

**An Important Message from
The Texas Health and Human Services Commission (HHSC)**

**Reminder: Prepare for EVV Cures Act Home Health Care Services
Implementation**

Background:

The Texas Health and Human Services Commission (HHSC) will require Electronic Visit Verification (EVV) for Medicaid home health care services (HHCS) beginning Jan. 1, 2024, as listed in the [Home Health Care Services required to use EVV \(PDF\)](#). The 21st Century Cures Act is the federal law that requires states to implement EVV.

Key Details:

HHCS Claims for EVV Required Services Must be Submitted to TMHP Starting December 1

- Program providers and financial management services agencies (FMSAs) must submit all HHCS EVV claims to Texas Medicaid & Healthcare Partnership (TMHP) using TexMedConnect, or through Electronic Data Interchange (EDI) using a Compass 21 (C21) Submitter ID starting with dates of service on or after Dec. 1, 2023.
- Managed care organizations (MCOs) will reject any HHCS managed care claims with EVV services and dates of service on or after Dec. 1, 2023, back to the program provider and FMSA, directing them to submit the claim to TMHP for EVV claims matching.

Action Items:

Register for TexMedConnect

- To access TexMedConnect through the TMHP website, you must already have an account.
- If you don't have an account, set one up using the information provided in the TMHP Website Security Provider Training Manual.
- Program providers and FMSAs that need help setting up C21 or CMS Submitter IDs should call the EDI Help Desk at 888-863-3638, Option 4, or visit [TexMedConnect](#) for more information.

Request EVV Portal Access

- To access the EVV Portal, program providers and FMSAs must have a TMHP User Account.
- Program providers and FMSA staff must contact their TMHP Provider Administrator to request EVV Portal access.

- For full instructions, review the [EVV Portal job aids on the EVV Learning Management System \(LMS\)](#).

Complete Onboarding and EVV Portal Training by December 31

Program providers and FMSAs must complete the following **before Dec. 31, 2023**, to avoid impacts to EVV claims payment:

- Onboard with the state-funded EVV vendor system, HHAeXchange, by submitting the [HHAeXchange Provider Onboarding Form](#).
- Complete the TMHP Learning Management System (LMS) to complete annual EVV Portal training requirements.

Visit the [TMHP EVV Training web page](#) for more information.

EVV Home Health Care Services Practice Period: Oct. 1–Dec. 31, 2023

The practice period allows program providers and FMSAs, to practice using the EVV system, using the EVV Portal and submitting EVV claims before the Jan. 1, 2024, implementation date. EVV claims will be paid by the payers (HHSC or MCO) even if the EVV visit transactions do not match the EVV claims.

- Consumer Directed Services (CDS) employers can practice using the EVV system selected by their FMSA.
- Service providers and CDS employees can practice clocking in and clocking out using their program provider's or FMSA's selected EVV system, and the visit data will be transmitted to the EVV Aggregator.

Additional Information:

EVV Claims Matching with Denials

Effective Jan. 1, 2024, and after, when an HHCS EVV claim is submitted without a matching EVV visit transaction, the EVV claim will be denied. This applies to all program providers and FMSAs required to use an EVV system. Program providers and FMSAs will be able to view EVV claim match results in the EVV Portal.

Resources:

- For questions about HHAeXchange onboarding, technical help with using the HHAeXchange Portal or issues related to data, email [HHAeXchange](#) or call 833-430-1307.
- Review [FAQs about the EVV HHCS Implementation \(PDF\)](#), found on the [EVV 21st Century Cures Act web page](#).
- For specific HHCS billing codes combinations that require the use of EVV, refer to the EVV HHCS Service Bill Codes table in [Excel](#) or [PDF](#).
- [Visit HHS EVV](#) for more information about EVV.