

## **Electronic Visit Verification**

## STAR+PLUS, STAR Kids and STAR Health LTSS Billing Matrix and Service Authorization Updates for EVV-Required Services

The STAR+PLUS and STAR Kids Long-term Services and Supports (LTSS) Healthcare Common Procedure Coding System (HCPCS) codes, modifiers and unit types for Electronic Visit Verification (EVV) required services were updated. The updates also impact STAR Health because the STAR Kids LTSS billing matrix is used for some STAR Health services. The updates are effective Dec. 1, 2022.

Program providers and financial management services agencies (FMSAs) contracted with managed care organizations (MCOs) must complete the five steps listed below to help avoid visit transaction rejections and EVV claim mismatches and denials.

- 1. Review the EVV Personal Care Services Bill Codes table updates.
  - a. Review the Managed Care section.
  - b. Review the 12/1/2022 Revision History.
  - c. The table is in <u>Excel</u> and <u>PDF</u> formats on the <u>HHSC EVV web page</u>.
- 2. Log in to your MCO's provider portal to view updated service authorizations or new service authorizations for your members. Confirm that the HCPCS codes, modifiers and unit types are the same as the EVV Personal Care Services Bill Codes table.
  - a. Note: MCOs may also provide updated service authorizations through other methods, such as fax. Contact your MCO for more information.
- 3. Log in to your EVV system to update existing service authorizations or create new service authorizations using the updated HCPCS codes, modifiers and unit types. Resources are listed below.
  - a. Refer to DataLogic Vesta's notice, "EVV Personal Care Services Bill Codes Table Updates (PDF)," under their Publication section.
  - b. Refer to First Data AuthentiCare's document, "Service Code List (PDF)," under their web portal's Custom Links tab.
  - c. EVV Proprietary System Operators (PSOs) should follow their internal procedures to update existing service authorizations or create new service authorizations.



- 4. Before submitting a claim, use the Accepted Visit Search tab in the EVV Portal to confirm that the visit transactions for these services have been accepted by the EVV Aggregator.
  - a. The following are related <u>TMHP learning management system (LMS)</u> resources:
    - i. Refer to, "Using the EVV Portal: Accessing the EVV Portal Job Aid," for instructions on how to use the EVV Portal.
    - ii. Refer to, "Using the EVV Portal: Accepted Visit Search Tab Job Aid," for instructions on how to use the Accepted Visit Search tab.
    - iii. Watch, "CBT Module 5 Part 4: Accepted Visit Search Demo," for instructions on how to use the Accepted Visit Search tab.
- 5. Submit claims with dates of service on or after Dec. 1, 2022, to TMHP using the updated HCPCS codes, modifiers and unit types to make sure a successful EVV claims match. The claim will be forwarded to your MCO.
  - a. Refer to, "CBT Module 6: EVV Claims Submission," in the <u>TMHP LMS</u> for training on EVV claims submission and the EVV claims matching process.

Contact your MCO with questions about this notice. You can refer to the last page of the <u>EVV contact quide (PDF)</u> for MCO contact information.

Refer to <u>TMHP's notice posted on July 12</u>, to learn more about Medicaid Managed Care LTSS billing matrices effective Dec. 1, 2022.