

NC Medicaid Home Health Electronic Visit Verification: Billing Instructions for Medicaid Direct

Update for Providers Using Alternate Electronic Visit Verification: Visit Capture Home and Community Defined

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Beginning 1-01-2023, Home Health Providers will be subject to Electronic Visit verification (EVV) at which time, Home Health Services (HHS) visits must be billed in a way that allows for visit validation on a per visit basis.

In order for the EVV record to match the claim, providers billing multiple Home Health Services (i.e., PT and Skilled Nursing Visit) on the same date of service, must use one revenue code (one for each HH service) per claim line. Providers can no longer span dates on a single claim line or bill all units for the entire month.

All providers subject to the EVV requirements must indicate the location of each visit, home, or community, in the service location field for a visit to be validated in the Sandata Aggregator.

Home is defined as the beneficiary's address listed in EVV.

Community is defined as any/all other locations as defined in NC Medicaid Home Health Services 3-A Clinical Coverage Policy:

<https://medicaid.ncdhhs.gov/3a/open>, section 1.0 Description of the Procedure, Product, or Service.

The address of the beneficiary listed in EVV is not an acceptable community location selection.

Questions:

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