

<u>Electronic Visit Verification (EVV) Introduction</u> for Program Providers

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 and state law, a service provider must use the EVV vendor system or an HHSC-approved EVV proprietary system to electronically document the delivery of an EVV-required service.

Program providers must complete the following before service providers can use an EVV system:

Step 1

Select an EVV system

Step 2

Complete all applicable EVV training for Program Providers

- EVV system training as delivered by the EVV Vendor or PSO
- EVV policy training through the HHSC Learning Portal
- EVV Portal through the TMHP Learning Portal
- Train <u>all staff</u> who will have access to EVV Portal and EVV system



HHSC EVV webpage

Step 3

Complete EVV system Onboarding

The following steps explain the steps of EVV and how the EVV system processes <u>EVV visit transactions</u>:

Step 4

Service providers 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 <u>captures and verifies</u> visit data and validates the identification and visit data against Texas Medicaid data. It will then notify program providers of <u>exceptions</u> in the EVV visit transaction and submit the EVV visit transaction to the <u>EVV Aggregator</u>.

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 <u>claims matching</u> <u>process</u> and store rejected EVV visit transactions, then return results to the EVV system.

Step 7

Program Providers complete <u>visit maintenance</u>, if necessary, to resolve rejected visit transactions sent back by the EVV Aggregator, and add <u>reason codes</u> and <u>free text</u> as required.

Step 8

Program Providers use the EVV Portal to search and <u>review visit data</u>, and verify EVV visit transactions are accepted prior to billing.

Step 9

Program Providers <u>submit EVV claims</u> to the appropriate claims management system.

Step 10

EVV Aggregator matches EVV claims to accepted EVV visit transactions and returns EVV claims match result codes to the claims management system and the EVV Portal.

Continuing Responsibilities The <u>EVV Policy Handbook</u> defines required tasks for <u>program providers</u>. The <u>Compliance Job Aid</u> provides tips on being compliant with EVV policy.

What Services Require the use of EVV? The lists of <u>Personal Care Services</u> and <u>Home Health Care Services</u> required to use EVV are located on the <u>HHSC EVV webpage</u>.

Stay Updated on EVV Policy Changes and Upcoming Events All Program providers must sign up for email updates via <u>GovDelivery</u>. This only requires an email address.

Questions? The HHSC <u>Contact Information Guide for Program Providers and FMSAs</u> provides further instructions where to direct more in-depth inquiries.



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