

# Electronic Visit Verification

Public Forum for Home Health Care Services and  
Personal Care Nurse Supervisory Code 99509  
June 11, 2024



# Your Role?



# Opening Remarks

**Dana Raue**

Deputy Director, Bureau of Programs and Policy

# By the End of the Forum

- Know the electronic visit verification (EVV) hard launch date.
- Understand the EVV requirement.
- Know how to prepare for hard launch.
- Get answers to your questions.

# Agenda

- Introductions
- Overview of EVV
- EVV for Personal Care (PCS) and Supportive Home Care Services Update
- Overview of EVV for Home Health Care Services (HHCS) as well as Personal Care Code 99509
  - Timeline
  - Background and Requirements
  - EVV Policy
  - Collaborative Feedback, Action Items and Resources
- Questions and Input

# Introductions

## **Wisconsin Department of Health Services (DHS)**

Scott Hawley, Mandy Marcum, Martha Pings, Dana Raue, Ali Renk

## **Wisconsin EVV Customer Care**

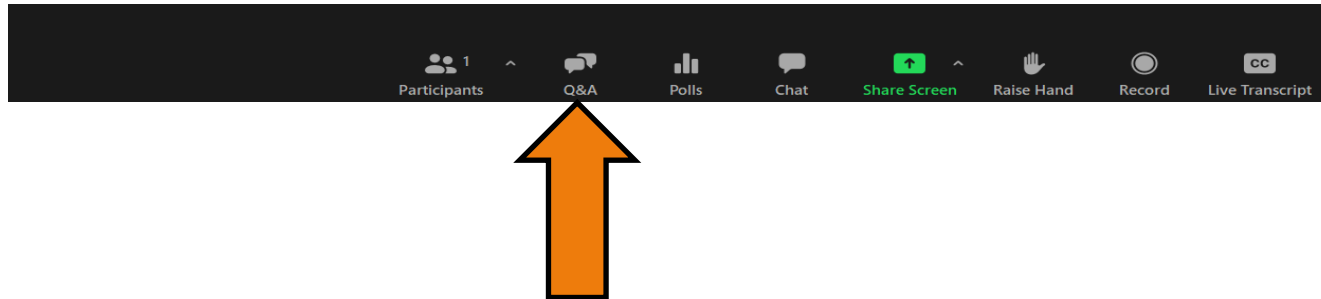
Chris Mathieu, Halli Tyra

## **Wisconsin EVV Systems Team**

Sheila Itzen, Alex Kubli

# Questions and Input

- Focus questions on EVV for HHCS and nurse supervisory code 99509.
- Type questions in Q&A field.
- Maintain privacy.



# Overview of EVV

- Federally mandated 21<sup>st</sup> Century Cures Act requires EVV for Medicaid-covered PCS and HHCS.
- States that do not implement EVV will lose Medicaid funding.



# EVV for PCS and Supportive Home Care Update

- Service codes **T1019**, **T1020**, **S5125**, and **S5126** required EVV since soft launch starting November 2, 2020.
- EVV hard launch began **May 1, 2023**.
- DHS EVV team analyzes data to identify key learnings, provide support, and create solutions.

# Timeline of EVV for HHCS and 99509

Two phases:

1. Soft launch began on January 1, 2024.
2. Hard launch begins on October 1, 2024.

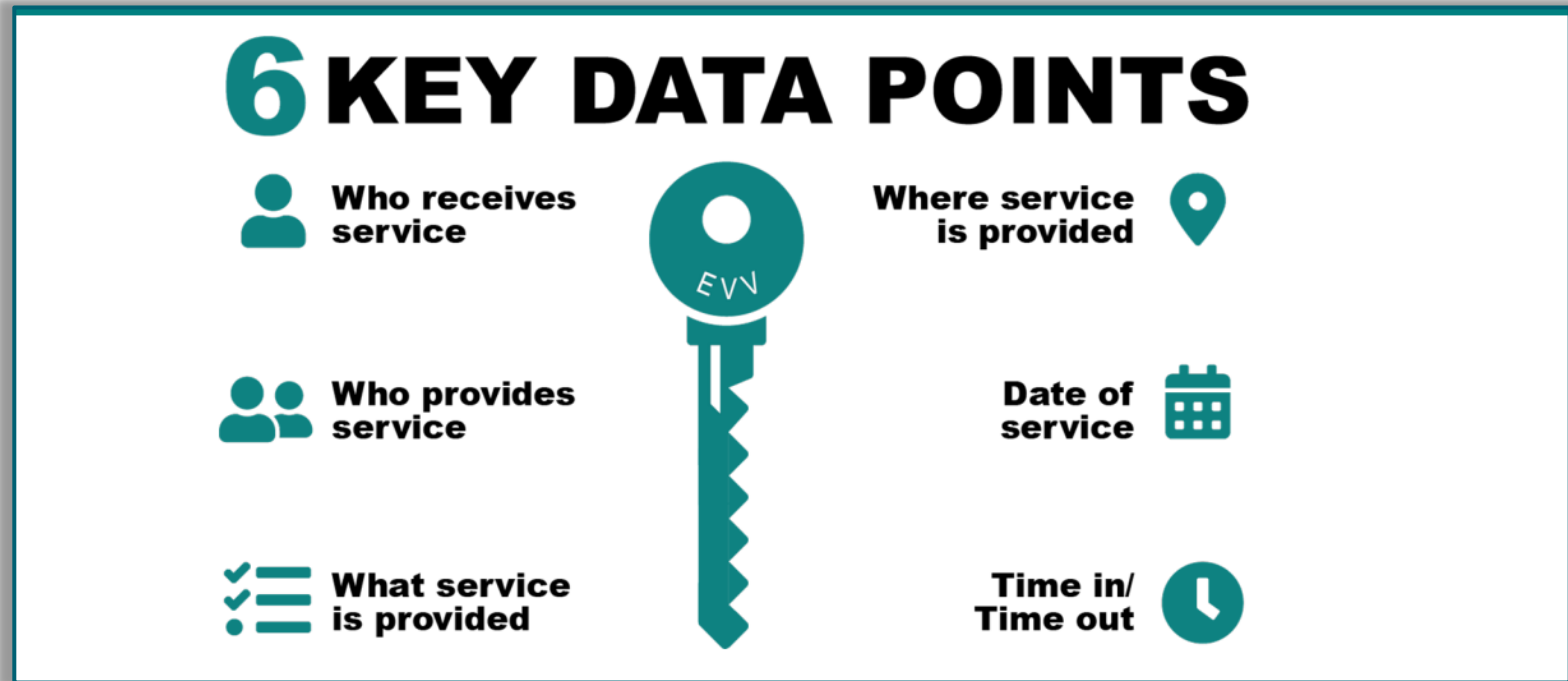
October 2024

| Sunday | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday |
|--------|--------|---------|-----------|----------|--------|----------|
|        |        | 1       | 2         | 3        | 4      | 5        |
| 6      |        | 8       | 9         | 10       | 11     | 12       |
| 13     | 14     | 15      | 16        | 17       | 18     | 19       |
| 20     | 21     | 22      | 23        | 24       | 25     | 26       |
| 27     | 28     | 29      | 30        | 31       |        |          |
|        |        |         |           |          |        |          |

# Background and Requirements

| <b>Personal Care Services (T1019)<br/>Nurse Supervisory Visit Code</b>                     | <b>Private Duty Nursing (PDN) Codes<br/>(Independent Nurses and Agency Nurses)</b> | <b>Non-PDN Nursing Codes<br/>(Independent Nurses and Agency Nurses May Use)</b>      | <b>Therapy Codes</b>  |
|--|--|--|---|
| <b>99509</b> (Home visit for assistance with activities of daily living and personal care) | <b>99504</b> (Home visit for mechanical ventilation care)                          | <b>99600</b> (Unlisted home visit service or procedure)                              | <b>92507</b> (Treatment of speech, language, voice, communication, and/or auditory processing disorder) |
|  | <b>S9123</b> (Non-vent private duty nursing care in home—by RN)                    | <b>T1001</b> (Nursing assessment/evaluation)   | <b>97139</b> (Unlisted therapeutic procedure—occupational therapy)                                      |
|  | <b>S9124</b> (Non-vent private duty nursing care in home—by LPN)                   | <b>T1502</b> (Administration of oral, intramuscular, and/or subcutaneous medication) | <b>97799</b> (Unlisted physical medicine/rehab service or procedure—physical therapy)                   |
|  |  | <b>T1021</b> (Home health aide or CNA visit)   |   |

# Overview of EVV



\*Wisconsin's EVV solution does not monitor or track worker's location during visit.

# Overview of EVV



[dhs.wi.gov/evv/index.htm](https://dhs.wi.gov/evv/index.htm)

# Background and Requirements

DHS-provided Sandata EVV system has three methods to collect EVV information.

## Sandata Mobile Connect (SMC)

Smart phone or tablet



## Telephonic Visit Verification (TVV)

Landline at client's home



## Fixed Visit Verification (FVV)

Device at client's home



# Background and Requirements

## **Alternate EVV Systems**

- All systems must be certified prior to use.
- Users of alternate EVV systems are not exempt from EVV requirements or consequences.
- If an alternate EVV system will not be ready for use by October 1, 2024, the DHS-provided Sandata EVV system must be used to ensure continued payment.
- For more information: [dhs.wi.gov/evv/alternateevv.htm](https://dhs.wi.gov/evv/alternateevv.htm)

# EVV Hard Launch Policy

Dates of service on and after **October 1, 2024**, will have consequences when EVV information is not captured for required services.

Consequences include:

- ◆ Claim denial
- ◆ Exclusion from future HMO and managed care organization (MCO) capitation rate setting development

*\*Hard launch does not change current requirements for time sheets, record of care, or other documentation.*

**October 2024**

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| 27     | 28     | 29      | 30        | 31       |        |          |
|        |        |         |           |          |        |          |



# EVV Policy

Program areas with HHCS that require EVV:

- Fee-for-Service Medicaid and BadgerCare Plus (ForwardHealth card)
- BadgerCare Plus and SSI HMOs
- Family Care and Family Care Partnership

# EVV Policy

## **Fee-for-Service Medicaid and BadgerCare Plus**

- Claim details without required verified EVV data will be denied.
- Detail units billed exceeding the verified EVV visit units available will also be denied.

# EVV Policy

## **BadgerCare Plus and Medicaid SSI HMOs, Family Care, and Family Care Partnership**

- HMOs and MCOs have the authority to deny provider claims with missing EVV data.
- Provider agencies should contact their HMO or MCO about EVV payment policy.

# HHCS EVV Policy and Program Design

## **Manual Time Entry and Corrections**

- Expectation is to capture EVV in real time.
- Administrators may need to manually create visits or make corrections on occasion.
- Manual EVV visits must be entered in Sandata EVV Portal.
- Alternate EVV system users check with vendor.
- Manual visits and corrections require reason code.
- Currently, DHS does not limit the number of manual EVV visits.
- DHS Office of the Inspector General (OIG) monitors manually entered visits and corrections.

# HHCS EVV Policy and Program Design

## **Capturing EVV Without Payer's Authorization**

- Sandata system requires authorization details to capture EVV visit information without error.
- DHS allows providers to enter required authorization information for required HHCS and 99509 service codes to capture EVV visit information in Sandata.
- Adding this information does not authorize a member to receive services or create a true authorization in ForwardHealth, HMO, or MCO systems.

# HHCS EVV Policy and Program Design

## **Private Duty Nursing** (Service Codes 99504, S9123, S9124)

- EVV systems use the same rounding logic required for providers per ForwardHealth policy.
- The EVV visit units must be **equal to or greater than** the units on the claim detail, or the claim will be denied.
- EVV does not change policy (for example, overlapping shifts, more than 60 hours worked, out-of-state services)
  - ◆ EVV does not enforce those policies.
  - ◆ EVV provides information that may flag instances where policy is not followed.

# HHCS EVV Policy and Program Design

## **Private Duty Nursing** (Service Codes 99504, S9123, S9124)

Example:

Worker checks in at 9 a.m.  
Break from 11–11:30 a.m.  
Checks out at 1 p.m.

- Only bill time providing services = 3.5 hours
  - EVV visit = 4 hours

EVV units may be equal to or greater than number of units being billed.

Note: Providers may require workers to check out of their EVV system when they are not providing a service requiring EVV.

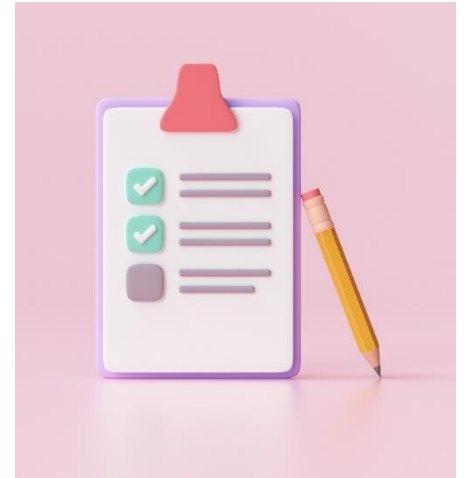
# EVV Policy

- Providers refer to policy in their program's Online Handbook:
  - Fee for service—[BadgerCare Plus and Medicaid program area of the Online Handbook](#).
  - Family Care—Electronic Visit Verification section of the [Family Care program area of the Online Handbook](#).
  - Family Care Partnership—Electronic Visit Verification section of the [Family Care Partnership program area of the Online Handbook](#).
- EVV ForwardHealth Updates on EVV: Resources and FAQs webpage [dhs.wi.gov/evv/resources.htm](https://dhs.wi.gov/evv/resources.htm)



# Collaborative Feedback

- Public forums
- HHCS advisory workgroup
- Monthly payer meetings
- Monthly Key Conversations sessions
- Provider/independent nurse surveys
  - ◆ Independent nurse-specific trainings and resources
  - ◆ Emails about clearing exceptions, reporting, how to use the SMC app, and how EVV affects billing
  - ◆ Individual support from EVV Customer Care
- Reach out to Wisconsin EVV Customer Care



# Action Items and Resources

## Follow the “New to EVV?” steps

- Get required IDs.
- Perform EVV system technical setup.
- Create training plan.
- Start using EVV.

[New to EVV? flyer](#)

### New to EVV?

Getting Started With Electronic Visit Verification in Wisconsin

Electronic visit verification (EVV) is a system that uses technology to capture the time, date, and place that personal care or some supportive home care services were provided. It also captures which services were provided, who provided them, and who received them.

EVV is federally required for Medicaid-covered personal care and some supportive home care services. All states must require EVV or risk losing Medicaid funding for these services.

Whenever performing services that require EVV, workers log or call in to an EVV system at the beginning and the end of their visit. Provider agencies can use the Wisconsin Department of Health Services (DHS)-provided EVV system from Sandata or choose to use an alternate EVV system. All systems have to collect the same six key data points at every visit.

#### 6 KEY DATA POINTS

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

EVV visit data will need to be collected for care provided under the following service codes:

- T1019 • S5125
- T1020 • S5126

#### Agency ID and Worker IDs

**Step 1**

- If your provider agency has a Medicaid ID, make sure your contact information on the ForwardHealth Portal is current. DHS sends important information to the email address listed there.
- If your provider agency **does not have a Medicaid ID**, use the [EVV Portal Functionality User Guide](#) to get a unique EVV provider agency ID. This ID is how DHS will match your EVV information to your claims.

**Step 2**

Link your workers to your provider agency. This is called “associating” your workers to your agency. For EVV, each worker has to be linked to the provider agency they work for in the ForwardHealth Portal. Chapter 7 of the EVV Portal User Guide, Worker Association, gives detailed instructions on how to search for and add workers to your provider agency. This process is the same whether your agency has a Medicaid ID or a unique EVV provider agency ID.

*(Continued on next page.)*

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P-03078 (08/2022)

# Action Items and Resources

## **Understand Payer Billing Requirements**

- Soft launch—data matched to claims is informational only.
  - ◆ Watch payer claims messaging to learn if claim would be paid in hard launch.
  - ◆ Contact payer or EVV Customer Care if unsure why a claim wouldn't be paid.
- Hard launch—when EVV info isn't captured, claims will deny.
- Providers should check with their HMO or MCO regarding billing requirements, including the use of span billing.
- Provider agencies and independent nurses should review explanation of benefits codes on Remittance Advice.

# Action Items and Resources

- DHS provides resources in a train-the-trainer model.
- Training resources are available for independent nurses, administrators, and workers.
- EVV Training webpage is [dhs.wi.gov/evv/training.htm](https://dhs.wi.gov/evv/training.htm).
- Maximize soft launch to practice, practice, practice!



# Action Items and Resources

## Complete Required Administrative Training for Sandata Users

- EVV Training Administrators webpage: [dhs.wi.gov/evv/training-administrators.htm](https://dhs.wi.gov/evv/training-administrators.htm)
- Alternate EVV users complete Sandata Aggregator Training and your own system training

The screenshot shows the Wisconsin Department of Health Services website. The header includes the department logo and navigation menus for 'About DHS', 'Data & Statistics', 'Diseases & Conditions', 'Health Care & Coverage', 'Long-Term Care & Support', 'Prevention & Healthy Living', 'Partners & Providers', and 'Certification, Licenses & Permits'. The breadcrumb trail indicates the current page is 'Home > Partners & Providers > Electronic Visit Verification > Electronic Visit Verification (EVV): Training'. The main content area is titled 'Electronic Visit Verification (EVV): Training' and includes a 'Quicklinks' sidebar with 'Training for EVV administrators' and 'Training videos and written materials'. The main text explains that workers, providers, fiscal employer agents (FEAs), and program payers (HMOs and MCOs) all need training. It lists three groups: 1) Workers, including independent nurses, who need to know how to check in and out for visits. 2) Providers, independent nurses, Family Care FEAs, and microboards who need to know how to train workers and use the Sandata EVV Portal. 3) IRIS consultant agencies (ICAs) and the IRIS self-directed personal care (SDPC) agency who need information to answer questions. It also notes that program payer agencies need to view data on the Sandata aggregator and that IRIS payers who choose their own workers need to ensure their workers are trained and use EVV. A 'How do workers, providers, FEAs, and program payers get trained?' section follows, stating that the DHS-provided EVV system is Sandata and that administrators can train their employees on this system. A 'Providers and Independent Nurses' section is partially visible at the bottom.

**Electronic Visit Verification (EVV): Training**

Workers, providers, fiscal employer agents (FEAs), and program payers (HMOs and MCOs) all need training.

These groups will be using EVV directly. Their training is different based on their roles and the tools they use for EVV:

- **Workers, including independent nurses**, need to know how to check in and out for visits.
- **Providers, independent nurses, Family Care FEAs, and microboards** need to know how to train workers and how to use the Sandata EVV Portal to make sure visit data is correct.
- **IRIS consultant agencies (ICAs)** and the IRIS self-directed personal care (SDPC) agency need information to answer questions. ICAs also provide participants with information needed to train participant-hired workers. For ICAs and the SDPC agency, attending training on the full EVV system is not required.
- **Program payer agencies** need to view data on the Sandata aggregator.
- **IRIS payer agencies who choose their own workers**, instead of working with a provider, will need to make sure their workers are trained and use EVV. The fiscal employer agency (FEA) chooses which EVV system participant-hired workers will use. IRIS consultants can help participants find the resources to train their participant-hired workers. Find more information on the [EVV IRIS webpage](#).

IRIS participants who choose services from a provider will not need to train workers for EVV. The provider will manage the EVV requirements. These participants do not need to take any action.

**How do workers, providers, FEAs, and program payers get trained?**

**DHS-provided EVV system: Sandata**

The Wisconsin Department of Health Services (DHS) provides training to administrators using the DHS-provided EVV system, Sandata. Those administrators can then train their agency's employees for their new roles.

**Providers and Independent Nurses**

# Action Items

## **Log in to Sandata EVV Portal**

Sandata sends welcome kit email (from eTRAC) with temporary Portal password after administrative training is complete.

# Action Items and Resources

## Upcoming training webinars:

- **New!** EVV and Independent Nurses
- **New!** Wisconsin-Specific Information for Sandata EVV Systems
- Fee for Service: EVV and Claim Edits
- Adding Required Authorization Information in the Sandata EVV Portal

The screenshot shows the Wisconsin Department of Health Services website. The main heading is "Electronic Visit Verification (EVV): Training Other Provider Administrators". Below the heading, there is a navigation menu with options like "About DHS", "Data & Statistics", "Diseases & Conditions", "Health Care & Coverage", "Long-Term Care & Support", "Prevention & Health Living", "Partners & Providers", and "Certification, Licenses & Permits". The breadcrumb trail is "Home > Partners & Providers > Electronic Visit Verification > Electronic Visit Verification (EVV): Training Other Provider Administrators".

On the left side, there is a sidebar menu with the following items: EVV: Home, What's New, Members, IRIS, Providers, Payers, Alternate EVV, Training, Resources and FAQs, and Contact Us.

The main content area contains the following text:

**Electronic Visit Verification (EVV): Training Other Provider Administrators**

These resources help administrative staff learn to use the Sandata EVV portal. They can also be used to review information. Use a combination of resources that makes the most sense for your provider agency's and staff's needs: video, PowerPoint, or written materials.

Review of these materials does not provide credentials from Sandata. Lead EVV administrators who need these credentials should take an online video course from Sandata or attend live webinars when offered (see [EVV training webpage](#)). For training workers who visit members or participants in their homes, please see materials on the [training workers](#) webpage.

As a reminder, training resources do not supersede DHS policy. Refer to the [DHS EVV resources and FAQ](#) webpage for EVV policy information.

Additional languages for written materials can be requested through email at [ylvx.contactevv@wisconsin.gov](mailto:ylvx.contactevv@wisconsin.gov) or call 833-931-2035. Please allow time for translation and delivery.

Below the text is a table with the following rows:

|                                       |   |
|---------------------------------------|---|
| General information                   | + |
| Getting started: ForwardHealth Portal | + |
| Getting started: Sandata EVV Portal   | + |
| Client data                           | + |
| Employee data                         | + |
| Visit methods                         | + |
| Visit maintenance                     | + |
| Fee-for-Service Claims                | + |
| Reports                               | + |

There is a yellow box highlighting a "Stay connected" section on the left side of the page. The text in this box is:

**Stay connected**  
Join our email list  
Sign up to receive email notices about EVV in Wisconsin.  
**Have questions? Need help?**  
Wisconsin EVV Customer Care is available at 833-931-2035 or [ylvx.contactevv@wisconsin.gov](mailto:ylvx.contactevv@wisconsin.gov) Monday-Friday, 7 a.m.-6 p.m. Central Time.

[dhs.wi.gov/evv/training-administrators.htm](https://dhs.wi.gov/evv/training-administrators.htm)

# Action Items and Resources

## Train EVV Workers (Includes Independent Nurses)

- Training Worker webpage: [dhs.wi.gov/evv/training-workers.htm](https://dhs.wi.gov/evv/training-workers.htm)
- Provider agencies should make plans for training workers:
  - ◆ One-on-one, small group, or large group sessions
  - ◆ In person or virtual
  - ◆ Print outs, videos, hands-on practice
  - ◆ Follow-up sessions and extra practice
- Start now. Training takes time.

WISCONSIN DEPARTMENT OF HEALTH SERVICES

Home | General & Overview | Electronic Visit Verification (EVV) | Electronic Visit Verification (EVV) Training Workers

EVV Home  
What's New  
Members  
IRIS  
Providers  
PAYERS  
Training  
Resources and FAQs  
Contact Us

**Stay connected**  
Join our email list  
Sign up to receive email notices about EVV in Wisconsin.

**Have questions? Need help?**  
Wisconsin EVV Customer Care is available at 833-931-2695 or [evv.contact@wisconsin.gov](mailto:evv.contact@wisconsin.gov). Monday-Friday, 7 a.m.-6 p.m. Central Time.

### Electronic Visit Verification (EVV): Training Workers

Train the workers who will use an EVV system to check in and out for visits. Use the combination of resources that makes the most sense for your provider agency and workers' needs. Most workers will **not** need to review all the resources. These resources can also be used as review and reference materials.

Refer to [Training Workers for Electronic Visit Verification](#) for training plan suggestions. As a reminder, training resources do not supersede DHS policy. Refer to [DHS EVV Resources and FAQs](#) for EVV policy information.

Additional languages for written materials can be requested at [evv.contact@wisconsin.gov](mailto:evv.contact@wisconsin.gov) or 833-931-2695. Please allow 30 business days for translation and delivery.

| Resource Title  | Description   | Languages Available   |
|---|---|---|
| <b>General</b>  |   |   |
| EVV Informational Video   | Learn what EVV is and how EVV information is collected during a visit by watching this short video (2:58 minutes).  | English   |
| EVV Fundamentals- An Overview   | A video to learn the purpose of EVV, the methods for verifying a client's visit, steps needed to start implementing EVV, and where to find EVV resources. (28:54 minutes)   | English   |
| EVV Service and Task List   | Information workers will need to enter when they complete visits using EVV.   | English (PDF), Burmese (PDF), Hmong (PDF), Karen (PDF), Russian (PDF), Spanish (PDF)  |
| EVV Worker Visit Template   | A card that workers can use during visits to capture vital client information.  | English   |
| <b>Mobile Visit Verification with the Sandata Mobile Connect app</b>                |   |   |
| EVV Essentials-How to Use the SMC App   | A video to learn everything needed to use the Sandata Mobile Connect app, also known as the SMC app. You'll also learn the steps needed to capture a client's visit even when WiFi or cell phone coverage is not available. (31:08 minutes) | English   |
| Downloading the Sandata Mobile Connect App from the App Store (for iOS)             | Written instructions for downloading the correct app for Apple products   | English (PDF), Albanian (PDF), Burmese (PDF), Hmong (PDF), Karen (PDF), Russian (PDF), Serbian (PDF), Somali (PDF), Spanish (PDF) |
| Downloading the Sandata Mobile Connect App from the Google Play Store (for Android) | Written instructions for downloading the correct app for Android products   | English (PDF), Albanian (PDF), Burmese (PDF), Hmong (PDF), Karen (PDF), Russian (PDF), Serbian (PDF), Somali (PDF), Spanish (PDF) |
| Sandata Mobile Connect App Guide for Employees                                      | Written instructions for using the Sandata Mobile Connect app during a visit  | English (PDF), Albanian (PDF), Burmese (PDF), Hmong (PDF), Karen (PDF), Russian (PDF), Serbian (PDF), Spanish (PDF)               |
| PowerPoint 6: Sandata Mobile Connect  | Basic functionality of the Sandata Mobile Connect app   | English, Burmese, Hmong, Karen, Russian, Spanish  |



# Action Items Summary

- Choose EVV system; follow New to EVV? guide for initial set-up steps.
  - Understand payer billing requirements.
  - Complete required administrative training.
  - Log in to Sandata EVV Portal.
  - Review worker trainings, create training plan.
  - Train workers and follow up.

## Electronic Visit Verification (EVV): Information for Providers Setting up EVV: Steps for providers, including independent nurses

🗨 Independent nurses, as “an agency of one,” will have the roles of both administrator and worker in the steps below.

[Learn more about the service codes requiring use of an EVV system.](#)

### Steps for providers, including independent nurses, to prepare for EVV

All providers, regardless of EVV system, should complete these steps:

- Update your provider contact information on the Demographic Maintenance area’s Mailing Address panel in the [ForwardHealth Portal](#). Important provider information about EVV from the DHS EVV team will be sent to the email provided. Refer to the [ForwardHealth Portal Demographic Maintenance Tool User Guide, P-00953 \(PDF\)](#) for more information.
- Review the [New to EVV? guide, P-03078](#) for initial set-up steps.
- Start thinking through how EVV will fit into your daily routine and, if appropriate, how to communicate about EVV to the members you serve.
- Make a plan to train your workers. Suggestions can be found on the [Training Workers for EVV, P-02851 \(PDF\)](#) resource and [Successful Training, P-02706 \(PDF\)](#).
- Share feedback with your health maintenance organization (HMO) or managed care organization (MCO). Become acquainted with their customer care options and claim resubmission policies.

Providers using the DHS-provided Sandata EVV system should complete these steps

+

Providers using an alternate EVV system should complete these steps

+

### Using an EVV system: Steps and resources for providers, including independent nurses

All providers should complete these steps

+

[dhs.wi.gov/evv/providers.htm](https://dhs.wi.gov/evv/providers.htm)

# Action Items

- Join monthly Key Conversations.
- Share feedback with your HMO or MCO. Become acquainted with their customer care options and claim resubmission policies.
- Reach out to Wisconsin EVV Customer Care with questions.
- Review resources on EVV webpage: [dhs.wi.gov/evv/index.htm](https://dhs.wi.gov/evv/index.htm)

## **Have questions? Need help?**

Wisconsin EVV Customer

Care is available at

833-931-2035 or

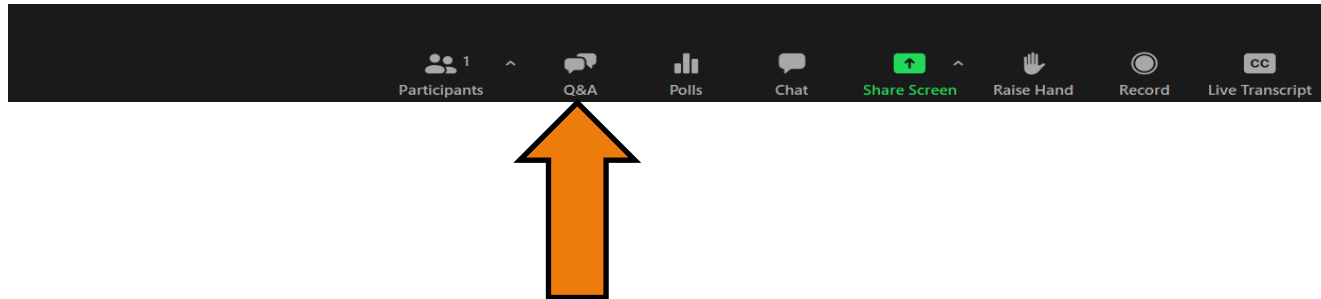
[vdxc.contactevv@wisconsin.](mailto:vdxc.contactevv@wisconsin.gov)

[gov](mailto:vdxc.contactevv@wisconsin.gov) Monday-Friday, 7 a.m.–6

p.m. Central Time.

# Questions and Input

- Focus questions on EVV for home health care services and nurse supervisory code 99509.
- Type your questions in the Q&A.
- Maintain privacy.



# EVV for HHCS Soft Launch Importance

January–September 30, 2024, is soft launch:

- Overcome initial hurdles.
- Establish processes and practice collecting EVV information.
- Reduce resubmissions for denied claims at hard launch.

During the soft launch phase:

- Claims processing will **not** be impacted.
- Data is matched to claims for informational purposes only.
- Watch payers claims messaging to learn if claims would be paid in hard launch. Contact payer or EVV Customer Care if unsure why a claim would not be paid.

# Brief Survey

Please share your feedback.

Thank You



# Private Duty Nursing Codes

EVV visit units must be equal to or greater than the units on the claim detail or the claim will be denied.

| IF THE WORKER...                          | AND THE PROVIDER...                 | THEN THE CLAIM...  |
|---|-------------------------------------|--|
| Captures four units of EVV during a visit | Bills for three units of a service, | Passes—There are at least as many EVV units as billed units. |
| Captures four units of EVV during a visit | Bills for five units of a service,  | Fails—The billed units are greater than the EVV units.       |

# Therapy Codes and Nursing Codes

There must be one unique visit captured for each instance of the code billed.

| IF THE WORKER...  | AND THE PROVIDER...                           | THEN THE CLAIM...   |
|---|---|---|
| Completes two visits for the same service code on the same day                  | Bills for two units of the same service code, | Passes—There is one EVV visit for each instance of the code being billed.             |
| Completes two visits for different service codes (for example, T1502 and 99600) | Bills for two units of 99600,                 | Fails—Provider billing must match the visits captured in EVV.                         |
| Completes one visit for one service code  | Bills for two codes,                          | Fails—Each instance of the per visits codes must be associated to a unique EVV visit. |



# HHCS EVV Policy and Program Design

## **Provider ID**

- Sandata provider training asks for provider ID. Use Medicaid ID in this field.
- Providers may continue to use their National Provider Identifier (NPI) for service authorizations and billing.
  - ◆ Providers who successfully bill Wisconsin Medicaid with an NPI already have a Medicaid ID.
  - ◆ Providers who are already Medicaid enrolled should not request a separate provider ID for EVV.
- Providers who need help finding their Medicaid ID should contact Provider Services or Wisconsin EVV Customer Care.

# HHCS EVV Policy and Program Design

## Worker IDs

- Providers are required to obtain a unique worker ID for each worker using EVV to log visits regardless of EVV system:
  - ◆ Independent nurses are both provider/admin and worker; unique worker ID is required.
  - ◆ Nurse supervisors providing 99509 services must have a unique worker ID.

Definition of worker =  
Anyone who provides  
services requiring use  
of an EVV system,  
including independent  
nurses and nurse  
supervisors

# HHCS EVV Policy and Program Design

## **Live-in Workers**

- DHS requires EVV for live-in workers providing home health services.
- DHS requires EVV for live-in nurses providing 99509 services.

# HHCS EVV Policy

## **Member Traveling Out of State**

EVV does not change DHS policy about where services may be provided.

# HHCS EVV Policy

## **Outpatient Services**

For HMOs, MCOs, and fee-for-service BadgerCare Plus and Wisconsin Medicaid, outpatient services, distinct from home health care services, do not require EVV.

# HHCS EVV Policy

## **Medicare Crossover Claims**

- DHS does not require EVV for Medicare crossover claims.
- Providers may choose to require workers to capture EVV information for all HHCS services that would normally require EVV.

# HHCS EVV Policy

## **Commercial Insurance**

DHS requires EVV to be captured regardless of whether the member has commercial insurance coverage as the primary payer.

# HHCS EVV Policy and Program Design

**Therapy and Nursing Codes** (99600, T1001, T1502, T1021, 92507, 97139, 97799)

There must be one unique visit captured for each instance of the code that is billed.



# HHCS EVV Policy and Program Design

## **Nurse Supervisory Code 99509**

- Service code 99509 is billed per visit.
- Workers must capture one unique EVV visit for each instance of the code the provider bills; that is, a provider may not bill more than one 99509 visit to one EVV record.
- For the purposes of EVV, DHS does not require a minimum or maximum amount of time for each visit.

# EVV for HHCS Update

## Choose an EVV System

### DHS-Provided Sandata EVV System

- No cost to Wisconsin providers
- Training provided
- Sandata EVV Portal
- Wisconsin EVV Customer Care supports Sandata system questions

### Alternate EVV System

- EVV systems research and vendor coordination
- Responsible for system costs
- Ensure system is certified and meets DHS policy/technical requirements
- Required integration with DHS EVV system
- Training provided by alternate EVV vendor
- Sandata aggregator training required
- Alternate EVV system customer care supports questions

# Action Items and Resources

- Provider agencies need to add their workers to ForwardHealth Portal.
- Independent nurses need to add themselves as a worker to ForwardHealth Portal.
- EVV Portal Functionality User Guide gives step-by-step instructions.
- Within two days, workers receive email from Sandata with temporary password for SMC app.

