Health and Human Services Commission (HHSC)

Electronic Visit Verification (EVV) Compliance Oversight Reviews Policy (Revised) Effective Sept. 1, 2019

EVV Compliance Oversight Reviews monitor program providers, who are contracted with HHSC and Managed Care Organizations (MCOs), on the use of an EVV system to electronically document authorized service delivery visits.

Program providers will be reviewed on a regular basis to ensure they are following EVV policies in the following areas:
- **EVV Usage (NEW)**
  - Program providers will be reviewed for EVV visit transactions manually-entered into the EVV system and EVV visit transactions rejected by the EVV Aggregator.
- **EVV Reason Codes and Required Free Text (REVISED)**
  - Program providers will be reviewed for appropriate use of reason codes and reason code description options and entry of required free text.
- **EVV Allowable Phone Identification (REVISED)**
  - Program providers will be reviewed for allowable home landline phone types used to clock in and out.

EVV USAGE REVIEWS (NEW)

Effective for visits on or after Sept. 1, 2019, the EVV Usage Review will monitor:
- Manually entered EVV visit transactions; and
- Rejected EVV visit transactions caused by program provider error.

A **manual EVV visit transaction** is an EVV visit transaction which requires manual entry of billed hours into an EVV system through the graphical user interface (GUI). These are also called GUI transactions. A manual EVV visit transaction is identified when the "GUI" indicator is present in the visit *Clock In Method* field, visit *Clock Out Method* field, or both fields.

A **rejected EVV visit transaction** is an EVV visit transaction submitted to the EVV Aggregator from an EVV system that is not accepted because it does not pass visit validation edits.

Compliance Standard
All program providers must achieve and maintain a minimum EVV Usage Score of 80 percent (80%), rounded to the nearest whole percentage point, per quarter, unless otherwise notified by HHSC. This score applies for both HHSC Fee-for-Service and MCOs' programs.

Grace Period
Program providers currently required to use EVV will receive an EVV Usage grace period for visits with dates of service between Sept. 1, 2019 through Aug. 31, 2020.

EVV USAGE REVIEWS (CONT'D)

During the grace period, program providers *will be required to*:
- Use the EVV system.
- Complete visit maintenance before billing.
- Train/re-train their staff on how to use the EVV system.
- Review the *EVV Usage Report* and become familiar with the data.

During the EVV Usage grace period, program providers *will not be required to* meet the minimum EVV compliance score of 80 percent until further notice.

Review Period/Schedule

The EVV Usage Review period consists of all visits with dates of service within the state's fiscal year quarters. Reviews may begin sixty calendar days from the last day of the quarter beginning on or after the 5th day of the following month. This allows for visit maintenance to be completed for all visits within the quarterly review period. The EVV Usage Review Period/Schedule is listed below:

EVV Usage Review Period/Schedule

Quarter #	Review Period (based on date of visit)	EVV Usage Review May Begin On or After:
1	September, October, November	February 5
2	December, January, February	May 5
3	March, April, May	August 5
4	June, July, August	November 5

Report

Effective for visits on or after Sept. 1, 2019, the payers will use the *EVV Usage Report* (located in the EVV Portal) to determine the EVV Usage Score for each program provider's contract with HHSC and the MCOs. This report will show the EVV Usage score for the preceding quarter and is available for up-to-date monitoring.

Score Calculations

The **EVV Usage Score** is equal to the **manual visit score** plus the **rejected visit score** for the quarter.

- The **manual visit score** is equal to the number of *non-GUI EVV visit transactions* divided by the *total accepted EVV visit transactions,* multiplied by 60 percent.
  - A GUI EVV visit transaction is an accepted EVV visit transaction in which the "GUI" indicator is present in the visit *Clock In Method* field, visit *Clock Out Method* field, or both fields.
  - GUI EVV visit transactions with zero pay hours will be excluded from EVV Usage Score calculations.
  - GUI EVV visit transactions are counted once.
  - Total accepted EVV visit transactions include transactions which have been accepted into the EVV Aggregator.

- ▪ For example, an EVV GUI visit transaction that is initially rejected by the EVV Aggregator but is resubmitted and accepted would only be counted one time.
- The **rejected visit score** is equal to the number of *non-rejected EVV visit transactions,* divided by the *total exported EVV visit transactions,* multiplied by 40 percent.
  - o Total exported EVV visit transactions include each EVV visit transaction exported from an EVV system to the EVV Aggregator.
    - ▪ For example, an EVV visit transaction that is initially rejected by the EVV Aggregator but is later resubmitted and accepted would be counted two times.
  - o Rejected EVV visit transactions identified as program provider error are counted as many times as they are resubmitted to the EVV Aggregator.

Manual Visit Score	+	Rejected Visit Score	=	EVV Usage Score
Manual Visit Score $\left(\dfrac{\text{non-GUI visit transactions}}{\text{total accepted visit transactions}}\right) * 60\%$	+	**Rejected Visit Score** $\left(\dfrac{\text{non-rejected visit transactions}}{\text{total exported visit transactions}}\right) * 40\%$	=	**EVV Usage Score**
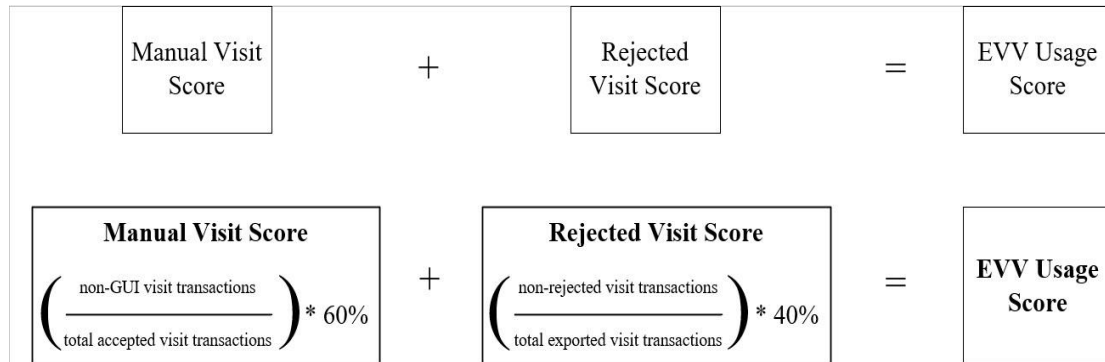
Review Start Date
The start date of the EVV Usage Reviews will be posted on the HHSC and MCOs' websites ninety days prior to the start of the review.

Failure to Meet the Compliance Standard
Grace period until Aug 31, 2020. Program providers *will not be required to* meet the minimum EVV compliance score of 80 percent until further notice.

EVV REASON CODE AND REQUIRED FREE TEXT REVIEWS (REVISED)

EVV Reason Code and Required Free Text Reviews will monitor:
- Misuse of EVV reason code numbers and reason code description options; and
- Failure to enter required free text.

Compliance Standard

Misuse of Reason Codes -
- Using the same EVV reason code number and reason code description option for the same member more than 14 days within a calendar month may constitute misuse of reason codes. If a program provider uses the same EVV reason code number and same reason code description option for more than 14 days within a calendar month, the program provider must document the situation that caused the use of the same reason code number and description option.
- Inappropriate use of EVV reason code numbers and reason code descriptions.

Required Free Text -
- Free text is required for **ANY** missing (applies to all reason codes):
  - Actual clock in time when EVV services begin;
  - Actual clock out time when EVV services end; or
  - Actual clock in and clock out time when EVV services begin and end.

- Free text is also required whenever the following reason codes are used:
  - **Reason Code 131 - Emergency:** The program provider must describe the nature of the emergency and document any missing actual clock in or clock out time.
  - **Reason Code 600 - Other:** The program provider must document the reason why "other" was selected and document any missing actual clock in or clock out time.

Grace Period for Misuse of Reason Codes
Reason codes are required in the EVV system to clear visit exceptions, however program providers will not be assessed for misuse of reason codes for visits with dates of service between Sept. 1, 2019 through Aug. 31, 2020.

During the grace period, program providers *will be required to*:
- Use the EVV system.
- Complete visit maintenance before billing.
- Train/re-train their staff on using the most appropriate reason code/descriptions.
- Review the *EVV Reason Code Usage and Free Text Report* and become familiar with the data.

Grace Period for Required Free Text
There is no grace period for documenting required free text. Program providers must always document required free text.

EVV REASON CODE AND REQUIRED FREE TEXT REVIEWS (CONT'D)

Review Period/Schedule
- Misuse of reason codes will not be reviewed for visits with dates of service between Sept. 1, 2019 through Aug. 31, 2020.
- Required free text reviews will be at the payer's discretion and may occur at any time. Each payer will determine the date range of the review period for required free text.

Report
Effective for visits on or after Sept. 1, 2019, the payers will use the *EVV Reason Usage and Free Text Report* (located in the EVV Portal) to determine the reason code/reason code description used for each member and if any required free text was entered. This report is available for up-to-date monitoring.

Review Start Date *(For revised Reason Codes and Free Text requirements, effective Sept. 1, 2019)*
- **Misuse of Reason Codes –** The review start date will be posted on the HHSC and MCOs' websites 90 days prior to the start of reviews.
- **Required Free Text –** Reviews for revised free text requirements will start on Sept. 1, 2019.

Failure to Meet the Compliance Standard
Misuse of Reason Codes - Grace period until Aug. 31, 2020. Program providers *will not be assessed enforcement actions, including recoupments* until further notice.

Required Free Text - Failure to document any required free text may result in recoupment of associated claims.

EVV ALLOWABLE PHONE IDENTIFICATION REVIEWS (REVISED)

The EVV Allowable Phone Identification Review will monitor:
- The use of an unallowable phone type when a program provider has selected the member's home phone landline method as the clock in and clock out method.

Compliance Standard
Program providers must ensure unallowable phone types are not used to clock in and clock out of the EVV system when the visit *Clock In Method* field or visit *Clock Out Method* field is identified as Landline for the member.

Grace Period
None

Review Period/Schedule
The Allowable Phone Identification Review period will be reviewed at the payer's discretion and may occur at any time. Each payer will determine the date range of the review period for Allowable Phone Identification Reviews.

Report
The payers will use the *EVV Landline Phone Verification Report* (located in the EVV vendor system) to identify unallowable for types used to clock in and out of the EVV system, when the visit *Clock In Method* field or visit *Clock Out Method* field is identified as Landline for a member. This report is available for up-to-date monitoring of unallowable phone types.

Review Start Date
Aug. 1, 2018

Failure to Meet the Compliance Standard
If HHSC or an MCO identifies an unallowable phone type, the program provider will be notified in writing via email and mail. The written notification to the program provider must include, at a minimum, the following information:
- Phone number identified
- Phone type
- Dates the phone number was used to clock in or clock out
- Attendant associated with the EVV visit
- Member's first and last name
- Member's Medicaid number
- Date HHSC or MCO identified the phone number associated with the device
- List of supporting documentation the provider can submit to validate the identified unallowable phone number(s) is not a mobile phone, a cellular-enabled device, or tablet
- HHSC or MCO contact information

HHSC or the MCO must provide the program provider a copy of the *EVV Landline Phone Verification Report* or other phone sampling reports used to identify the unallowable phone type.

EVV ALLOWABLE PHONE IDENTIFICATION REVIEWS (CONT'D)

When an unallowable phone type is identified on the *EVV Landline Phone Verification Report*, the program provider must take one of the actions listed below within twenty business days from receipt of a written notice from HHSC or MCO:

- Use an allowable phone type.
- Select a different EVV call in and call out method:
  - o EVV mobile method, or
  - o EVV alternative device.
- Submit supporting documentation to HHSC or MCO showing the phone number identified is not an unallowable phone type. Supporting documentation may include, but is not limited to:
  - o Internet search sites such as White Pages, Free Carrier Look-up Service, Reverse Phone Check
  - o Documentation from the phone company

HHSC or the MCO will review all supporting documentation submitted within the required twenty business day timeframe and provide written notice of a decision. If the program provider fails to take appropriate action when using an unallowable phone type within twenty business days from the date of the written notice from HHSC or MCO, enforcement action(s), including recoupment of the claim(s) associated with the visits(s) identified in the written notice, may result.