

IHCP *bulletin*

INDIANA HEALTH COVERAGE PROGRAMS BT201855 OCTOBER 2, 2018

IHCP announces EVV solution for personal care and home health services

As announced in *Indiana Health Coverage Programs (IHCP) Bulletins* [BT201750](#) and [BT201820](#), the *21st Century Cures Act* directs states to require providers of personal care services and home health services to use an electronic visit verification (EVV) system to document services rendered. The implementation date for requiring use of an EVV system for personal care services – previously announced as January 1, 2019 – has been delayed to January 1, 2020. The implementation date for requiring use of an EVV system for home health services, remains January 1, 2023.



Announcing the IHCP EVV solution

The IHCP will use the Sandata system as the State-sponsored solution for implementing federal EVV requirements. The Sandata EVV system is *Health Insurance Portability and Accountability Act (HIPAA)*-compliant and incorporates verification of the federally mandated data elements. In partnership with DXC Technology, the CoreMMIS system will be configured to integrate with the Sandata EVV system.

Providers may choose to use an EVV solution other than Sandata; however, providers will still be required to export data from their selected system to Sandata's "Aggregator" for integration with CoreMMIS. This requirement will be necessary for documentation, billing, and reimbursement purposes. Sandata's Aggregator will capture data from Sandata EVV users and from other EVV solutions; providers using other solutions must work with Sandata to create an export interface with the Sandata Aggregator. More information will be published in a future bulletin about export format and transmission requirements to assist providers in developing those interfaces.

The Sandata EVV system includes both mobile visit verification (MVV) and telephonic visit verification (TVV) options and an administrative portal to manually manage employee and visit data. If providers require specialized employee management software to automate with a human resource system or other more advanced scheduling features, this specific solution may not meet those needs. In those instances, providers are encouraged to research other options with Sandata or with other companies.

As of this publication, the current list of vendors that have already integrated with Sandata is as follows:

- | | |
|----------------------------------|--------------------|
| ■ Alora Health | ■ ContinuumLink |
| ■ Ampersand International, Inc. | ■ Maxim |
| ■ Axxess | ■ MaximCare Mobile |
| ■ Brightstar | ■ McKesson |
| ■ CellTrak | ■ PointClickCare |
| ■ ClearCare | ■ RhinoBill |
| ■ Complya Health – ContinuumLink | ■ Salo Solutions |

EVV Implementation

The IHCP is currently working through specific plans related to implementing the State-sponsored solution and to issuing implementation guidance on the use of EVV. Discussions are currently under way on the following topics:

- Specific timeline to launch the State-sponsored EVV solution
- Assessment of annual fee on providers to support the State-sponsored EVV solution
- Specific data collection issues such as:
 - Which visit data fields can cause exceptions
 - Reason codes associated with exceptions
 - Unit measurement and rounding

Additional information regarding these topics and others will be communicated in future IHCP provider publications.

Also, EVV resources, including training and other reference information, will be created and posted to indianamedicaid.com. For immediate concerns or questions, email EVV@fssa.in.gov.

EVV personal care services

The procedure codes and modifier combinations for personal care services for which IHCP will require use of electronic verification are listed in Table 1. Each code and modifier combination was chosen based on the federal definition for personal care services. Procedure codes and modifier combinations for home health services that will require electronic verification will be communicated in a future publication.

Table 1 –Procedure codes and modifiers for personal care services that require EVV

Service Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description	Unit
97535	U7				Residential-based habilitation; per 15 minutes	15 minutes
H0034	UB				Medication training and support services, individual; per 15 minutes	15 minutes
H0034	UB	HR			Medication training and support services, family/couple w/individual; per 15 minutes	15 minutes
H0034	UB	HS			Medication training and support services, family/couple w/o individual; per 15 minutes	15 minutes
H0034	UB	U1			Medication training and support services, group; per 15 minutes	15 minutes
H0034	UB	U1	HR		Medication training and support services, group setting, family/couple w/individual; per 15 min	15 minutes
H0034	UB	U1	HS		Medication training and support services, group setting, family/couple w/o individual; per 15 minutes	15 minutes
H2014	UB				Home and community-based habilitation and support services, individual; per 15 minutes	15 minutes
H2014	UB	HR			Home and community-based habilitation and Support Services, family/couple w/ individual; per 15 minutes	15 minutes
H2014	UB	HS			Home and community-based habilitation and Support Services, family/couple w/o individual; per 15 minutes	15 minutes

Table 1 – Procedure codes and modifiers for personal care services that require EVV (Continued)

Service Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description	Unit
S5125	U7				Attendant care services (non-agency); per 15 minutes	15 minutes
S5125	U7	UA			Attendant care services (agency); per 15 minutes	15 minutes
S5125	U7	U1			Attendant care services (self-directed); per 15 minutes	15 minutes
S5125	U7	U1	TU		Attendant care services (self-directed overtime); per 15 minutes	15 minutes
S5130	U7				Homemaker service, NOS, (non-agency); per 15 minutes	15 minutes
S5130	U7	UA			Homemaker service, NOS, (agency); per 15 minutes	15 minutes
S5150	UB				Unskilled respite care, not hospice; per 15 minutes	15 minutes
S5150	U7	UA	U9		Unskilled respite care; per 15 minutes	15 minutes
S5151	U7	U5			Respite care; per hour	Per hour
T1005	HA				Respite care services; per 15 minutes	15 minutes
T2016	U7	U5			Residential habilitation services; per hour	Per hour
T2016	U7	U5	UA		Residential habilitation services; per hour	Per hour
T2016	U7	U5	UN	UA	Residential habilitation daily 1 (2 person setting, Algo 3); per diem	Per day
T2016	U7	U5	UN	UB	Residential habilitation daily 2 (2 person setting, Algo 4); per diem	Per day
T2016	U7	U5	UN	UC	Residential habilitation daily 3 (2 person setting, Algo 5); per diem	Per day
T2016	U7	U5	UP	UA	Residential habilitation daily 4 (3 person setting, Algo 3); per diem	Per day
T2016	U7	U5	UP	UB	Residential habilitation daily 5 (3 person setting, Algo 4); per diem	Per day
T2016	U7	U5	UP	UC	Residential habilitation daily 6 (3 person setting, Algo 5); per diem	Per day
T2016	U7	U5	UQ	UA	Residential habilitation daily 7 (4 person setting, Algo 3); per diem	Per day
T2016	U7	U5	UQ	UB	Residential habilitation daily 8 (4 person setting, Algo 4); per diem	Per day
T2016	U7	U5	UQ	UC	Residential habilitation daily 9 (4 person setting, Algo 5); per diem	Per day
T2029	U7	NU			Specialized medical equipment	Cost
T2029	U7	U5	NU		Specialized medical equipment	Cost
T2029	U7	U5	U8		Specialized medical equipment	Cost
T2029	U7	U8			Specialized medical equipment	Cost
T2033	U7	U5			Participant assistance and care; per hour	Per hour

QUESTIONS?

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