

Electronic Visit Verification Overview

November 2023
Wisconsin EVV



WISCONSIN DEPARTMENT
of HEALTH SERVICES

P-02746 (12/2023)

Welcome to the training for Electronic Visit Verification Overview

Objectives

- Learn about Electronic Visit Verification (EVV) requirements
- Learn which services codes require EVV
- Understand soft launch and hard launch impacts

This will be a broad overview of what EVV is, what services require EVV in Wisconsin, and what we mean by “soft launch” and “hard launch.” Our intent here is to make sure everyone starts with the same basic knowledge before going deeper into EVV.

Key Terminology

- Sandata – EVV system provided by the Department of Health Services
- Client – A client is a member or participant who receives services through Wisconsin Medicaid
- Employee – A person (worker) who provides care to one or more clients

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Here's some key terminology that will be used throughout:

Sandata—EVV system provided by the Department of Health Services. It can be used by providers free of charge, or providers can choose to purchase a different EVV system. Our trainings are geared to use of the Sandata system. Those choosing a different system should be sure to get the training and information they need from that vendor.

Client—A client is a member or participant who receives services through Wisconsin Medicaid.

Employee—A person (worker) who provides care to one or more clients. “Employee” is the term used in the Sandata EVV Portal; therefore, it's the one we will use for training. Employees in our presentations refer to the person taking care of clients and does not include administrative office staff.

A note for independent nurses: You wear two hats, business owner/administrator and employee. You'll need to consider how EVV fits in your routines from both perspectives.

Overview of EVV

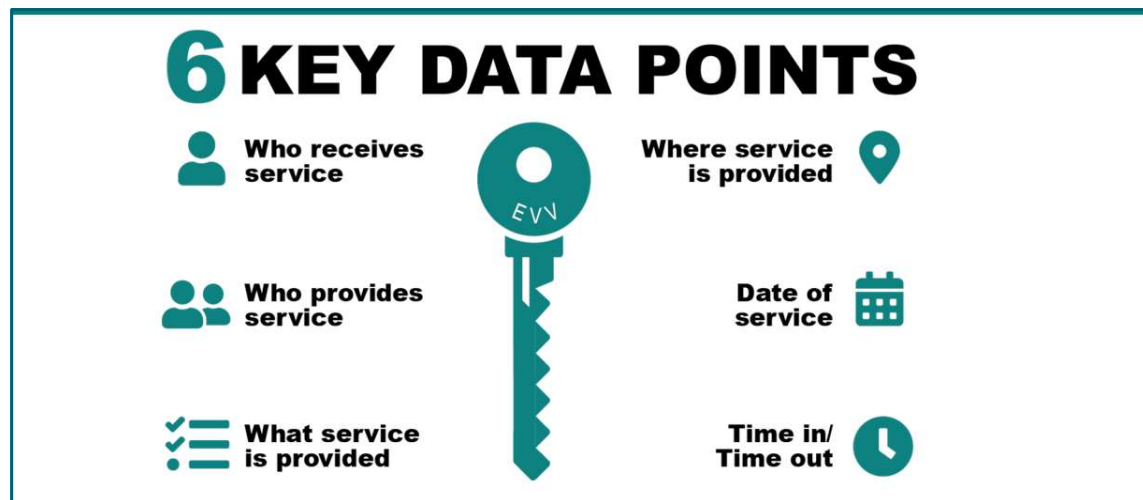
- Federally-mandated 21st Century Cures Act requires EVV for Medicaid-covered personal care services (PCS) and home health care services (HHCS).
- EVV uses technology to make sure clients receive the services they need.
- States that do not implement EVV will lose Medicaid funding.

Let's begin with an overview of why Wisconsin is requiring EVV.

In 2016, the 21st Century Cures Act, a federal law, was passed. The law requires every state, including Wisconsin, to implement EVV for Medicaid-covered personal care and home health care services. It uses technology (which can be as simple as a landline telephone) to make sure clients receive the services they need.

If we don't follow this federal law, Wisconsin will lose money for Medicaid services.

Overview of EVV



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So let's talk about what EVV is. EVV is an electronic system that uses technology to make sure clients receive the services they need. Employees check in at the beginning and check out at the end of each visit, using a smart phone or tablet, small digital device, or landline telephone. The 21st Century Cures Act requires that the EVV system captures six key pieces of information:

- Who receives the service (the client)
- Who provides the service (the employee, and their employer/provider agency)
- What service is provided
- Where the service is provided
- The date of service
- The time the service begins and ends

Two points I'd like to emphasize here:

- Wisconsin's EVV solution does **not** monitor or track a worker's location before, after, or during a visit. Location is only captured at the start and end of a visit—two points in time.
- EVV does not change DHS policy of where care can be provided. There are times that care is allowed and provided in the community, outside the client's home. EVV does not prevent that.

Overview of EVV

The Wisconsin Department of Health Services (DHS) is working to:

- Maintain level of services provided
- Support provider selection
- Keep individual's choice of worker
- Ensure needed care is delivered

Have questions? Need help?

Wisconsin EVV Customer Care is available at 833-931-2035 or vdxc.contactevv@wisconsin.gov Monday-Friday, 7 a.m.–6 p.m. Central Time.

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DHS has worked with clients, employees, providers, payers, and advocacy groups to ensure these guiding principles are met:

- Maintain level of services provided
- Support provider selection
- Keep individual's choice of worker
- Ensure needed care is delivered

We appreciate all of your time and feedback provided throughout this process, and welcome more feedback as we go along. We want EVV to be successful in our state and for our providers.

Our Wisconsin EVV Customer Care is available to help! Their contact information is here, and on each of our DHS EVV webpages. They are committed to helping providers and employees through the EVV process. We will do our best to ensure these changes have the least amount of impact on clients, employees, providers, and payers while still meeting the federal requirements.

Service Codes Requiring EVV

Personal Care Services

Service codes T1019, T1020, S5125, and S5126

Hard launch May 1, 2023

Additional PCS Code 99509

- **Soft launch on January 1, 2024**
- Hard launch in 2024—date TBD

Home Health Care Services

Service codes 92507, 97139, 97799, 99600, 99504, S9123, S9124, T1001, T1021, T1502.

- **Soft launch on January 1, 2024**
- Hard launch in 2024—date TBD

www.dhs.wisconsin.gov/evv/service-codes.htm



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Let's move on to which service codes require EVV.

Here is a quick comparison of our EVV Timelines for both personal care services and home health care services. All of this information is also on our webpage. You can use the QR code here: point your cell phone camera at the box in the lower right corner, tap on the text that pops up, and you'll be taken to the webpage.

As you can see, the four service codes on the left for personal care services (T1019, T1020, S5125, S5126) are in "hard launch," which means those claims are denied if EVV is not used with these services. Providers can follow up by editing and resubmitting.

The 10 services codes on the right, for home health care services, will be in "soft launch" and required to use EVV on January 1, 2024.

I'd also like to draw your attention to the additional PCS code, 99509 for nurse supervisory visits, you see on the left. That service code will also be in "soft launch" and require EVV on January 1, 2024.

The hard launch date for these final codes is still to be determined. DHS will provide at least three months' notice to providers before hard launch begins. In

addition to an email and ForwardHealth Update announcing the TBD hard launch date, the webpage referenced here will always have the latest information on dates.

Soft Launch for HHCS

Use of EVV system is required on January 1, 2024, to:

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

During the soft launch phase:

- Data is matched to claims for informational purposes only.
- Watch your payer's claims messaging to learn if your claim would be paid in hard launch.
- Contact your payer or EVV Customer Care if unsure why a claim wouldn't be paid.

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So what is soft launch? Soft launch means EVV is required. For home health care services listed on the previous slide and the 99509 personal care service code, the use of an EVV system is required on January 1, 2024, to:

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

During the soft launch phase:

- Data is matched to claims for informational purposes only.
- Watch your payers' claims messaging to learn if your claim would be paid in hard launch.
- Contact your payer or EVV Customer Care if you're unsure why a claim wouldn't be paid.

Start using EVV during soft launch. Find your new routines in this safe zone, before there are financial consequences. Providers who practice capturing EVV information in soft launch have fewer claim denials when hard launch began. We cannot reinforce enough how important it is for home health providers to start EVV use during the soft launch phase.

Next we'll look at hard launch, and what that looks like with different payers.

Hard Launch: Fee-for-Service

- Hard launch requires service claims to have a corresponding EVV record.
- On and after hard launch, the following will occur:
 - Fee-for-service claim details without required verified EVV data will be denied.
 - Fee-for-service detail units billed exceeding the verified EVV visit units available will also be denied.

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In hard launch, claims must have a corresponding EVV record to be paid. Claims that cannot be matched by the payer to an EVV record are denied.

- On and after hard launch, the following will occur:
 - Fee for service claim details without required verified EVV data will be denied.
 - Fee for service detail units billed exceeding the verified EVV visit units available will also be denied.

Hard Launch: HMOs and MCOs

- HMOs and MCOs have the authority to deny provider claims that are missing EVV data.
- HMO and MCO encounters submitted to DHS without matching EVV data may be excluded from future capitation rate setting development.

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If your payer is an HMO or MCO: Claims that cannot be matched by the payer to an EVV record can be denied. HMOs and MCOs have the authority to deny provider claims that are missing EVV data.

The HMO and MCO also have consequences in how they are paid by DHS. HMO and MCO encounters submitted to DHS without matching EVV data may be excluded from future capitation rate setting development.

Hard Launch: IRIS

- IRIS fiscal employment agencies (FEA) will deny provider claims that are missing EVV data.
- IRIS participants whose participant-hired worker (PHW) fails to meet EVV requirements risk being disenrolled from the IRIS program.
- FEAs will continue to pay PHWs claims in a timely manner.

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This slide is for personal care service providers supporting those in the IRIS program.

After the May 1, 2023 hard launch:

- IRIS fiscal employment agencies (FEA) deny provider claims that are missing EVV data.
- IRIS participants whose participant-hired worker (PHW) fail to meet EVV requirements risk being disenrolled from the IRIS program.
- FEAs must continue to pay participant-hired workers in a timely manner.

Use HHCS Soft Launch

Getting ready for soft launch:

- Obtain required IDs.
- Perform technical setup.
- Train employees and staff.

www.dhs.wisconsin.gov/evv/providers.htm



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Have questions? Need help?
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Electronic Visit Verification (EVV): Information for Providers Getting ready for soft launch on January 1, 2024

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

Below are steps to complete this fall to start capturing EVV information on January 1, 2024. Independent nurses, as "an agency of one," will have the roles of both administrator and worker in the steps below.

Steps to take through November 2023

All providers, regardless if they are using the DHS-provided Sandata EVV system or an alternate EVV system, should complete these steps.

- Choose an EVV system that is right for your business. Providers can opt for either the DHS-provided Sandata EVV system or an alternate EVV system.
- Sign up for [EVV emails](#).
- Update your provider contact information on the [ForwardHealth Portal Demographic Maintenance Tool User Guide](#), P-00953 (PDF) 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 you provide.
- For providers using the DHS-provided Sandata EVV system, make sure you register for the Sandata administrator training with this same email because credentials will be sent to it after the training is complete.
- Join the [EVV Public Forum](#) on Wednesday, November 29 from 1-3 p.m. Central time (CT).
- Join [Key Conversations](#), a monthly informal question and answer session with EVV specialists.
- Share feedback with your health maintenance organization (HMO) or managed care organization (MCO). Become acquainted with their customer care options and claim resubmission policies.
- Start thinking through how EVV will fit into your daily routine and, if appropriate, how to communicate about EVV to your workers and the members you serve.
- Consider how you will structure training for your workers. Suggestions can be found on the [Training Workers for EVV](#), P-02851 (PDF) resource and [Successful Training](#), P-02706 (PDF).
- All printed resources are available in English, Hmong, and Spanish. Determine if printed resources will be needed in other languages. Request them at vdxc@contactevv.wisconsin.gov.

Use soft launch to its fullest. Don't put off using EVV until financial consequences are in effect. Prepare!

Providers (including independent nurses) can follow the steps listed on the "Getting Ready for Soft Launch" checklist located on the EVV Provider webpage. This step-by-step guide will help you keep track of each task to get ready for soft launch on January 1, 2024. The QR code here will take you to directly to this webpage.

What are the next big steps? If you're using the DHS-provided Sandata EVV system, then you'll need obtain the required worker IDs in mid December, then perform the technical system setup. After that comes administrator training and then training to learn how to capture visit information using the Sandata EVV system. Those are the three big steps.

Then practice, practice, practice!

Resources

Know that we are here to help, and providers have many resources available.

Resources

- EVV Customer Care:
 - Phone: 833-931-2035, Monday–Friday, 7 a.m.–6 p.m.
 - Email VDXC.ContactEVV@wisconsin.gov
- EVV webpage at www.dhs.wisconsin.gov/evv/index.htm
 - Training Resources
 - Information about EVV in Wisconsin

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EVV Customer Care at 833-931-2035, Monday–Friday, 7 a.m.–6 p.m. Our customer service team are specially trained for EVV and only take EVV calls.

Email support at VDXC.ContactEVV@wisconsin.gov

EVV webpage at www.dhs.wisconsin.gov/evv/index.htm for information about the following:

- Training Resources
- EVV in Wisconsin

Thank You

Thank you for the important services you provide to members.



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