Home Health Providers Only: DELTA and New Users of Sandata Agency Management/Electronic Visit Verification (EVV) Implementation Frequently Asked Questions (FAQ)

Updated 2/23/2024

QUESTIONS & ANSWERS

1. **Q: Where can I find the link to the Bulk Upload Form?**

   A: Click on the following link: Sandata Agency Management Client Bulk Upload Instructions – Sandata Technologies (zendesk.com) Back to Top

2. **Q: After bulk upload will you still be required to make each patient active, or will the patients be active?**

   A: It will be the provider's responsibility to make each client "Active" in their Santrax Account, once the Bulk Upload is complete. Back to Top

3. **Q: On the bulk import then we don't know what date to use for SOC?**

   A: We recommend using the actual start of care date, but this would really depend on your Company's own business practices. Back to Top

4. **Q: How do I set up an account for Sandata on Demand (SoD)?**

   A: Click on the following link: Getting-Started-with-Sandata-On-Demand (zendesk.com) Back to Top

5. **Q: How do I add a new client?**

   A: Click the following link to see "Adding a New Client": Adding a New Client – Sandata Technologies (zendesk.com) Back to Top

6. **Q: Is there a caregiver training video?**

   A: Yes, click the following link to see the "Connecticut (All Payers) Videos": Connecticut (All Payers) Videos – Sandata Technologies (zendesk.com) Back to Top

7. **Q: Will this webinar be posted?**

   A: Yes, click the following link to see the "Connecticut Recorded Webinars": Connecticut Home Health Non-Waiver Training Sessions 2023 – Sandata Technologies (zendesk.com) Back to Top

8. **Q: Can you use the schedule? And if you do, will it come up?**

   A: Yes, you may use schedules; however, schedules are not required for Home Health non-waiver services. If a schedule is created, it will be visible in Santrax. Back to Top

9. **Q: I know schedules don't have to be used, but can we use them if our EMR is integrated with Sandata and can push the schedules?**

   A: Yes, you can use schedules in Sandata Agency Management, but not for Alt EVV. Back to Top

10. **Q: I had asked yesterday if we could use schedules. Our EMR is integrated with Sandata for schedules to sync to Sandata, and actual in and out times sync back?**

    A: Yes, you can use schedules in Sandata Agency Management, but not for Alt EVV. Back to Top

11. **Q: Will calls still appear in Sandata if schedules are not used for the non-waiver services?**

    A: Yes, schedules are not required but there will be a new phone number to capture the visit data for your Home Health non-waiver population. Back to Top

12. **Q: Is the phone number to call different for HHI then the original telephone numbers given to agencies when they started with waiver?**

    A: Yes, the new toll-free numbers and additional information will be provided in your “Welcome Kit” which you will receive once training is completed. Back to Top

13. **Q: Where do we find the user's Company ID for the user?**

    A: Your "Welcome Kit" will include your Agency/Company ID number (begins with a "3" followed by a series of digits), but each user (employee) will have their own User ID (recommend using their email address). Back to Top

14. **Q: I thought that the tasks and charting aren't required because they're only for notes. If that's the case wouldn't the timesheets be required as the actual documentation of the visit?**

    A: Tasks are not required in EVV for non-waiver services. Many agencies use their EMR system to capture tasks and notes. If you have no other method to capture this information, then you may use Sandata or timesheets. Agencies will need to ensure that all required information is captured. Back to Top

15. **Q: What if the caregiver does not or cannot log in or call in – is there a way to manually enter the visits? Or should the staff call in when they realize they forgot?**

    A: Yes, there is a method to manually enter visits which can be found in Sandata on Demand (SoD). If the "Sandata Mobile Connect" app is unavailable, then a caregiver can call-in using the new telephone number as a backup option. If the caregiver realizes they forgot, then they should call-in as soon as they remember.

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16. **Q: If a caregiver starts a visit via telephony, do they have to finish via telephony as well?**

    A: No, the visit could be started via the "Sandata Mobile Connect" app and ended over the phone (or vice versa).

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17. **Q: If caregivers have been calling in from their personal phones due to the clients refusing use of their phones, will this make these past visits invalid?**

    A: It won't make the visit invalid, but it will create an "exception". It is highly advised that the caregivers use the "Sandata Mobile Connect" app during these situations.

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18. **Q: Our EMR integrated with Sandata. EMR created a new user for each employee. Can we "terminate" or "cancel" the old user ID without being blocked from billing or verifying services?**

    A: The provider needs to submit a ticket to Sandata with the specific scenario and clear details for clarity of the ask. The ticket should be sent to ctcustomercare@sandata.com.

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19. **Q: If it helps, just trying to get clarification of impact of putting an employee on Terminate status on billing out of Sandata or visit verification for older visits prior to using the new login through EMR.**

    A: The provider needs to submit a ticket to Sandata with the specific scenario and clear details for clarity of the ask. The ticket should be sent to ctcustomercare@sandata.com.

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20. **Q: Can terminations be entered as a batch?**

    A: The provider needs to submit a ticket to Sandata with the specific scenario and clear details for clarity of the ask. The ticket should be sent to ctcustomercare@sandata.com.

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21. **Q: Is it necessary to terminate former employees in this system?**

    A: The provider needs to submit a ticket to Sandata with the specific scenario and clear details for clarity of the ask. The ticket should be sent to ctcustomercare@sandata.com.

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22. Q: What happens if an employee is active with multiple agencies?

A: The provider needs to submit a ticket to Sandata with the specific scenario and clear details for clarity of the ask. The ticket should be sent to ctcustomercare@sandata.com. Back to Top

23. Q: Can you upload an employee file – similar to a client upload? Which should come first, employees or clients to get started?

A: No, the "Bulk Upload" pertains only to the client information. It is the provider's responsibility to enter employee information. Back to Top

24. Q: What if the client does not have a landline?

A: The caregiver may also use a client's cell phone to check-in and check-out, or the agency provider may request a Fixed Visit Verification (FVV) device. Back to Top

25. Q: Is the dial-in only for landlines because a lot of people only have a cell phone?

A: You are able to use the designated dial-in number from either the client's landline or the client's cell phone, depending on the number which is associated to the client's profile. Back to Top

26. Q: Can you give me some direction on when a clinician does a Recertification for an existing patient regarding the appropriate time in/out of EVV? Many of our clients will not be agreeable to have the clinician stay in the home to complete the OASIS paperwork.

A: The clinician may complete the recertification document (i.e., review of care plan) outside of the member's home. Please note, if documentation is completed outside the home, the clinician will need to check-in and check-out for the time spent with the member. The EVV visit check-out time may be manually adjusted in Sandata Agency Management – *Visit Maintenance* to reflect the additional time used to complete the required documentation. The reason code of "Other", with a note identifying the reason for the manual adjustment to the visit, must be utilized to document the change. For providers using an Alternate EVV solution, the visit start and end times sent to the Aggregator must include the time spent completing the documentation. If the visit is manually adjusted due to the documentation being completed outside the member's home, the visit change segment must be updated with the reason code of "Other" and a note must be entered to notate the reason for the change. Back to Top

27. Q: Will EVV be required for instances when Medicaid is billed as the secondary payer for clients with Medicare or private insurance (i.e., primary payer)?

A: DSS is not requiring EVV for crossover claims or when a private insurance, i.e., third-party liability (TPL), pays a portion of the claim. Back to Top

28. Q: If a Medicare eligible member resides in a 24-hour residential setting such as a group home and a HHA is providing additional billable services to the member, do these services require EVV?

A: Since the HHA is a separate agency from the 24-hour residential home and is providing HHCS, then EVV requirements would apply to the HHA. Back to Top

29. Q: Can I submit visits in both SAM and via Alt EVV?

A: No, providers must choose one option for submission. Back to Top

30. Q: If I move to Alt EVV, can I modify past visits in SAM?

A: Yes, providers will have one year to modify visits initially created in Sandata Agency Management.

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31. Q: What edits will set if a claim is submitted, and no confirmed visit is found?

A: Effective 4/1/2024, edit 3331 (i.e., Non-waiver confirmed visit not found) and edit 3332 (i.e., Non-waiver confirmed visit units are exceeded) will set if a claim is submitted and no confirmed visit is found. Prior to 4/1/2024, edit 3327 (i.e., Confirmed visit not found) will "post and pay" up through and including 3/31/2024. Back to Top

32. Q: Can I enter a visit less than 8 minutes?

A: Yes, providers are able to enter Medical Administration visits less than 8 minutes in Sandata Agency Management. An Important Message about the impacted procedure codes was posted on the Connecticut Medical Assistance Program Web site on 11/1/2023. Click on the following link: Provider Public and Secure Web Portals (ctdssmap.com).

In the event a specific procedure code is used and there is a valid check-in & check-out under 8 minutes via SMC or TVV, the system will trigger an "OK To Bill" status. Below is additional helpful guidance about visits less than 8 minutes:

- The functionality is only applicable to the procedure codes identified by DSS in the abovementioned Important Message.
- An unscheduled visit with the appropriate procedure code and check-in & check-out will result in an "OK To Bill" status in the system. Manual edits/overrides will trigger a "Not OK To Bill" status.
- If a schedule is created, the standard scheduling protocol must be followed. The proposed/scheduled visit duration must be set to at least 8 minutes. If the proposed/scheduled time is manually adjusted to reflect the actual check-in & check-out, the adjustment will trigger a "Not OK To Bill" status. To reiterate, it is strongly recommended that providers not manually adjust proposed/scheduled times to match the actual check-in & check-out.
- Manual entry modifications and active usage of the override option will change the system's proposed behavior and place the visit in a "Not OK To Bill" status.

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33. Q: How are group visits to be handled in SAM?

A: Click on the following link: https://sandata.zendesk.com/hc/en-us/articles/24073252207763-Group-Visit-Functionality Back to Top

Acronym List	
Acronym	**Definition**
Alt-EVV / Alt EVV / Alternate EVV / Alternative EVV / 3rd Party	3rd Party Alternate Electronic Visit Verification
AVRS	Automated Voice Response System
CHNCT	Community Health Network of Connecticut
CMAP	Connecticut Medical Assistance Program
CT DSS / DSS	Connecticut Department of Social Services
EMR	Electronic Medical Records
EVV	Electronic Visit Verification
FAQ	Frequently Asked Questions
FVV	Fixed Visit Verification
HCBS	Home and Community-Based Services
HCPC	Healthcare Common Procedure Coding
HH	Home Health
HHA	Home Health Agency
HHCS	Home Health Care Services (a.k.a. Home Health Services)
HHI	Admission / Program type for Home Health non-waiver Services
OASIS	Outcome and Assessment Information Set
PA	Prior Authorization
PCA	Personal Care Assistance
PCS	Personal Care Services
RCC	Revenue Center Code
SAM	Sandata Agency Management
SOC	Start of Care
SoD	Sandata on Demand
TPL	Third Party Liability
UAT	User Acceptance Testing