Medicaid Provider Notification:

Electronic Visit Verification (EVV) Initiative Instructions for Request of EVV Small Alternative Device

All Medicaid-enrolled service providers (provider agencies) who provide Medicaid services that are subject to electronic visit verification (EVV) are required to use a Health and Human Services Commission (HHSC) approved EVV system to record onsite visitation with the individual/member.

HHSC has notified individuals, and members who receive a service subject to EVV, that every service provider in Texas delivering certain attendant and private duty nursing (PDN) services is required to use EVV to document the time an attendant or nurse provides services. The notification included the following information:

- An attendant or nurse will need to use the individual's or member's home landline phone to call a toll-free phone number when he or she begins and ends providing services.
- Attendants and nurses may not use an individual's or member's cell phone for EVV.
- If an individual or member does not have a home landline phone, a small alternative device will be installed in their home for use by the nurse or attendant to document the time the attendant or nurse begins and ends providing services.
- Individuals/members should notify their provider agency or attendant/nurse if they do
 not have a home landline phone or will not allow use of their home landline phone.
 The provider agency will need to ask the individual or member to sign a Medicaid
 Electronic Visit Verification Small Alternative Device Agreement Form to document
 they do not have a home landline phone or will not allow use of their home landline
 phone.

NOTE: Consumer Directed Services (CDS) employers will not have to complete the Medicaid Electronic Visit Verification Small Alternative Device Agreement Form as EVV is optional for CDS. However, the Financial Management Service Agency (FMSA) will need to complete a Medicaid Electronic Visit Verification Small Alternative Device Order Form on behalf of the CDS employer and submit the form to the EVV vendor before a device can be shipped.

PROVIDER REQUEST FOR A SMALL ALTERNATIVE DEVICE

The following steps must be followed to order a small alternative device for the individual's/member's home.

- 1. Present in person the Medicaid Electronic Visit Verification Small Alternative Device Agreement Form to the individual or member when the person either does not have, or will not allow use of, their home landline phone. (Step 1 does not apply to persons participating in the CDS option.)
 - (a) HHSC prefers the provider agency present the form within seven calendar days of receiving notice from the person.
- The provider agency or FMSA must complete the remaining provider agency portions of the Agreement Form and the Order Form before sending to the EVV vendor. HHSC expects completed agreement/order forms be submitted to the EVV vendor as follows:

Instructions for Request of EVV Small Alternative Device

- (a) Within three calendar days of obtaining the individual's or member's signature from a provider agency; or
- (b) Within three days of receiving a request for a CDS employer from an FMSA.
- 3. EVV vendor will process and deliver small alternative device(s) to the provider agency, or CDS employer, within 10 calendar days of order receipt:
 - (a) If the signed Small Alternative Device Agreement Form is <u>incomplete</u>, the EVV vendor will notify the provider agency or FMSA within three calendar days of receipt of the order for quick resolution.
 - (b) For any other administrative concerns regarding small alternative device orders, the EVV vendor will contact the MCO or the Texas Medicaid & Healthcare Partnership (TMHP), as appropriate, within three calendar days of receipt to assist the EVV vendor and provider agency with resolution of the issue
- 4. Provider agency or CDS employer will install the small alternative device in the individual's or member's home on or before the first service delivery date following receipt of the small alternative device.

The Medicaid Electronic Visit Verification Small Device Agreement Form may be downloaded or printed from any Medicaid STAR+PLUS or STAR Health managed care organization website, the TMHP website, the DADS website, or from any EVV vendor website.

Instructions for Request of EVV Small Alternative Device

LIST OF HHSC APPROVED EVV VENDORS

Care Monitoring 2000, LLC (CM2000)				
Website: http://www.cm2000.com/texas.aspx				
Contact:	Email:	Phone:		
Alan Morris, Texas office Sales Account Manager	alan.morris@cm2000.com	Cell: (214) 771-6316 Office: (855) 209-2345		
Greg Lotz, Florida office Sales Account Manager	greg.lotz@cm2000.com	Cell: (727) 433-3636 Office: (855) 209-2345		
DataLogic (Vesta) Software, Inc.				
Website: www.vestaevv.com				
Contact:	Email:	Phone:		
Gloria Garza, Ph.D. Business Development Director	Gloria@vesta.net	(956) 412-1424		
Angela Byrd, Vesta EVV Specialist	angela@vesta.net	(956) 412-1424		
MEDsys Software Solutions, LLC				
Website: www.medsyshcs.com				
Contact:	Email:	Phone:		
Texas Dedicated Support and Sales Number		(877) 698-9392 Option 2 for sales		
Jeff Calcaterra	jcalcaterra@medsyshcs.com	(419) 491-3335 Ext. 722		
Hank Hernly	hhernly@medsyshcs.com	(419) 491-3335 Ext. 702		

COVERED SERVICES

The following services are subject to EVV requirements:

Services	Description
Managed Care	Personal assistance services (PAS), personal care services (PCS), private duty nursing (PDN) services, and Community First Choice (CFC) services provided in the home and in the community in the managed care STAR+PLUS and STAR Health programs
HHSC acute care fee-for-service	PCS and PDN services provided in the home and in the community

Instructions for Request of EVV Small Alternative Device

Services	Description
DADS fee-for- service	Attendant-like services provided in the home and in the community for the following programs:
	Community Attendant Services (CAS)
	Community Living Assistance and Support Services (CLASS)
	 Habilitation services and in-home respite
	 Community First Choice (CFC) services provided in the home and in the community for CLASS individuals
	Family Care (FC)
	Medically Dependent Children Program (MDCP)
	 In-home respite and flexible family support
	Primary Home Care (PHC)
Consumer Directed Services	EVV is optional for individuals who have selected the Consumer Directed Services (CDS) option.

TRAINING INFORMATION

HHSC will be hosting webinars for provider training; EVV vendors will conduct face-to-face training for providers, and vendor training materials can be found on-line at EVV vendor websites.

Provider agencies should monitor MCO, TMHP, HHSC and DADS websites for additional information regarding EVV implementation and training opportunities.

GENERAL INFORMATION

Provider agencies are encouraged to sign-up for email updates at: https://public.govdelivery.com/accounts/TXHHSC/subscriber/new

Questions about EVV implementation or the Medicaid Electronic Visit Verification Provider System Selection Form may be directed to:

Program	Email
Managed Care	Managed_Care_Initiatives@hhsc.state.tx.us
DADS fee-for-service programs	CPC@dads.state.tx.us
TMHP (acute care fee-for-service programs)	1-800-925-9126, Option 5