

# Electronic Visit Verification

## What is Electronic Visit Verification

Electronic Visit Verification (EVV) is a computer-based system that replaces paper timesheets. EVV:

- Electronically verifies authorized service visits that occur.
- Documents the date and time the service begins and ends.

EVV documents:

- The individual/member getting services
- Who is providing services
- The type of service performed
- FMSA/provider agency information
- Date and time the service begins and ends

# Why is EVV Required?

State and federal laws require EVV in Texas for certain Medicaid funded programs and services.

- Texas state laws and rules that require EVV:
  - [Texas Government Code §531.024172](#)
  - [Human Resource Code, Section 161.086](#)
  - [TAC, Title 1, Part 15, Chapter 354, Subchapter A, Division 11, Rule §354.1177\(d\)](#)
  - [TAC, Title 40, Part 1, Chapter 49, Subchapter C](#)
  - [TAC, Title 40, Part 1, Chapter 68](#)
- Federal state laws that require EVV:
  - Section 1903(I) of the Social Security Act as amended by [section 12006](#) of the 21st Century Cures Act ([Cures Act](#))

# What Services Require EVV

Programs, services and service delivery options affected by the 21st Century Cures Act.

Programs	Services	Service Delivery Options
Star Kids	<ul style="list-style-type: none"> <li>• CFC PAS</li> <li>• CFC HAB</li> <li>• PCS</li> </ul>	<ul style="list-style-type: none"> <li>• CDS</li> <li>• SRO</li> </ul>
Star Kids MDCP Covered Services	<ul style="list-style-type: none"> <li>• In-Home Respite</li> <li>• Flexible Family Supports</li> </ul>	<ul style="list-style-type: none"> <li>• CDS</li> <li>• SRO</li> </ul>

Programs and services currently required to use EVV.

Programs	Services	Service Delivery Options
Star Kids	<ul style="list-style-type: none"> <li>• CFC PAS</li> <li>• CFC HAB</li> <li>• PCS</li> </ul>	<ul style="list-style-type: none"> <li>• Agency</li> </ul>
Star Kids-MDCP Covered Services	<ul style="list-style-type: none"> <li>• In-Home Respite</li> <li>• Flexible Family Supports</li> </ul>	<ul style="list-style-type: none"> <li>• Agency</li> </ul>

For a full list click [here](#).

# EVV Rights and Responsibilities

Effective Nov 1, 2018 HHSC and MCO staff are required to notify Medicaid service recipients receiving EVV related services of their rights and responsibilities.

The EVV rights and responsibilities form states members rights and responsibilities for EVV.

- Some examples of member rights include:
  - Refusing to allow attendant to use your home telephone.
  - You have a right to ask for an interdisciplinary meeting or service plan team meeting with your health plan service coordinator.
  
- Some examples of member responsibilities include:
  - Allowing attendant to use EVV to clock-in and clock-out in one of the following ways: EVV mobile method, EVV alternative device or your home landline.
  - Notifying your provider agency if your attendant asks you to clock-in or clock-out of the EVV system for them.

CCHP Service Coordinators will review this form with members on initial visit and on their annual visit.

# EVV Systems

The **EVV system** allows a FMSA or a CDS employer to document the delivery of Medicaid services requiring EVV.

There are two types of EVV systems:

- EVV Vendor System
- EVV Proprietary System

**Note:** The CDS employer will use the EVV system selected by their FMSA.

# EVV Training Policy

EVV required training must be completed initially and once a year after.

The yearly training is based on when the initial training is completed.

FMSAs and CDS employers must maintain current records indicating completion of training requirements.

- [Training Policy](#)

# EVV Training Policy For CDS Employers

## EVV training requirements:

- EVV System Training: Conducted by EVV Vendor
- EVV Policy Training: Conducted by Payer (HHSC or MCO)
- Clock In/Clock Out Methods: Conducted by EVV Vendor

The clock in/clock out methods training is part of the EVV system training with the vendor or PSO.



# EVV Training Policy For CDS Employees

## EVV training requirements:

- Clock In/Clock Out Methods: Conducted by EVV Vendor

The clock in/clock out methods training is part of the EVV system training with the vendor or PSO. The EVV vendor is training the CDS employer. If the CDS employer needs more help, the EVV vendor will need to provide the help.

# EVV Training Policy-PSOs

FMSAs using their own EVV system assume responsibility for training all users. This training includes the clock in and clock out methods. The PSO, or who they choose, will need to provide training on their EVV system to:

- FMSA staff
- CDS employers
- HHSC staff
- MCO staff (if applicable)
- TMHP staff

[EVV Proprietary Systems Policy](#)

# EVV Schedules Policy

**The CDS option does not require the use of schedules.** The CDS employer has the option to either enter a schedule or not.

**Note:** The EVV vendor will provide instructions on the use of the EVV system with or without schedules.

[Schedules Policy](#)

# Using the EVV System

The FMSA and CDS employer can begin using the EVV vendor system once:

- An EVV system has been selected.
- All required training is completed.
- The onboarding process with an EVV system is complete, including entering all required identification data.

# EVV Data Collection Policy

The CDS employee clocking/in and clocking/out of the EVV system will generate the EVV visit data. This will have:

- Date and time of the service
- Location of the service

**The visit data will have** the person providing the service (service attendant) and the clock in/out information.

## EVV Data Collection Policy Continued

An **EVV Visit Transaction** is a complete, verified visit consisting of the date and time service delivery begins and ends matched with other required data elements that identify the Medicaid member, CDS employee, FMSA and payor.

**Note:** A visit that has missing or incorrect information will result in:

- Rejected EVV visit transactions
- Denied or recouped EVV claims
- Inaccurate EVV standards reports

# Electronic Methods Verification Policy

When a CDS employee provides authorized services to a Medicaid member in the home or community, the CDS employee must use one of three approved EVV methods to clock in and clock out.

- HHSC-approved EVV mobile method ([Mobile Application Policy](#))
- EVV Alternative Device ([Alternative Device Policy](#))
- CDS Employer's Home Phone Landline ([Home Phone Landline Policy](#))

# EVV Mobile Method

A mobile device or mobile device application used in the home or community to clock in when service delivery begins and clock out when service delivery ends.

To clock in and clock out of the EVV system, the CDS employee can use:

- Their own personal mobile device
- A mobile device provided by the FMSEA or CDS employer
- The CDS employer's mobile device.

**Note:** The mobile method is the only clock in/clock out method that can be used in the community.



# EVV Mobile Application Method

- The FMSA or CDS employer must update the EVV system when authorizing the use of a mobile method by a CDS employee.
  - If the mobile method is a smart phone application, the mobile application must be downloaded and registered with the EVV system.
    - This allows the CDS employee to be linked to the Medicaid member.
- The mobile device must be kept operational.
  - If the CDS employee is unable to clock in or out due to the mobile device not being operational another method must be used. If another method can't be used the visit must be manually entered. Manually entered visits are considered a failure to use the EVV system.
- Mobile application login credentials must not be shared.
  - Users must only access the mobile application using their own login credentials.

**Note:** The mobile method application cannot store Protected Health Information (PHI).

# EVV Mobile Application Method Cont.

The EVV mobile application:

- Only records the location at time of clock in and clock out.
- **Does not track** the location of the CDS employee, CDS employer, or Medicaid member before, during, or after the visit.
- May be used by the CDS employee if they live in the same home or apartment complex as the Medicaid member.
- May be used in the community.

## Mobile Method-Specifications

The mobile device must use the Apple iOS or Android operating system. Device must not be rooted or jailbroken.

- **Rooting:** Process of getting around Android's security architecture and gaining access to the Android operating system code.
- **Jailbreaking:** Process of removing the limitations put in place by a device's manufacturer.

**Note:** Contact the EVV vendor for a full list of mobile method specifications, including device types.

## User Liability if Using a Downloadable Mobile Method

HHSC, MCOs, TMHP and EVV vendors are not liable for:

- Any cost incurred while using the EVV mobile method.
- Any viruses on the device.
- A hacked, broken, damaged, or lost or stolen device.
- A non-working device.

## Member Home Landline Telephone

A method used to clock in and clock out of an EVV system by using the Medicaid member's home phone landline to call a toll-free number when service delivery begins and ends.

A Medicaid member has the option of allowing a CDS employee to use their home phone landline to clock in and clock out of the EVV system.

- The home phone landline must be located in the Medicaid member's primary residence.

## Member Home Landline Telephone Cont.

The CDS employee will call a toll-free number when clocking in and clocking out from the Medicaid member's home phone landline.

- CDS employees **must not use cell phones to call the toll-free number** when the Medicaid member's home phone landline has been designated as the call in and call out method.
- Cell phones can only be used for the EVV mobile method or to call in alternative device codes.

When the CDS employee calls in, the EVV system will match the phone number used by the CDS employee with the Medicaid member's home phone landline number entered into the EVV system.

- If the numbers do not match, the EVV system will reject the visit and the CDS employer or FMSA must perform visit maintenance to manually enter the visit.

## Member Home Landline Telephone Cont.

A Medicaid member's home phone landline must be physically connected to the Medicaid member's home and provided only at a specified address of the Medicaid member.

- The CDS employee may not use an unallowable phone type when the Medicaid member's home phone landline is the designated clock in/clock out method.
- An **unallowable** home phone landline type is a cell phone or cellular-enabled device or tablet.

## Unallowable Phone Types for Home Phone Landline

Example of unallowable types of mobile phone carrier options which offer **prepaid or pay** as you use cell phone plans include the following:

- AT&T
- Boost Mobile
- Cricket Wireless
- Metro PCS
- Spectrum (Time Warner)
- Sprint
- Straight Talk
- T-Mobile
- Verizon
- Virgin Mobile

[Allowable Phone Identification Policy](#)

## Unallowable Phone Types for Home Phone Landline Cont.

The CDS employee also must not use a cellular-enabled device or tablet; such as but not limited to:

- iPad Tablet
- Galaxy Tablet
- Smart Watch

**Note:** If an unallowable phone type is used, the visit is subject to recoupment.



# Monitoring Phone Type Usage

The FMSA or CDS employer must monitor the phone type usage when the clock in and clock out method is the Medicaid member's home phone landline.

- *The EVV Landline Phone Verification Report located in the EVV system will show the phone type.*

**Note:** The EVV vendor conducts monthly phone sampling of home landline numbers entered into the EVV system to verify that the number is a landline number and not a mobile phone number.

# Unavailable Home Phone Landline

The CDS employer should have the CDS employee use a mobile method, or order and place an alternative device in the home if the:

- CDS employer does not want the CDS employee to use the home phone landline to clock in or clock out.
- Medicaid member's home phone landline is frequently not available due to service interruption or use by the Medicaid member.
- Medicaid member does not have a home phone landline.

# EVV Alternative Device

An alternative device (AD) is a HHSC-approved device that generates codes indicating the date, clock in and clock out time in the EVV system.

## EVV Alternative Device Method Policy

**The alternative device must always remain in the home.**

- If the alternative device does not remain in the home, visits may be subject to recoupment and the payer may make a Medicaid fraud referral to the Office of Inspector General

**Note:** Alternative devices are provided directly to the CDS employer by the EVV vendor.

# Ordering an Alternative Device

Upon determining that an alternative device is needed, the FMSA or CDS employer has 14 calendar days to order a device from the vendor.

- CDS employers can place the order themselves, or request assistance from their FMSAs
- The EVV vendor will provide instructions on how to order and use an alternative device
- The EVV vendor has 10 business days to process and ship the alternative device. Depending on the shipping method, it may take additional days to deliver the order

The EVV vendor electronic ordering process allows FMSAs and CDS employers to:

- Order a new or replacement alternative device
- Track alternative device orders
- Manage, assign and un-assign alternative devices
- Manage shipping addresses

## Placing or Attaching the Alternative Device in the Home

The CDS employer will either place the alternative device in a specific location in the home or attach the alternative device to something in the home.

The alternative device should always be accessible to the CDS employee. For example:

- Kitchen Counter
- Coffee table
- Lockbox located in the garage or on the patio

**Note:** The EVV vendor will provide instructions on how to attach the alternative device in the Medicaid member's home.

## Requirement to Use the Alternative Device

The CDS employer must designate the alternative device as the clock in and clock out method if:

- There is no home phone landline available in the Medicaid member's home
- The Medicaid member will not allow the use of the home phone landline for clock in and clock out
- If the CDS employee is unable to use the mobile method to clock in and clock out

### Alternative Device Codes

- The CDS employer must train the CDS employee in the use of the alternative device and explain the process for using the device to document the clock in and clock out time
- CDS employees must document the codes generated by the alternative device and call in the codes within seven calendar days

**Note:** The **codes will expire seven** (7) calendar days after the date of the visit.

# Calling in Alternative Device Codes

The CDS employee must call a toll-free number to enter the codes. Or, the FMSA, CDS employer may enter the codes into the EVV system.

- The CDS employee's personal cell phone may be used to call in alternative device codes; or if the CDS employer allows it, the CDS employer's home phone landline

**Note:** Once the codes have expired, the visit must be manually entered into the EVV system and the payer will consider the visit as a **failure to clock in and/or clock out of the EVV system.**

# Multiple Clock In/Clock Out Methods

EVV policy allows the CDS employee to use multiple clock in/clock out methods for a service delivery visit.

For example:

- The CDS employee can clock in using the designated clock in/clock out method of the Medicaid member's home phone landline. If the CDS employee also has the mobile application, they can clock out using the mobile method.



# EVV Usage Policy

The HHSC EVV Usage Policy specifies that HHSC or MCOs will monitor the number of manual EVV visit transactions and the number of rejected EVV visit transactions recorded by the FMSA or CDS employer.

- Failure to clock in and clock out of the EVV system and EVV visit transaction errors will negatively impact the quarterly EVV Usage Score

**Note:** The CDS employer is ultimately responsible for the CDS employee clocking in and clocking out.

[EVV Usage Policy](#)

# EVV Usage Policy Cont.

If the CDS employee fails to clock in or clock out using one of the approved clock in and clock out methods, the FMSA or CDS employer must:

- Manually enter the visit into the EVV system by:
  - Completing visit maintenance and
  - Adding the most appropriate EVV reason code

**Note:** Failure to complete all visit maintenance prior to submitting an EVV claim will result in the denial or recoupment of the EVV claim.

# EVV Usage Policy Cont.

If a member temporarily loses Medicaid eligibility or the service authorization has been suspended, and the FMSA chooses to continue services, the CDS employee must still clock in and clock out using the EVV system.

- Any required visit maintenance must also be completed during this time

**Note:** The FMSA cannot bill the services until the eligibility or authorization is reinstated as required by Medicaid eligibility.

# Clocking in and Clocking Out

The EVV systems allows:

## **Multiple CDS Employees**

- Two or more CDS employees to provide services for one CDS employer at the same time

## **Companion Cases**

- One CDS employee to provide services to more than one CDS employer at the same time

# Companion Case Example

When two or more people receive services from the same CDS employee in the same home, the CDS employee must use the EVV system to clock in and clock out for each person. For example:

CDS employee Jane provides services to Bob Jones 8-11am, and Mary Jones, 11am-1pm.

- Jane will need to use EVV to clock in at 8am and clock out at 11am to document service delivery for Bob Jones
- Jane will also need to use EVV again to clock in at 11am and clock out at 1pm to document service delivery for Mary Jones

# EVV Services in the Community

When a CDS employee begins or ends EVV service delivery outside the home, the CDS employee must still use the EVV system.

- Depending on the clock in/clock out method, this may require written documentation by the CDS employee on the time services began and/or ended and require the FMSA or CDS employer to perform visit maintenance

Note: The only clock in and clock out method available for clocking in and clocking out in the community is the EVV mobile method.

If the CDS employer receives services in more than one location, the FMSA or CDS employer must work with the EVV vendor on the most appropriate clock in and clock out method to use at the different locations.

For example, the CDS employer receives services at their residence, but 1 week out of the month they receive services at their daughter's residence.

- Contact your EVV vendor for additional questions, training, or for assistance in determining the method to use when a CDS employee provides EVV services in the community

# Non-Relevant EVV Services

There are some services that are not required to use EVV, such as transportation.

These services are referred to as non-relevant EVV services.

CDS employers will continue to follow program policy on documentation requirements for non-relevant EVV services.

- It is up to the CDS employer to decide how CDS employee is to clock in and clock out of the EVV system when performing both EVV services and non-relevant services

# Non-EVV Relevant Time Report

Non-EVV time deducted from visits will show up on the **Non-EVV Relevant Time Report** located in the EVV system.

- The report only identifies time associated with non-EVV services. It does not identify the specific non-EVV service(s) (e.g. transportation) associated with that time

**Note:** If a CDS employee is providing two non-EVV services during a visit, the report will combine both services.



# Verifying Visit Data

The FMSA or CDS employer must ensure that each EVV visit transaction in the EVV system is:

- Complete
- Accurate
- Validated

This is done by reviewing the EVV visits captured in the EVV system to verify that the required EVV visit data elements are accurate and complete.

# Verifying Visit Data Cont.

When the CDS employee clocks in or clocks out, the EVV system will capture the:

- Date and Time
- Member ID
- Attendant ID
- Location of the clock in and clock out

If any of these data elements are missing or incorrect, the EVV system will alert the CDS employer and FMSEA of the exception(s). The CDS employer must clear all exceptions before the EVV visit transaction can be verified.

# EVV Visit Maintenance Definition

**EVV Visit Maintenance:** The process of modifying data in the EVV system to accurately reflect the delivery of service.

- Visit maintenance in the EVV system must be performed by the CDS employer or their FMSEA

The CDS employer must indicate the EVV visit maintenance responsibilities on the Form 1722 CDS Employer's Selection for EVV Responsibilities.

# EVV Visit Maintenance Responsibilities

**Form 1722** list the following options:

- **Option 1:** The CDS employer will perform all required visit maintenance within the EVV system using their own computer or other electronic device and will approve their attendant's time worked in the EVV system
- **Option 2:** The CDS employer will have their FMSA complete all required EVV visit maintenance on their behalf; however, the CDS employer will approve their attendant's time worked in the EVV system
- **Option 3:** The CDS employer will have their FMSA complete all required EVV visit maintenance AND confirm their attendant's time worked in the EVV system based on approval documentation from the CDS employer
- [1722.pdf](#)

## EVV Visit Maintenance Responsibilities Cont.

If the CDS employer elects to have the FMSA complete the EVV visit maintenance on their behalf, the CDS employer **must** give final approval on the visit maintenance performed.

- The CDS employer is ultimately responsible for ensuring the visit maintenance is accurate and complete before giving approval

**Note:** The FMSA confirmation on the Form 1722 indicates the CDS employer has approved the visit.

## EVV Visit Maintenance

The FMSA can modify the identification data and certain data elements of the EVV visit transaction. Identification data the FMSA may modify includes the:

- FMSAs data
- Medicaid member's (Person's) data
- CDS employee's data
- Type of service performed

**Note:** The CDS employer can modify certain data elements of the EVV visit transaction, but not the identification data.

## EVV Visit Maintenance Policy

The FMSA and CDS employer cannot change the following visit data when performing visit maintenance. The visit data elements that cannot be changed when performing visit maintenance are:

- Member ID
- Clock in time
- Clock out time
- Visit date
- Existing reason codes (a new reason code can be added, but not removed) or free text

## EVV Visit Maintenance Policy Cont.

The CDS employer or FMSA may adjust the pay hours (bill hours) during visit maintenance to indicate the actual time worked that the FMSA intends to bill.

Manually entering pay hours into the EVV system is known as a graphical user interface (GUI) visit transaction.

The pay hours:

- Must be entered if there is a missing clock in or clock out
- May be downward adjusted, as needed
- May not be greater than the actual hours worked (Based on clock in and clock out times)

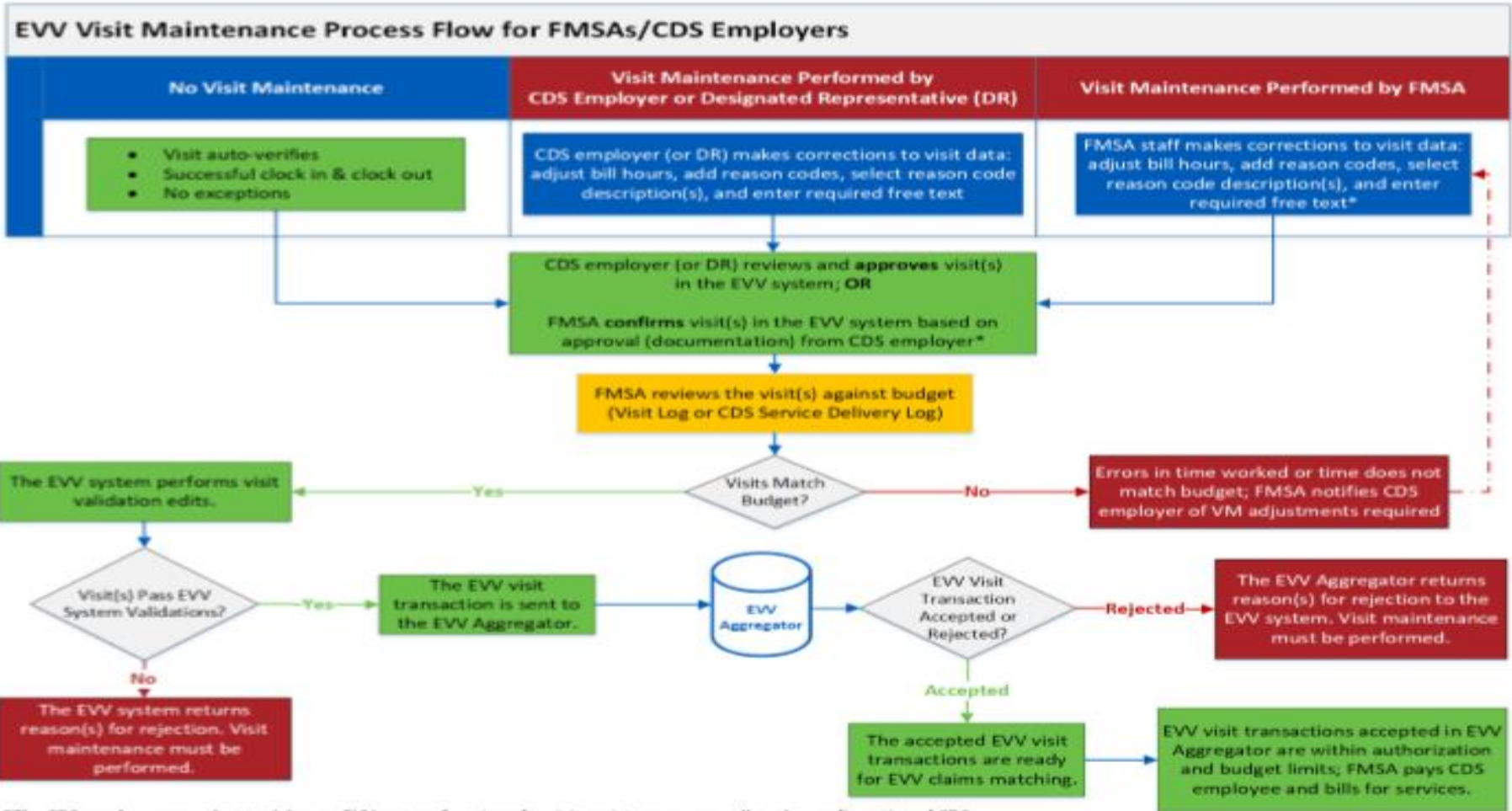
Visit maintenance must be completed prior to submitting an EVV claim.

- EVV claims are subject to denial or recoupment if they are submitted before all required visit maintenance has been completed in the EVV system

**Note:** If visit maintenance is required after a claim has been submitted, then do the visit maintenance in the EVV system and resubmit the claim.



# EVV Visit Maintenance Process Flow



\*The CDS employer may elect to delegate EVV system functions for visit maintenance as well as the confirmation of CDS employee time worked to the FMSA via Form 1722. The FMSA confirmation indicates the CDS employer has approved the visit.

## Last Visit Maintenance Date Policy

Payers will compare the last visit maintenance date and time on the EVV visit transaction to the date and time the claims management system received the EVV claim. This comparison will indicate if all visit maintenance was completed before the EVV claim was submitted.

- After the EVV visit has occurred, changes to certain fields on the EVV visit transaction will change the last visit maintenance date and time
- Once a change is made and saved, the EVV system will update the EVV visit transaction to reflect the:
  - Last Visit Maintenance Date
  - Time of the change

## Last Visit Maintenance Date Policy Cont.

After the visit occurs, changes to any of the following fields will change the Last Visit Maintenance Date recorded in the EVV visit transaction:

- NPI
- API
- Contract Number
- CDS Employer's Medicaid Number
- Service Group
- Service Code
- HCPCS Code
- Modifiers
- Pay Hours
- Units
- Adding a Reason Code
- Adding a Reason Code Description
- Entering a Reason Code Comment

## Last Visit Maintenance Date Policy Cont.

Visit maintenance must be completed prior to submitting an EVV claim for payment.

- If the last visit maintenance date is after the EVV claim receipt date, the claim is subject to recoupment
- The last visit maintenance date may be viewed on the EVV Visit Log Report and the EVV Visit Details screen located in the EVV Portal
- The EVV claim receipt date is the date the TMHP claims system receives the claim submitted by the FMSA or their third-party biller

[Visit Maintenance: Last Visit Maintenance Date Policy](#)

## Last Visit Maintenance Timeframe

Visit maintenance must be completed within 60 calendar days from the date of the visits.

- After 60 days, the visit is locked and cannot be edited unless written approval is received by the payer

**Note:** Making corrections to visit transactions after 60 days will not change any type of action taken during a monitoring review, because the required information was missing or incorrect during the review period.

## EVV Visit Maintenance Timeframe Cont. (Temporary Policy)

Effective Dec. 1, 2020; the EVV Visit Maintenance Time Frame Policy will be temporarily changed to 90 calendars days from the date of the visit.

The temporary policy change is from:

Dec.1, 2020-Feb.28, 2021

- This will allow FMSAs and CDS employers/DRs time to become familiar with using visit maintenance

# Request to Unlock EVV Visit Maintenance

After the 60 or 90 day time frame:

- The FMSA or CDS employer must contact their payer to request visit maintenance be unlocked
- Approvals and denials to unlock visit maintenance are processed in the order they are received, at the payer's discretion and determined on a case-by-case basis
- Requests may take up to two weeks to complete and there are no expedited requests

## Request to Unlock EVV Visit Maintenance Cont.

For an unlock request, the FMSA or CDS employer, via a secure email, must submit the following documents to the payer listed on the visit transaction:

- A completed EVV Visit Maintenance Unlock Request Spreadsheet that can be downloaded from the payer website or the HHSC EVV website
- All supporting documentation related to the visit maintenance unlock request

[Visit Maintenance Unlock Request](#)



## Request to Unlock EVV Visit Maintenance Cont.

The FMSA or CDS employer must include the required subject line of “Visit Maintenance Unlock Request” in the email.

- **Requests must be sent by secure email**
  - Requests not sent securely could result in a Health Insurance Portability and Accountability Act (HIPPA) violation and the **payer will deny the request**

For more information on Request to Unlock EVV Visit Maintenance and time frames, please see the [EVV Visit Maintenance Unlock Request Policy](#) located on the HHSC EVV website.

# EVV Reason Codes

EVV visit maintenance to clear an exception on an EVV visit transaction will require the use of EVV reason codes.

[EVV Reason Codes](#) are standardized HHSC-approved codes used during visit maintenance to explain the specific reason a change was made to an EVV visit transaction

HHSC EVV reason codes are found on the HHSC EVV website.

## EVV Reason Code Policy

The HHSC EVV Reason Code and Required Free Text Policy requires FMSAs or CDS employers to do the following when performing visit maintenance in the EVV system:

- Select the most appropriate EVV reason code number(s)
- Select reason code description option(s)
- Enter any required free text when performing visit maintenance in the EVV system
- More than one reason code and reason code description may be used

### [Reason Code and Required Free Text Policy](#)

## Clearing Exceptions with EVV Reason Codes

There may be more than one exception in the EVV system for an EVV visit transaction.

FMSAs or CDS employers must clear all exceptions before the EVV visit transaction will be exported to the EVV Aggregator.

# EVV Reason Codes

Reason Code	Number	Reason Code Description
Overnight Visit (if applicable)	000	This reason code is a system-generated reason code used by the EVV vendor when the EVV system auto-generates a clock out at 11:59 pm and a clock in at 12:00 am for overnight visits. This reason code is not available for program provider use.

# EVV Reason Codes Cont.

Reason Code	Number	Reason Code Description
<b>Service Variation</b>	100	The program provider will select this reason code and the appropriate reason code description when acceptable service variations occur.
Free text is required for A-J if any missing actual clock in or clock out time is not electronically captured by the EVV system.		A-Staff hours worked differ from schedule
		B-Downward adjustment of pay hours
		C-Authorized services provided outside of home
		D - Fill-in for regular attendant
		E - Member agreed or requested staff not work
		F - Attendant failed to show up for work
		G-Confirm visits with no schedule
		H-Overlap visits
		I-Split schedules
		J-In-home respite: used when an in-home respite visit occurs and there is no schedule in the EVV system

# EVV Reason Codes Cont.

Reason Code	Number	Reason Code Description
<b>Disaster</b>	130	The program provider will select this reason code and the appropriate reason code description when all or part of the scheduled services were unable to be delivered due to a natural disaster.
Free text is required for A-F if any missing actual clock in or clock out time is not electronically captured by the EVV system.	A- Flood	
	B- Hurricane	
	C- Ice/snow storm	
	D- Tornado	
	E- Wildfire	
	F- Public Health Disaster	

# EVV Reason Codes Cont.

Reason Code	Number	Reason Code Description
<b>Emergency</b>	<b>131</b>	<p>The program provider will select this reason code when all or part of the scheduled services were unable to be delivered due to an emergency with the member.</p> <p>Free text is required: The provider must document any missing actual clock in or clock out time not electronically captured by the EVV system</p>
<b>Alternative Device</b>	<b>200</b>	<p>The program provider will select this reason code and the appropriate reason code description when an assigned alternative device could not be used to clock in and/or clock out.</p>
		A-Alt device ordered
		B-Alt device pending placement
		C-Alternative device missing
		Free text is required for A-C if any missing actual clock in or clock out time is not electronically captured by the EVV system.



# EVV Reason Codes Cont.

Reason Code	Number	Reason Code Description
<b>Mobile Device</b>	201	The program provider will select this reason code and the appropriate reason code description when an assigned mobile device could not be used to clock in and/or clock out.
		A-Mobile device ordered
		B-Mobile device pending placement
		C-Mobile device missing
		Free text is required for A-C if any missing actual clock in or clock out time is not electronically captured by the EVV system.

# EVV Reason Codes Cont.

Reason Code	Number	Reason Code Description
<b>Technical Issues</b>	300	The program provider will select this reason code and the appropriate reason code description when technical issues prevented staff from clocking in and/or clocking out of the EVV system.
Free text is required for A-H if any missing actual clock in or clock out time is not electronically captured by the EVV system.		A-Phone lines not working
		B-Malfunctioning alternative device
		C-Incorrect alternative device value
		D - Incorrect employee ID entered
		E - Incorrect member EVV ID entered
		F - Malfunctioning mobile device/application
		G-Multiple calls for one visit
		H-Reversal of call in/out time

# EVV Reason Codes Cont.

Reason Code	Number	Reason Code Description
<b>Landline Not Accessible</b>	400	The program provider will select this reason code and the appropriate reason code description when the member's home landline phone was not accessible, which prevented staff from clocking in and/or clocking out of the EVV system.
Free text is required for A-C if any missing actual clock in or clock out time is not electronically captured by the EVV system.		A-Member does not have home phone
		B-Member phone unavailable
		C-Member refused staff use of phone
<b>Service Suspension</b>	500	The program provider will select this reason code when the member's services are suspended.

# EVV Reason Codes Cont.

Reason Code	Number	Reason Code Description
<b>Other</b>	600	<p>The program provider will select this reason code when an EVV system exception cannot be addressed using any other reason codes and reason code descriptions.</p> <p>Free text is required: The provider must document any missing actual clock in or clock out time not electronically captured by the EVV system</p>
<b>Non-Preferred</b>	900	The program provider will select this reason code and the appropriate reason code description when staff failed to clock in and/or clock out of the EVV system.
Free text is required for A-D if any missing actual clock in or clock out time is not electronically captured by the EVV system.		A-Failure to call in
		B-Failure to call out
		C-Failure to call in and out
		D – Wrong phone number

## Misuse of EVV Reason Codes Policy

Using the same EVV reason code number and reason code description option for the same CDS employer more than 14 days within a calendar month may constitute misuse of reason codes.

- If this happens, the FMSA or CDS employer must document the situation in the free text field
- Documentation is required starting on the 15th day the same EVV reason code number and same reason code description are used and each day after that when they are used

## Free Text Policy

The reason codes below also require free text

- **Reason Code 131-Emergency:** Describe the nature of the emergency and document any missing actual clock in or clock out time
- **Reason Code 600-Other:** Document the reason for using “other” and document any missing actual clock in or clock out time

## Free Text Policy Cont.

If there is not a clock in and/or a clock out, the FMSEA or CDS employer must:

- Verify the actual time worked and document the missing actual clock in time and/or clock out time in the free text field.

Examples of required free text when the clock in/out is missing:

- “Actual clock in was 8:05am” or “8:05a”
- “Clock out was 1pm” or “1p”
- “Actual clock in was 10am, and actual clock out was at 4pm” or “10a-4p”

## Reason Codes with Graphical User Interfaces

When the CDS employee does not clock in and/or not clock out, EVV visit maintenance will need to be completed using an EVV reason code.

- Manually entering pay hours into the EVV system is known as a graphical user interface (GUI) visit transaction

**Note:** The pay hours cannot be adjusted to an amount greater than the actual hours worked.



## Visit Maintenance Adjusting the Pay (Bill) Hours

The FMSA or CDS employer may adjust the pay (bill) hours to indicate the actual time worked. For example, if the CDS employee forgets to clock out.

The pay hours:

- Must be entered if there is a missing clock in or clock out
- May be downward adjusted, as needed
- May not be greater than the actual hours worked

## Visit Maintenance Completed

Once visit maintenance is complete and all exceptions are cleared, the EVV system will perform final validations before sending the EVV visit transaction to the EVV Aggregator.

The EVV system sends EVV visit transactions to the EVV Aggregator on a nightly basis.

## How to reduce Visit Maintenance

EVV system solutions have been implemented to help reduce visit maintenance, increase auto-verified visits and provide more flexibility for clocking in and out.

- For more information on the visit maintenance reduction solutions, please see the [EVV Provider Policy Handbook Section 4200 Visit Maintenance.](#)

## EVV Visit Maintenance

The EVV system combines the **identification data** with the **visit data** and creates an **EVV Visit transaction**.

- **EVV visit transaction:** a complete, verified visit consisting of all required data elements needed to verify a service delivery visit

# EVV Visit Transaction Cont.

## Identification data:

Provider or FMSEA  
the Service

Type of Service Performed

Member Receiving the Service

Person Providing the Service

## Visit data:

Date and Time of  
Location of the Service

- **EVV visit transaction:** a complete, verified visit consisting of all required data elements needed to verify a service delivery visit

## EVV System Visit Validations

The EVV system validation ensures the identification data and visit data is in the correct format and all required information is entered.

After a visit is completed and prior to exporting a complete, accurate and verified EVV visit transaction to the EVV Aggregator, the EVV system will compare the visit data against:

- A pre-existing schedule, if a schedule is entered (Schedules are optional for the CDS option)
- Existing identification data specific to the CDS employer

**Note:** Data entries are compared to Texas Medicaid data.

## EVV System Visit Validations Cont.

If the visit data **passes** the EVV system validations edits, the:

- EVV visit transaction is forwarded to the EVV Aggregator for further business validations.

If the visit data **fails** the EVV system validations edits:

- EVV system will generate exceptions
- EVV visit will not auto-verify and the EVV visit data will stay in the EVV system
- FMSAs or CDS Employers will be notified via a report of the EVV exceptions
- FMSAs or CDS Employers will need to go into the EVV system and perform visit maintenance

**Note:** Exceptions must be cleared before the EVV visit transaction can be submitted to the EVV Aggregator.

# EVV System Rejection Edits

Some examples of rejection edits are listed below.

Failure Reason	Failure Reason Description
Ex0002A-NPI is Missing or Invalid	The provider NPI is missing or the length is more than or less than 10 digits.
Ex0003A-The Provider API on the EVV visit is not in a valid 10-character API format.	The Provider API is missing, or the length is more than or less than 10 digits.
Ex00025B-Invalid Employee EVV User ID	The EVV visit record was manually verified but the Employee User ID is missing.
Ex00058B-HCPCS Code is missing or Invalid	The HCPCS code assigned to the EVV visit record is missing or invalid



# EVV Rounding Rules

It's important to be familiar with EVV rounding rules for billing purposes and how the EVV system applies the rounding rules.

- The EVV system applies the rounding rules to the total duration of the actual hours worked by rounding the total hours worked to the next quarter hour
- By system default, pay hours are equal to actual hours based on the clock in and out times
- Pay hours can be adjusted down if the FMISA or CDS employer wants to bill for fewer hours than were logged on the visit

# EVV Rounding Rules on Billed Units

EVV services are billed in quarter-hour increments, (0, 15, 30, or 45 minutes past the hour).

The EVV system rounds:

- Up to the next quarter-hour when the total actual time worked is 8 minutes or more
- Rounds down to the previous quarter hour when the total actual time worked is 7 minutes or less

Ex:

1. A CDS employee works 2 hours and 53 minutes for a scheduled shift, the adjusted pay hours will **round up** to 3 hours.
  - The CDS employee worked 2 hours, 45 minutes, plus 8 minutes
2. A CDS employee works 2 hours and 52 minutes, the adjusted pay hours will **round down** to 2.75 hours.
  - The CDS employee worked 2 hours, 45 minutes, plus 7 minutes

# EVV System Standard Reports

The reports located in the EVV system will be available to:

- FMSAs
- CDS employers
- HHSC staff
- MCOs staff

# EVV System Standard Reports Cont.

The EVV system standard reports are listed below.

- **EVV Alternative Device Order Status Report**

Used to verify that alternate devices have been ordered and to track the status of those orders.

- **EVV CDS Service Delivery Log**

Displays EVV visit data for CDS visits for a requested date range.

- **EVV Landline Phone Verification Report**

Used to verify the use of an unallowable phone type when a provider has selected the member's home phone landline method as the clock in and clock out method.

- **Non-EVV Relevant Time Report**

Displays time that was spent on non-EVV services between clock in and clock out for a requested date range.

# EVV Vendor Ad-Hoc Reports

The EVV vendor must provide ad-hoc reporting of data available in the EVV vendor system at no additional cost to the FMISA or CDS employer, DR or LAR

- Ad-hoc reports are not considered EVV standard reports and cannot be used for contract oversight monitoring; such as contract monitoring reviews
- For questions regarding EVV vendor Ad-hoc reporting, contact the EVV vendor

# EVV Reports Questions

For questions on EVV reports, contact the following:

- How to use the EVV Portal, contact [EVV@TMHP.com](mailto:EVV@TMHP.com)
- How to access EVV Standard Reports from the EVV system, contact your EVV vendor
- For EVV policy on reports, contact HHSC or your MCO

# Compliance Oversight Reviews Policy

The EVV Compliance Oversight Reviews are conducted by HHSC and MCOs to ensure EVV policies and requirements are being met. The reviews will be on a regular basis and consist of:

- EVV Usage Reviews
- Misuse of EVV Reason Codes and Required Free Text Review
- EVV Allowable Phone Identification Reviews

## Compliance Oversight Reviews Policy

# EVV Usage

Payers conduct usage reviews to ensure the EVV system is being used and EVV visit maintenance is being conducted.

EVV usage review, looks at the:

- **Manual entry of bill (pay) hours** into an EVV system through graphical user interface (GUI) transactions
- **Rejected EVV visit transactions**
  - A rejected EVV visit transaction is an EVV visit transaction rejected by the EVV Aggregator because it does not pass EVV visit validation edits

FMSAs and CDS employers will need to confirm that data entered into the EVV system is complete and correct to avoid rejections by the EVV Aggregator

- The EVV system will assist FMSAs and CDS employers by identifying incomplete or incorrect data and providing alerts that require the FMSAs or CDS employers to make updates prior to the data being submitted



# EVV Usage Report

HHSC and MCOs will use the EVV Usage Report (located in the EVV Portal) to determine the EVV Usage Score for each FMSA contract.

- This report will show the EVV Usage Score for the preceding quarter and is available for up-to-date monitoring

Note: This report can be used by the FMSA to monitor the FMSAs EVV Usage Score.

- The report can be pulled in Excel format and filtered

# EVV Usage Compliance Score

FMSAs must achieve and maintain a minimum EVV Usage Score of 80 percent, rounded to the nearest whole percentage point, per quarter, unless otherwise notified by HHSC or their MCO.

# EVV Usage Review Period

The EVV usage review consists of all visits with dates of service within the state's fiscal year quarters. Payers will post the review start date on their websites ninety days prior to the start of the review.

Quarter#	Review Period (based on date of visit)	EVV Usage Review may Begin On or After
1	September, October, November	February 5
2	December, January, February	May 5
3	March, April, May	August 5
4	June, July, August	November 5

## EVV Reason Codes and Required Free Text

The HHSC EVV Reason Code and Required Free Text Policy requires the selection of the most appropriate EVV reason code number, reason code description and the entry of any required free text when performing visit maintenance in the EVV system.

Payers will monitor:

- Misuse of EVV reason code numbers and reason code description options
- Failure to enter required free text

## **EVV Reason Code Usage and Free Text Report**

The EVV Reason Code Usage and Free Text Report will display the EVV reason code number, reason code description and any free text entered on accepted EVV visits transactions during a specified month, sorted by each FMSAs contract number.

- Report can be pulled in excel format and filtered

# EVV Allowable Phone Identification

Monitoring for unallowable phone types in the EVV system will take place.

- The FMSAs and CDS employers must monitor the phone type usage when the clock in and clock out method is the member's home phone landline

## EVV Allowable Phone Identification Policy

# EVV Landline Phone Verification Report

The EVV Landline Phone Verification Report is available in the EVV system for up-to-date monitoring of unallowable phone types.

- If you require assistance in locating or generating the EVV Landline Phone Verification Report, contact the EVV vendor or Proprietary System Operator

Note: Refer to the [EVV Compliance Oversight Reviews policy](#) for additional information.

# Written Notice From Payer

If written notice of an unallowable phone type for a member is received, appropriate action must be taken within **20 business days** from receipt of the written notice.

When a written notice is received from the payer, the appropriate action to take is:

- Use an allowable phone type
- Select a different EVV call in and call out method such as the EVV mobile method or the EVV alternative device
- Submit supporting documentation to HHSC showing the phone number identified is not an unallowable phone type

If a FMSA or CDS employer fails to take appropriate action within twenty business days, enforcement actions may result.

- Refer to the [EVV Compliance Oversight Reviews](#) policy for additional information



# Compliance Calculations

The manual visit score plus the rejected visit score equals the EVV Usage Score for the quarter.

**Manual Visit Score + Rejected Visit Score = EVV Usage Score**

## EVV Compliance Reviews Grace Periods

The EVV compliance grace period will be from:

- Dec. 1, 2020 through Nov. 30, 2021. During the grace period, contract action will not be taken against FMSAs who do not meet the EVV compliance scores

**Note:** There is no grace period for documenting required free text.

# During Grace Period for FMSAs

During the grace period, FMSAs will have the opportunity to:

- Review the EVV Reason Code Usage and Free Text Report to ensure the EVV system is being used per policy
- Ensure any required visit maintenance is completed before submitting EVV claims
- Provide training/re-train if needed on using the most appropriate EVV reason codes, EVV reason code descriptions, to staff, and if applicable CDS employers

**Note:** Payers may send notification of misuse as a training tool only, but no action will be taken.

# EVV Fraud, Waste and Abuse

If a FMSA or CDS employer is not compliant with the EVV policies and requirements, it could result in a referral to the HHSC Inspector General for Medicaid fraud, waste and abuse.

- If you suspect Medicaid fraud, waste or abuse please report it to the HHSC Inspector General online or by calling their toll-free fraud hotline at 800-436-6184

Examples of fraud include, but is not limited to:

- Refusing to use the EVV system
- Billing for services which were not provided
- Filing false claims
- Continuing inappropriate billing after provider education visits
- Using improper billing practices

# Monitor Final Claim Adjudication

Once the claim is submitted it's a good idea to monitor final claim adjudication from your payer by checking the:

- Explanation of Benefits (EOB);
- Explanation of Payment (EOP); or
- Billing exception report

If the EVV claim was denied, check the reason for denial and contact the payer for the EVV claim.

**Note:** The EVV claim may be denied for other reasons not related to EVV

# Recap: Getting Started with EVV

FMSAs, CDS employers and CDS employees complete all required EVV training before Dec. 1, 2020.

- EVV Policy Training
- EVV Portal Training
- EVV System Training

# Recap: Getting Started with EVV Cont.

FMSAs, CDS employers and CDS employees begin using the EVV system.

## **Practice period July 1-Nov. 30, 2020**

- CDS employers ensure CDS employees clock in and clock out using the EVV system
- Perform any required EVV visit maintenance in the EVV system
- CDS employers pull/review reports in the EVV system
- FMSAs pull/review reports in the EVV Portal and the EVV system
- FMSAs submit claims to TMHP and view claim matching results in the EVV Portal

# EVV Resources

- All resources are located on the EVV website:  
<https://hhs.texas.gov/doing-business-hhs/providerportals/long-term-care-providers/resources/electronic-visitverification>
- <http://www.cookchp.org/English/Providers/Pages/Electronic-Visit-Verification.aspx>
- EVV Acronyms/Glossary
- EVV Computer Based Training (CBT): [HHS Learning Portal](#)
- [EVV Contact Information Guide](#)
- Cook Children's Health Plan EVV Mailbox:  
[CCHPEVV@cookchildrens.org](mailto:CCHPEVV@cookchildrens.org)
- HHSC EVV Mailbox: [electronic\\_visit\\_verification@hhsc.state.tx.us](mailto:electronic_visit_verification@hhsc.state.tx.us)

**Note:** Important to check Cook Children's Health Plan website often for EVV notices.