

NEWSLETTER

Volume 31 No. 16 June 2021

TO: All Providers Billing for Personal Care Assistance (PCA) Services,

including Division of Developmental Disabilities Programs - For

Action

All Managed Care Organizations – For Action

SUBJECT: Provider Payment: Electronic Visit Verification (EVV) Claims

Payment for all Medicaid/NJ FamilyCare Fee-for-Service (FFS) and Managed Care Organization (MCO) Providers Billing for PCA Services subject to the EVV mandate of the Federal 21st

Century Cures Act

EFFECTIVE: July 1, 2021

PURPOSE: To supply additional guidance to providers and MCOs concerning compliance and payment with EVV requirements as of July 1, 2021.

BACKGROUND: In accordance with the 21st Century Cures Act, New Jersey requires providers of personal care services to use its EVV system for specified home health and PCA services, effective January 1, 2021. The Department has previously issued Newsletters in January 2021 (Volume 31-01) and April 2021 (Volume 31-09) regarding EVV.

ACTION: Agency providers of personal care services must meet requirements described herein to ensure compliance with the federal mandate, ongoing participation as a Medicaid/NJ FamilyCare provider, and payment for services appropriately provided through the Medicaid/NJ FamilyCare program.

Agency providers that do not demonstrate EVV compliance outlined in DMAHS Newsletters in <u>January 2021 (Volume 31-01)</u> and <u>April 2021 (Volume 31-09)</u>, and herein will be at risk of not receiving new referrals for PCA services. To prevent unnecessary disruption of care relationships between members and providers, provisional status is being granted to providers for a limited time. MCOs will ensure a smooth transition so that all members are being served by Operational providers by October 1, 2021.

Definition of Provider Status

Operational: Operational providers are fully compliant with the requirements of the 21st Century Cures Act as stated in the <u>January 2021 (Volume 31-01)</u> newsletter. These providers are confirming <u>all</u> visits with EVV using HHAeXchange (HHAX), CareBridge or an integrated third party EDI solution. In addition, these providers are able to bill using HHAX or CareBridge billing process as outlined by the payer. Operational status for providers will be payer specific.

Provisional: There are two kinds of Provisional providers described below. Provisional providers will be able to continue serving Medicaid/NJ FamilyCare members in the short term, but are required to move to Operational status no later than September 30, 2021.

a) Engaged: Engaged providers are using an EVV data solution to support visits but have not completed integration with HHAX and/or CareBridge. As a result, the provider's EVV data cannot be used to support claims processing by one or more payers. Engaged status for Providers is payer specific.

Division of Medical Assistance and Health Services (DMAHS)

- ➤ Effective September 1, 2021, providers that have not moved to Operational status will not be assigned new cases.
- ➤ Effective October 1, 2021, MCOs will ensure that all members are being served by Operational providers. Providers remaining in Engaged status will have existing cases moved to Operational providers.

Division of Developmental Disabilities (DDD)

- ➤ Effective September 1, 2021, providers that have not moved to Operational status will not be assigned new cases through Support Coordination.
- ➤ Effective September 1, 2021, Support Coordination Agencies (SCA) will begin transitioning all members to operational providers with a completion date of October 31, 2021; or
- Providers may elect to continue rendering services with the understanding they cannot bill for services delivered after September 30, 2021 until they complete all EVV requirements.
- b) Disengaged: Disengaged providers have not identified an EVV solution and/or are not utilizing an EVV solution to be compliant with the Federal mandate. These providers must immediately address EVV requirements and move into Engaged status with all applicable payers.

DMAHS

- ➤ Effective July 15, 2021, providers remaining in Disengaged status will not be assigned new cases.
- Effective August 1, 2021, MCOs will ensure that all members are being served by Operational providers. Providers remaining in Disengaged status will have existing cases moved to Operational providers.

DDD

- ➤ Effective August 1, 2021, providers remaining in Disengaged status will not be assigned new cases though Support Coordination.
- ➤ Effective September 1, 2021, Support Coordination Agencies (SCA) will begin transitioning all members to operational providers with a completion date of October 31, 2021; or
- Providers may elect to continue rendering services with the understanding they cannot bill for services delivered after September 30, 2021 until they complete all EVV requirements.

Requirement for Providers to Notify All Payers of Operational Status for July 1 2021

Providers are required to complete a one-time <u>attestation</u> of their status with respect to EVV compliance on July 1, 2021. Providers who are not fully operational with any payer will document the reasons why they are not able to fully operationalize EVV. The attestation will provide notification to individual payers. Managed Care Organizations and their EVV vendors will work directly with providers to support adoption of EVV and integration of data.

Link to attestation:

https://www.cognitoforms.com/HHAeXchange1/njevvproviderattestationform

EVV Specific Contact Information and Billing after July 1, 2021

Each provider should ensure coordination between their EVV solution and payer. Contact information is detailed below.

Payer	Payer Contact information for EVV	EVV Solution for Data	Claims Submission Portal for
	Questions	Submission and Technical	Operational Providers
		Support	
FFS Medicaid	DDDEVV@dhs.nj.gov	HHAeXchange:	EVV mandated services will
	mahs.evv@dhs.nj.gov	Njsupport@hhaexchange.com	be submitted and billed
		866-245-8337	through HHAeXchange
Aetna	Joseph Manger	HHAeXchange:	All EVV mandated services
	MangerJ@aetna.com	Njsupport@hhaexchange.com	will be submitted and billed
	Namrata Sood:	866-245-8337	through HHAeXchange
	SoodN@aetna.com		
	Constance Offer:		
	OfferC@aetna.com		
Amerigroup	Eyreny Mekhaiel:	CareBridge:	All EVV mandated services
	eyreny.mekhaiel@amerigroup.com	njevv@carebridgehealth.com	will be submitted and billed
	Lynelle Steele:		through CareBridge
	fannie.steele@amerigroup.com		
	Keisha J Woodson:		
	keisha.woodson@amerigroup.com		
Horizon	Shagun Malik:	CareBridge:	All EVV mandated services to
	Shagun Malik@horizonblue.com	njevv@carebridgehealth.com	be billed directly to Horizon.
	Denaire Johnson:		No Change to claims
	Denaire Johnson@horizonblue.com		submission - Refer to Section
	Stephen Fitch:		9.3 – Electronic Billing Guide
	Stephen Fitch@horizonblue.com		in the <u>Provider Manual</u>

United HealthCare	Hcbs_northeast_pr@uhc.com	HHAeXchange: Nisupport@hhaexchange.com 866-245-8337	All EVV mandated services will be submitted and billed through HHAeXchange
WellCare	Consuelo Taveras: Consuelo.Taveras@wellcare.com Damaris Camilo: Damaris.Camilo@wellcare.com Joan Cosme: Joan.Cosme@wellcare.com Elaine Aguirre: Elaine.Aguirre@wellcare.com	HHAeXchange: Njsupport@hhaexchange.com 866-245-8337	All EVV mandated services will be submitted and billed through HHAeXchange

If you have any questions concerning this Newsletter, please complete the Provider Inquiry form accessible at the link below and it will be send directly to the DMAHS EVV Resource account

https://www.cognitoforms.com/HHAeXchange1/NJEVVProviderAssistance