## Electronic Visit Verification (EVV) Visit Maintenance Unlock (VMU) Process Policy & Procedure

Providers have 95-days from the date of the visit to perform any visit maintenance in the Electronic Visit Verification (EVV) vendor system before the visit transaction is locked. A **Visit Maintenance Unlock (VMU) Request** form can be completed and submitted to the Baylor Scott & White Health Plan to unlock a visit under certain circumstances.

The Provider is responsible for ensuring that visit transactions are successfully transmitted and accepted in the EVV aggregator prior to claim submission, and that visit maintenance is performed before the visit is locked.

Guidance for Providers should be reviewed at the Health and Human Services <u>Best Practices to Avoid EVV</u> <u>Claim Mismatches</u> guide for technical guidance and for help avoiding EVV claim mismatches.

### **EVV VISIT MAINTENANCE UNLOCK REQUEST PROCESS**

EVV Visit Maintenance Unlock Requests must follow the process listed below:

- 1. A secure email was received from the following URL: <a href="mailto:claimappealsprovider@bswhealth.org">claimappealsprovider@bswhealth.org</a> with the applicable Visit Maintenance Unlock Request Form attached. If not received secure, the appeal should be rejected
- 2. The appeal must be relevant to the following approved reasons:
  - a. Visit related to retro-authorizations or back-dated authorizations
  - b. Visit related to retro-eligibility of a Member
  - c. Visit related to a payor change
  - d. Visit related to circumstances outside of Provider control
  - e. HHSC determines that an exception is required for circumstances like a natural disaster
  - f. The Program Provider was unable to manually enter an EVV visit during the visit maintenance time frame because of a payer or EVV vendor system error, and the error persisted throughout the visit maintenance time frame. In this case, the Program Provider must provide proof demonstrating:
    - i. Health Plan was informed of the issue within the visit maintenance time frame
    - ii. The issue was not resolved during the visit maintenance time frame
    - iii. A good faith effort was made to comply with the visit maintenance time frame
- 3. Approval of the form must meet the following timelines:
  - a. Ten (10) business days from the date of receipt of the secure email with the completed Unlock Request Form attached
  - b. 30 business days from the date of receipt of a secure email with the completed request for an appeal or reconsideration with supporting documentation

If additional supporting documentation is required, the Provider must respond within five (5) business days through a secure email or 15 business days if the additional request of information is related to an appeal or reconsideration.

**IMPORTANT:** A Visit Maintenance Unlock Request Form missing information or that attempts to correct a data element field that is not allowed or not listed as an approved reason (listed above) will be denied. The following data elements **cannot** be corrected:

- a. Actual Time In
- b. Actual Time Out

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- c. Actual Visit
- d. Reason Codes

### **Impacted Providers**

Medicaid home health care services (HHCS)

In-Home Skilled Nursing Visits

Occupational Therapist services provided in the home

Physical Therapist services provided in the home

PCS provided by a home health aide in the home under the supervision of an RN, Occupational Therapist or Physical Therapist.

## **State Regulation**

Cures Act Home Health Care Services

### Workflow for Appeal Logic

