



Electronic Visit Verification

Overview

Disclaimer:

- This information is provided in part, as a courtesy from *iCare* to assist you with claims submission and billing. This does not replace Forward Health and DHS Guidelines. *iCare* relies upon Forward Health and DHS for payment rules and regulations for claim submission.
- Please reference the ForwardHealth Implementation of Electronic Visit Verification for Personal Care and Supportive Home Care Services <https://www.forwardhealth.wi.gov/kw/pdf/2020-31.pdf> for additional guidance and ongoing changes
- *iCare* contracted Personal Care and Supportive Home Care providers must comply with ForwardHealth EVV requirements, including [training](#).

Per Wisconsin Department of Health Services

- The **Federal 21st Century Cures Act** requires all states to implement Electronic Visit Verification (EVV) for Medicaid-covered Personal Care Services and Supportive Home Care (PCS & SHC) and Home Health Care Services (HHCS)
- **EVV** is a system that uses technology to verify that authorized services are provided. Through EVV, a worker providing Personal Care or Supportive Home Care services **sends visit data to an EVV vendor** at the **beginning and end of each visit** using methods such as:
 - a **mobile application**
 - a **home phone** (landline or fixed Voice over Internet Protocol [VoIP])
 - **fixed device**

Per Wisconsin Department of Health Services Cont.

Workers using EVV enter information to record

- Who receives the service
- Who provides the service
- What service is provided
- Where the service is provided
- The date of the service. The check in and check out times for the service

Programs affected

- Medicaid and BadgerCare Plus (ForwardHealth card)
- BadgerCare Plus and Medicaid SSI HMOs
- Family Care and Family Care Partnership
- IRIS (Include, Respect, I Self-Direct)
 - *IRIS does not apply for HHCS

Services Impacted – PCS & SHC

Personal Care Services

- T1019 (Personal care services, per 15 minutes, not for an inpatient or resident of a hospital, nursing facility, ICF/MR¹ or IMD, part of the individualized plan of treatment)
- T1020 (Personal care services, per diem, not for an inpatient or resident of a hospital, nursing facility, ICF/MR or IMD, part of the individualized plan of treatment)

Supportive Home Care services (Family Care Partnership)

- S5125 (Attendant care services; per 15 minutes)
- S5126 (Attendant care services; per diem)

Services Impacted – HHCS

- **92507:** Treatment of speech, language, voice, communication, and/or auditory processing disorder; per visit
- **97139:** Unlisted therapeutic procedure – Occupational therapy; per visit
- **97799:** Unlisted physical medicine/rehabilitation service or procedure – Physical therapy; per visit
- **99504:** Home visit for mechanical ventilation care; per hour
- **99600:** Unlisted home visit service or procedure; per visit
- **S9123:** Non-vent private duty nursing care in the home – by registered nurse; per hour
- **S9124:** Non-vent private duty nursing care in the home – by licensed practical nurse; per hour
- **T1001:** Nursing assessment/evaluation; per visit
- **T1021:** Home health aide or certified nurse assistant; per visit
- **T1502:** Administration of oral, intramuscular and/or subcutaneous medication by health care agency/ professional; per visit
- **99509:** Nurse supervisory visit; Home visit for assistance with activities of daily living and personal care; per visit

PCS & SHC HHCS

- ForwardHealth and *iCare* require PCS & SHC claims to have a matching EVV record; if there is no matching EVV record, the claim will be denied
- ForwardHealth and *iCare* will require HHCS claims to have a matching EVV record; if there is no matching EVV record, the claim will be denied

Technology

- DHS's chosen EVV solution, offered through a vendor called Sandata, may be used by all DHS programs, provider agencies, and program payers. DHS will provide the Sandata EVV system's data collection functionality free of charge to providers and program payers. Provider agencies and program payers will **not** have to purchase an EVV system if they elect to use the DHS-provided EVV system

EVV Data Collection

- **Mobile phone application** (mobile visit verification [MVV]): This option allows the worker to record visits using a smart phone or tablet, even when no cellular, satellite, or other data services are available at the service location
- **Landline or fixed VoIP phone** (telephonic visit verification [TVV]): This option allows the worker to record visits via a landline or fixed VoIP phone at the service location using a toll-free phone number
- **EVV digital device** (fixed visit verification [FVV]): This option allows the worker to record visits with a small electronic device. The device, which is secured to a surface in the member or participant's home, provides a code that links the time and date the services are provided to the client and service location. The visit information is then submitted to the provider agency or program payer via a phone. FVV is the option of last resort and may only be requested if certain criteria are met. Refer to the Fixed Visit Verification section of this Update for more information
- **Note:** Alternate EVV systems may employ different data collection methods. Refer to the Alternate EVV Systems section of this Update for more information on alternate EVV

Corrections

- In addition to manually entering visits, administrative users of DHS EVV may correct exceptions for valid EVV data. In the DHS-provided EVV, provider agencies will be able to identify exceptions that are preventing visit data from being validated and log in to the Sandata Provider Agency EVV portal to acknowledge or correct them
- All corrections to EVV visit information, including those made through an alternate EVV system, require an associated reason code to explain why the EVV data was created or changed. Corrections applied to the EVV data will be monitored by DHS. The provider agency must retain and maintain paper documentation of the reason for the correction, per the Centers for Medicare & Medicaid Services. The DHS Office of the Inspector General will be closely monitoring corrected exceptions for valid EVV data

Visits Lasting Longer Than 24 Hours

- When providing continuous services lasting more than 24 hours, workers are required to check out and check back in again at least once every 24 hours
- **Note:** The DHS EVV system will automatically check out a worker after 25 hours. For this reason, visits that last longer than 25 continuous hours will require a worker to check in again to continue the visit
- Alternate EVV systems may not be subject to these limitations

Visits With Multiple Dates of Service

For services provided when a single visit has more than one DOS (for example, a visit starting Monday at 8 p.m. and ending Tuesday at 4 a.m.), workers using EVV should check in and check out at the beginning and end of a shift as they normally would

BadgerCare Plus and Medicaid

- For services provided to BadgerCare Plus or Medicaid members, the claim could be billed as a date span, or both dates could be billed on separate details on the claim. Per current policy, span dates may only be billed when the same services are provided for the same amount of time for each DOS. The procedure or revenue code, modifier, and units billed must be the same for each date included in the span

Visits With Multiple Dates of Service Cont.

Family Care, Family Care Partnership, IRIS

- For services provided under Family Care, Family Care Partnership, or IRIS, both DOS will need to be identified as separate details on the encounter. For MCOs and IRIS FEAs, the encounter must be associated to a specific visit key

Span Billing

Span billing is when one claim detail is submitted for services given over multiple days. The Wisconsin Department of Health Services (DHS) requires that certain conditions be met in order for claims using span billing to be processed correctly. This is especially important when billing for services that require electronic visit verification (EVV), because the **units of service captured using an EVV system must be equal to or greater than the units of service billed on the claim.**

To be compliant with existing DHS span billing policy, **the procedure code, revenue code, modifier, and units billed must all be the same for each date included in the date span.** Unless the billed units for every day in the date span are identical, provider agencies should bill each date of service separately to avoid denials.

Additional Span Billing Details

When processing claims using span billing, DHS calculates the units billed per day by dividing the total units in the date span by the number of days in the span. The result is the calculated units for every day of the span.

DHS policy requires that, for each day in the span, there be at least as many EVV units as calculated units.

For example, if a provider agency bills 15 units for three days, there must be at least five EVV units for **each** of the three days in the date span. If the EVV units were captured as six units on Monday, five units on Tuesday, and four units on Wednesday, the date span detail would **not** be compliant with DHS policy because Wednesday does not have at least five EVV units. Managed care organizations (MCOs) may deny payment for claims that are not compliant with DHS policy.

Examples:

From Date 11/1/2022 To Date 11/3/2022

Claim Detail Line billed units of 15

EVV Visits units required:

11/1/22	5 or more EVV units
11/2/22	5 or more EVV units
11/3/22	5 or more EVV units

Day 1: 5 EVV hours or more

Tips and Reminders

- Ensure EVV units match the units on the claim to avoid denials
- Verify your authorizations are loaded under the correct Medicaid Provider Number in Sandata
- Verify workers are entering EVV data with the valid *iCare* authorization
- EVV data should be entered at the time services are provided. However, if data is manually entered, allow at least 48 hours for the EVV data to load to *iCare* before submitting claims

DHS Resources

- [EVV webpage](#)
- [ForwardHealth Implementation of Electronic Visit Verification for Personal Care and Supportive Home Care Services](#)
- [Home Health Care Services Information](#)
- [EVV FAQs](#)
- [ForwardHealth Portal](#)
- [Training resources](#)
- Wisconsin EVV Customer Care: 833-931-2035