# Electronic Visit Verification (EVV) Townhall

August 7, 2024



# Housekeeping



### **REMINDER: HFS EVV Resources**

- HFS EVV Website
- HFS Provider Notices \*sign up for Home Health and Waiver to receive EVV updates\*
- HFS.EVV@illinois.gov \*for State Plan HHCS providers, general EVV inquiries, and escalation of concerns submitted to HHAeXchange\*



### **Additional State EVV Resources**

#### **DHS DDD**

- DHS DDD EVV Resources
- DHS.DDDEVV@ILLINOIS.gov \*for in-scope DDD providers\*

#### **IDoA**

Aging.EVVSupport@illinois.gov \*for in-scope IDoA providers\*

#### **DSCC**

- DSCC EVV Resources
- O365-dscc-evv@UIC365.onmicrosoft.com \*for in-scope DSCC providers\*

#### **DHS DRS**

- DHS DRS EVV Resources
- DHS.EVV@illinois.gov \*for in-scope DRS providers\*



# Submitting Unresolved Concerns to HFS.EVV@illinois.gov:

- Include Your Provider Agency Name
- Include Your Tax Identification Number (TIN)
- Include Your Latest HHAeXchange <u>Client Support</u> <u>Portal Ticket Number</u>
- Include A Summary of Your Concern



### July 16, 2024, EVV Townhall Recap

### **Topics**

- Tracking Caregivers By Full Social Security Numbers (all nine digits)
- IDoA Implementation Delay
- GPS Tolerance Range Update to 500 Feet
- Authorizations Due By Date—New Report
- Provider Driven Placement Demos—Members, Caregivers, Authorizations
- HHAeXchange (HHA) Resources



### Revisiting July 16, 2024, Q&A

- Managed Care Organizations (MCOs)
  - **i. IDs**—Report of HHAeXchange not accepting MCO ids entered by provider because the MCO id entered does not align with HHAeXchange's Payer table (template). \*Refer to updated HHA EDI Specification document\*
  - Aetna Better Health of Illinois (HealthChoice Illinois (HCI)): ABHI
  - Aetna Medicare-Medicaid Alignment Initiative (MMAI): AEMM
  - Blue Cross Blue Shield HCI and MMAI: BCCI
  - CountyCare HCI: CCHI
  - Humana MMAI: HUIL
  - Meridian HCI and MMAI: MHPI
  - Molina HCI and MMAI: MOHI



### Revisiting July 16, 2024, Q&A (cont.)

- I. Managed Care Organizations (MCOs)
  - ii. MCOs as Payers—Where do the MCOs fall in terms of the respective programs for Illinois?
    - ONLY manage HCBS for Elderly waiver (IDoA), Brain Injury (DRS), HIV/AIDS (DRS), and Persons with Disabilities (DRS)
    - MCOs pay directly for Homemaker services under the Elderly waiver, and Homemaker and Home Health Care Services (HHCS) under all three DRS waivers for MCO enrolled customers.
    - HHCS is ONLY paid for under the DRS waivers if it is denied by Medicaid or Medicare and supported by individual need/healthcare professional order
    - MCOs can pay for State Plan Medicaid-funded HHCS for individuals enrolled in Medical coverage under a HealthChoice Illinois (HCI) or Medicare-Medicaid Alignment Initiative (MMAI) plan.



### Revisiting July 16, 2024, Q&A (cont.)

### II. Tracking Location

- i. GPS Out of Range—What should caregivers do if GPS coordinates continue to show up as miles away from the customer's residence?
  - GPS tolerance range was recently expanded from 300 to 500 feet.
  - Caregiver should check in location services to ensure that they are allowing "Precise Location" for the HHAeXchange application.
  - If "precise location" is enabled and concern persists, take a screenshot and submit to HHA by way of their <u>Client Support portal</u>.

### Revisiting July 16, 2024, Q&A (cont.)

### **III. Appropriate Time Stamp for EDI Providers**

- i. What Time format should third party vendors use?
  - Times are expected in UTC as described in HHA's <u>EDI Specification document</u>.

### IV. HHA Acquisition of Other EVV Vendors

- i. HHA vs. Generations—HHA has acquired Generations EVV software. What is HHAeXchange doing to eliminate fees that Providers are currently paying monthly for the service since HHA is state-funded?
  - The two software offerings remain separate as well as any contractual engagements with the provider's current EVV vendor. Providers are free to transition to utilizing the Statesponsored free HHA system.

# REMINDER: Previous Illinois EVV Implementation Timelines

- **September 1, 2023:** Personal Support Workers (PSWs) under the Adult with Developmental Disabilities waiver and the Children and Young Adults with Developmental Disabilities waiver.
- **December 31, 2023:** Home Health Care Services (HHCS) for providers billing Illinois State Plan Medicaid, <u>Healthchoice Illinois (HCI)</u> Managed Care Organizations (MCOs), <u>Medicare-Medicaid Alignment Initiative (MMAI)</u> MCOs, Division of Specialized Care for Children (DSCC), and Illinois Department of Human Services' (DHS) Division of Developmental Disabilities (DDD).



### **IDoA EVV Implementation Delay**

- EVV will NOT Go live for IDoA on 11/01/2024.
- July 12, 2024, HFS Provider Notice
- Implementation has been delayed until further notice.
- This <u>ONLY</u> impacts:
  - In-Home Providers or Homemaker agencies serving IDoA
     CCP customers



### **EVV** is MEDICAID Specific

- The <u>Federal 21<sup>st</sup> Century Cure's Act</u> Requires EVV for Medicaidfunded Personal Care Service (PCS) and Home Health Care Service (HHCS) Providers.
- This includes ALL HHCS agencies billing
  - Illinois State Plan Medicaid
  - Division of Specialized Care for Children (DSCC)
  - Illinois Department of Human Service's Division of Developmental Disabilities (DDD)
  - HealthChoice Illinois MCOs (only Medicaid eligible)
  - MMAI MCOs (Medicaid and Medicare eligible)



### **EVV** is MEDICAID Specific (cont.)

- The State included MMAI in consideration of individuals eligible for Elderly waiver (IDoA), Brain Injury, Persons with Disabilities, and HIV/AIDS waivers enrolled with MMAI MCOs for waiver management, AND;
- In consideration of HHCS providers billing the Medicaid component of MMAI when Medicare denies claims.
- HHCS agencies ONLY need to submit EVV data for Medicaid-funded services included in the <u>State's Home Health Fee Schedule | HFS (illinois.gov)</u>



### **EVV** is **NOT** Required for Medicare

- HHCS agencies ONLY need to submit EVV data for Medicaid-funded services included in the <u>State's Home Health Fee Schedule | HFS (illinois.gov)</u>
- G0157 and G0158 are MEDICARE specific codes for Physical Therapy Assistant (PTA) and Occupational Therapy Assistant (OTA) services, and cannot be billed to State Medicaid upon Medicare denial
- When Medicaid is the primary payer, PTA and OTA visits should be logged in or transmitted to HHA as G0151 and G0152 (currently only applicable to DDD and State Plan Medicaid HHCS). G0151:U2 and G0152:U2 may also be used by PTAs and OTAs for State Plan HHCS.



# Social Security Number (SSN) Requirement

- <u>ALL</u> Provider Agencies will need to track caregivers by <u>FULL</u> SSN. This includes all nine digits.
- Aids the State in identifying individual caregiver EVV compliance and in the investigation of fraud, waste, and abuse concerns.
- Addressed at the <u>July 16, 2024, EVV Townhall Webinar</u>.
- Deadline of October 17, 2024.
- Communicated in July 26, 2024, HFS Provider Notice.



### **SSN Privacy**

- Illinois Department of Healthcare and Family Services' (HFS) contract with HHAeXchange requires the vendor to be <u>HITRUST</u> certified and <u>HIPAA</u> compliant.
- HHAeXchange must submit initial and annual Service Organization Control (SOC) reports to HFS that are reviewed by HFS' Chief Security Officer.
- Federal Centers for Medicare and Medicaid (CMS) Security assessments during Operational Readiness Review (ORR) and Certification Review.
- Quarterly Security Reports to HFS and CMS





### Illinois Provider Townhall

August 7, 2024

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### Agenda



- Introductions
- Recent Hot Topics
- EDI Provider FAQ
- Authorization Workflow in HHAX
- HHAeXchange Customer Care & Other Resources



### HHAeXchange Team

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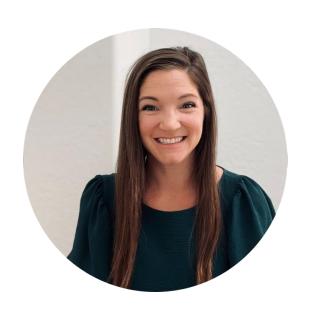


### **Team Introductions**





**Shawn Bowen** Sr. Project Manager, State **Implementations** 



**Decree Sweeney** Director, Customer Success



### Recent Hot Topics



### **Tracking Caregivers (Providers) by SSN**



- The State has issued guidance that agencies should begin using the full caregiver's (provider's) Social Security Number (SSN) to track them in HHAeXchange
- What does this mean for agencies using HHAeXchange EVV?
  - Update existing caregiver profiles to include the full SSN and create new profiles with this going forward
  - The caregiver does not need to make any changes with the Mobile App
- What does this mean for EDI agencies?
  - Update existing caregiver profiles to include the full SSN via the API and send new records with this going forward
  - Caregiver ID / Employee ID / External ID (whatever ID is used in your EVV vendor system) will remain the unique identifier for each caregiver profile



### **Service Code Discussion**



- PT and OT Service Codes with combined disciplines:
  - G0151, G0151:U2 and G0152, G0152:U2
- System related updates being made to accept either PT/PTA and OT/OTA services as appropriate for the purposes of EVV
- Impacted providers will receive outreach from HHAeXchange once updates are completed, confirming both types of visits will now be accepted in the system



### EDI Provider FAQ



### **EDI Provider FAQ – New Vendors**



- New EVV Vendors
  - Agencies are able to utilize the HHAX system as the state-sponsored EVV system at no cost
  - If an agency elects to use a different EVV system, an attestation should be signed by the provider, attesting that the vendor will capture all 6 Cures Act elements















### **EDI Provider FAQ – MCO Payer ID**



 Visits for MCO services can be submitted - ensure the MCO Payer ID is included on the visit

 All payer ID's are a 4 letter abbreviation

Payer ID	Payer Name
IHFS	IL Dept of Healthcare & Family Services
IDDD	IL Division of Developmental Disabilities
DSCC	IL Division of Specialized Care for Children
MHPI	Meridian Health Plan IL
MOHI	Molina Healthcare IL HCI & MMAI
HUIL	Humana IL MMAI
AEMM	Aetna MMAI
BCCI	IL Blue Cross Blue Shield HCI & MMAI
ABHI	Aetna Better Health of Illinois
CCHI	CountyCare Health Plan IL HCI



### **EDI Provider FAQ - Member Not Found Rejection**



- "Member Not Found Based on Qualifier Value" visit rejections
  - Visit Data sent to HHAeXchange from any third-party provider is matched against payer, member information, and provider identifiers
  - If you're experiencing this rejection and need assistance determining why the visits will not process, please contact HHAeXchange EDI support



### **EDI Provider FAQ – IDOA Provider Status**



- Providers integrated for IL Department on Aging members specifically
  - Integration with IDOA and HHAeXchange is not active at this time
  - Agencies do not need to take any action, integration will remain valid and visits can be submitted once integration with IL DOA data is completed



# Authorization Workflow in HHAX

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### **Authorization Management by Contract**



Contract	Program	Member Placement and Authorization Responsibility
Division of Developmental	HHCS & PCS (Personal Support	
Disabilities	Worker)	Provider Agency
Division of Specialized Care fo Children	r HHCS	Provider Agency
Department of Health &		
Family Services (State Plan)	HHCS	Provider Agency
IL MCOs	HHCS (when authorization is not required yet)	Provider Agency
IL MCOs	HHCS (when authorization is required)	Payer (MCO)
IL MCOs	PCS (Homemaker)	Payer (MCO)

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### **Authorization Management by Contract**



Contract	Program	Member Placement and Authorization Responsibility
Division of Developmental	HHCS & PCS (Personal Supp	
Disabilities	Worker)	Provider Agency
Division of Specialized Care for Children	or HHCS	Provider Agency
Department of Health & Family Services (State Plan)	HHCS	Provider Agency
IL MCOs	HHCS (when authorization is required yet)	s not Provider Agency



IL Payers (DDD, DSCC, HFS, select MCO services) send Member information to HHAeXchange



HHAX processes member information (will be referenced during member placement process)

HHAX Providers enter member profiles to link to payer provided member profiles. Once members are placed, providers directly enter authorizations



**EDI Providers** enter members and authorizations to primary EVV system, send to HHAX via API

#### **EDI Providers**

manage visit response file received (success / failure)



### **Authorization Management by Contract**



Contract	Program	Member Placement and Authorization Responsibility
IL MCOs	HHCS (when authorization required)	n is Payer (MCO)
IL MCOs	PCS (Homemaker)	Payer (MCO)

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IL Payers (select MCO services) send Member information and Authorization information to HHAeXchange



HHAX processes member and authorization info to appropriate provider portal

**HHAX Providers** access member and authorization information from MCOs



EDI Providers enter members and authorizations to primary EVV system, send visits to HHAX via API

#### **EDI Providers**

manage visit response file received (success / failure)



### **Adding Authorizations**HHAX Providers



In the scenario the service allows for manual member management, Authorizations can be created manually via the HHAeXchange portal

- 1) Navigate to member profile
- 2) Select authorization section from the left menu
- 3) Select "new authorization" from the top right
- 4) Populate all required fields based on authorization approved by payer
- 5) Select save

### **EDI/3rd Party Providers**

- No Manual Entry Required
- Authorization is automatically created upon caregiver import from the 3<sup>rd</sup> Party API
- Refer to the <u>Illinois API Technical</u>
  Specifications for caregiver import details.
- For inquiries or further assistance, please create a support ticket via the <u>Provider EDI</u> <u>Integrations</u> help desk.

This applies to the following programs:

- IDDD Personal Care
- State Plan, DSCC and IDDD Skilled Nursing & Home Health Care Services
- MCO Home Health Care Services when prior authorization is not required



### Linking a visit to an existing authorization



### **HHAX Providers**

Authorization listed in HHAX portal from MCO

- 1) Create a new visit, with service code as listed in authorization
- 2) Visit will automatically link with authorization based on service code and date range

### **EDI/3rd Party Providers**

Authorization listed in HHAX portal from MCO

- Visit import sent from 3<sup>rd</sup> party API will align with authorization from MCO in accordance with the data points:
  - MCO ID
  - Agency TIN
  - Member ID
  - Service Code
  - DOS
- Refer to the <u>Illinois API Technical</u> Specifications for visit import details.

This applies to the following programs:

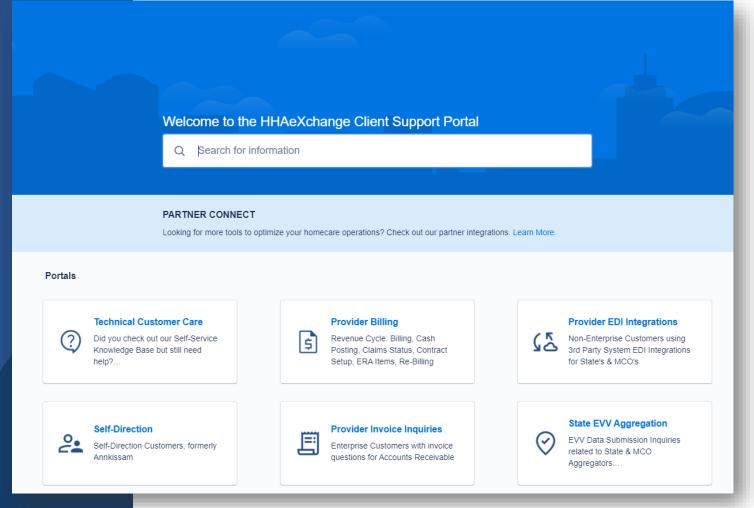
- MCO Home Health Care Services when prior authorization is required
- MCO Personal Care Services



### HHAeXchange Provider Resources



### Client Support Portal



https://www.hhaexchange.com/supportrequest



### **HHA Technical Customer Care**

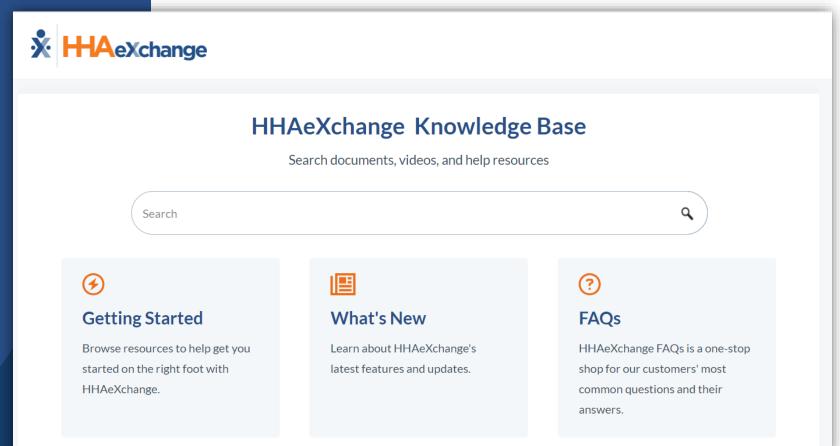


### Client Support Portal: <a href="https://hhaexchange.com/supportrequest">https://hhaexchange.com/supportrequest</a>

- Recommended to always include relevant details to help us solve your issue:
  - Agency Tax ID
  - Explanation of issue and steps taken to reproduce the issue (if applicable)
  - Examples/screenshots
  - Anything else you think might help us
- Select the Right Team:
  - Technical Customer Care HHAeXchange portal technical assistance (e.g. navigation, error messages within portal, login help, etc.)
  - Provider EDI Integrations Assistance with setting up a new EDI integration with your vendor, questions about rejections or specifications, etc.



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### Knowledge Base

**HHAeXchange Provider Knowledge Base** 





### State Info Hub



https://hhaexchange.com/info-hub/illinois

#### **HHAeXchange Support**



**State Info Hub** 

https://hhaexchange.com/info-hub/illinois



**Client Support Portal** 

https://hhaexchange.com/supportrequest



Email

ILSupport@hhaexchange.com



**Phone** 

833-961-7429

#### **Illinois Home Health Support**



Email

HFS.EVV@illinois.gov

### Provider Resources



### Q&A



**State Info Hub** 



**Client Support Portal** 



### Thank you!