

Electronic visit verification (EVV) initiative

Amerigroup* is committed to working in partnership with our providers, members and the attendants on this new program. In support of this important initiative, key components of our compliance plan include the following:

- The basis for our approach to EVV compliance will be the Health and Human Services Commission (HHSC)'s EVV Initiative Provider Compliance Plan. We will require providers to adhere to all aspects of the overall HHSC EVV Initiative Provider Compliance Plan.
- We will amend the Amerigroup *Provider Manual* to reflect required compliance with these mandatory STAR+PLUS and CHIP program contract requirements.
- The EVV vendor selection requirement is also mandatory for all financial management service agencies. This is the case even though the use of EVV is optional in the consumer direction/self-directed member population in preparation of a consumer-directed participant opting to participate in the use of EVV.
- Training is mandatory for all attendants and other assigned staff prior to beginning services with members. The provider agency is responsible for keeping track of details of training for all their staff. This documentation may be reviewed by Amerigroup upon reasonable request.
- Providers should utilize EVV vendor reports to self-monitor their performance relative to visit verification and adhering to the compliance standards.
- We are required to ensure each EVV-applicable service unit authorized and billed to Amerigroup matches the applicable EVV record. As a result, any discrepancy may result in the claim being denied or recouped/recovered. Only visits that have been verified are eligible for reimbursement.
- Visit maintenance was required for all services dates beginning September 1, 2015, and must be completed within 60 days from date of service.
- Provider agencies must use the most appropriate visit maintenance codes, and should a record be updated, the provider must use the code that **most accurately** explains why a change was made to a visit record.
- If a provider agency has misused preferred reason codes per policy, the provider agency compliance score may be negatively impacted, and the provider agency may be subject to the assessment of liquidated damages; imposition of contract actions; implementation of the corrective action plan process; and/or referral for a fraud, waste and abuse investigation. For example, providers use a preferred reason code 100 when there is no call in or call out.
- **Claims should not be submitted before the visit is entered into the EVV system and any necessary visit maintenance is completed.**
- Provider agencies must maintain a minimum compliance score of 75 percent per review period until March 31, 2017.
- Starting April 1, 2017, provider agencies must maintain a minimum compliance score of 90 percent per review period as outlined in the HHSC EVV Initiative Provider Compliance Plan.
- Providers who fail to meet the minimum EVV compliance score requirement of 75 percent until March 31, 2017, and 90 percent thereafter:
 - May be asked to create and submit a corrective action plan.
 - May be subject to liquidated damages as outlined in HHSC's EVV Initiative Provider Compliance Plan. We will be following the \$3 per visit outlined for nonpreferred reason code use.

**Amerigroup members in the Medicaid Rural Service Area and the STAR Kids Program are served by Amerigroup Insurance Company; all other Amerigroup members in Texas are served by Amerigroup Texas, Inc.*

- May be subject to contract termination after continued failure to meet the 75 percent until March 31, 2017, and 90 percent after compliance requirement.
- Provider agencies may request informal review for noncompliance finding by:
 - Submitting a letter describing the specific EVV system failure that prevented compliance and including all supporting documentation.
 - The letter and documentation must be received within 10 calendar days after the provider agency's receipt of written quarterly compliance review findings.
- Providers should notify the appropriate managed care organization or HHSC of any ongoing issues with EVV vendors or EVV systems within 48 hours.

If you have questions, please email TXEVVSupport@amerigroup.com, call our Provider Services team at 1-800-454-3730 or contact your local Provider Relations representative:

Bexar/Travis (San Antonio/Austin area)	Jennifer Pena	1-800-589-5274, ext. 55381
El Paso	Maribel Martinez	1-877-405-9871, ext. 59624
Harris	Eric Preston	1-800-325-0011, ext. 55446
Jefferson	Kristal Babino	1-800-325-0011, ext. 55684
Lubbock/Amarillo	Judith Mann	1-800-589-5274, ext. 54880
Johnson, Dallas and Tarrant	l'Esha Hudson-Buggs	1-800-589-5274, ext. 57793
Denton, Wise Hood and Parker	Deidre Haynie	1-800-589-5274, ext. 55817
Western Region Rural Service Area	Nancy Belcher	1-800-589-5274, ext. 52317