

# interChange Provider Important Message

## Attention: Home Health Providers

### Important Electronic Visit Verification (EVV) Reminders – as of March 22, 2024

- 1) EVV Home Health Claims Enforcement for all Providers
- 2) Important Updates for Sandata Agency Management Users
- 3) 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 [21<sup>st</sup> 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 all Providers

All home health providers should now be utilizing EVV to capture HHCS visit data in accordance with the federal mandate in the 21<sup>st</sup> Century Cures Act.

Effective for dates of service **March 22, 2024, through March 31, 2024**, providers will see one of the following Explanation of Benefit (EOB) codes post to claims but still pay when a confirmed visit cannot be found or when units are exceeded.

##### For Non-Waiver Home Health Claims:

- Claims without a confirmed visit will result in a payment denial with EOB 3331 (i.e., Confirmed Visit Not Found).
- Claims with confirmed visit units that are exceeded will set EOB 3332 (i.e., Confirmed Visit Units are Exceeded).

##### For Waiver Home Health Claims:

- Claims without a confirmed visit will result in a payment denial with EOB 3327 (i.e., Confirmed Visit Not Found).
- Claims with confirmed visit units that are exceeded will set EOB 3328 (i.e., Confirmed Visit Units are Exceeded).

Effective for dates of service **April 1, 2024, and forward**, providers will receive claim denials with one of the EOB codes listed above when a confirmed visit cannot be found or when units are exceeded.



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Please note that as of April 1, 2024, the following medication administration procedure codes will not be subject to EVV claim editing: T1502, T1503, and H0033. Providers must continue to use EVV to capture visit data for these services.

Furthermore, providers utilizing Sandata Agency Management will be issued step-by-step instructions on how to enter visits for medication administration services that are less than 8 minutes. Claim edit enforcement dates for the abovementioned medication administration procedure codes will be communicated in a future Important Message.

*To reiterate, all EVV mandated home health services, with the exception of medication administration, will require a confirmed visit in order for the claim to pay.*

## 2. Important Updates for Sandata Agency Management Users

### Visit Type Issue for Providers not using Schedules

For providers not using schedules who were experiencing an issue with the visit type changing from “visit” to “hourly”, Sandata Technologies has resolved this issue.

## 3. 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 at the following email address: [ctaltevv@sandata.com](mailto:ctaltevv@sandata.com). As a reminder, questions related to EVV can be submitted securely to [ctevv@gainwelltechnologies.com](mailto:ctevv@gainwelltechnologies.com).