



Electronic Visit Verification

EVV Policy Handbook Revision Log – September 2024

Health and Human Services Commission (HHSC) published the information below to describe the changes made to the [Electronic Visit Verification \(EVV\) Policy Handbook](#) on September 12, 2024.

Due to the extensive changes in this revision, the table is organized by Section number rather than by EVV policy type. The format is used for the tables below:

- Above each table is the main Policy Handbook Section. The tables list the following information about the policy:
 - The left column lists the name of the subsection found in the EVV Policy Handbook.
 - The right column lists the subsection number and revisions found in the EVV Policy Handbook.

Universal Changes

Effective May 1, 2023, HHSC contracted with a new state provided EVV system vendor, HHAeXchange. The HHAeXchange contract was implemented October 1, 2023, which resulted in a change from two state provided EVV system vendors to one. All references in the EVV Policy Handbook to multiple state provided EVV system vendors and "vendor pool" have been updated to reflect a single state provided EVV system vendor.

Updates to grammar and punctuation are not included in the tables below.

Handbook Section Renumbering

A new Section 8000, Calculation of Bill Hours, was inserted into the EVV policy handbook. As a result, former policy handbook Sections 8000 - 16000 have been renumbered, and former policy handbook Sections 9000 and 14000 have been renamed as follows:

- Former Section 8000, Visit Maintenance, is now Section 9000
- Former Section 9000, EVV Reason Code, is now Section 10000, Reason Codes
- Former Section 10000, EVV Compliance Reviews, is now Section 11000 with the following changes
 - Section 10030, EVV Required Free Text Reviews, is deleted
 - Section 10040, HHSC EVV Informal Reviews and MCO Disputes, is now Section 11030
 - Section 10050, Formal Appeal of HHSC Enforcement Actions, is now section 11040



- Former Section 11000, Usage, is now Section 12000
- Former Section 12000, EVV Claims, is now Section 13000
- Former Section 13000, Reports, is now Section 14000
- Former Section 14000, Non EVV Services, is now Section 15000, EVV Optional Services and Non-EVV Services
- Former Section 15000, Fraud Waste and Abuse, is now Section 16000
- Former Section 16000, EVV CDS Employer Policies, is now Section 17000

If the only changes to a Section are updates to the Section number and/or references to the new Section number, they are not included in the tables below. In addition, any updated references to Sections with new numbers are not included in the tables below.

Section 1000

Policy Subsection Name	Policy Subsection Numbers and Revisions
Electronic Visit Verification Policy Handbook Introduction	1000 <ul style="list-style-type: none">• Updates the lists of entities that must comply with the EVV Texas Administrative Code (TAC).• Updates the EVV TAC reference to reflect the changes effective January 1, 2024.• Revises language for clarity.
EVV Overview	1100 <ul style="list-style-type: none">• Changes "EVV vendor system" to "state provided EVV system".• Revises language for clarity.
Federal Law	1300 <ul style="list-style-type: none">• Changes the references to the future implementation dates of personal care services (PCS) and home health care services (HHCS) to indicate HHSC implemented PCS and HHCS on January 1, 2021, and January 1, 2024, respectively.



Policy Subsection Name	Policy Subsection Numbers and Revisions
Key Terms	<p>1600</p> <ul style="list-style-type: none"> • Adds the following Key Terms: <ul style="list-style-type: none"> ○ Actual Hours ○ Bill Hours ○ Consumer Directed Services (CDS) Employer <ul style="list-style-type: none"> ▪ This definition was moved from Sections 2800 and 16010 (now 17010) due to the number of times the term is used in the policy handbook. ○ Data Error ○ Designated Representative (DR) ○ EVV Optional Services ○ EVV Required Services ○ Non-EVV Services ○ Service Provider Discipline ○ State provided EVV System ○ Texas EVV Service Provider ID • Updates the following Key Term: <ul style="list-style-type: none"> ○ EVV System <ul style="list-style-type: none"> ▪ Changes "EVV vendor system" to "state provided EVV system". • Deletes the following Key Terms: <ul style="list-style-type: none"> ○ EVV Vendor System ○ Exception ○ Service Delivery Documentation • Revises language for clarity.

Section 2000

Policy Subsection Name	Policy Subsection Numbers and Revisions
EVV Stakeholders	<p>2000</p> <ul style="list-style-type: none"> • Changes "EVV vendors" to "state provided EVV system vendor".



Policy Subsection Name	Policy Subsection Numbers and Revisions
Payers	2100 <ul style="list-style-type: none">• Updates the language to reflect Key Term in Section 1600.• Updates the Long-Term Care (LTC) Fee-for-Service (FFS) payer table to include three programs/services that were incorrectly included in the Acute Care FFS payer table:<ul style="list-style-type: none">○ Community First Choice (CFC)○ Youth Empowerment Services (YES Waiver)○ Home and Community-based Services-Adult Mental Health (HCBS-AMH) Waiver• Updates the Acute Care FFS payer table:<ul style="list-style-type: none">○ Renames "Personal Care Services (PCS)" to include the program name for clarity.○ Removes three programs/services that were incorrectly included in this payer table:<ul style="list-style-type: none">▪ Community First Choice (CFC)▪ Youth Empowerment Services (YES Waiver)▪ Home and Community-based Services-Adult Mental Health (HCBS-AMH) Waiver



Policy Subsection Name	Policy Subsection Numbers and Revisions
Payers, continued	<ul style="list-style-type: none">• Updates the Managed Care payer table:<ul style="list-style-type: none">○ Adds the STAR program.○ Revises STAR Kids and STAR Health to remove the reference to the Medically Dependent Children Program (MDCP); MDCP is considered a part of these programs.○ Combines STAR+PLUS Home and Community Based Services (HCBS) and STAR+PLUS Medicare Medicaid Plan (MMP) into a single item (STAR+PLUS).• Adds information on how to find further information on managed care.• Revises language for clarity.
Texas Medicaid and Health Care Partnership	2200 <ul style="list-style-type: none">• Updates the language to state that the Texas Medicaid Healthcare Partnership (TMHP) is responsible for managing the state provided EVV system vendor (HHAeXchange) and EVV proprietary system vendors.• Changes "EVV vendors" to "EVV system vendors".• Revises language for clarity.
State Provided EVV System Vendor	2300 <ul style="list-style-type: none">• Changes the name of the section from EVV Vendors to State Provided EVV System Vendor.• Changes "EVV vendor" to "the state provided EVV system vendor".• Revises language for clarity.



Policy Subsection Name	Policy Subsection Numbers and Revisions
EVV Proprietary System Operator	2400 <ul style="list-style-type: none">• Updates the PSO definition.• Corrects the statute reference format.• Revises language for clarity.
Program Provider	2500 <ul style="list-style-type: none">• Adds a links to the EVV statute in the Texas Government Code.• Revises language for clarity.
Financial Management Services Agency	2600 <ul style="list-style-type: none">• Adds a links to the EVV statute in the Texas Government Code.• Revises language for clarity.
Member	2700 <ul style="list-style-type: none">• Removes reference to Form 1718.• Revises language for clarity.
CDS Employer	2800 <ul style="list-style-type: none">• Removes the definition of CDS employer; this was moved to Section 1600, Key Terms.• Revises language for clarity.

Section 3000

Policy Subsection Name	Policy Subsection Numbers and Revisions
Programs and Services Required to Use EVV	3000 <ul style="list-style-type: none">• Updates the TAC reference to reflect the changes effective January 1, 2024.• Adds a reference to home health care services.• Revises language for clarity.



Section 4000

Policy Subsection Name	Policy Subsection Numbers and Revisions
EVV System and Setup	4000 <ul style="list-style-type: none">• Updates the System Onboarding graphic.• Changes "EVV vendor" to "the state provided EVV system".• Revises language for clarity.
EVV System Selection	4100 <ul style="list-style-type: none">• Changes "EVV vendor" to "state provided EVV system".• Changes the reference to the state provided EVV system from plural to singular.
State Provided EVV System	4110 <ul style="list-style-type: none">• Changes "EVV vendor" to "state provided EVV system".• Changes the reference to the state provided EVV system from plural to singular.• Deletes contact information for the previous state provided EVV system vendors.
EVV Proprietary Systems	4120 <ul style="list-style-type: none">• Changes "EVV vendor system" to "the state provided EVV system" in the definition of EVV proprietary system.
Select an EVV System	4130 <ul style="list-style-type: none">• Changes "EVV vendor system" to "the state provided EVV system".



Policy Subsection Name	Policy Subsection Numbers and Revisions
Select an EVV System, continued	<ul style="list-style-type: none">• Updates the language to state that the TMHP is responsible for managing the state provided EVV system vendor, HHAeXchange.• Revises language for clarity.
EVV Training	4200 <ul style="list-style-type: none">• Revises language for clarity.
EVV Training Requirements for Program Providers	4210 <ul style="list-style-type: none">• Changes "EVV vendor system" to "the state provided EVV system".• Revises language for clarity.
EVV Training Requirements for FMSAs	4220 <ul style="list-style-type: none">• Changes "EVV vendor" to "the state provided EVV system vendor".• Revises language for clarity.
EVV Training Requirements for CDS Employers	4230 <ul style="list-style-type: none">• Adds reference to Form 1722, CDS Employer's Selection for Electronic Visit Verification Responsibilities.• Adds EVV reports to the required training elements for CDS employers who chose Option 3 on Form 1722, CDS Employer's Selection for Electronic Visit Verification Responsibilities.• Changes "EVV vendor" to "the state provided EVV system vendor".• Revises language for clarity.
Training Requirements for Service Providers and CDS Employees	4240 <ul style="list-style-type: none">• Revises language for clarity.



Policy Subsection Name	Policy Subsection Numbers and Revisions
Credentialing	4300 <ul style="list-style-type: none">• Adds language indicating the DR must be associated with the CDS employer and has the appropriate permissions in the EVV system.• Revises language for clarity.
Data Collection	4400 <ul style="list-style-type: none">• Revises language for clarity.
Service Authorizations	4500 <ul style="list-style-type: none">• Adds language indicating the EVV system will alert program providers and Financial Management Services (FMSAs) that a change in the service plan was electronically retrieved and that they must review the new service authorization for accuracy.• Condenses list of specific managed care programs to a reference to all managed care (MCO) programs.• Adds instructions to contact the MCOs for instructions on manually entering service authorizations.• Revises language for clarity.
Schedules	4600 <ul style="list-style-type: none">• Adds language directing the program provider, FMSA, or proprietary system operator (PSO) to contact the state provided EVV system vendor or EVV proprietary system vendor for instructions on the scheduling process.• Adds instructions to use Reason Code 110 A for schedule exceptions.



Policy Subsection Name	Policy Subsection Numbers and Revisions
Schedules, continued	<ul style="list-style-type: none">• Adds language stating the program providers and FMSAs must comply with program requirements for schedules if the EVV proprietary system does not offer the capability to enter schedules, and to contact the EVV proprietary system vendor for information regarding schedules.• Changes the reference to the state provided EVV system from plural to singular.• Changes "EVV vendor system" to "the state provided EVV system".• Revises language for clarity.
Schedule Types	4610 <ul style="list-style-type: none">• Adds language that the EVV system will track the remaining hours in a weekly variable schedule or that the EVV system user must manually verify the remaining hours in a weekly variable schedule.• Revises language for clarity.
EVV System Transfer	4700 <ul style="list-style-type: none">• Deletes language regarding transferring to and from one state provided EVV vendor to another.• Adds language that PSOs must return alternative devices per the EVV proprietary system vendor's requirements.• Changes the reference to the state provided EVV system from plural to singular.• Changes "EVV vendor system" to "the state provided EVV system".• Revises language for clarity.



Policy Subsection Name	Policy Subsection Numbers and Revisions
How to Transfer to the State Provided EVV System	4710 <ul style="list-style-type: none">• Changes "EVV vendor system" to "the state provided EVV system".• Changes "EVV vendor" to "state provided EVV vendor".• Revises language for clarity.
How to Transfer to an EVV Proprietary System	4720 <ul style="list-style-type: none">• Adds instructions to contact the EVV proprietary system vendor or TMHP for questions about EVV proprietary system transfers.• Changes "EVV vendor system" to "state provided EVV system".• Revises language for clarity.

Section 5000

Policy Subsection Name	Policy Subsection Numbers and Revisions
EVV Proprietary System	5000 <ul style="list-style-type: none">• Adds language specifying the PSO Onboarding Process is only used to request approval to use an EVV proprietary system vendor.• Adds language that information regarding each PSO Onboarding path is on the TMHP proprietary systems webpage.• Changes "EVV vendor system" to "the state provided EVV system".• Revises language for clarity.
Reimbursement for Use of an EVV Proprietary System	5010 <ul style="list-style-type: none">• Revises language for clarity.



Policy Subsection Name	Policy Subsection Numbers and Revisions
EVV Proprietary System Onboarding Process	5030 <ul style="list-style-type: none">• Changes "EVV vendor system" to "the state provided EVV system".• Revises language for clarity.
EVV Proprietary System Operational Readiness Review	5040 <ul style="list-style-type: none">• Updates the language to state that TMHP is responsible for the Operational Readiness Reviews (ORRs).• Adds policies regarding the Expedited Path ORR.• Adds scenarios that define appropriate situations that can use the Expedited Path ORR.• Revises language for clarity.
Success or Failure of the Operational Readiness Review	5050 <ul style="list-style-type: none">• Updates the language to state that the TMHP is responsible for communications regarding the outcome of ORRs.• Revises language for clarity.
EVV Proprietary System General Operations	5060 <ul style="list-style-type: none">• Specifies the PSO is responsible for training on the EVV proprietary system.• Revises language for clarity.
Proprietary System Operator Compliance	5080 <ul style="list-style-type: none">• Removes language regarding the Free Text Report.• Revises language for clarity.



Section 6000

Policy Subsection Name	Policy Subsection Numbers and Revisions
EVV Visit Transaction	6000 <ul style="list-style-type: none">• Revises language for clarity.
EVV System	6100 <ul style="list-style-type: none">• Revises language for clarity.

Section 7000

Policy Subsection Name	Policy Subsection Numbers and Revisions
Clock In and Clock Out Methods	7000 <ul style="list-style-type: none">• Adds language that EVV proprietary system vendors may charge a PSO for clock in and clock out methods.• Adds language that an EVV proprietary system vendor may charge for certain clock in and clock out methods, but PSOs must not pass on the costs for clock in and clock out methods to the member, program provider, FMSA, CDS employer, service provider, HHSC, MCO or TMHP.• Adds language stating a PSO does not have to require a service authorization for the service provider to clock in and clock out, but they must still ensure all required visit data is included in the visit transaction.• Changes "EVV vendor" to "the state provided EVV system vendor".• Revises language for clarity.



Policy Subsection Name	Policy Subsection Numbers and Revisions
Manually Entered EVV Visits	<p>7010</p> <ul style="list-style-type: none">• Defines a manual visit as a visit when a service provider or CDS employee fails to use the EVV system to clock in or clock out (moved from Section 11010).• Adds language regarding the usage of a manual visit.• Removes the list of the specific service documentation requirements.• Adds requirement that the program provider, FMSA or PSO must ensure all data elements are included in the visit transaction.• Revises language for clarity.
Mobile Method	<p>7020</p> <ul style="list-style-type: none">• Replaces the previous policies for the mobile method with the stand-alone policy effective April 1, 2024, as published on the EVV website.
Home Phone Landline	<p>7030</p> <ul style="list-style-type: none">• Adds the requirement that the service delivery location and address must be in the member's profile when the member frequently receives services at an alternate location.• Deletes the reference to a specific mobile phone carrier.• Revises language for clarity.
Alternative Device	<p>7040</p> <ul style="list-style-type: none">• Replaces the previous alternative device policies with the stand-alone policy effective October 1, 2023, as published on the EVV website.



Policy Subsection Name	Policy Subsection Numbers and Revisions
Using Multiple Clock In and Clock Out Methods	7050 <ul style="list-style-type: none">• Changes "EVV vendor" to "the state provided EVV system".
EVV Services Delivered Outside the Member's Home	7060 <ul style="list-style-type: none">• Changes "EVV vendor" to "the state provided EVV system vendor".• Changes the language to indicate that program providers and CDS employers may contact their EVV proprietary system vendor for more information and system training on services delivered outside the member's home.
Multiple EVV Visit Transactions	7070 <ul style="list-style-type: none">• Adds a new section with the following policies:<ul style="list-style-type: none">○ Service providers and CDS employees will not be required to clock in and clock out multiple times during an overnight shift; this is automated in the EVV system.○ Multiple EVV visits are allowed in circumstances such as a member requires two service providers to deliver a specific service, or two members live in the same home and receive similar services.○ A table indicates when multiple visits are and are not allowed in the EVV system.○ A note to refer to program policy to determine when multiple EVV transactions are allowed in the program.



Section 8000

Policy Subsection Name	Policy Subsection Numbers and Revisions
Calculation of Bill Hours	8000 <ul style="list-style-type: none">• Adds a new section with the stand-alone policy effective October 1, 2023, as published on the EVV website.
Bill Time In and Bill Time Out	8010 <ul style="list-style-type: none">• Adds a new section with the stand-alone policy effective October 1, 2023, as published on the EVV website.
Rounding	8020 <ul style="list-style-type: none">• Moves policies previously in Section 8090.• Revises language for clarity.
Bill Hours	8030 <ul style="list-style-type: none">• Adds a new section with the stand-alone policy effective October 1, 2023, as published on the EVV website.

Section 9000

Policy Subsection Name	Policy Subsection Numbers and Revisions
Visit Maintenance	9000 <ul style="list-style-type: none">• Revises the definition of visit maintenance.• Revises language for clarity.
Required Visit Maintenance	9010 <ul style="list-style-type: none">• Lists the data fields that cannot be changed during visit maintenance.• Revises language for clarity.



Policy Subsection Name	Policy Subsection Numbers and Revisions
Auto-Verification	9020 <ul style="list-style-type: none">• Adds language stating that a service provider may clock in or clock out when there is not a service authorization, but the EVV system will not auto-verify. This is only applicable to PSOs.• Revises language for clarity.
EVV System Validation	9030 <ul style="list-style-type: none">• Adds language stating that a program provider or CDS employer may deactivate visits prior to being accepted by the aggregator.• Revises language for clarity.
EVV Aggregator Validation	9040 <ul style="list-style-type: none">• Defines a rejected visit transaction as one that is not accepted by the aggregator (moved from Section 11010).• Revises language for clarity.
Visit Maintenance Unlock Request	9060 <ul style="list-style-type: none">• Adds the following data fields included in the Visit Maintenance Unlock Request:<ul style="list-style-type: none">○ Bill time in○ Bill time out○ Modifier• Changes "EVV vendor" to "the state provided EVV system vendor".• Revises language for clarity.
Visit Maintenance and Billing EVV Claims	9070 <ul style="list-style-type: none">• Revises language for clarity.
Last Visit Maintenance Date	9080 <ul style="list-style-type: none">• Revises language for clarity.



Policy Subsection Name	Policy Subsection Numbers and Revisions
Visit Maintenance Reduction Features	9090 <ul style="list-style-type: none">Revises language for clarity.

Section 10000

Policy Subsection Name	Policy Subsection Numbers and Revisions
Reason Codes	10000 <ul style="list-style-type: none">Adds a new section with the stand-alone policy effective October 1, 2023, as published on the EVV website.

Section 11000

Policy Subsection Name	Policy Subsection Numbers and Revisions
EVV Compliance Reviews	11000 <ul style="list-style-type: none">Deletes Free Text from the compliance requirements.Adds language regarding HHSC's suspension of compliance requirements.Deletes language on compliance grace periods for specific services and timeframes.Revises language for clarity.
EVV Usage Reviews	11010 <ul style="list-style-type: none">Moves definition of manual EVV visit to Section 7010.Moves definition of a rejected visit to Section 9040.Adds payer errors to the list of actions a payer must not count against a CDS employer's compliance score.



Policy Subsection Name	Policy Subsection Numbers and Revisions
EVV Usage Reviews, continued	<ul style="list-style-type: none">• Deletes language on compliance grace periods for specific services and timeframes.• Revises language for clarity.
EVV Landline Phone Verification Reviews	11020 <ul style="list-style-type: none">• Deletes language on compliance grace periods for specific services and timeframes.• Revises language for clarity.
HHSC EVV Informal Reviews and MCO Disputes	11030 <ul style="list-style-type: none">• Revises language for clarity.
Formal Appeal of HHSC Enforcement Actions	11040 <ul style="list-style-type: none">• Revises language for clarity.

Section 12000

Policy Subsection Name	Policy Subsection Numbers and Revisions
Usage	12000 <ul style="list-style-type: none">• Revises language for clarity.
EVV Usage Score	12010 <ul style="list-style-type: none">• Updates the Program Provider Usage Score Calculation graphic.• Updates the FMSA Usage Score Calculation graphic.• Deletes table with CDS employer usage scores for service delivery dates prior to March 1, 2023.• Updates the CDS Employer Usage Score Calculation graphic.• Revises language for clarity.



Policy Subsection Name	Policy Subsection Numbers and Revisions
Manual EVV Visit Transaction Score	12020 <ul style="list-style-type: none">• Revises language for clarity.
Rejected EVV Visit Transaction Score	12030 <ul style="list-style-type: none">• Deletes the table of data element rejection codes.• Adds a link to Appendix M of the EVV Business Rules on the TMHP website.• Revises language for clarity.
How EVV Usage Reviews are Conducted	12040 <ul style="list-style-type: none">• Revises language for clarity.



Section 13000

Policy Subsection Name	Policy Subsection Numbers and Revisions
Claims Submission	13010 <ul style="list-style-type: none">• Makes the following changes to the Long-term Care Fee-for-service (LTC-FFS) Claims Management System table:<ul style="list-style-type: none">○ Deletes the Service Responsibility Option (SRO) from the Community Attendant Services (CAS) program service delivery options.○ Adds home health care services and a note that all services must be delivered in the home to the Community Living Assistance and Support Services (CLASS) program.○ Adds home health care services and a note that all services must be delivered in the home to the Deaf-Blind with Multiple Disabilities (DBMD) program.○ Adds home health care services and a note that all services must be delivered in the home to the Home and Community-based Services (HCS) program.○ Adds home health care services to the Texas home Living (TxHmL) program.○ Deletes SRO from the Primary Home Care (PHC) program service delivery options.



Policy Subsection Name	Policy Subsection Numbers and Revisions
Claims Submission, continued	<ul style="list-style-type: none">• Makes the following changes to the Acute Care Fee-for-service (FFS) TMHP Compass 21 (C21) table:<ul style="list-style-type: none">○ Revises the Personal Care Services (PCS) program name to the Comprehensive Care Program (CCP) in the Texas Health Steps program.○ Adds PCS Behavioral Health to the CCP program.○ Adds a note that PCS and PCS Behavioral Health services include delegated nursing.○ Adds SRO to the CCP program service delivery options.○ Revises the Community First Choice (CFC) program name to Acute Care FFS.○ Adds the following services to Acute Care FFS:<ul style="list-style-type: none">▪ CFC Attendant Care only▪ CFC Habilitation (HAB) and Attendant Care▪ In-Home Skilled Nursing Visits▪ In-Home Occupational Therapist Visits▪ In-Home Physical Therapist Visits○ Deletes Consumer Direct Services (CDS) from the Acute Care FFS service delivery options.• Adds the following to the Home and Community Based Services-Adult mental Health (HCBS-AMH) program table:<ul style="list-style-type: none">○ In-home nursing services○ A note that all services must be delivered in the home



Policy Subsection Name	Policy Subsection Numbers and Revisions
Claims Submission, continued	<ul style="list-style-type: none">• Makes the following changes to the STAR Health Program services in the Managed Care Long-Term Services and Supports (LTSS) TMHP C21 table:<ul style="list-style-type: none">○ Updates the names of CFC HAB and CFC PAS to CFC Attendant Care only and CFC HAB and Attendant Care.○ Adds the following services:<ul style="list-style-type: none">▪ Occupational Therapist services in the home▪ Physical Therapist services in the home▪ PCS provided by a home health aide under the supervision of a nurse or therapist• Makes the following changes in the STAR Health – Medically Dependent Children Program (MDCP) program in the Managed Care Long-Term Services and Supports (LTSS) TMHP C21 table:<ul style="list-style-type: none">○ Clarifies that In-Home Respite and Flexible Family Supports (FFSS) are provided in the home.○ Adds the following services:<ul style="list-style-type: none">▪ Delegation and supervision of personal care tasks during In-Home Respite and FSSS. This does not include Private Duty Nursing (PDN).▪ In-Home Respite and FFSS provided in the home by a nurse.



Policy Subsection Name	Policy Subsection Numbers and Revisions
Claims Submission, continued	<ul style="list-style-type: none">• Makes the following changes to the STAR Kids program in the Managed Care Long-Term Services and Supports (LTSS) TMHP C21 table:<ul style="list-style-type: none">○ Adds the following services:<ul style="list-style-type: none">▪ Nurse delegation of PCS and CFC provided in the home. This does not include PDN.▪ Occupational Therapist services in the home▪ Physical Therapist services in the home▪ PCS provided by a home health aide under the supervision of a nurse or therapist• Makes the following changes to the STAR Kids – MDCP Covered Services program in the Managed Care Long-Term Services and Supports (LTSS) TMHP C21 table:<ul style="list-style-type: none">○ Clarifies that In-Home Respite and Flexible Family Supports (FFSS) are provided in the home.○ Adds delegation and supervision of PCS and CFC services provided in the home. This does not include Private Duty Nursing (PDN), In-Home Respite and FFSS provided in the home by a nurse.• Revises language for clarity.
Claims Matching	13020 <ul style="list-style-type: none">• Adds language that all program providers and FMSAs must notify a third-party biller that all EVV required services must be submitted to TMHP.• Revises language for clarity.



Policy Subsection Name	Policy Subsection Numbers and Revisions
Claims Matching Process	13030 <ul style="list-style-type: none">Revises language for clarity.
Claims Match Result Codes	13050 <ul style="list-style-type: none">Revises language for clarity.

Section 14000

Policy Subsection Name	Policy Subsection Numbers and Revisions
Reports	14000 <ul style="list-style-type: none">Revises language for clarity.
EVV Portal Standard Reports	14010 <ul style="list-style-type: none">Deletes the EVV Reason Code Usage and Free Text Report.Revises language for clarity.
EVV System Standard Reports	14020 <ul style="list-style-type: none">Deletes the EVV Reason Code Usage and Free Text Report.Revises language for clarity.
EVV Vendor Ad Hoc Reporting	14030 <ul style="list-style-type: none">Corrects "EVV PSO" to "EVV proprietary system vendor".Changes "EVV vendor" to "the state provided EVV system vendor".
EVV Portal Search Tools	14040 <ul style="list-style-type: none">Changes "EVV vendor" to "the state provided EVV system vendor".Corrects "EVV PSO" to "EVV proprietary system vendor".Revises language for clarity.



Section 15000

Policy Subsection Name	Policy Subsection Numbers and Revisions
EVV Optional Services and Non-EVV Services	15000 <ul style="list-style-type: none">• Moves Non-EVV Services to Section 15020.• Adds an overview of EVV Optional Services and Non-EVV Services.
EVV Optional Services	15010 <ul style="list-style-type: none">• Adds polices on Optional EVV services including:<ul style="list-style-type: none">○ A definition of an EVV optional service.○ When and how a visit transaction for an EVV optional service may be collected in the EVV system.○ Options on how the EVV system could be used to collection EVV optional services visit transactions, including the impact on the usage score.○ Examples of using the EVV system to collect EVV optional services visit transactions.
Non-EVV Services	15020 <ul style="list-style-type: none">• Revises definition of non-EVV service.• Adds language that program providers, FMSAs and CDS employers must not use the EVV system to document non-EVV services.• Clarifies the language and adds instructions for recording non-EVV time that occurs during an EVV visit.• Clarifies the examples for recording non-EVV time that occurs during an EVV visit.• Revises language for clarity.



Section 16000

Policy Subsection Name	Policy Subsection Numbers and Revisions
Fraud Waste and Abuse	16000 <ul style="list-style-type: none">Revises language for clarity.

Section 17000

Policy Subsection Name	Policy Subsection Numbers and Revisions
EVV CDS Employer Policies	17000 <ul style="list-style-type: none">Updates the TAC reference to reflect the changes effective January 1, 2024.Removes the date for CDS employers to begin using EVV.Revises language for clarity.
CDS Option Stakeholders	17010 <ul style="list-style-type: none">Removes the definition of CDS employer; this was moved to Section 1600, Key Terms.Removes the definition of Designative Representative; this was moved to Section 1600, Key Terms.Revises definition of Legally Authorized Representative (LAR).Revises language for clarity.
CDS Employer Steps Prior to Using an EVV System	17020 <ul style="list-style-type: none">Adds approving any changes to the CDS employee's time worked the FMSA has made to the responsibilities of CDS employers who chose Option 3 on Form 1722, CDS Employer's Selection for Electronic Visit Verification Responsibilities.



Policy Subsection Name	Policy Subsection Numbers and Revisions
CDS Employer Steps Prior to Using an EVV System, continued	<ul style="list-style-type: none">• Adds language that a service provider or CDS employee profile must be in the EVV system before entering a schedule.• Revises language for clarity.
CDS Employer(s) Using an EVV System	17030 <ul style="list-style-type: none">• Revises language for clarity.

Forms

Form Number and Name	Revisions
Form 1718, Electronic Visit Verification (EVV) Rights and Responsibilities Managed Care Organization	Deletes this form.
Form 1732, Management and Training of Service Provider	Adds this form.

Contact Us

Policy Subsection Name	Policy Subsection Numbers and Revisions
Contact Us	Updates EVV Operations Mailbox.