

Connecticut Department of Social Services Medical Assistance Program

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Provider Bulletin 2018-17 March 2018

TO: Acquired Brain Injury (ABI), Connecticut Home Care Program for Elders (CHC), Personal Care Assistance (PCA) and Home Health Service Providers

RE: Electronic Visit Verification (EVV) Enhancement – Alternate Claim Solution

Effective April 11, 2018, the Department of Social Services (DSS) will implement the alternate claim solution which will allow providers to bill or adjust claims with a date of service on or after January 1, 2018 from their own system, via the www.ctdssmap.com secure Web site, from the Santrax system or any combination of these three methods. Explanation of Benefit (EOB) code 630 -"Claim must be submitted via EVV system" will no longer post on Electronic Visit Verification (EVV) claims with a date of service on or after January 1, 2018 that are billed to DXC Technology outside of the Santrax system.

What is the alternate claim solution?

Currently, claims for EVV mandated services must be submitted to DXC Technology from the Santrax system. Santrax ensures that claims are billed according to the confirmed visit data, such as visit date, service and visit duration.

The alternate claim solution introduces new claim editing designed to ensure claims for EVV mandated services that are submitted outside of Santrax are subject to the same visit validation requirements.

Important: The alternate claim solution does not remove the requirement that providers use the Santrax system to create schedules, checkin/out or confirm visits. Additionally, the alternate claim solution does not change the EVV compliance requirement; providers are still expected to achieve a minimum 90% compliance rate in their use of the EVV system.

What are the benefits to the alternate claim solution?

Providers may return to their existing claim submission methods used prior to the EVV implementation. Claim export requirements within Santrax will no longer need to be maintained, such as the skilled requirement to capture physician signature, or identify third party liability (TPL) or diagnosis codes.

Providers who wish to continue to export their claims out of Santrax may continue to do so. All existing claim export requirements will remain the same for claims submitted out of Santrax.

What are the new claim EOBs?

DXC Technology will receive a daily extract from Sandata Technologies which contains confirmed visits. In order for the claim to be considered for payment, a visit must exist in one of the following three confirmed statuses:

- 02 Confirmed which indicates 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 which indicates that a visit for this service has already been confirmed and a claim exported for claims processing.
- 04 Closed which indicates that a visit has been confirmed, a claim exported for claims processing and has been paid or denied payment as appropriate. This status is set by the provider in the Santrax system.



EOB code 3327 "Confirmed visit not found" - This EOB code will post to a claim containing an EVV mandated service if there is no confirmed visit found that contains the same client ID, provider ID, date of service, service code and modifier(s).

To resolve this claim denial, the visit must first be confirmed in the provider's Santrax system. It is **important** to note, the confirmed visit data used in claims processing may be up to 24 hours old, therefore, it is critical to ensure visits are confirmed in a timely manner, at least 24 hours prior to claim submission, in order to avoid unnecessary claim denials.

EOB code 3328 "Confirmed visit units are exhausted" - This EOB code will post to a claim containing an EVV mandated service where there is a confirmed visit that contains the same client ID, provider ID, date of service, service code and modifier(s), however, the visit units have been exhausted due to a previously paid claim.

This claim denial can only be resolved if the confirmed visit units in Santrax are sufficiently increased.

EOB code 0047 "Confirmed visit units are exceeded" - This EOB code will post to a claim containing an EVV mandated service where there is a confirmed visit found that contains the same client ID, provider ID, date of service, service code and modifier(s), however, the visit units on the confirmed visit are less than the units billed on the claim. This claim will pay, but it will cut back to the number of units on the confirmed visit.

This EOB can only be resolved if the confirmed visit units in Santrax are sufficiently increased.

Please note that reduced units on a confirmed visit may be the result of a pending authorization change. Units on a confirmed visit in Santrax are reduced to the remaining units on the authorization in Santrax. If the authorization units are increased after the visit was confirmed, the visit must be refreshed and updated in Santrax to reflect the full number of confirmed units. Once this occurs, the claim may be adjusted in order to receive payment for the additional units.

EOB code 0047 may also occur if there are two visits for the same client and service on the same day and only one visit is confirmed. The second visit must be confirmed in order for the claim to pay the total number of units billed for the day.

EOB code 3329 "Detail dates of service that span 31 days cannot be verified" - Claims submitted from Santrax are limited to one date of service per claim detail. Claims submitted outside of Santrax may be submitted using spanned dates. These spanned dates cannot exceed 31 days.

This denial is resolved by reducing the number of days submitted on the claim detail.

<u>How will providers take advantage of this enhancement?</u>

Providers will not have to take any action to take advantage of this new alternate claim solution. Once implemented, claims may be submitted directly to DXC Technology.

How will adjustments be handled?

Claims with dates of service on or after January 1, 2018 may be adjusted via the 837 electronic claim transaction, the www.ctdssmap.com secure Web site or rolled back via the Santrax system.



Will I receive the ASC X12N 999 Functional Acknowledgment from DXC Technology if I choose to submit electronic claims directly to DXC Technology?

Yes, DXC Technology will issue the ASC X12N 999 Functional Acknowledgment to providers who submit EVV claims directly to DXC Technology.

For more information on the alternate claim solution, please contact the EVV mailbox at ctevv@dxc.com.

