

BULLETIN

Bulletin Number: MMP 24-11

Distribution: Home Health Care Services Providers

Issued: February 29, 2024

Subject: Home Health Electronic Visit Verification

Effective: April 1, 2024

Programs Affected: Medicaid

Purpose

The purpose of this policy is to inform home health care services (HHCS) providers of the Michigan Department of Health and Human Services (MDHHS) requirements for Electronic Visit Verification (EVV).

Background

The 21st Century Cures Act (the Cures Act), enacted by the U.S. Congress in December 2016, added Section 1903(I) to the Social Security Act to require all states to use EVV for personal care services (PCS) and HHCS provided under a Medicaid State Plan of the Social Security Act or under a waiver of the State Plan.

EVV is a technology-based validation of PCS or HHCS provided. This information helps to ensure that beneficiaries receive their expected care.

MDHHS is implementing an open vendor EVV model. This allows providers flexibility to use the state EVV system at no cost, or another EVV system of their choosing that meets state requirements. The state selected HHAeXchange as its EVV vendor and aggregator. To use an EVV system other than HHAeXchange, a provider must ensure compatibility with the HHAeXchange Electronic Data Interchange (EDI) process and must submit EVV information to the state's aggregator. A provider's use of an alternative EVV system is at their own cost.

Additional information about use of an alternative EVV system and the EDI process can be found on the HHAeXchange web page at: www.hhaexchange.com/info-hub/Michigan.

Timeline for Implementation

Effective April 1, 2024, MDHHS requires the use of EVV for HHCS for Medicaid Fee-for-Service (FFS) providers serving Medicaid beneficiaries. For dates of service on or after April 1, 2024, certain HHCS will require EVV. Failure to comply will impact payment.

An implementation date for EVV requirements for HHCS provided through a Medicaid Health Plan (MHP) will be forthcoming.

EVV Data Requirements

The Cures Act requires the following six data elements to be collected for EVV:

- Type of service performed
- Person receiving the service
- Date of the service
- Location of the service
- Person providing the service
- Time the service begins and ends

EVV Data Collection Methods

If using the vendor EVV tools offered by MDHHS, then the methods for reporting information include:

- **Mobile Application**

The mobile application can be downloaded to a caregiver-owned or employer-issued smart phone or GPS-enabled tablet. The caregiver will use the device to clock-in at the start of the service and clock-out at the end of the service. This is the preferred method for reporting EVV information.

The mobile device also has an offline EVV feature that allows the caregiver to clock-in and clock-out while offline, as in the absence or loss of an internet connection. The information will transmit the stored data once internet connection returns. The data is time-sensitive, requiring the caregiver to ensure access to an internet connection within seven calendar days of service delivery.

- **Telephony/Interactive Voice Response (IVR)**

Using the beneficiary's landline, the caregiver will call into a designated toll free EVV telephone line to clock-in at the start of the service and place a second call to clock-out at the end of the service. This is an approved method of reporting EVV, but only expected to be used if the mobile application is not an option.

A provider may use telephony/IVR when:

1. The beneficiary has a landline that can be used for the purpose of EVV.
2. The beneficiary's services start and/or end in their home.

If the beneficiary does not have a landline that can be used for the purpose of EVV, the caregiver must use an alternate method to capture EVV. Agency providers must ensure caregivers have access to alternate methods to capture EVV data.

Alternative EVV Vendor

If using an alternative EVV vendor system, providers will continue to use the vendor's existing data collection methods, as long as the system has been validated as meeting federal and state EVV requirements.

Home Health Care Services Codes

The following HHCS codes require EVV:

- G0151 - Physical Therapy
- G0152 - Occupational Therapy
- G0153 - Speech/Language Therapy
- G0156 - Home Health Aide
- G0299 - Skilled Nursing Services, RN
- G0300 - Skilled Nursing Services, LPN

The EVV-required codes for HHCS are listed on the home health billing and imbursement website, which can be accessed on the MDHHS website at www.michigan.gov/medicaidproviders >> Billing & Reimbursement >> Provider Specific Information >> Home Health.

EVV Home Health Care Service Exclusions

- Hospice Services
- Durable Medical Equipment Services
- HHCS visits for beneficiaries who are dually enrolled with Medicare and Medicaid are excluded from EVV requirements. Providers do not need to collect EVV data for HHCS visits for these beneficiaries.

EVV Compliance

MDHHS is determining an EVV compliance and monitoring plan and will share additional information as it becomes available.

Manual Maintenance

Retain this bulletin until the information is incorporated into the MDHHS Medicaid Provider Manual.

Questions

Any questions regarding this bulletin should be directed to Provider Inquiry, Department of Health and Human Services, P.O. Box 30731, Lansing, Michigan 48909-8231, or e-mailed to ProviderSupport@michigan.gov. When you submit an e-mail, be sure to include your name, affiliation, NPI number, and phone number so you may be contacted if necessary. Typical Providers may phone toll-free 800-292-2550. Atypical Providers may phone toll-free 800-979-4662.

An electronic copy of this document is available at www.michigan.gov/medicaidproviders >> Policy, Letters & Forms.

Approved

A handwritten signature in black ink that reads "Meghan E. Groen". The signature is written in a cursive, flowing style.

Meghan E. Groen, Director
Behavioral and Physical Health and Aging Services Administration