



Electronic Visit Verification (EVV) Introduction for Financial Management Services Agencies (FMSA)

EVV Basics

EVV is a computer-based system that electronically documents and verifies service delivery information, such as date, time, service type and location for certain Medicaid service visits. As required by [federal law](#), an FMSA must ensure the EVV vendor system or an [HHSC-approved EVV proprietary system](#) is used to electronically document the delivery of a service requiring EVV.

Getting Started with EVV

FMSAs must complete the following steps before using an EVV system:

- Step 1** → Select an EVV system
- Step 2** → [Complete all applicable EVV training](#) for [FMSAs](#)
 - EVV system training as delivered by the EVV Vendor or PSO
 - EVV policy training through the [HHSC Learning Portal](#)
 - EVV Portal training in the TMHP Learning Management System
- Step 3** → [Complete EVV system Onboarding](#)



HHSC EVV webpage

Visit Transactions (using EVV)

The following steps explain the steps of EVV and the process of [EVV visit transactions](#):

- Step 4** → CDS employees must clock in at the beginning of service delivery and clock out at the end of service delivery using an [approved clock in and clock out method](#).
- Step 5** → EVV system [captures and verifies](#) visit data and validates the identification and visit data with Texas Medicaid data. It then alerts FMSAs and CDS employers of [exceptions](#) in the EVV visit transaction and submits the EVV visit transaction to the [EVV Aggregator](#).
- Step 6** → EVV Aggregator conducts data validation and determines if the EVV visit transaction is accepted or rejected. It will store accepted EVV visit transactions for the [claims matching process](#) and store rejected EVV visit transactions, then return results to the EVV system.
- Step 7** → FMSAs and CDS employers complete [visit maintenance](#), as applicable, to resolve rejected visit transactions sent back by the EVV Aggregator, and add [reason codes](#) and [free text](#) as required. [FMSAs EVV Usage Score](#) is solely based on rejected visit transactions
- Step 8** → FMSAs use the EVV Portal to search and [review visit data](#), and verify EVV visit transactions are accepted prior to billing.
- Step 9** → FMSAs [submit EVV claims](#) to the appropriate claims management system.
- Step 10** → EVV The EVV Aggregator matches EVV claims to accepted EVV visit transactions and returns EVV [claims match result codes](#) to the claims management system and EVV Portal.

What Services Require the use of EVV? The lists of [Personal Care Services](#) and [Home Health Care Services](#) required to use EVV are located on the [HHSC EVV webpage](#).

Stay Updated on EVV Policy Changes and Upcoming Events All FMSAs must sign up for email updates via [GovDelivery](#). This only requires an email address.

Continuing Responsibilities The [EVV Policy Handbook](#) defines required tasks for [FMSAs](#).

Questions? The HHSC [Contact Information Guide for Program Providers and FMSAs](#) provides further instructions where to direct more in-depth inquiries. The [EVV Consumer Directed Services Option page](#) provides more detail on using EVV with the CDS Option.



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