healthcare, LLC to support the existing EVV claims matching process.
Application maintenance and development for the EVV Aggregator/Portal will be handled by Deloitte Consulting LLP.

The EVV System Management Services contractor will oversee proprietary systems and a single state EVV vendor system. These EVV systems will integrate with HHSC’s existing EVV Aggregator/Portal system.
EVV System Management Services
Request For Offer

• Per Potential Electronic Visit Verification Changes Coming in 2023 | Texas Health and Human Services:
  • HHSC’s contract for the current Electronic Visit Verification vendor systems (AuthentiCare and Vesta EVV) is scheduled to expire on August 31, 2023.
  • On April 26, 2022, HHSC posted a competitive solicitation for EVV System Management Services.

Notification of contract award is anticipated in March 2023.

EVV System Management Services
Responsibilities

The selected Contractor’s responsibilities will include:
• Providing and managing a single EVV vendor system.
• Review and approval of provider-operated EVV proprietary systems.
• Coordinating EVV system integration with the EVV Aggregator.
• Providing operational and technical support for the functions listed above.

Responsibilities do not include managing Medicaid eligibility information, claims status checks or claims matching.
**EVV System Management Services**

**Procurement Information**

- HHSC, at its sole discretion, may publish updates about the anticipated award date to the Procurement Forecast on the [HHS Procurement Opportunities webpage](#). Respondents are responsible for periodically checking the ESBD and the HHSC Procurement Forecast webpage for updates.

- HHSC must maintain the confidentiality and integrity of the procurement process; therefore, no additional information is available at this time. HHSC will provide more information in future announcements.

- [Email questions about this solicitation to Andrick Reese](#).

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**TMHP Modernization Summary**

- HHSC understands the criticality of this transition. We know that providers rely on the EVV systems for daily business operations and to remain compliant with state and federal requirements.

- HHSC will communicate key milestones to stakeholders when this information is finalized.
Questions?

EVV Resources Summary

- HHSC EVV webpage
- Sign up to receive EVV email updates
- Personal Care Services Required to Use EVV
- Home Health Care Services Required to Use EVV
- HHSC EVV Policy Handbook
- HHSC EVV Training Resources webpage
- FAQs about the EVV HHCS Implementation (PDF)

- TMHP EVV webpage
  - TMHP EVV Proprietary Systems webpage
  - TMHP EVV Training
Thank You

Please submit questions to:
EVV@hhs.texas.gov