interChange Provider Important Message

Attention: Electronic Visit Verification (EVV) Service Providers

Changes to EVV Optional Service Code Listing

The Department of Social Services (DSS) is pleased to announce that, in response to provider feedback, some EVV mandated services that were suspended from EVV for the duration of the COVID-19 public health emergency period have been moved to EVV as an optional service. As a result, effective beginning June 18, 2020 providers will see prior authorizations (PAs) for these services in their Santrax system and, **if the provider chooses to**, will be able to create schedules and submit claims based on the visit data captured in EVV.

Claims for the service codes identified below will continue to be excluded from the EVV mandate and will not require a confirmed EVV visit in order for claims to pay as expected. Explanation of benefit codes (EOB) 3327 - Confirmed Visit Not Found, 3328 - Confirmed Visit Units are Exhausted and 0047 - Confirmed Visits Units are Exceeded will not set on claims for the services identified below for the duration of the public health emergency period.

There will be no changes to the PA process as a result of this change. Access Agencies will continue to provide PA for these services and the PA will be visible via the secure web provider portal, as well as in Santrax. Providers can access their PAs by logging into the secure site, www.ctdssmap.com, and selecting Prior Authorization then Prior Authorization Search.

Affected Service Codes

- 1247Z Mental Health Counseling-Individual
- 1536P Companion Services Per 1/4 Hour (18-Hour/Day Max.) ABI only
- S9123 Nursing Care in Home by Registered Nurse, by hour
- S9124 Nursing Care in Home by Licensed Practical Nurse, per hour
- T1002 RN Services, up to 15 minutes
- T1003 LPN/LVN services, up to 15 minutes
- T1502 Medication administration visit
- T1503 Medication administration, not oral/injection
- G0151 Services performed by a qualified physical therapist in the home health or hospice setting, each 15 minutes
- G0152 Services performed by a qualified occupational therapist in the home health or hospice setting, each 15 minutes



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G0153 - Services performed by a qualified speech-language pathologist in the home health or hospice setting, each 15 minutes

G0162 - Skilled services by registered nurse (RN) for management and evaluation of the plan of care; each 15 minutes

Please note: The following Revenue Center Codes (RCC) will **not** be placed on the optional service code listing. PAs for these services will not be present in the Santrax system and these services will continue to be suspended from EVV. PAs for these services will continue to be visible via the secure web provider portal.

- 421 Physical Therapy, Per Diem
- 431 Occupational Therapy, Per Diem
- 441 Speech Therapy, Per Diem
- 444 Speech Therapy Evaluation for the Start of Care (SOC)/ Resumption of Care (ROC)

Please note: Providers who will be using Santrax to maintain visit data and/or submit claims will need to first update the visit to associate the PA to the visit(s) prior to confirming the visit and making it "OK to Bill". For assistance in updating a visit please contact Sandata Customer Care. They can be reached at 1-855-399-8050 or by email at ctcustomercare@sandata.com.

Suspension of EVV Compliance Requirement

As a reminder, in response to the outbreak of COVID-19 (coronavirus), the Department of Social Services (DSS) is temporarily lifting the Electronic Visit Verification (EVV) 90% compliance requirement. DSS considers a provider to be compliant with EVV if 90% of the visits performed are validated by a check-in and a check-out documented by the caregiver via telephony, Mobile Visit Verification (MVV) or a Fixed Visit Verification (FVV) device. Providers will not be held accountable for being less than 90% compliant until further notice.

