Beginning Sept. 1, 2019, All Electronic Visit Verification (EVV)-relevant Claims must be submitted to TMHP:

- For the new EVV claims matching process, program providers that are required to use EVV must submit all claims for EVV-relevant services with a date of service Sept. 1 or after, to the Texas Medicaid & Healthcare Partnership (TMHP) via TexMedConnect or the Electronic Data Interchange (EDI).

- Program providers enrolled with Medicaid through TMHP, who do not currently submit claims to TMHP, must establish a Compass 21 Submitter ID. Program providers who want to submit through EDI must also establish a Receiver ID.

- Managed care organization Long-Term Services and Support (LTSS) program providers enrolled through the Health and Human Services Commission (HHSC), must contact the TMHP EDI Helpdesk to establish a C21 Submitter ID to submit EVV-relevant claims through EDI. LTSS program providers may not submit claims through TexMedConnect.

Program providers who submit claims to their managed care organization (MCO) for dates of service Sept. 1, 2019, or after, will have their claims denied or rejected. The MCO will inform the program provider to submit their EVV-relevant claims to TMHP through TexMedConnect or EDI. The payment or denial of the claims will continue to be provided by the MCO, not by TMHP.

**EVV Claims Matching:**

When TMHP receives a claim for EVV-relevant services, for dates of service Sept. 1, 2019, or after, it will be matched against the accepted EVV visit transactions in the EVV Aggregator. The EVV Aggregator is a centralized database that collects, validates, and stores statewide EVV data transmitted by an HHSC-approved EVV system. Program providers can refer to the article published on March 29, 2019, titled "EVV Aggregator Infographic, EVV Vendor Infographic Now Available," to learn more about the EVV Aggregator.

Once the EVV claims matching process is performed, all claims are forwarded to the appropriate payer for final processing. If the following data elements do not match an accepted EVV transaction, the claim will be denied:

- Medicaid ID
- EVV visit date and claim date of service
- National Provider Identifier (NPI) or Atypical Provider Identifier (API)
- Healthcare Common Procedure Coding System (HCPCS) code
- HCPCS modifiers, if applicable
- Billed units

MCO or HHSC payers will no longer pay any unmatched claims. Payers may deny an EVV claim during processing, even if the claim passes the EVV claims matching process.
Program providers using a third-party submitter must notify them to prepare for EVV claims submission policy.

For questions regarding TexMedConnect or EDI, or to obtain a C21 Submitter ID or a Receiver ID, contact the TMHP EDI Help Desk at 888-863-3638, Option 4 or visit the EDI webpage for additional information.

For questions about this notification, contact HHSC EVV Operations.

**Upcoming Webinars for EVV Aug. 1 and 15, 2019**

TMHP is holding two webinars in August on the following EVV topics:

- Selecting a Texas Health and Human Services Commission approved EVV vendor
- The EVV Provider Onboarding process
- An introduction to the EVV Aggregator and the EVV Portal
- Submitting EVV claims

To register, click on the date you would like to attend:

- [Aug. 1, 2019 - Live Webinar](#)
- [Aug. 15, 2019 - Pre-Recorded Webinar](#)

After registering, a confirmation email will be sent with information about joining the webinar. TMHP will conduct both webinars, including a live question and answer session after the presentation scheduled for Aug. 1.

**Note:** The Aug. 15, 2019, webinar will be pre-recorded with no live question and answer session after the presentation.

For those unable to attend, a recording of the webinar will be posted on the TMHP Learning Management System at a later date.

For more information, contact evv@tmhp.com.

Point of Contact: HHSC EVV Operations.