IHCP *bulletin*

IHCP announces date of full enforcement of EVV for personal care services and other updates

Federal law requires personal care service and home health service providers to use an electronic visit verification (EVV) system to document services rendered and directs Medicaid programs to implement this requirement. **Beginning with dates of service on or after Jan. 1, 2023, the Indiana Health Coverage Programs (IHCP) will deny claims for personal care services that are not EVV-compliant.**

The requirement that personal care services providers use an EVV system has been in place since Jan. 1, 2021. For more information, see *IHCP Bulletin BT201855*.

Service codes and EOB codes related to EVV

Services that must be documented with the EVV system are included in the *Service Codes That Require Electronic Visit Verification*, accessible from the *Code Sets* page at in.gov/medicaid/providers.

Providers should review their Remittance Advices (RAs) and look for the following explanation of benefits (EOB) codes related to EVV to understand if the provider's claim denied due to an issue with EVV:

- 0950 – *Matching EVV data not found*

- 0951 – *Matching EVV data not found**

- 0952 – *EVV Aggregator units less than units submitted on the claim, provider should verify EVV aggregator information*

*Note: Providers may see either EOB code 0950 or 0951 due to a recent system update; however, the EOB codes provide the same meaning.

If a provider receives one of the above billing codes on a claim, that means the claim will deny. To prevent a denial, the Family and Social Services Administration (FSSA) will work with providers to correct the issue. Providers should reach out to Gainwell at INXIXEVV@gainwelltechnologies.com for EVV claim support.

EVV Pre-Check Process

To help providers ensure their readiness and avoid potential payment denials for lack of EVV activity, the IHCP is creating an optional "pre-check" process for providers to verify EVV compliance. This process will verify the following:

- The provider is recognized as actively participating with the Sandata Aggregator.

- The Sandata Aggregator is receiving recently verified EVV records.

- The provider's recent claim activity subject to EVV is appropriately linking to verified EVV records.

This process will look at a sample of the most recent month's claims to determine if there are any concerns with the provider's EVV activity. This process will only look at a sample of claim activity and will not guarantee previous or ongoing compliance with the EVV requirement.

Prior to using this process, providers are encouraged to review the following activity:

1. Providers should log in to the Sandata Aggregator at evv.sandata.com/VM/Login to review that the expected EVV data is appearing if they use an alternate EVV vendor.

2. For agencies using the state-sponsored EVV solution, Sandata, providers should ensure that EVV record exceptions are cleared and records are in a "Verified" status within the Sandata Portal prior to billing for services.

3. For agencies using an alternative EVV vendor, providers should ensure that all EVV record exceptions are cleared prior to moving the EVV data into the Sandata Aggregator.

4. Providers should confirm that they are only billing for services that have EVV records documented in the Sandata Aggregator.

5. Providers should regularly review their RA for EVV EOBs 0950, 0951 or 0952 showing the EVV data is missing or not matching the claim billed.
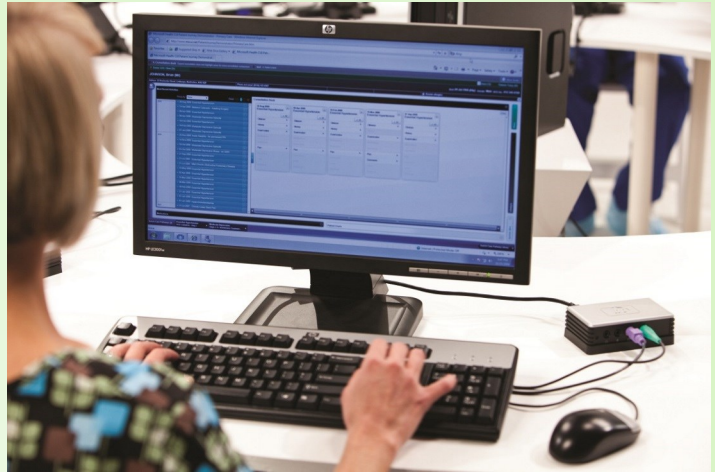
Providers that wish to participate in this process should submit an email to inxixevv@gainwelltechnologies.com and include the following information:

- Provider name

- IHCP Provider ID

- Sandata Provider ID (*known as the STX or agency ID*)

  – If there is more than one IHCP location, please include all actively enrolled locations.

- Individual name and contact information

Providers should expect to have a response within 48 business hours of their request. Any provider identified as having a potential concern around their EVV activity will receive guidance on correcting the errors.

All providers subject to the EVV requirement are strongly encouraged to use this optional process to reduce the risk of payment disruption.

EVV collaborative activities with providers

In addition to compliance with federal law, the FSSA encourages personal care services and home health agencies to leverage the EVV system to streamline business processes. For example, the EVV system can be used to help your organization move away from tedious and inaccurate paper time sheets and help you comply with *Fair Labor Standards Act* record-keeping requirements, which expanded in 2016 to include personal care workers. In addition to supporting your organization, the EVV system may be used to support your direct service professionals, as some have indicated they feel safer knowing that someone in their office knows exactly where they are — and can escalate a concern if they do not check in as expected.

The IHCP will continue supporting providers with EVV through communication activities. The following outlines some of the activities that will occur through December 2022:

- FSSA website and IHCP Provider Healthcare Portal updates
- Monthly Banner Page articles and bimonthly webinars
- Email reminders from the IHCP
- FAQ document(s)
- Provider association engagement
- Enhanced claim messaging
- Phone calls to provider agencies
- Potential in-person agency visits

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