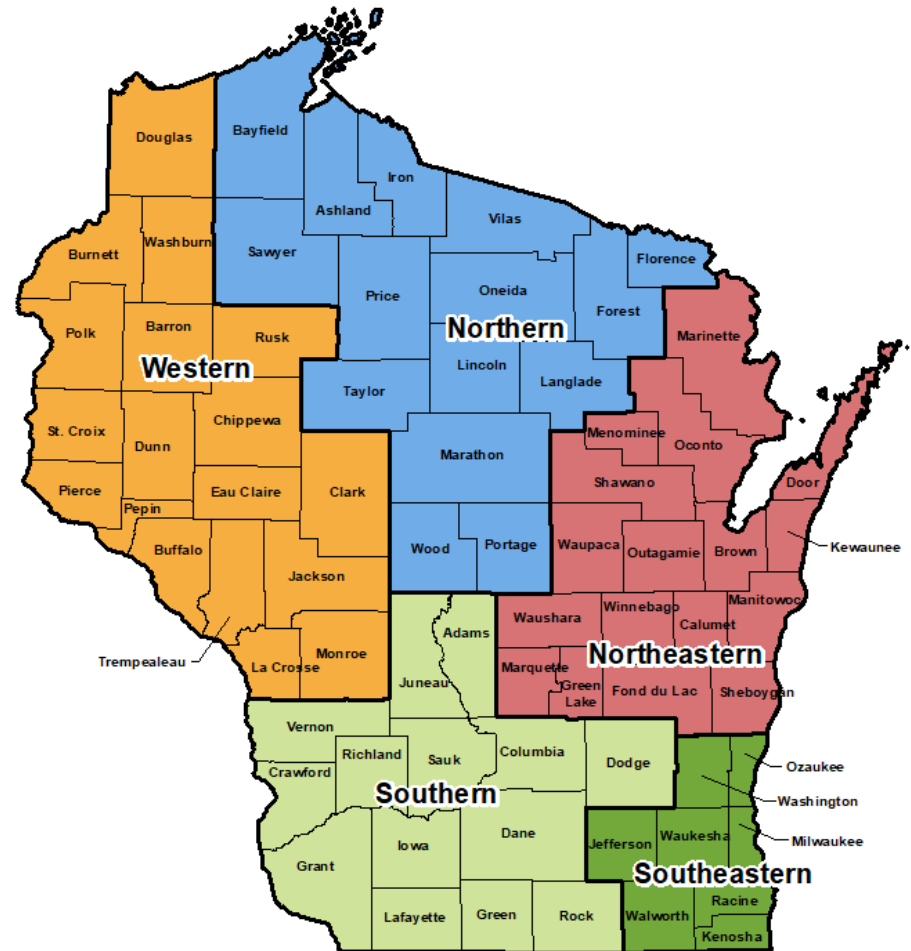# Where Are You Joining From?

What Is Your Role?

Fee-for-Service Electronic Visit Verification Administrator Training: Claim Edits

Spring 2023

WISCONSIN DEPARTMENT *of* **HEALTH SERVICES**

Introductions

- Sheila Itzen—Electronic Visit Verification (EVV) Business Lead
- Laura Castrogiovanni—EVV Customer Care
- Halli Tyra—EVV Customer Care
- Amber Bey—EVV Training Specialist
- Martha Pings—EVV Training Specialist

Objectives

- Understand how EVV policy impacts the claims process
- Recognize and understand EVV claim edits
- Learn how edits are resolved
- Understand when a claim should be resubmitted
- Learn how EVV effects span billing
- Use best practices to avoid EVV claim edits
- Learn where to find additional resources and assistance

Agenda

- EVV Lifecycle
- EVV Fee-for-Service Claim Processing
- EVV Best Practices
- Resources
- Questions

EVV Lifecycle

Lifecycle Flyer

How does the electronic visit verification record fit into the general claims process?

This overview provides a snapshot of how an electronic visit verification (EVV) visit record fits into the general claims process. Additional details about each step are provided on the following page.

Authorization

Payer authorizations are submitted to the Wisconsin Department of Health Services (DHS). DHS sends all authorizations for services requiring EVV to Sandata nightly.

Visit

A worker uses EVV technology to check in and check out of an authorized visit. Six key data points are captured to create EVV visit data.

Verification

Visits with all six required data elements are considered verified visits.

If necessary, the provider agency administrator makes manual edits in their EVV system to complete or correct the visit record. Sandata sends all of the day's visit files, including any edits and visits received from alternate EVV vendors, to DHS after midnight.

DHS then sends verified visits to the appropriate program payer the following day to be used for claims processing.
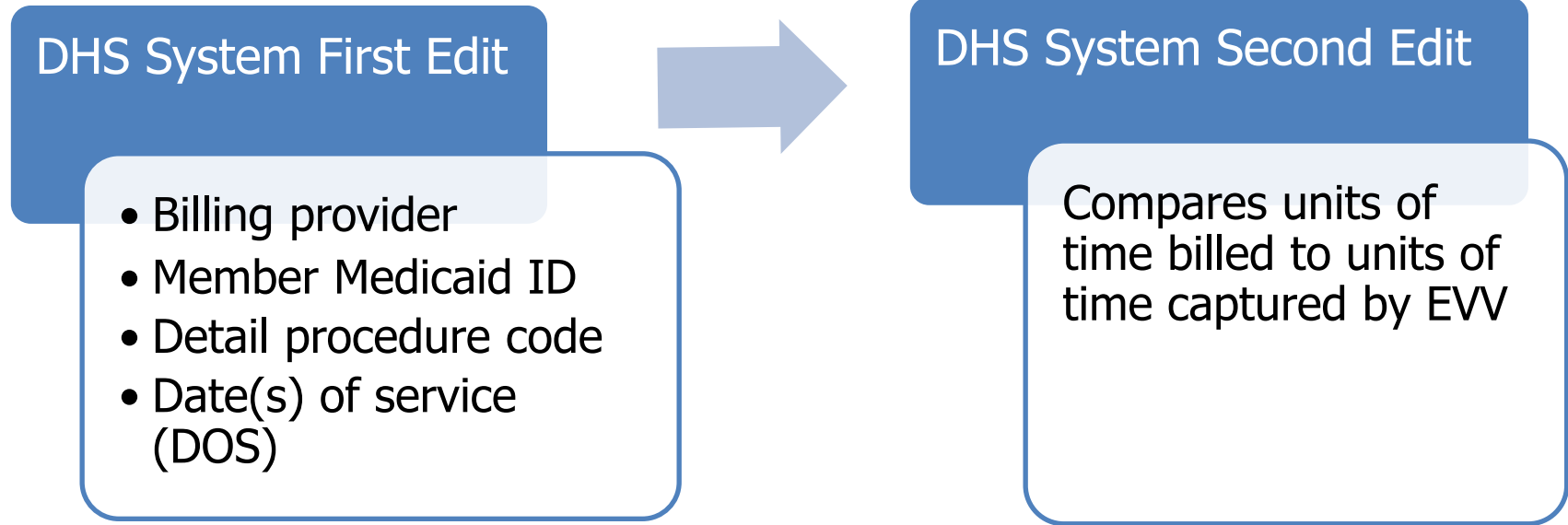
Validation

Visits should be in a verified status in the EVV system prior to the claim being sent. Incomplete visit records (those missing information) will not be used for claims or encounter processing.

The claim must correspond to the EVV visit record. This step ensures that each personal care or applicable supportive home care service has corresponding EVV data to support payment.

P-03124 (10/2021)

EVV Fee-for-Service Claim Processing

Validation of EVV Data

DHS System First Edit

- Billing provider
- Member Medicaid ID
- Detail procedure code
- Date(s) of service (DOS)

DHS System Second Edit

Compares units of time billed to units of time captured by EVV

Tip! Avoid payment delays by confirming EVV visits for claims are in verified status in your Sandata Portal or aggregator **before** submitting a claim.
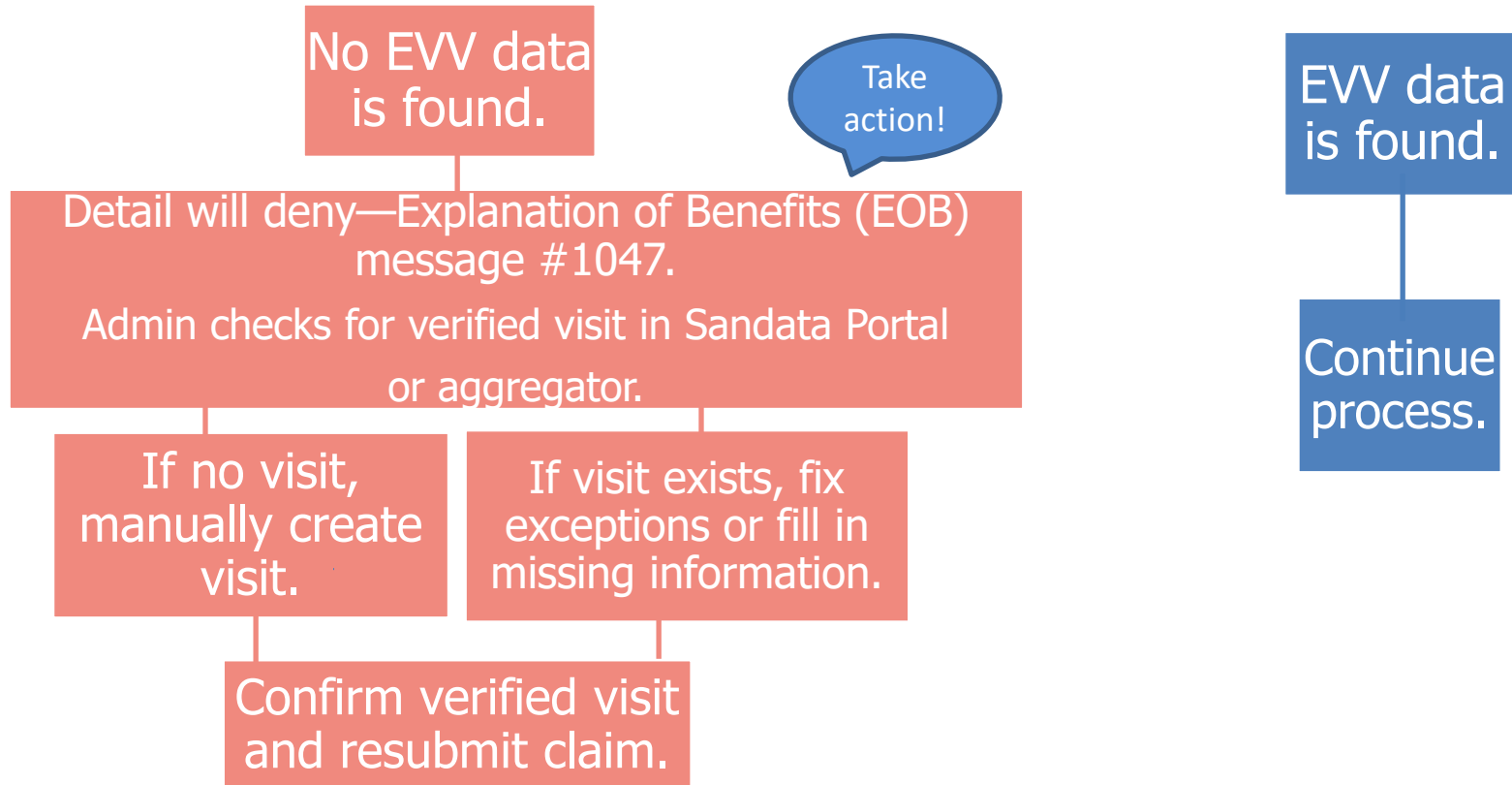
Explanation of Benefits (EOB)

Topic #5017

Correct Errors on Claims and Resubmit to ForwardHealth on the Portal

Providers can view EOB codes and descriptions for any claim submitted to ForwardHealth on the ForwardHealth Portal. The EOBs help providers determine why a claim did not process successfully, so providers may correct the error online and resubmit the claim. The EOB appears on the bottom of the screen and references the applicable claim header or detail.

PROC CD	MODIFIERS	SERVICE DATES FROM	TO	ALLW UNITS COPAY AMT	RENDERING PROVIDER BILLED AMT	ALLOWED AMT	INCENTIVES	PA NUMBER PAID AMT	DETAIL EOBS
T1019		010923	011323	95.00				9999999999	1048
				0.00	534.85	0.00	0.00	0.00	

First System Edit

No EVV data is found.

Take action!

EVV data is found.

Detail will deny—Explanation of Benefits (EOB) message #1047.

Admin checks for verified visit in Sandata Portal or aggregator.

Continue process.

If no visit, manually create visit.

If visit exists, fix exceptions or fill in missing information.

Confirm verified visit and resubmit claim.

Excluding Live-Ins

For excluded live-in workers:

1. Use the ForwardHealth Portal to get their worker ID number.
2. Amend prior authorization with the live-in form.
3. Submit claim with KX modifier.

Service or Modifier
T1019: Personal Care Services per 15 minutes
T1020: Personal Care Services per day
S5125: Supportive Home Care per 15 minutes
S5126: Supportive Home Care per day
KX Modifier: identifies a live-in worker not required to collect EVV data

Excluding Live-Ins

Information about excluding live-in workers from EVV:

Your Key to EVV Newsletter, Issue 9
https://www.dhs.wisconsin.gov/newsletters/evv9-2021-06.pdf

Your Key to EVV
Unlocking Electronic Visit Verification in Wisconsin

Issue 9 | June 2021

It's so nice to see the blooming flowers and growing gardens! We are thankful for the changing seasons and for the thousands of hard-working Wisconsinites who serve Medicaid members and participants. In this issue, the Wisconsin Department of Health Services (DHS) is answering questions about electronic visit verification (EVV) and **live-in workers**.

Wisconsin EVV Customer Care

833-931-2035 | vdxc.contactevv@wisconsin.gov

Monday–Friday | 7 a.m.–6 p.m. CT

https://www.dhs.wisconsin.gov/evv/index.htm
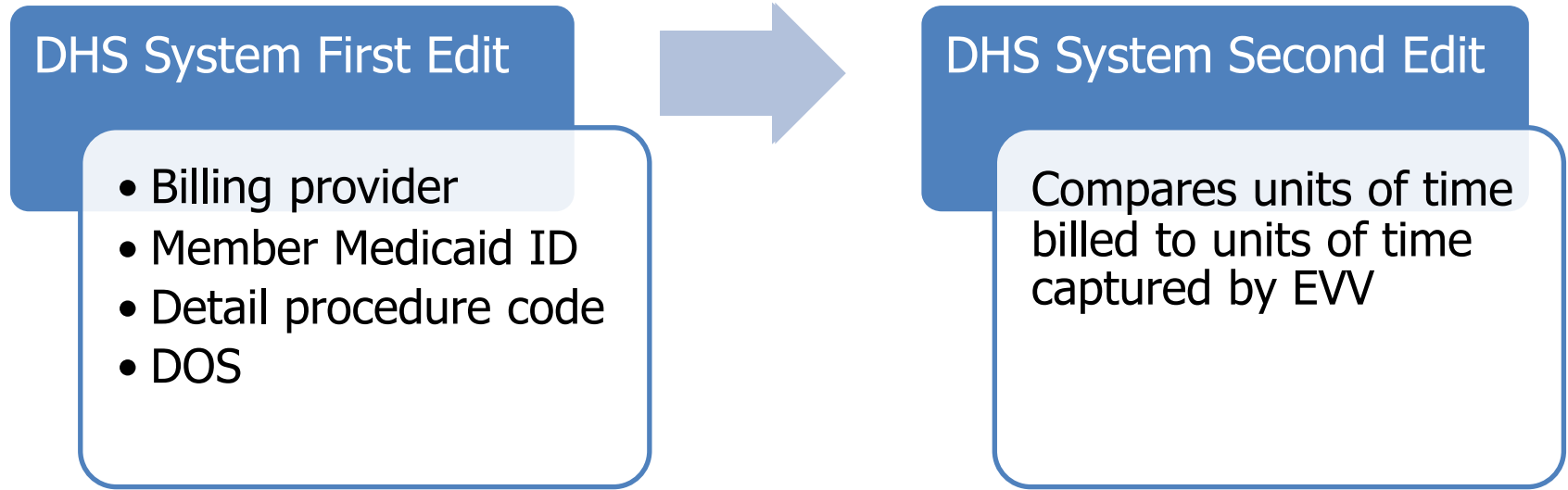
This newsletter provides information about EVV in Wisconsin. The July 2020 ForwardHealth Update (2020-31), titled "Implementation of Electronic Visit Verification for Personal Care and Supportive Home Care Services," and the January 2021 Update (2021-05), titled "Electronic Visit Verification Prior Authorization Procedure for Live-In Workers," contain approved guidance.
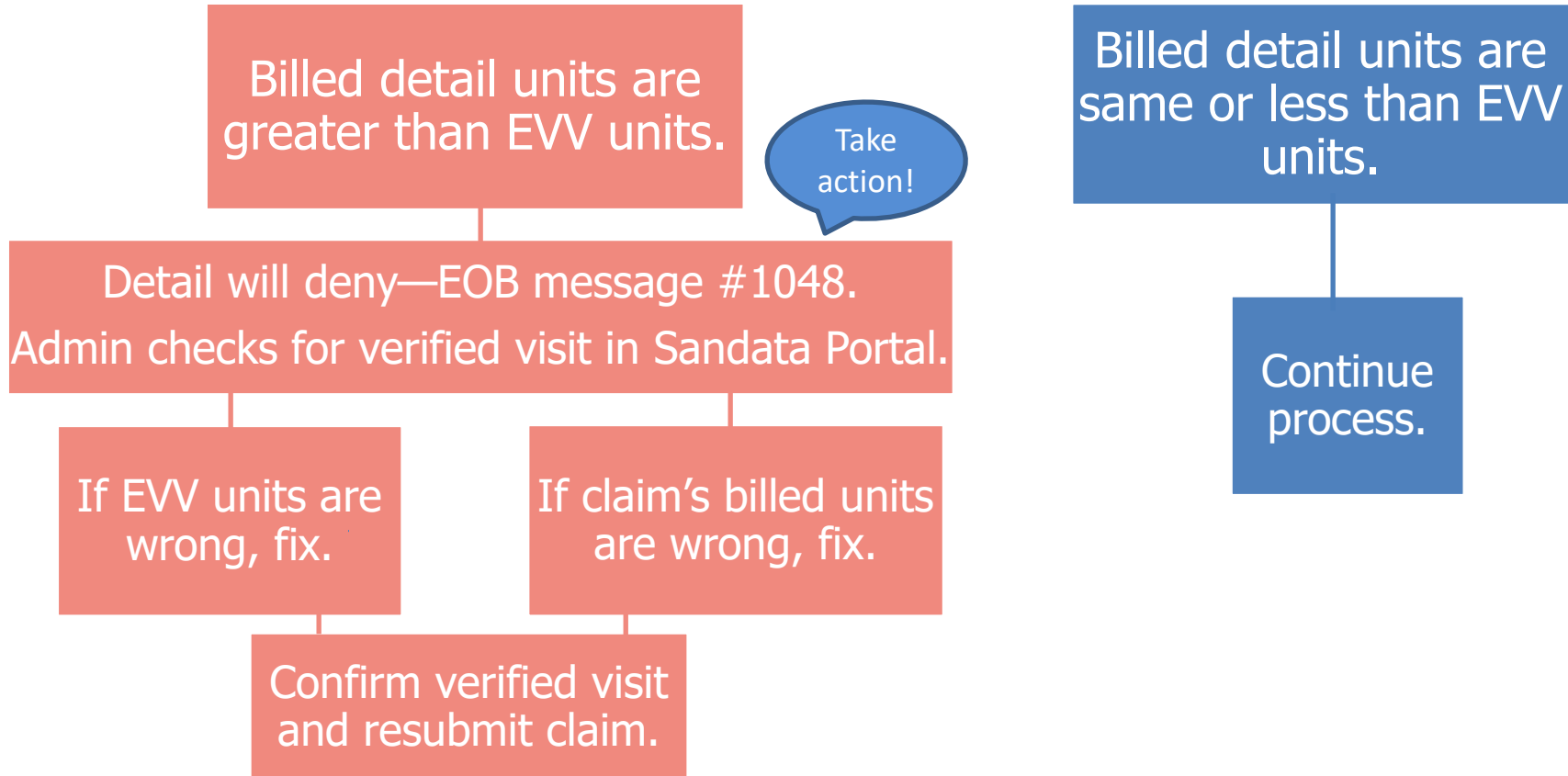
WISCONSIN DEPARTMENT of HEALTH SERVICES

In the Know

The federal Centers for Medicare & Medicaid Services requires workers to record EVV information during Medicaid-covered personal care and applicable supportive home care services. However, because of their unique situations, DHS does not require live-in workers to use EVV.

Although DHS does not require EVV for live-in workers, HMOs, managed care organizations (MCOs), and provider agencies may require live-in workers to use EVV. IRIS (Include, Respect, I Self-Direct) fiscal employer agencies cannot require participant-hired live-in workers to use EVV.

Documentation to Verify Live-In Workers
Provider agencies verify a live-in worker by confirming where the worker currently lives. Look at Live-in Workers (topic #21777) of the ForwardHealth Online Handbook for the definition of a live-in worker and a list of documents that can be used to verify that a worker is a live-in worker.

(Continued on next page.)

Validation of EVV Data

DHS System First Edit

- Billing provider
- Member Medicaid ID
- Detail procedure code
- DOS

DHS System Second Edit

Compares units of time billed to units of time captured by EVV

Tip! Avoid payment delays by confirming that EVV visits for claims are in verified status in your Sandata Portal or aggregator **before** submitting a claim.

Second System Edit

Billed detail units are greater than EVV units.

Take action!

Detail will deny—EOB message #1048.
Admin checks for verified visit in Sandata Portal.

If EVV units are wrong, fix.

If claim's billed units are wrong, fix.

Confirm verified visit and resubmit claim.

Billed detail units are same or less than EVV units.

Continue process.

Second System Edit

Second edit or EOB message #1048, "EVV system units do not meet requirements of visit."
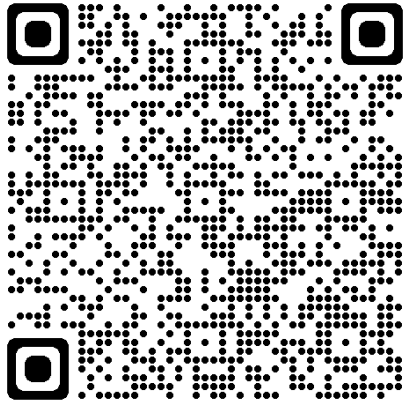
Topic #2479

Units of Service

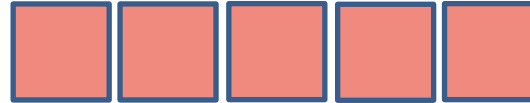| Accumulated time	Unit(s) billed
1-22 minutes	1.0
23-37 minutes	2.0
38-52 minutes	3.0
53-67 minutes	4.0
68-82 minutes	5.0
83-97 minutes	6.0
98-112 minutes	7.0
113-127 minutes	8.0
Etc.	9.0+

Second System Edit

The EVV time units should be the *same as* or *greater than* the units on the claim.

EVV units are less than   claim units = FAIL

EVV units are same as or more than claim units = PASS

Billing for Multiple Dates of Service

Topic #22240

Billing for Multiple Dates of Service

Claims that span more than one date of service may be billed as a date span (also known as span billing) on a single detail line or each date of service may be billed on a separate detail on the claim. Date spans may be billed only for covered days.

The revenue code, procedure code and modifiers (if applicable), service units, and the charge must be identical for each date within the span billing range. It is not appropriate to bill non-consecutive dates of service as a date span. For example, a provider cannot bill a date span from Monday through Friday if the member was absent on Wednesday.

EVV Fee-for-Service Claim Processing

PROC CD	MODIFIERS	SERVICE DATES FROM	TO	ALLW UNITS COPAY AMT	RENDERING PROVIDER BILLED AMT	ALLOWED AMT	INCENTIVES	PA NUMBER PAID AMT	DETAIL EOBS
T1019		022023	022023	26.00				9999999999	9918
				0.00	156.00	152.36	0.00	152.36	
T1019		022123	022123	26.00				9999999999	9918
				0.00	156.00	152.36	0.00	152.36	
T1019		022223	022223	38.00				9999999999	9918
				0.00	228.00	222.68	0.00	222.68	
T1019		022323	022323	38.00				9999999999	1048 9918
				0.00	228.00	0.00	0.00	0.00	
T1019		022423	022423	38.00				9999999999	1047 9918
				0.00	228.00	0.00	0.00	0.00	
T1019		022523	022523	34.00				9999999999	1047 9918
				0.00	204.00	0.00	0.00	0.00	

EVV Fee-for-Service Claim Processing

Denied details

Take action!

EOB Code	What it means	What you can do
1047	EVV system visit not found	Ensure a "verified visit" in your EVV system Use KX modifier if live-in visit is excluded from EVV Resubmit the details that denied
1048	EVV units do not meet requirements of visit	Compare the EVV time to the billed units and make corrections Resubmit the details that denied

Fee-for-Service Span Billing Requirements
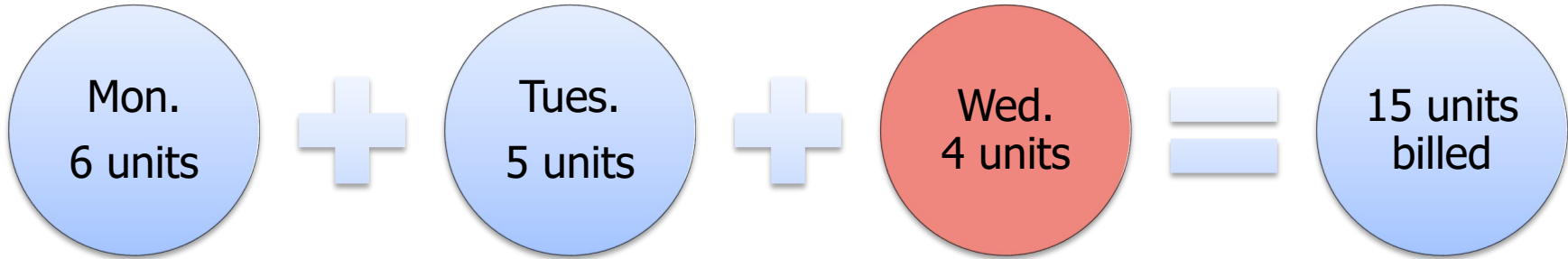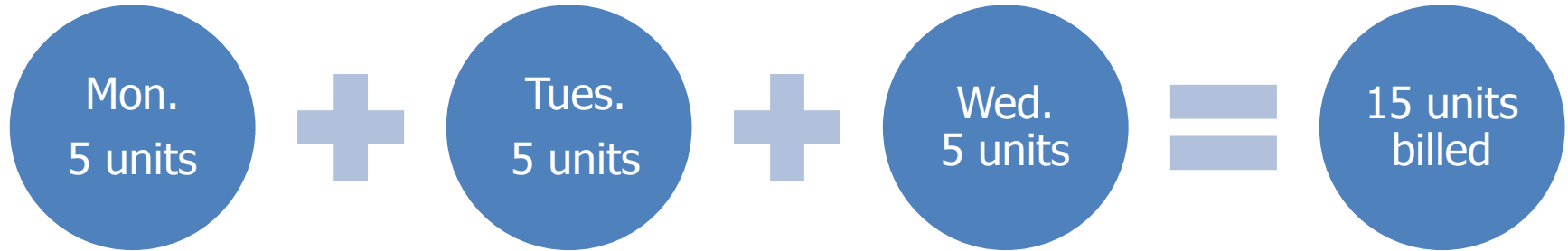
Each day in the date span must have matching:
- Procedure codes
- Revenue codes
- Modifiers
- Service units

PROC CD	MODIFIERS	SERVICE DATES FROM	TO	ALLW UNITS COPAY AMT	RENDERING PROVIDER BILLED AMT	ALLOWED AMT	INCENTIVES	PA NUMBER PAID AMT	DETAIL EOBS
T1019		010923	011323	95.00				9999999999	1048
				0.00	534.85	0.00	0.00	0.00	

Fee-for-Service Span Billing Example

PASS

Mon. 5 units **+** Tues. 5 units **+** Wed. 5 units **=** 15 units billed

Mon. 6 units **+** Tues. 5 units **+** Wed. 4 units **=** 15 units billed

FAIL

Billing for Multiple Dates of Service

PROC CD	MODIFIERS	SERVICE DATES FROM TO	ALLW UNITS RENDERING PROVIDER COPAY AMT BILLED AMT ALLOWED AMT INCENTIVES	PA NUMBER PAID AMT DETAIL EOBS
T1019		010923 011323	95.00	9999999999 1048
			0.00 534.85 0.00 0.00	0.00

Billing for Multiple Dates of Service

- Provider agencies should check with their HMO, managed care organization, or IRIS (Include, Respect, I Self-Direct) fiscal employer agency for span billing requirements.

EVV Fee-for-Service Claim Processing

Claims : Responsibilities

Topic #547

Submission Deadline

Claims

To receive reimbursement, claims and adjustment requests must be received within 365 days of the DOS. This deadline applies to claims, corrected claims, and adjustments to claims.

Best Practices

Best Practices

- Confirm client authorizations are current in your EVV system.
- Review EVV visits in your EVV system regularly to look for exceptions.
- Correct exceptions and confirm all visits are in verified status before claim submission.
- Advise personal care workers to use the EVV system at every visit.

Questions

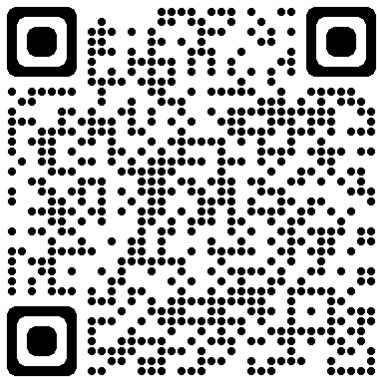**Wisconsin EVV Customer Care**

One-on-one office hours support:

- Phone: **833-931-2035**
- Email: vdxc.contactevv@wisconsin.gov
- Monday–Friday: 7 a.m.–6 p.m. CT

Resources

Resources

www.dhs.wisconsin.gov/evv/
training-administrators.htm

Training for other provider agency administrators

These resources help administrative staff learn to use the Sandata EVV Portal. Use a combination of resources that makes the most sense for your provider agency's and staffs' needs. These resources can also be used as review and reference materials. For training workers who visit members or participants in their homes, please see materials on the Training Workers webpage.

Review of these materials does not provide credentials from Sandata. Lead EVV administrators who need these credentials should attend an online course. As a reminder, training resources do not supersede DHS policy. Refer to the DHS EVV Resources and FAQ webpage for EVV policy information.

Additional languages for written materials can be requested through email at vdxc.contactevv@wisconsin.gov , or call 833-931-2035. Please allow 30 business days for translation and delivery.

General information	+
Getting started: ForwardHealth Portal	+
Getting started: Sandata EVV Portal	+
Client data	+
Employee data	+
Visit methods	+
Visit maintenance	−

Resource Title	Description	Languages Available
PowerPoint 9: EVV Visit Maintenance, P-02754	Administrative use of the Sandata EVV Portal to make corrections or additions to visit data, including how to clear exceptions and how to prevent exceptions	Updated 11/5/2021: English, Burmese, Hmong, Karen, Russian, Spanish
Refresher Training: Overview of Visit Maintenance	Understanding the visit life cycle, timeframe for edits, search filters, GPS (42:48 minutes)	English ▸
Refresher Training: Visit Maintenance and Call Edits	Editing calls, merging calls, entering manual calls, creating a call, preventing errors (27:14 minutes)	English ▸
Refresher Training: Visit Maintenance and Clearing Exceptions	Clearing unknown client exceptions, unauthorized service exceptions, preventing errors (35:28 minutes)	English ▸

Reports	+

Questions

Questions

- Focus on questions for claims
- Type your questions in the Q&A
- Maintain privacy
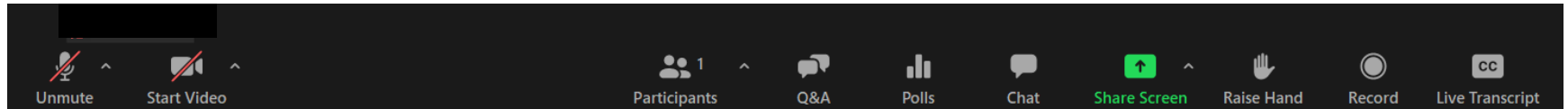
Thank you

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of HEALTH SERVICES