



Electronic Visit Verification (EVV) Introduction for Financial Management Services Agencies (FMSA)

EVV Basics

EVV is a computer-based system that electronically documents and verifies service delivery information, such as date, time, service type and location for certain Medicaid service visits. As required by [federal](#) and [state](#) laws, an FMSA must ensure an EVV [vendor system](#) or an [HHSC-approved EVV proprietary system](#) is used to electronically document the delivery of a service requiring EVV.

Getting Started with EVV

FMSAs must complete the following before using an EVV system:

- Step 1** → [Select an EVV system](#)
- Step 2** → [Complete all applicable EVV training](#) for [FMSAs](#)
 - EVV system training as delivered by the EVV Vendor or PSO
 - EVV policy training through the [HHSC Learning Portal](#)
 - EVV Portal through the [TMHP Learning Portal](#)
- Step 3** → [Complete EVV system Onboarding](#)



HHSC EVV webpage

CDS

The EVV Visit Transactions (using EVV)

The following steps explain the steps of EVV and the process of [EVV visit transactions](#):

- Step 4** → employees must clock in at the beginning of service delivery and clock out at the end of service delivery using an [approved clock in and clock out method](#).
- Step 5** → EVV system [captures and verifies](#) visit data and validates the identification and visit data with Texas Medicaid data. It then alerts program providers and FMSAs of [exceptions](#) in the EVV visit transaction and submits the EVV visit transaction to the [EVV Aggregator](#).
- Step 6** → EVV Aggregator conducts data validation and determines if the EVV visit transaction is accepted or rejected. It will store accepted EVV visit transactions for the [claims matching process](#) and store rejected EVV visit transactions, then return results to the EVV system.
- Step 7** → FMSAs and CDS employers complete [visit maintenance](#), as applicable, to correct exceptions and rejected visit transactions sent back by the EVV Aggregator, adjust bill hours and add [reason codes](#) and [free text](#) as required.
- Step 8** → Program Providers and FMSAs use the EVV Portal to search and [review visit data](#), verify accepted EVV visits for billing and access claims matching results.
- Step 9** → Program Providers and FMSAs [submit EVV claims](#) to the appropriate claims management system.
- Step 10** → Aggregator matches EVV claim line items to accepted EVV visit transactions and returns [claims match result codes](#) to the claims management system.

What Services Require the use of EVV? The HHSC EVV Policy Handbook, [section 3000](#) identifies all services requiring EVV.

Want to be informed of changes to EVV and Upcoming events? [Sign up for GovDelivery](#). It only requires an email address and is how HHSC updates EVV users on important events.

Continuing Responsibilities The [EVV Policy Handbook](#) defines required tasks for [FMSAs](#).

Questions? The HHSC [Contact Information Guide for Program Providers and FMSAs](#) provides further instructions where to direct more in-depth inquiries. The [EVV Consumer Directed Services Option page](#) provides more detail on using EVV with the CDS Option.



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