

interChange Provider Important Message

Attention: Home Health Providers

Electronic Visit Verification (EVV) Updates – as of June 25, 2024

1. [EVV Home Health Claims Enforcement for Dates of Service July 1, 2024, and Forward](#)
2. [Claim Denials for Explanation of Benefit \(EOB\) 3332](#)
3. [Transition from Sandata Mobile to Sandata Mobile Connect \(SMC\)](#)
4. [Resources](#)

The purpose of this Important Message is to remind all home health providers, whether using the State's EVV system (i.e., Sandata Agency Management) or a third-party ("Alternate") EVV solution to capture visit data, about critical upcoming dates. Please note, the information below is related to the federal mandate in Section 12006 of the [21st Century Cures Act](#) that requires all states to use an EVV system for Medicaid home health care services (HHCS).

1. [EVV Home Health Claims Enforcement for Dates of Service July 1, 2024, and Forward](#)

Effective January 1, 2024, all home health providers must be utilizing an EVV solution to capture HHCS visit data in accordance with the federal mandate in the 21st Century Cures Act. The new claim editing enforcement date for all HHCS, including medication administration procedure codes, is [July 1, 2024](#).

Edits currently set to "post and pay" for the following EOBs will be set to a "denied" status starting on [July 1, 2024](#).

For Non-Waiver Home Health Claims:

- EOB 3331 - Confirmed Visit Not Found
- EOB 3332 - Confirmed Visit Units are Exceeded

For Waiver Home Health Claims:

- EOB 3327 - Confirmed Visit Not Found
- EOB 3328 - Confirmed Visit Units are Exceeded

As a reminder, whether billing through Sandata Agency Management or Alternate EVV, providers must allow time for the visits to be loaded into the Medicaid Management Information System (MMIS) prior to claim submission. In order for the claim to be considered for payment, a visit from the Sandata



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Agency Management system must exist in one of the following three confirmed statuses:

- *02 - Confirmed* – signals when a visit has been auto confirmed or manually verified and then confirmed. The visit is now ready and available to bill.
- *03 - In Process* – signifies that a visit for the service has already been confirmed and a claim exported for claims processing.
- *04 - Closed* – indicates that a visit has been confirmed, the claim has been exported for claims processing, and the claim has been paid or denied as appropriate. This status is set by the provider in the Santrax system.

As a reminder for providers manually adding non-Waiver clients within Sandata Agency Management, please be advised that there are two areas in which the client ID must be entered for the visit to be paid. **Failure to enter the client ID in both areas will cause the claim to deny in the MMIS.** Please reference [Attachment A](#) on the final page of this Important Message for screen prints that demonstrate entry of the client ID in two locations.

Sandata Agency Management users billing and/or adjusting claims via an *alternate claim solution* are advised that the visits will be available in the MMIS for payment within 24 hours.

For Alternate EVV, once the vendor has submitted a verified visit and it appears in the Sandata Aggregator, it may take an additional 24-48 hours for that visit to be available in the MMIS for payment.

2. Claim Denials for EOB 3332

An issue was previously identified where certain complex care skilled nursing procedure codes billed with the TG modifier (“Complex Visit”) were incorrectly being cut back to a unit of one (1). Gainwell Technologies has resolved this issue and all impacted claims have been systematically reprocessed. Thus, claim editing enforcement will be activated for the aforementioned procedure codes beginning **July 1, 2024.**

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3. Transition from Sandata Mobile to SMC

The date by which all providers must be using the SMC application is **September 4, 2024**. For further details on this transition, please refer to the following SMC resources on the Sandata on Demand (SoD) Web site:

- [Sandata Mobile Connect \(SMC\) Version 2 - Sandata Technologies \(zendesk.com\)](#)
- [Downloading Sandata Mobile Connect - Sandata Technologies \(zendesk.com\)](#)
- [Log in to Sandata Mobile Connect \(SMC\) - Sandata Technologies \(zendesk.com\)](#)
- [SMC 2.0 application video library](#)

4. Resources

Helpful and up-to-date information regarding the EVV HHCS implementation is available on the Connecticut Medical Assistance Program (CMAP) Web site - EVV [Home Health Implementation Documentation](#) Web page including [Alternate EVV Specifications](#), [Alternate EVV Frequently Asked Questions](#), Provider Bulletins, Important Messages, Town Hall materials, and training requirements.

To access the current version of the Web page, click the refresh/reload icon near the address bar (also referred to as “location” or “URL” bar) in the Web browser.

For questions related to Alternate EVV support, providers can contact Sandata Technologies at the following email address: ctaltevv@sandata.com. As a reminder, questions related to EVV can be submitted securely to ctevv@gainwelltechnologies.com.

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Attachment A Manual Client Data Entry – Non-Waiver Clients



Adding New Clients: Continue Data Entry

Personal Screen:

- ▶ Add the Client's Medicaid ID
 - Personal Screen > Agency Designations > Other ID

Agency Designations

Disaster Lvl:

DNR:

DNR Date:

Transportation Assistance Level:

Last Updated:

Other ID:

Sandata

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Adding New Clients: Continue Data Entry

General Screen:

- ▶ Add the Coordinator
- ▶ Add the Client's service
- ▶ Add the Client's Customer Number (Medicaid ID)
 - Chart > General > Payor > Cust. No.

Payor Information for Client: Riddle, Thomas

General

* Payor:

* Rate Plan:

Rank:

Send Bill To:

Percent:

Numbers, Etc.

Cust. No.:

Medicaid ID:

Group No.:

Referral No.:

Begin:

End:

Options

☐ Capped Rates Transition to Next Payor

☐ Suppress in Electronic File

☐ Responsible for Copay

☐ Requires Pre-Denial

HSP Type: