

HHSC Electronic Visit Verification

Module 7
EVV Aggregator and EVV Portal
April 15, 2019



Introduction

This is Module 7 of the Electronic Visit Verification (EVV) Tool Kit: EVV Aggregator and EVV Portal.

EVV Tool Kit: A collection of resources that will help prepare program providers, Financial Management Services Agencies (FMSAs), and Consumer Directed Services (CDS) employers in the use of EVV.

Click here for information on the 21st Century Cures

Act – Texas Implementation.



EVV Tool Kit

Previous modules are available in the EVV Tool Kit section of the HHSC EVV website:

- Module 1: Jan. 15, 2019:
 EVV 101 Introduction to EVV
- Module 2: Feb. 1, 2019:
 EVV Roles and Responsibilities Part I
- Module 3: Feb. 15, 2019:
 EVV Roles and Responsibilities Part II



EVV Tool Kit (cont'd)

Previous modules are available in the EVV Tool Kit section of the HHSC EVV website:

Module 4: March 1, 2019:

EVV Visit Transactions

Module 5: March 15, 2019:

EVV Visit Maintenance

Module 6: April 1, 2019:

EVV Process Flow: Beginning to End



Overview

This module will define the EVV Aggregator and EVV Portal and consists of the following EVV topics:

- Purpose and Benefits of the EVV Aggregator
- EVV Portal
- Data Validation
- EVV Claims Submission

Note: EVV does not replace any contract, program or licensure requirements regarding service delivery or service delivery documentation.

What is the EVV Aggregator?

The EVV Aggregator is a centralized database that collects, validates, and stores statewide EVV visit data transmitted by an EVV system.



Texas Medicaid & Healthcare Partnership (TMHP), the Texas Medicaid claims administrator, is responsible for operating and maintaining the EVV Aggregator and EVV Portal.



Purpose of the EVV Aggregator

The EVV Aggregator:

- Provides validated provider contract or enrollment data to EVV vendors.
- Accepts or rejects confirmed EVV visit transactions using standardized validation edits and returns results to EVV vendors.
- Stores all accepted and rejected EVV visit transactions.
- Matches EVV claim line items to accepted EVV visit transactions in the EVV Aggregator and sends matching results to the appropriate payer for EVV claims processing.



Benefits of the EVV Aggregator

- The EVV Aggregator improves data quality with standardized validations against state data.
 - It reduces the need for manual entry, decreasing data element errors on visit transactions.
 - Consistent visit data validation will be performed on all EVV visit transactions.
- EVV claims matching is standardized.
 - The same critical data elements will be used for EVV claims matching for all EVV payers.



Benefits of the EVV Aggregator (cont.)

- The EVV Aggregator stores accepted and rejected EVV visit transactions from the EVV vendors.
 - The EVV Aggregator allows review of top rejection issues and percent of rejections by vendor and provider.

What is the EVV Portal?

The EVV Portal is an online system that allows users to perform searches and view reports associated with the EVV visit data in the EVV Aggregator.





Benefits of the EVV Portal

- Program providers, FMSAs, managed care organizations (MCOs), and HHSC are able to search, view, print, and export:
 - EVV visit data (accepted and rejected EVV visit transactions).
 - EVV visit transaction to EVV claim line items matching results.
 - Provider identification data.

 Note: CDS employers will not use the EVV Portal, but will have access to visit logs and related reports in the EVV vendor system.

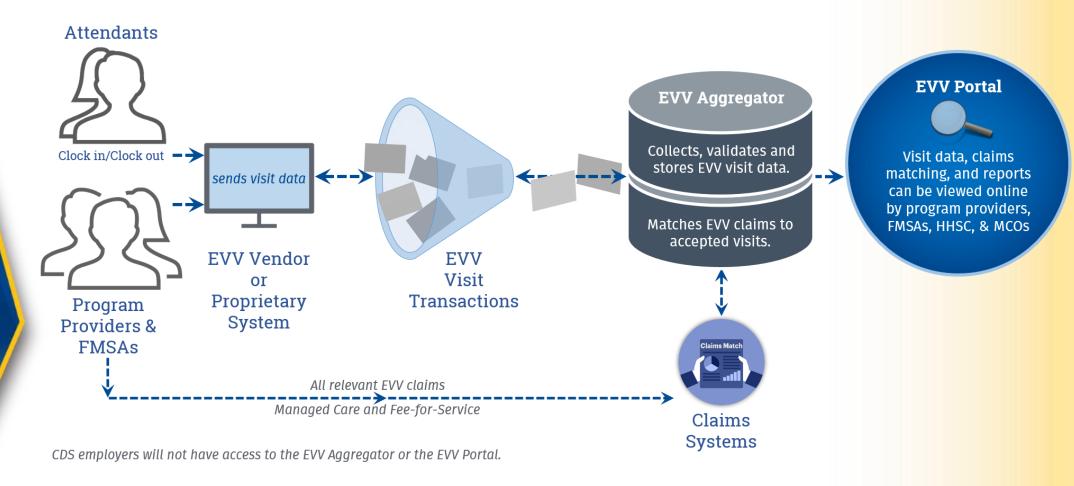


Benefits of the EVV Portal (cont'd)

- Users can:
 - View EVV visit transactions ready for billing.
 - Access standard EVV reports and run queries on EVV visit data.
 - Check the status and identify reasons for rejection of submitted EVV visit transactions.

EVV Systems Overview







Data Validation

- The EVV Aggregator will use existing, validated provider data from state Medicaid data resources to populate EVV provider data.
- The EVV Aggregator returns Medicaid enrolled provider data to EVV vendors.
- When all data elements from the EVV visit transactions pass validation edits, they are accepted into the EVV Aggregator.
- Data elements from EVV visit transactions that do not pass validation edits are returned to the EVV vendor system for correction.



EVV Claims Submission

- Fee-for-service (FFS) claims have no changes in the billing process.
- Claims for MCO EVV services will be submitted to TMHP through TexMedConnect or through Electronic Data Interchange (EDI) using a Compass 21 (C21) Submitter ID.



EVV Claims Matching Process

- When an EVV claim is received by TMHP, the EVV claim line items will be matched against the accepted EVV visit transactions, previously sent by the EVV vendor systems.
- Once the matching process has been performed, all EVV claims will be forwarded to the appropriate payer for final EVV claims processing.
- EVV claim line items without matching EVV visit transactions are denied by the payer.

EVV Claims

More detailed information on EVV claims submission and the matching process will be available in **Module 8 – Submitting an EVV Claim** of the EVV Tool Kit.





Tip #1

Get ready to submit EVV claims to TMHP.

- Claims for MCO EVV services will be submitted to TMHP through TexMedConnect or through Electronic Data Interchange (EDI) using a Compass 21 (C21) Submitter ID.
- Program providers and FMSAs that need help setting up C21 or CMS Submitter IDs should contact the EDI Help Desk at 1-888-863-3638, Option 4.
- Sign up for <u>GovDelivery</u> so you'll be notified when Module 8 – Submitting an EVV Claim of the EVV Tool Kit is posted on the EVV website.



Tip #2

Set up a TMHP Learning Management System (LMS) Account.

- The LMS, located at https://learn.tmhp.com/, contains TMHP's EVV-related training material. Use the LMS job aid to complete registration steps.
- Program providers, FMSAs, MCOs, and HHSC can click Sign Up for New Account to create a user name and password.
- Complete upcoming EVV computer-based training (CBT) modules located on the LMS.
 - Provider notifications will be posted when the CBT modules are available.



FAQs

FAQs – EVV Aggregator: 1 of 3

Question: Who is TMHP?

Answer: TMHP is the Texas Medicaid claims administrator and is responsible for managing the EVV Aggregator, the claims matching process, and the EVV Portal. TMHP is also responsible for management and oversight of the HHSC-approved EVV vendor pool and coordinates all data exchange for EVV vendors and EVV proprietary systems.

TMHP is responsible for training program providers, FMSAs, MCOs and HHSC on the use of the EVV Aggregator and EVV Portal.

Services

FAQs – EVV Aggregator: 2 of 3

Question: How can I get more information on the EVV Aggregator and EVV Portal?

Answer:

- 1. Attend the EVV Aggregator webinar on April 22, 2019.
- 2. Attend upcoming webinars conducted by TMHP during July and August.

Services

- Provider notifications will be posted when the registration link is available.
- 3. Ask TMHP questions about the EVV Aggregator and EVV Portal.

FAQs – EVV Aggregator: 3 of 3

Question: What happens if my EVV claim does not have an EVV visit transaction that matches?

Answer: EVV claims that do not have matching EVV visit transactions are denied by the payer.

Question: Where can I view my EVV claims matching results?

Answer: Program providers, FMSAs, MCOs, and HHSC will use the EVV Portal to view EVV visit transactions to EVV claim line item matching results.

Health and Human Services



What's Next?

April 22, 2019, Live Q&A Webinar:

- Topic: EVV Aggregator/EVV Portal
- Register for the webinar.
- Email questions ahead of time to <u>Electronic Visit Verification@hhsc.state.tx.us.</u>
- Include "Webinar Question" in the subject line.

May 1, 2019, Web Alert:

Submitting an EVV Claim

May 15, 2019, Web Alert:

EVV Portal Standard Reports and Search Tools



Thank you

Email EVV Aggregator and EVV Portal questions to:

EVV@TMHP.com