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### **Electronic Visit Verification (EVV) Quick Reference Guide**

#### **Overview**

Effective November 2, 2020, the Wisconsin Department of Health Services (DHS) requires electronic visit verification (EVV) for all personal care services and applicable supportive home care services paid for by Medicaid. This applies to the following procedure code:

• T1019: Personal care services, per 15 minutes, not for an inpatient or resident of a hospital, nursing facility, ICF/IID or IMD, part of the individualized plan of treatment

#### **Hard Launch**

Hard launch for personal care services began on May 1, 2023, for claims with dates of service of May 1, 2023, and after. Hard launch is when the Wisconsin Department of Health Services (DHS) will begin imposing financial and programmatic consequences if EVV information is not captured for required services. Consequences include claim denial, exclusion from future capitation rate setting development, possible provider enrollment sanctions, and possible IRIS (Include, Respect, I Self-Direct) participant disenrollment.

#### What is EVV?

EVV electronically verifies authorized services were provided. Health care professionals are required to send the following information to an EVV system at the beginning and end of each visit:

- Who receives the service
- Who provides the service
- What service is provided
- Where service is provided
- Date of service
- Time in/time out



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### **Federal Requirement**

Wisconsin DHS implemented the EVV requirement to comply with the <u>Federal 21st Century Cures Act</u>. <u>Section 12006(a) of the 21st Century Cures Act</u> mandates all states require EVV for all Medicaid personal care services and home health services that require an in-home visit by a provider. The Centers for Medicare & Medicaid Services (CMS) will fine state programs if they do not implement EVV.

The EVV requirement applies to all personal care and home health services, including services provided through Wisconsin Medicaid and BadgerCare Plus fee-for-service (ForwardHealth card), BadgerCare Plus and SSI HMOs, Family Care, Family Care Partnership, and IRIS (Include, Respect, I Self-Direct).

## **MHS Health Wisconsin Requirements**

- EVV is required for all workers who provide personal care services for MHS Health Wisconsin and Network Health plan Medicaid members including Live-in Workers.
- MHS Health excludes the use of UC modifier for T1019 from EVV processing. In case of a power outage or EVV system outage, the provider agency is required to manually enter visits in Sandata.
- Personal Care Agencies are required to verify that an authorization is in Sandata and visits are in a verified status prior to submitting a claim.
- Personal care workers (PCWs) do not need to capture tasks, client verification and/or signature with EVV.
- Once a visit is complete, the provider agency's EVV administrative user is responsible for performing visit maintenance and verifying visits.
  - A verified visit will automatically be sent from the EVV vendor to Wisconsin Medicaid and HMO/MCOs.
- Claims should be submitted electronically after the EVV visit has been verified.



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- EVV does not change the claim process for provider agencies.
- Units billed on claims should match the EVV verified units.
  - If units billed are greater than the visit units verified in Sandata, MHS Health will only reimburse up to the approved number units available on the verified EVV visit report.
- If a correction to an EVV visit is made, please wait 3 days before submitting a claim to MHS Health.
  - Corrected visit must also be in a verified status prior to billing.
- If a correction to an EVV visit is made after a claim is submitted, the provider agency will need to submit a corrected claim, if needed.
- MHS Health follows the same rounding rules as outlined in FH Topic #2479.
- MHS Health does not allow Span Billing.
- Record of care and timekeeping expectations and requirements have not changed.
  - All elements of record of care that workers were previously required to document must still be documented if the workers use an EVV system to capture record of care.
- Provider agencies may choose whether to use an EVV system to capture record of care or timekeeping or continue to use their current method of documentation.



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### **MHS Health Claim Denial Codes**

Claims without matching EVV information will be denied. Failure to comply with the EVV requirement may result in contract termination with MHS Health. Good faith efforts toward compliance must be communicated to MHS Health.

| #  | EX Code | Description  | Status |
|----|---------|--|--------|
| 01 | EXPv    | No Record of Visit on EVV File                                 | Deny   |
| 02 | EXPy    | Deny: Cannot Bill Spanned Date of Service –<br>Please Resubmit | Deny   |



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#### **MHS Health Wisconsin Contacts**

- Authorization missing in Sandata
  - o Email: MHSWIEVV@mhswi.com
- Claims and payment questions
  - Contact: Yotzy Perteet, Provider Relations Rep
  - o Email: Yotzy.Perteet@mhswi.com
  - o Phone: 414-386-9131
- Other inquiries
  - o Provider Inquiry Line: 1-800-222-9831
  - o Email: WI Provider Relations@mhswi.com

## **Wisconsin EVV Customer Support**

- Agencies can set up a one-on-one appointment with an EVV specialist who will talk through the agency's specific challenges and help them find solutions.
  - Hours: Monday-Friday, 7 a.m. 6 p.m. CT
  - o Call: 1-833-931-2035
  - o Email: vdxc.contactevv@wisconsin.gov



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#### **EVV Resources**

WI Administrative Code-Personal Care Services

WI DHS EVV

WI DHS EVV FAQ

**WI DHS EVV Training** 

Your Key to EVV DHS Newsletters

WI DHS EVV Portal Functionality User Guide

MHS Health WI Provider Portal

FH Update 2022-38 Documenting Record of Care

FH Update 2022-48 EVV Hard Launch Announcement

FH Update 2023-12 New EVV Policy

# **EVV Forward Health Topics**

#### **Forward Health Portal**

#21878 The Wisconsin Department of Health Services' EVV System

#21837 Alternate EVV Systems

#21757 An Overview

#21797 Worker Identification Numbers

#21860 Data Validation

#21859 Data Verification

#21737 Billing for Time Worked

#21817 Rounding Policies