

NEWSLETTER

Volume 31 No. 01 January 2021

TO: All Providers billing for Personal Care Services, including Division of

Developmental Disabilities Programs – **For Action** All Managed Care Organizations – **For Action**

SUBJECT: Electronic Visit Verification (EVV) Claims Payment for all

Medicaid Fee for Service (FFS) and Managed Care Organization (MCO) Providers Billing for Personal Care Services subject to

the EVV mandate of the 21st Century Cures Act

EFFECTIVE: Immediately

PURPOSE: To inform providers and Managed Care Organizations about the

process for, and requirements of, claims payment with Electronic

Visit Verification (EVV)

This Newsletter applies to all Medicaid Fee for Service (FFS) and Managed Care Organization (MCO) Providers Billing for Personal Care Services that are subject to the EVV mandate of the 21st Century Cures Act. Personal Care Services covered by this federal mandate are detailed in a chart at the end of this Newsletter.

Please note that NJ Division of Developmental Disabilities (DDD) provider agencies billing FFS must follow the guidelines of this newsletter.

Additionally, EVV requirements will apply to self-directed services provided through the Personal Preference Program and the DDD Self-Directed Options. The implementation plan for self-direction is described in detail below.

BACKGROUND: The Division of Medical Assistance and Health Services (DMAHS) is implementing an EVV System in New Jersey. In collaboration with our EVV contractor, HHAeXchange, and in compliance with Section 12006(a) of the 21st Century Cures Act, DMAHS will have launched, as of January 1, 2021, an EVV system capable of capturing and processing all of the required EVV data elements, which are:

- 1. Type of service performed;
- 2. Individual receiving the service;
- 3. Date of the service;
- 4. Location of service delivery;
- 5. Individual providing the service;
- 6. Time the service begins and ends.

It is DMAHS's intention to work together with all stakeholders to ensure this new system meets federal requirements while supporting access to care and minimizing impact on claims payment. DMAHS will work with stakeholders to address and overcome initial challenges while establishing processes to ensure a robust and reliable EVV system.

ACTION – Provider Agencies and MCOs:

Phase 1: January 1, 2021 - June 30, 2021

Provider agencies will demonstrate progress towards full compliance with training and verified visit submission. During Phase 1, as they progress to full compliance, providers will continue to receive payment for authorized services, so long as the claims are submitted and services rendered in compliance with all other provisions of the law.

The following activities are required to demonstrate a provider's progress towards full compliance for submitting EVV visits:

- **Training**: Provider has completed the onboarding process and applicable training. Training requirements may vary based on the method for which EVV compliant visit data is captured:
 - o <u>If using tools provided through HHAeXchange</u> each provider must:
 - a) Complete the provider survey, and
 - b) Complete the HHAeXchange Learning Management System (LMS) modules OR must have attended the training webinars hosted the week of November 30, 2020.

Training information can be found at https://hhaexchange.com/nj-dmahs/. Click on Trainings or Info Sessions based on your training needs.

- If using an EVV tool provided by Horizon and/or Amerigroup (CareBridge)
 provider must attend the trainings required by the MCO/CareBridge.
 Information available at https://www.carebridgehealth.com/trainingnjevv.
- If using an EVV platform that is different from the systems above provider must attend the Electronic Data Interchange (EDI) sessions provided through the HHAeXchange LMS or have attended the hosted webinars described above.
- Verified Visit Submission: Provider agencies will demonstrate increasing compliance with verified visit submission throughout Phase 1. The table below lists the minimum compliance thresholds that must be met for claims representing dates of service in January 2021 June 2021. The Minimum Compliance Threshold is defined as the percentage of all Personal Care Service claims submitted by providers which are verified by EVV technology.

Verified Visit Rate (Dates of Service in Month)	Minimum Compliance Threshold**
January 2021	20%
February 2021	35%
March 2021	45%
April 2021	60%
May 2021	75%
June 2021	90%

^{**}Percentage of all claims paid verified by EVV technology

<u>Phase 1 Provider Agency Accountability:</u> DMAHS is committed to continuing payment for services rendered, and maintaining important member/provider connections during Phase 1. However, Providers should be aware that consequences for failure to a) complete the required training and b) meet minimum compliance thresholds during Phase 1 may include non-assignment of new cases through Managed Care Organizations.

Additionally, while DMAHS has established minimum compliance thresholds, these are not intended to be maximums and providers are encouraged to exceed these thresholds when practicable, with appropriate focus on both worker training and continuity of care for members.

Phase 2: July 1, 2021

Effective July 1, 2021, DMAHS will require that 100% of claims for Personal Care Services delivered through provider agencies are supported by verified visit data, consistent with the EVV mandate and inclusive of any CMS guidance issued subsequent to this newsletter.

ACTION - Self-Directed Services Through Personal Preference Program (PPP) and the DDD Self-Directed Option

To ensure a smooth transition to EVV with adequate support for members and caregivers, DMAHS is implementing an EVV pilot for self-direction as follows:

- Members of Amerigroup and their caregivers participating in the Personal Preference Program will be fully trained and supported with EVV by the fiscal intermediary, Public Partnerships, Ltd. (PPL).
 - For members self-directing through PPL, only Amerigroup members will implement EVV during the pilot period.
- Members using the NJ DDD Self Directed Option through Easterseals Agency with Choice Program will be trained and supported with EVV by Easterseals and HHAeXchange.

Based on member and provider experience during the first 45 days of the pilot period, DMAHS may define additional rollout groups and compliance thresholds for self-direction.

Services Requiring Electronic Visit Verification

The following table represents the services and associated procedure codes covered under the EVV mandate beginning January 1, 2021.

Service	Unit of Service	Procedure Code
Personal Care Assistance_15M	15 Minutes	T1019
Personal Care Assistance Group	15 Minutes	T1019_HQ
Personal Care Assistance_PD	Per Diem	T1020
Personal Care Assistance (Self Directed) Individual	15 Minutes	T1019_SE
Personal Care Assistance (Self Directed) Individual - Agency	15 Minutes	T1019_SE_UI
Personal Care Assistance Group (Self Directed) Group	15 Minutes	S5125_SE_HQ
Personal Care Assistance (Self Directed) Group - Agency	15 Minutes	S5125_SE_U3
MLTSS Home Based Supportive Care	15 Minutes	S5130
MLTSS Home Based Supportive Care - Self Directed	15 minutes	S5130_HQ
MLTSS In Home Respite	15 Minutes	T1005
DDD Individual Supports	15 minutes	H2016HI
DDD Individual Supports	15 minutes	H2016HI22
DDD Individual Supports	15 minutes	H2016HIU8
DDD In Home Respite	15 minutes	T1005HI
DDD In Home Respite	15 minutes	T1005HIU8
DDD Community Based Supports	15 minutes	H2021HI
DDD Community Based Supports	15 minutes	H2021HI22
DDD Community Based Supports	15 minutes	H2021HI52

As our collaborative work continues, DMAHS, in partnership with DDD and the EVV Steering Committee, will provide updates and information as appropriate. Please visit the DMAHS EVV Website for additional information:

https://www.nj.gov/humanservices/dmahs/info/evv.html

To submit questions or concerns about EVV, please email New Jersey's EVV Mailbox at: mahs.evv@dhs.nj.gov

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