

Blue Cross and Blue Shield of Texas, a Division of Health Care Service Corporation, a Mutual Legal Reserve Company, an Independent Licensee of the Blue Cross and Blue Shield Association

Revised 04/03/2023

Training Instructions

- This is a biannually 30-minute training sessions
- Our training is Instructor led
- Training is for Texas Medicaid Providers, FMSAs, and CDS Employers and all have the option to attend. The usage score is a part of their EVV Compliance.
- We reference the links to the VMUR forms and where they are located on our website to educate.
- Registration is required via Teams Meeting to attend the training and will track training completion for attendees.
- Currently no assessment is included in the training.

Overview of Training

- EVV Basic Program Highlights
 - EVV Training Requirements Checklists (PDF)
- EVV Key Terms and Definitions
- EVV Federal/State Rules
- EVV Policies
- EVV Compliance Review Areas
- Blue Cross and Blue Shield of Texas (BCBSTX) EVV Website and Resources
- BCBSTX EVV Contact Information

EVV Program Highlights

- Electronic Visit Verification (EVV) is a computer-based system that electronically documents and verifies service delivery information, such as date, time, service type and location of certain Medicaid service visits.
- Electronic Visit Verification allows for verification of the following critical data elements relating to the delivery of Medicaid services:
 - The type of service provided
 - The name of the recipient to whom the service is provided
 - The date and times the provider began and ended the service delivery visit
 - The location, including the address, at which the service was provided
 - The name of the individual who provided the service
 - Other information the commission determines is necessary to ensure the accurate adjudication of Medicaid claims
- EVV Training Requirements Checklists (PDF)

Key Terms and Definitions

Term	Acronym	Definition	
21st Century Cures Act	Cures Act	The 21st Century Cures Act is a federal law enacted by the U.S. Congress in December 2016. This law requires all states to use EVV for Medicaid personal care services (PCS) and home health care services (HHCS) requiring an in-home visit that are provided under a State plan or under a waiver of the plan.	
EVV Aggregator		A centralized database that collects, validates, and stores statewide EVV service delivery data transmitted by an EVV system	
EVV Compliance Oversight		A set of standards established by the Texas Health and Human Services Commission (HHSC) and managed care organizations (MCOs) to ensure EVV requirements and policies are being followed	
EVV Policy Handbook		The Texas Health and Human Services Commission (HHSC) handbook that provides EVV standards and policy requirements	
EVV Portal		An online system that allows users to perform searches and view reports associated with EVV visits in the EVV Aggregator	
EVV Usage Score		The EVV Usage Score measures manually entered EVV visit transactions and rejected EVV visit transactions	

Key Terms and Definitions – Cont.

Term	Acronym	Definition
EVV Vendor System		Provided at no cost to Program Providers, FMSAs or CDS employers. Program Providers or FMSAs may select one of the approved systems available from the state vendor pool
EVV Visit Transaction		The time spent by a service provider providing services that require EVV to a member
HHSC	HHSC	Texas Health and Human Services Commission
Reason Code		Represents the overall issue for the need to complete visit maintenance on an EVV visit transaction
Texas Medicaid & Healthcare Partnership	TMHP	The state's claims administrator who is responsible for the Medicaid Management Information System (MMIS) where the EVV Aggregator resides
EVV Visit Maintenance		A process used by the Program Provider, FMSA or CDS Employer to correct an EVV visit transaction in the EVV system to accurately reflect the delivery of service
Employer's Selection for EVV	Form 1722	Consumer Directed Services (CDS) Employer selection on who performs EVV Visit Maintenance to correct visit information and approve time worked
EVV Acknowledgment	Form 1718	EVV Responsibilities and Additional Information Acknowledgment form with MCO – done with Service Coordinator

EVV Federal/State Rules

Federal

- 21st Century Cures Act (Section 12006)
 - Two Phases: January 1, 2021, for Medicaid Personal Care Services and January 1, 2023, for Medicaid Home Health Care Services
 - States that do not implement EVV will receive reduced federal Medicaid funding
 - HHS Webpage <u>21st Cures Act webpage</u>

State

- Texas Administrative Code, Title 1, Chapter 354, Subchapter O
 - Rules that implement requirements for the Texas EVV system
- Texas Government Code, Section 531.024172
 - Governmental Rules to implement EVV
- Texas Human Resources Code, Section 161.086
 - Delivery of services specifications for EVV

EVV Policies and Handbook

- Electronic Visit Verification Policy Handbook
 - November 2021, EVV Policies were all combined into the EVV Policy Handbook
 - EVV Policy Handbook will be updated on a quarterly basis
 - Instead of having stand alone EVV policies, they are now all located in one area
- Policy Guidance and Temporary Policies
 - HHS will publish guidance and temporary policies as needed
- EVV Handbook Sections to note:
 - 6000 EVV Visit Transaction | Texas Health and Human Services
 - 7000 Clock In and Clock Out Methods | Texas Health and Human Services
 - 8000 Visit Maintenance | Texas Health and Human Services
 - 9000 EVV Reason Code | Texas Health and Human Services
 - 11000 Usage | Texas Health and Human Services
 - 12000 EVV Claims | Texas Health and Human Services
 - 13000 Reports | Texas Health and Human Services
 - 14000 Non-EVV Services | Texas Health and Human Services
 - <u>15000 Fraud Waste and Abuse | Texas Health and Human Services</u>
 - <u>16000 EVV CDS Employer Policies | Texas Health and Human Services</u>

EVV Compliance Monitoring

- HHSC is in the process of renaming and updating compliance standards for EVV – <u>EVV Policy Handbook section 10000</u>
- MCO's are required to conduct EVV Compliance reviews to ensure Program Providers, Financial Management Services Agencies (FMSAs), and CDS Employers follow EVV requirements and Policies. This is done during BCBSTX monthly Compliance Workgroup.
- EVV Compliance Workgroup Reports Reviewed
 - EVV Usage Ensuring minimum EVV Usage Score is achieved
 - EVV Landline Phone Verification Ensuring valid phone type is used
 - EVV Required Free Text Ensuring documentation is provided for required free text reason codes
- Currently there are no grace periods

BCBSTX EVV Website

- BCBSTX EVV Webpage https://www.bcbstx.com/provider/medicaid/ev
- Four Resource Sections Policies, Training, Notices, and Archives
- EVV Visit Maintenance Unlock Request forms (located on our <u>EVV webpage</u>)
 - Programs Providers and FMSA
 - CDS Employers
- Health and Human Services EVV Contact Information
- Texas Medicaid & Healthcare Partnership (TMHP) EVV Contact Information
- EVV Vendor Contact Information
- EVV Compliance Oversight Reviews
- EVV Most Common Reasons for Denial and Recoupment
- Span Billing Guidelines

BCBSTX EVV Contact Information

- BCBSTX EVV Questions@bcbstx.com
- Provider Customer Service at 1-877-784-6802
- For Service Coordination needs, call 1-877-301-4394 (TTY 7-1-1)
- Information on how to submit a <u>Complaint or Appeal</u>
- Sign Up for GovDelivery Ensures you will have the most current news and alerts related to EVV

Conclusion

Questions?





