Home Health Services EVV

Home Health Services EVV Questions and Answers

Frequently asked questions for home health service providers about Home Health Services EVV.

WHERE CAN PROVIDERS FIND A BENEFICIARY'S ENROLLMENT STATUS AND HEALTH PLAN?

The NCTracks Provider Portal allows providers to look up a beneficiary's managed care enrollment status and their assigned health plan. The information can be found in the Benefit Plan field. Health plan contact information is available on the Medicaid website at medicaid.ncdhhs.gov/health-plans.

WILL ALL BENEFICIARIES MOVE TO NC MEDICAID MANANAGED CARE?

NC Medicaid Managed Care launched on July 1, 2021. Medicaid beneficiaries who were required to enroll in managed care were assigned a health plan to manage their needs.

When NC Medicaid Managed Care Behavioral Health and Intellectual/Developmental Disabilities Tailored Plans launch Oct. 1, 2023, Medicaid beneficiaries required to enroll in a Tailored Plan will be enrolled in the Tailored Plan that serves their administrative county. Some Medicaid beneficiaries are excluded from managed care and will and remain in NC Medicaid Direct.

HOW CAN PROVIDERS FIND OUT IF BENEFICIARIES ARE ENROLLED IN NC MEDICAID MANAGED CARE?

Providers should always check the eligibility of all Medicaid beneficiaries in NCTracks before providing services and prior to billing. If a beneficiary is enrolled in NC Medicaid Managed Care, NCTracks will show which health plan the beneficiary is enrolled in.

If you have questions about a beneficiary, call their health plan for more information. Health plan contact information is available on the Medicaid website at medicaid.ncdhhs.gov/health-plans.

WHAT IF A STAFF MEMBER DOESN'T HAVE AN EVV CAPTURE APP ON THEIR PHONE?

Information on how to use the mobile app can be found on the NC Medicaid EVV webpage at fast.wistia.net/embed/channel/6ugjp809ix.

Providers can contact Sandata, HHAeXchange or CareBridge for additional information about the

mobile app.

The mobile app is a free, downloadable application that can be installed on a smartphone. If a staff member does not have a smartphone, the provider agency can use an alternative method to capture the required EVV data.

HOW TO MAKE SURE STAFF IS NOT GOING OVER ALLOTTED HOURS

To ensure providers are using the correct units, refer to the information below. The information is also available the Medicaid EVV webpage (medicaid.ncdhhs.gov/EVV) under Claims and Resolution Tips.

Example: The number of hours of services allowed weekly is 40; a worker clocks in five minutes before time and clocks out 10 minutes after time, but it is real time. The provider agency's administrator can make manual edits to each visit to ensure the start time and end times correspond with the approved, authorized home health service subject to EVV.

Minimum amount to count as 1 unit and amounts to round up from 1 to 2 units.

0 – 7 minutes	= 0 units
8 – 22 minutes	= 1 unit
23 – 37 minutes	= 2 units
38 – 52 minutes	= 3 units
53 – 67 minutes	= 4 units
68 – 82 minutes	= 5 units
83 – 97 minutes	= 6 units
98 - 112 minutes	= 7 units

HOW TO ENSURE THE CORRECT ADDRESS IS CAPTURED DURING THE VISIT

When a change in address is recorded in NCTracks portal the beneficiary's address is automatically updated in Sandata's system. If the address is not correct, advise the beneficiary to request a change of address with their local Department of Social Services.

An incorrect address or telephone number will not prevent visits entered in the Sandata system from moving to a verified status in the Sandata portal. All verified visits will be transmitted to NCTracks for EVV validation to assist with claims adjudication. Address/GPS and telephone numbers are not data fields that are received or validated at the time of claims adjudication.

Medicaid will review GPS data as a compliance review through a post-payment audit to ensure services are conducted at the authorized location(s).

HOW DOES CLOCKING IN AND OUT WORK WITH MANUAL EDITS?

Medicaid realizes entering manual visits is necessary at times, especially as aides adjust to the EVV requirement. Manual visits can also be entered if a provider has a PCS authorization for a client and the client is not yet viewable in the Sandata EVV portal.

Once the provider can access the client in the EVV portal, manual visits for services completed can be entered for visits where services were provided but were unable to enter via SMC, TVV or FVV.

To learn how to enter a manual visit in the Medicaid's EVV solution, visit the EVV Provider Agency Training Video Library at fast.wistia.net/embed/channel/6ugjp809ix?wchannelid=6ugjp809ix and view the "Visit Maintenance" webinar.

WHAT IF A PROVIDER HAS PROBLEMS CLOCKING IN AND OUT?

For problems with clocking in and out, contact Sandata at **855-940-4915** or by email at NCCustomerCare@Sandata.com. For alternate EVV support, contact your alternate EVV vendor.

For problems with viewing the visit in the Sandata Aggregator, call **844-289-4246** or email NCAltEVV@Sandata.com.

WILL HOME HEALTH CLAIMS BE DENIED IF THE CLOCK-IN TIME IS ONE OR MORE MINUTES AFTER THE SCHEDULED TIME?

EVV business rules require visits to be scheduled. If the visit starts after the scheduled time, the agency's administrator may make manual edits to that visit in their EVV solution. The claim will be noted as pending in NCTracks when the units are more than the scheduled duration of the visit. Visits are not marked as pending in the Sandata system.

WHAT IS THE RULE FOR ROUNDING UNITS?

In the past, the guidelines were to round to the nearest 15 minutes. Sandata requires us to round down even if the clock-out is one minute short of a unit.

Home Health EVV is billed as **1 Visit = 1 Uni**t and uses Revenue Codes for Billing HH, therefore the rounding rules based on 15-minute increments do not apply to Home Health.

For more information, visit the Medicaid EVV webpage (medicaid.ncdhhs.gov/EVV) under Previous Stakeholder Meetings, Monday, April 25, 2022.

DOES A BENEFICIARY NEED AN AUTHORIZATION IN THE SANDATA SYSTEM IN ORDER TO CAPTURE THE REQUIRED VISIT DATA?

Yes, an authorization in the Sandata system is required for a Medicaid beneficiary to ensure the beneficiary is approved to receive the Home Health Service subject to EVV. One of the 21st Century Cure Act requirements for EVV states the beneficiary must be authorized to receive the home health service.

If an authorization is not available in the Sandata system, confirm with NCTracks it is available and contact Sandata directly to obtain a ticket number to assist with the resolution of the issue. Contact Sandata at **855-940-4915** or NCCustomerCare@Sandata.com.

CAN THE SERVICE BEGIN KNOWING THE AUTHORIZATION IS ON ITS WAY?

Yes, the provider can begin the service when an authorization has been provided by NCTracks and the EVV authorization is being uploaded in the Sandata system. When the EVV authorization is available, the provider must complete a manual visit edit to log visits that occurred before the authorization was available in the Sandata system.

WHAT CAN CAUSE A CLAIM TO DENY OR PEND?

There are several reasons a claim may pend or deny including:

- The visit is not in a verified state in the Sandata Aggregator
- The revenue code in the claim submittal does not match the service code in the Aggregator
- The units in the claim submittal do not match the total units in the Aggregator
- The NPI number is not the same NPI number in the Sandata system used to collect the visit information

To mitigate a claim's pend and denial issues in NC Medicaid Direct, use the visit history option in the NCTracks provider portal to compare visits against the logged visits in the Aggregator prior to submitting claims to NCTracks for payment.

IF A CLAIM LINE DOES NOT HAVE EVV, HOW DO WE CORRECT?

Each claim subject to EVV submitted for payment must have visit capture information in the Sandata Aggregator. If a claim line does not have the visit capture data, a manual visit edit in your EVV system must be completed for the date and time the visit occurred. Be sure the visit is in a verified state upon completion of the manual edit.

WHAT DOES A RED DOT MEAN IN THE SANDATA SYSTEM?

A red dot indicates something is not entered correctly. Be sure you start a visit before entering the client's identifying information, use the correct format for the beneficiary's MID #, with nine numerical numbers and one capitalized letter at the end of the number and enter the right program procedure code.

If these tips don't correct the problem, contact Sandata directly and request a ticket number to resolve the issue. Contact Sandata at **855-940-4915** or NCCustomerCare@Sandata.com.

CAN PROVIDERS SUBMIT CLAIMS SUBJECT TO EVV IN NCTRACKS FOR MEDICAID BENEFICIARIES ENROLLED IN MANAGED CARE?

No, claims subject to EVV for Medicaid beneficiaries enrolled in managed care must be submitted per the guidance of the health plans.

WHERE CAN PROVIDERS FIND THE MEDICAID BILLING RATES?

Medicaid rates can be found on the EVV webpage (medicaid.ncdhhs.gov/EVV) under Provider Resources and Service Codes.

DO PROVIDERS NEED TO PURCHASE AN EVV SOLUTION?

Providers are not required to purchase an EVV solution. There are three Medicaid payer types and each type has a free EVV solution providers can use. For providers who render services to beneficiaries under NC Medicaid Direct, Sandata is the free solution to use.

For providers rendering services for health plans and LME/MCOs, HHAeXchange is the free solution. Providers rendering services for Healthy Blue must use CareBridge. Providers may choose to purchase a comprehensive EVV solution that consolidates all visits from the three different payer types.

WILL THE EVV SOLUTION SUBMIT CLAIMS FOR BILLING ONCE THE VISIT IS LOGGED AND VERIFIED?

Claim submittal is not a part of the EVV requirements for NC Medicaid Direct. Providers need to speak with their assigned health plan to identify how to submit claims for billing.

WILL SANDATA SEND CAPTURED EVV TO HHAeXchange?

If you are using the provider-paid solution, Santrax Agency Management, Sandata will send your visits to HHAeXchange.

For more information regarding SAM, email info@sandata.com, call **800-544-7263 x4453** or complete the form located at sandata.com/schedule-call.

WHAT IS THE COST OF SANDATA'S PAID EVV SOLUTION?

If you are interested in information regarding Santrax Agency Management, email info@sandata.com, call **800-544-7263 x4453** or complete the form at sandata.com/schedule-call.

WHAT IS THE ADDRESS FOR NC MEDICAID EVV WEBPAGE?

The NC Medicaid EVV webpage is located at medicaid.ncdhhs.gov/EVV.

WHAT IS THE NC MEDICAID EVV EMAIL ADDRESS?

The EVV email address is Medicaid.EVV@dhhs.nc.gov. If your inquiry includes personal identifiable information (PII), be sure to use a secured email transmittal format to submit your NPI #, any relevant MID #s, your STX # and your Sandata or Alt EVV ticket #.

If you don't have a ticket #, call Sandata to obtain one first. You can reach the Sandata Customer Support Team at **855-940-4915**, email NCCustomerCare@Sandata.com, contact Sandata Alternate EVV Support at **844-289-4246** or email NCAltEVV@Sandata.com.

WHAT IS THE TELEPHONE NUMBER FOR SANDATA?

The Sandata Customer Support Team can be reached at **855-940-4915** or by email at NCCustomerCare@Sandata.com.

HOW CAN PROVIDERS ACCESS TRAINING PRESENTATIONS?

Meeting materials are posted on the NC Medicaid EVV webpage (medicaid.ncdhhs.gov/EVV) under Provider Meetings and Trainings.

HOW TO LINK A FIXED VISIT VERIFICATION DEVICE TO THE SANDATA PORTAL

Order forms for purchase or lease of FVV devices can be found on the NC Medicaid EVV webpage (medicaid.ncdhhs.gov/EVV) under Provider Resources and Service codes.

If you need more information after submitting a form, contact Sandata Provider support at **855-940-4915.**