Electronic Visit Verification (EVV) Best Practices to Avoid EVV Claim Mismatches

This document provides technical guidance for program providers and financial management services agencies (FMSAs) to prevent EVV claim mismatches when submitting EVV claims. If submitting EVV claims for Home and Community-based Services (HCS) or Texas Home Living (TxHmL) services, please refer to the HCS and TxHmL Best Practices to Avoid EVV Claim Mismatches (PDF).

All EVV claims for services required to use EVV must match to an accepted EVV visit transaction in the EVV Aggregator (the state's centralized EVV database) before reimbursement of an EVV claim by the payer.

Before Submitting the EVV Claim

1. **Check the EVV Portal to ensure the EVV visit transaction was accepted before submitting the EVV claim.**

   - The EVV Portal is an online system established by HHSC that allows users to perform searches and view reports associated with visit data and EVV claim match results in the EVV Aggregator. EVV visits are processed nightly.

   - Use the **Accepted Visit Search** tab or the **Visit History Search** tab in the EVV Portal to ensure the EVV visit transaction was accepted. Refer to the EVV Portal Search Tab Job Aids for instructions. Examples of search results:

Accepted Visit Search Results												
Visit ID	EVV System Name	Payer Name	NPI/API	Provider Legal Name	Medicaid ID	Member Last Name	Visit Date	Billable Units	HCPCS Code	Modifier(s)	EVV Service Provider ID	Aggregator Received Date
123456789012	SYSTEM NAME	PAYER (PAY)	1234567890	EXAMPLE PROVIDER	123123123	LAST NAME	10/02/2022	9.00	S5125	U3:U7	4321LASTNAME	11/10/2022 02:02 PM
123456789012	SYSTEM NAME	PAYER (PAY)	1234567890	EXAMPLE PROVIDER	123123123	LAST NAME	10/01/2022	10.00	S5125	U3:U7	4321LASTNAME	11/10/2022 02:02 PM
123456789012	SYSTEM NAME	PAYER (PAY)	1234567890	EXAMPLE PROVIDER	123123123	LAST NAME	10/03/2022	16.00	S5125	U5	4321LASTNAME	11/10/2022 02:04 PM
123456789012	SYSTEM NAME	PAYER (PAY)	1234567890	EXAMPLE PROVIDER	123123123	LAST NAME	10/01/2022	29.00	S5125	U5	4321LASTNAME	11/10/2022 02:04 PM
123456789012	SYSTEM NAME	PAYER (PAY)	1234567890	EXAMPLE PROVIDER	123123123	LAST NAME	10/03/2022	12.00	S5125	U5	4321LASTNAME	11/10/2022 02:06 PM

Visit History Search Results												
Visit ID	Visit Status	Visit Date	Medicaid ID	Member Last Name	HCPCS	Modifier(s)	Rejection Code	Updated Fields	Aggregator Received Date	Visit Indicator	NPI/API	Payer Name	EVV System Name
1234567890123	Accepted	06/30/2020	512345678	Last Name	T2026				07/30/2020 09:33 AM	NEW	1234567890	Long Term Care (LTC)	System Name
1234567890123	Accepted	06/28/2020	512345678	Last Name	G0100				07/30/2020 09:33 AM	NEW	1234567890	Long Term Care (LTC)	System Name
1234567890123	Accepted	06/28/2020	512345678	Last Name	G0100				07/30/2020 09:33 AM	NEW	1234567890	Long Term Care (LTC)	System Name
1234567890123	Rejected	06/28/2020	512345678	Last Name	T2026		Ex00049C2		07/30/2020 09:42 AM	UPDATED	1234567890	Long Term Care (LTC)	System Name
1234567890123	Accepted	06/26/2020	512345678	Last Name	T2026				07/30/2020 09:33 AM	NEW	1234567890	Long Term Care (LTC)	System Name

- If it was rejected, make corrections to the visit transaction in the EVV system (visit maintenance). Refer to the [EVV Visit Transaction Rejection Guide](#) for help with correcting EVV visit transaction rejections. When visit maintenance is complete, follow the appropriate process for your EVV system to ensure the EVV visit transaction is reexported, and check the EVV Portal the next day to see if it was accepted.

- If the visit transaction does not appear in the EVV Portal the day after the visit when you perform an Accepted Visit Search or Visit History Search, check the EVV system to make sure the EVV visit transaction was successfully exported to the EVV Aggregator.

  ‣ For instructions on how to view accepted and rejected visit transactions in the EVV system and/or export the visit transaction to the EVV Aggregator, contact your EVV vendor or Proprietary System Operator (PSO).

2. **Determine the billing options of your payer regarding span date/single line billing before submitting the EVV claim and follow the guidelines of your payer.**

   If the payer allows span date billing, verify the following:

   - Each date of service within the span of dates must have one or more matching accepted EVV visit transactions.

     ‣ **Example:** If the span dates are from Jan. 1, 2024 – Jan. 15, 2024, then there must be at least one accepted EVV visit transaction for each of the dates (Jan. 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, and 15.)

   - The total billed units on the EVV claim line item must match the combined total billable units on the accepted EVV visit transactions for the span of dates, if applicable.

     ‣ **Example:** If the EVV claim line item has 40 billed units, then the accepted EVV transactions for the associated dates of service must have a combined total of 40 billable units.

3. **Refer to the EVV Service Bill Codes Tables on the [HHSC EVV webpage](#) to ensure you're using the appropriate Healthcare Common Procedure Coding System (HCPCS) codes and Modifiers before submitting the EVV claim:**

   - [EVV Personal Care Services (PCS) Service Bill Codes Table (Excel)](#)

   - [EVV Home Health Care Services (HHCS) Service Bill Codes Table (Excel)](#)

4. **Ensure data elements on the EVV claim match data elements on the accepted EVV visit transaction before submitting the EVV claim.**

   Use the **Accepted Visit Search** tab in the EVV Portal to review the data elements on the accepted EVV visit transaction and ensure the:

Accepted Visit Search Results											
Visit ID	EVV System Name	Payer Name	NPI/API	Provider Legal Name	Medicaid ID	Member Last Name	Visit Date	Billable Units	HCPCS Code	Modifier(s)	EVV Service Provider ID
123456789012	SYSTEM NAME	PAYER (PAY)	1234567890	EXAMPLE PROVIDER	123123123	LAST NAME	10/02/2022	9.00	S5125	U3:U7	1234SMITH
123456789012	SYSTEM NAME	PAYER (PAY)	1234567890	EXAMPLE PROVIDER	123123123	LAST NAME	10/01/2022	10.00	S5125	U3:U7	1234SMITH
123456789012	SYSTEM NAME	PAYER (PAY)	1234567890	EXAMPLE PROVIDER	123123123	LAST NAME	10/03/2022	16.00	S5125	US	1234SMITH
123456789012	SYSTEM NAME	PAYER (PAY)	1234567890	EXAMPLE PROVIDER	123123123	LAST NAME	10/01/2022	29.00	S5125	US	1234SMITH
123456789012	SYSTEM NAME	PAYER (PAY)	1234567890	EXAMPLE PROVIDER	123123123	LAST NAME	10/03/2022	12.00	S5125	US	1234SMITH

- **National Provider Identifier (NPI)** or **Atypical Provider Identifier (API)** on the visit transaction matches the **NPI** or **API** on the EVV claim.

- **Medicaid ID** on the visit transaction matches the **Medicaid ID** on the EVV claim.

- **Visit Date** on the visit transaction matches the **Date of Service** on the EVV claim.

- **Billable Units**, if applicable on the visit transaction match the **Billed Units** on the EVV claim. Refer to the "Units Matched During EVV Claims Matching?" column in the EVV Service Bill Codes Tables to see if units are matched for a service during claims processing.

- **HCPCS Code** on the visit transaction matches the **HCPCS Code** on the EVV claim.

- **Modifiers**, if included on the visit transaction, match the **Modifiers** on the EVV claim.

After Submitting the EVV Claim

5. **Check the match results of the EVV claim matching process in the EVV Portal.**

   - Use the **EVV Claim Search** tab in the EVV Portal to view EVV claim matching results. An EVV claim match result code indicates if the EVV claim was successfully matched to an EVV visit transaction (EVV01) or if there was an EVV mismatch (EVV02-EVV06).

   - A successful EVV01 match does not guarantee that the EVV claim will be paid; final claims processing is performed by the claims management system. Payers will communicate the results of the final claims processing to program providers and FMSAs.

3

- EVV claims with the following mismatch codes will be denied:

EVV02 – Medicaid ID Mismatch:	The **Medicaid ID** on the EVV visit transaction didn't match the **Medicaid ID** on the EVV claim.
EVV03 – Visit Date Mismatch:	The **EVV visit date** on the EVV visit transaction didn't match the **Date of service** on the EVV claim.
EVV04 – Provider (NPI/API) Mismatch:	The **NPI** or **API** on the EVV visit transaction didn't match the **NPI** or **API** on the EVV claim.
EVV05 – Service Mismatch:	The **HCPCS code** on the EVV visit transaction didn't match the **HCPCS code** on the EVV claim and/or the **HCPCS modifiers** on the EVV visit transaction didn't match the **HCPCS modifiers** on the EVV claim.
EVV06 – Units Mismatch:	The **billable units** on the EVV visit transaction didn't match the **billed units** on the EVV claim.

- **Note:** The **EVV07 – Match Not Required** and **EVV08 – Natural Disaster** claim match result codes in the EVV Portal indicate HHSC has implemented a bypass of the EVV claims matching process for a disaster or other temporary circumstance. Payers will not immediately deny an EVV claim with EVV07 or EVV08. The actual match results can be viewed using the Informational Match Result column in the EVV Claim Search results in the EVV Portal to determine whether the claim would have matched without the bypass.

6. **Monitor the explanation of benefits (EOB) or explanation of payment (EOP) from your payer for final claim adjudication.**

- If the EVV claim was denied for an EVV mismatch, determine if the error is on the EVV claim and/or the visit transaction and make the correction(s).

  ‣ **If the error is on the EVV visit transaction:** Make the correction to the EVV visit transaction in the EVV system (visit maintenance) and ensure the visit transaction was exported. Check the EVV Portal to ensure the

corrected visit transaction is accepted before resubmitting the EVV claim to TMHP (repeat the steps in this document).

  ‣ **If the error is on the EVV claim:** Make the correction to the EVV claim (e.g., in EDI or TexMedConnect) and resubmit the EVV claim to TMHP for the claims matching process to occur. Repeat the steps in this document.

● **Note:** The TMHP system will **not** automatically resubmit EVV claims that were denied initially and corrected. Program providers and FMSAs must take action and resubmit corrected EVV claims to TMHP.

Questions?

Refer to the [EVV Contact Information Guide for Program Providers and FMSAs](#) to know who to contact.

Additional EVV Claims Resources

● [TMHP EVV Computer-Based Training (CBT) on the TMHP Learning Management System - Module 6: Claims and Billing](#)

● [EVV Policy Training for Program Providers and FMSAs CBT on the HHS Learning Portal – Module 6: EVV Claims](#)

● [Section 12000 EVV Claims in the EVV Policy Handbook](#)