New Explanation of Benefits Being Implemented for Recoupment of Long Term Care Fee-for-Service Claims

Information posted March 27, 2019

Beginning April 27th, 2019, Health and Human Services Commission (HHSC) will implement new explanation of benefits (EOBs) related to recoupment of certain long term care (LTC) fee-for-service (FFS) claims. The new EOBs are:

- Electronic Visit Verification (EVV) visit maintenance not completed prior to claim submission (EOB I1001)
- Incorrect Electronic Visit Verification (EVV) data entered (EOB I1002)
- Missing Electronic Visit Verification (EVV) data (EOB I1003)
- Electronic Visit Verification (EVV) Reason Code (Incorrect or failed to add required free text) (EOB I1004)
- One or more Electronic Visit Verification (EVV) disallowance reasons (EOB I1005)
- Unallowable phone type used for Electronic Visit Verification (EVV) (EOB I1006)
- A change to the Units Authorized for this Client has been submitted by a State Auditor (EOB F0246)

Recoupments for these reasons are typically the result of a contract monitoring review. If providers have claims recouped for any of the above EOBs, they will see these recoupment claims listed (along with the associated EOBs) on their Remittance and Status (R&S) Reports.

Claims for all dates of service recouped for any of the above reasons will deny if rebilled. Providers will see the denied claims with EOB F0347 (Services were recouped by a state auditor and repayment is not allowed) on their R&S Reports.

Providers must continue to use existing appeal processes which are offered prior to recoupment. However, if a provider believes repayment should be allowed for these recouped services, they must contact the HHSC Contract Specialist assigned to their contract. Repayment will be considered if the state made an error while recouping the claims.

For questions related to your R&S Report, call the TMHP Long Term Care Help Desk at 1-800-626-4117, Option 1.