

EVV Active Proprietary System Operator Workgroup Minutes

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| Date | March 26th, 2025 |
| Time Duration | 1:00 P.M. CST to 2:30 P.M. CST |
| Webinar Link Location | https://attendee.gotowebinar.com/register/2765996765905565269 Webinar Only |
| Contact | For questions related to this meeting, please contact: EVV_PSO@tmhp.com / EVVPSO@hhs.texas.gov |

Attendees/Invitees

| | |
|---------------------------------|------------|
| EVV Active PSO Workgroup | |
| Wed, Mar 26, 2025 12:36 pm CDT | |
| Registrants | 860 |
| Attendees | 451 |
| Attendance Rate | 52% |

Purpose

- The purpose of the EVV Active PSO Workgroup meeting is to share information between HHSC, TMHP, the operational PSOs and the approved proprietary system vendors that may impact a PSO’s daily operations or compliance requirements.
- Topics for this workgroup are limited to operational PSO concerns and questions. Questions or concerns related to other PSO topics such as the PSO waitlist and onboarding requirements will be handled separately outside of the workgroup. Non-operational PSO concerns or questions should be emailed to TMHP EVV PSO at evv_pso@tmhp.com and HHSC EVV PSO at evvpso@hhs.texas.gov.

Note: The agenda is subject to change.

Agenda

1. Welcome/Introductions

Presenter: Jesse Riordan, TMHP EVV PSO Operations

Duration: 3 minutes

- **Please note that HHSC doesn't allow the use of "chat bots" of any kind, including ones to record the meetings.**
- The [TMHP Active PSO Workgroup](#) Webpage will be updated with the minutes from today's workgroup meeting.
- Due to the large number of participants invited, all participants are muted when the webinar begins and will remain muted throughout the meeting. Participants must submit all questions through the GoToWebinar questions pane.

Materials and Resources

1. [HHSC EVV webpage](#)
2. [HHSC EVV Proprietary Systems Webpage](#)
3. [TMHP EVV Proprietary Systems Webpage](#)
4. [EVV Active PSO Workgroup Webpage](#)

Minutes:

Topic presented, any questions and responses related to topic are below.

2. Action Items Review from Prior Meeting

Presenter: Jesse Riordan, TMHP EVV PSO Operations

Duration: 2 minutes

- There are no open action items for the Active PSO Workgroup

Minutes:

Topic presented, any questions and responses related to topic are below.

3. General Update – News from webpage related to PSOs

Presenter: Naresh Berotte, TMHP EVV PSO Operations

Duration: 5 minutes

- **March 2025**
 - [EVV Active PSO Workgroup Information Now Available on EVV Proprietary Systems Web Page](#) - 12/27/2024
 - [EVV Active PSO Workgroup | TMHP](#) – 2/14/2025



Materials and Resources

1. [HHSC EVV Proprietary Systems Webpage](#)
2. [TMHP EVV Proprietary Systems Webpage](#)
3. [GovDelivery - Sign up to receive EVV email updates](#)

Minutes:

Topic presented, any questions and responses related to topic are below.

4. Managed Care (MCO) Updates Impacting PSOs

Presenter: Rae Harris, HHSC EVV Operations

Duration: 5 minutes

- [No updates for this meeting](#)
- [Questions](#)

Materials and Resources

1. [HHSC EVV webpage](#)
2. [HHSC EVV Proprietary Systems Webpage](#)

Minutes:

Topic presented, any questions and responses related to topic are below.

5. Compliance Updates and Reminders

Presenters: Yatinkumar Akbari, TMHP EVV PSO Operations and Sam Darby, HHSC EVV Operations

Duration: 30 minutes

- PSOs should note that they are a program provider or FMSA that has been approved to use an EVV proprietary system and are still required to comply with all policies applicable to program providers or FMSAs.
- PSOs are responsible for ensuring their Proprietary Systems are complying with the current Business Rules as noted on the PSO Certification Form that is signed by the Signature Authority. Provider PSOs and FMSA PSOs are responsible for required EVV Training as listed in EVV Training policy (Section 4200 of the EVV Policy Handbook)
 - See [EVV Training Requirements Checklists \(PDF\)](#) for System, Provider and/or FMSA training responsibilities.
- Compliance data is showing that some PS Vendor Systems are making updates to the Auto Confirm flag when performing Visit Maintenance. The Auto Confirm flag should never be changed after the visit has been accepted by the aggregator.
 - Refer to BR Appendix C – EVV Visit Transaction File; position 114-



EVV_AUTOCONFIRMFLAG: An indicator that specifies if a visit was auto-verified by the EVV System and no visit maintenance was required. Flag should be set to 'Y' if visit initially auto-verified. Flag should be set to 'N' if visit did not initially auto-verify. **Flag should not change with an update to the visit.**

- Compliance data has identified some PS Vendor Systems are performing Visit Maintenance without a new Reason Code.
 - A Reason Code is required each time a visit is updated/Visit Maintenance is performed.
 - SDV-48P - EVV System must require the System User to enter a EVV Reason Code and required free text when the System User makes changes to the EVV Visit Transaction after the System User/ Service Provider has documented the visit. EVV system must adhere to the HHSC EVV Policy regarding EVV Reason Codes.

Top 10 Reasons for Rejections (for all PSOs for February 2025)

| Edit_Code | Edit_Description | % of top 10 |
|-----------|--|-------------|
| Ex00031C | The Member's Payer on the EVV visit does not match our records for this Member. | 46.72% |
| Ex00034C2 | The Member Medicaid ID on the EVV visit does not have active Medicaid eligibility for the visit date. | 14.52% |
| Ex0007C2 | Member on the EVV visit is not authorized for this Provider Number on this visit date in our records. | 13.78% |
| Ex00057C3 | The Member on the EVV visit is not authorized for this service group/service code on this visit date in our records. | 11.28% |
| Ex00043C | The plan code on the visit is not associated with the Member's Payer. | 10.50% |
| Ex0007C1 | The Provider Number on the EVV visit is not associated with this provider NPI/API for the Visit Date. | 1.23% |
| Ex0002C | Provider NPI cannot be validated as active for the visit date. | 0.72% |
| Ex00028B | CDS Employer EVV ID is required when service is CDS service. | 0.68% |
| Ex00034C1 | The Member Medicaid ID on the EVV visit is not found in our records. | 0.34% |
| Ex00066C | The rounded Bill Hours on the EVV visit cannot be greater than the rounded EVV Hours. | 0.25% |

- The impacted PSOs have been notified and are working with TMHP to correct the issues to remain in compliance with BRs and EVV policy.
- Questions

Materials and Resources

1. [Electronic Visit Verification \(EVV\) Visit Transaction Rejection Guide](#)

Minutes:

Topic presented, any questions and responses related to topic are below.

6. HHSC/AMD System Updates

Presenter: Yvette Walters, HHSC EVV Operations
Duration: 5 minutes

- No updates
- Questions

Minutes:

Topic presented, any questions and responses related to topic are below.

7. Business Rule Updates

Presenter: Sam Darby, HHSC EVV Operations
Duration: 5 minutes

- Questions

Materials and Resources

1. [TMHP PSO Business Rule Webpage.](#)
2. HHSC EVV PSO Mailbox (EVVPSO@hhs.texas.gov).

Minutes:

Topic presented, any questions and responses related to topic are below.

8. PSO Operational Updates

Presenter: Naresh Berotte, TMHP EVV PSO Operations
Duration: 5 minutes

- Phase II of the BR v3.1 compliance ORR Process for Proprietary Systems Testing and ORR was completed in February 2025.
 - 12 PS vendors participated in the Phase II compliance ORR.
 - All 11 operational PS vendors passed both Phase I and Phase II of the BR v3.1 compliance ORR.
- Revised Compliance Documents for BR v3.1
 - PSOs received revised Certification Forms in February 2025. Providers who have not signed and returned the BR v3.1 certification form, please do so as soon as possible to remain in compliance.
 - Approval Letters will be delivered in early April 2025 to reflect their compliance with BR v3.1.
- Non-compliant proprietary systems cannot onboard new providers or FMSAs until they are compliant with BR v3.1.
- The EVV Proprietary Systems Approved by HHSC has been updated to reflect the BR version a PS is approved for in addition to other features offered by the PS.

- Questions

Materials and Resources

1. [EVV Proprietary Systems | TMHP](#)
2. TMHP PSO Mailbox: evv_pso@tmhp.com

Minutes:

Topic presented, any questions and responses related to topic are below.

9. 2025 Operational Readiness Review (ORR) Status Update

Presenter: Naresh Berotte, TMHP EVV PSO Operations

Duration: 5 minutes

- PSO Onboarding Sessions
 - All 2025 Sessions posted on [TMHP EVV Proprietary System webpage](#)

Upcoming ORR Sessions

| Session | Planning Meeting Date | ORR Start Date | Session Approval Date | Earliest Go-Live Date |
|--------------------------|-----------------------|----------------|-----------------------|-----------------------|
| 2025-2: Standard | Apr. 15, 2025 | May 1, 2025 | Jun. 11, 2025 | Jul. 15, 2025 |
| 2025-3: Expedited | Jul. 1, 2025 | Jul. 7, 2025 | Aug. 4, 2025 | Sept. 1, 2025 |
| 2025-4: Standard | Sept. 9, 2025 | Sept. 22, 2025 | Nov. 28, 2025 | Dec. 1, 2025 |
| 2025-5: Expedited | Jan. 6, 2026 | Jan. 12, 2026 | Feb. 9, 2026 | Mar. 15, 2026 |

- As of 03/17/2025, there are 882 operational PSOs and 11 operational PS Vendors.
- The updated [EVV Proprietary Systems Approved by HHSC](#) was published on the TMHP EVV Proprietary Systems webpage.
 - 11 approved proprietary systems.
 - Updated and published on 02/27/2025.
 - This document has been updated to reflect the addition of Visit Maintenance Legacy Visit import ability.
- Questions

Materials and Resources

1. [TMHP EVV Webpage - EVV Proprietary Systems](#)
2. [EVV Proprietary Systems Approved by HHSC \(PDF\)](#)
3. TMHP PSO Mailbox: evv_pso@tmhp.com

Minutes:

Topic presented, any questions and responses related to topic are below.

10. EVV Policy and Texas Administrative Code (TAC) Rules

Presenter: Sarah Hambrick, HHSC EVV Operations
Duration: 5 minutes

- • EVV Policy Handbook Revision
 - Published March 12, 2025.
 - EVV GovDelivery notice.
 - Revision Log.
 -
- 89th Legislative Session
 - Last Day to file new bills was March 14, 2025.
 - 9,898 bills filed.
 - Senate Bill 1334 and House Bill 3355.
- Questions

Materials and Resources

1. [HHSC EVV webpage](#)

Minutes:

Topic presented, any questions and responses related to topic are below.

11. Review Future Meeting Dates

Presenter: Jesse Riordan, TMHP EVV PSO Operations
Duration: 3 minutes

- Future Meeting Dates:
 - May 28, 2025 – 1:00 pm – 2:30 pm CST
 - July 30, 2025 – 1:00 pm – 2:30 pm CST
 - September 24, 2025 – 1:00 pm – 2:30 pm CST
 - November 19, 2025 – 1:00 pm – 2:30 pm CST
- Questions

Minutes:

Topic presented, any questions and responses related to topic are below.

12. Review Action Items

Presenter: Jesse Riordan, TMHP EVV PSO Operations
Duration: 2 minutes

- Outstanding action items
- New action items

Minutes:

Topic presented, any questions and responses related to topic are below.



13. Discussion on Future Agenda Items

Presenter: Jesse Riordan, TMHP EVV PSO Operations

Duration: 1 minute

- Request agenda topics for next meeting.
- Workgroup members may submit their suggestions for agenda topics to the EVV PSO Mailbox (EVV_PSO@tmhp.com) up to 2 weeks prior to the next meeting.

Minutes:

Topic presented, any questions and responses related to topic are below.

14. Adjournment

Presenter: Jesse Riordan, TMHP EVV PSO Operations

Duration: 1 minutes

Minutes:

Topic presented, any questions and responses related to topic are below.

15. Questions Received during Workgroup

If you have unanswered questions or would like clarification on a response, please send your questions to TMHP PSO Team EVV_PSO@tmhp.com or the HHSC PSO Team evvpso@hhs.texas.gov.

1. EVV Compliance Questions:

Question: How can we determine our EVV compliance? Also, what percentage of EVV compliance is required in Texas?

Answer: To determine your EVV compliance in Texas, you can use the EVV Usage Report and EVV CDS Employer Usage Report available in the EVV Portal or EVV System. These reports display your EVV Usage Score for each quarter, which is based on the number of manual and rejected EVV transactions. You must maintain a minimum EVV Usage Score of 80% each quarter. If your score falls below 80%, you may be reviewed by the payer for compliance.

Question: Regarding the mandatory 25% of transactions with GPS by September 2025,

will this be calculated for all our members in aggregate, or will it be calculated by Payor, as is done for the manual compliance score?

Answer: The compliance for the alternative reduction policy will be calculated as the number of visit transactions made using an alternative device divided by the total number of transactions with any approved method. The number of members will not be used in the calculation of the alternative device usage percentage. Each Payer will calculate the alternative device compliance score as is done for the EVV Usage score.

Question: I didn't quite understand the answer to my question. So, to clarify, is the 25% transition to GPS calculated by each individual payor? Does that mean we need to determine this separately for each payor when transitioning 25% of transactions to GPS?

Answer: Yes, it will be determined by the payer. But, for MCOs, it will use the NPI vs using the LTC provider contract number for fee-for-service providers. If you need additional information, please email EVV@hhs.texas.gov. Please note, the total number of visit transactions captured with the alternative device clock in and clock out method must be reduced over a period of years. Visit transactions captured with the mobile method or landline method are not affected.

Question: How are manual visits, which are neither token-based nor mobile, factored into the mobile device minimum requirement?

Answer: The alternative device reduction policy requires program providers and FMSAs, including those approved as PSOs, and CDS Employers to reduce their number of EVV visit transactions made using an alternative device. Beginning Sept. 1, 2025, all providers, regardless of which EVV system they use, will be required to limit their alternative device usage to a maximum of 75% of their total EVV visit transactions. As a reminder, manually entered EVV Visit Transactions negatively impact the EVV Usage score for program providers and CDS Employers. Compliance reviews of the EVV Usage score and compliance with the alternative device policy will be conducted separately. Program providers, FMSAs, and CDS Employers, including program providers and FMSAs approved as a proprietary system operator (PSO), must comply with EVV requirements, including EVV Usage and the alternative device reduction policy.

Question: It is possible to schedule a session or go over the EVV Usage Report on TMHP? Additionally, how do we identify our manual percentage in the report? We understand that we are not allowed to exceed 10 percent for manual transactions, is that correct?

Answer: The EVV Usage Score is available in the EVV Usage Report, which is accessible in the EVV Portal. The EVV Usage Score must be a minimum of 80% each state fiscal year quarter to be in compliance with the EVV Usage requirement. Training is available for

program providers and financial management services agencies on how to run the EVV Usage Report in the TMHP Learning Management System (LMS). You can access EVV Training for Program Providers and FMSAs on the TMHP EVV Training webpage. Demos are available, and you can download an EVV Usage Report Job Aid that includes step-by-step instructions on how to run the report and locate your EVV Usage Score.

2. Visit Maintenance & Auto-Verification Questions:

Question: If we can't edit an auto-confirmed visit, how do we add notes to indicate why the hours were changed in order to avoid recoupment if they didn't stay within the scheduled hours?

Answer: Adding an EVV Reason Code or performing other Visit Maintenance actions on an EVV Visit Transaction is allowed. The EVV_AUTOCONFIRMFLAG should not be changed with Visit Maintenance. The EVV_AUTOCONFIRMFLAG is an indicator of whether the EVV Visit Transaction initially auto-verified or did not auto-verify.

Question: If a completed visit was clean and auto-verified, with the Flag as Y, and then a manual adjustment is made to it with a reason code, should we change the flag to N because it was touched, altered, and is no longer considered auto-verified on the updated visit that is sent over?

Answer: The EVV_AUTOCONFIRMFLAG identifies if the EVV System initially auto-verified the visit or did not auto-verify the EVV Visit Transaction. If Visit Maintenance was performed on an EVV Visit Transaction, the EVV System should not change the EVV_AUTOCONFIRMFLAG.

Question: You stated not to change the auto-verify flag. Does that mean we are never allowed to make subsequent changes to a visit that was auto verified? Or is the restriction specifically about changing the auto-verify flag itself, and does it differ from making other changes to the visit (such as adjusting the hours or reason codes)?

Answer: The auto-verify flag itself should not be changed when performing Visit Maintenance on an EVV Visit Transaction. Program providers, FMSAs, and CDS Employers may perform Visit Maintenance according to [Appendix O – Visit Maintenance](#) (such as adjusting Bill Hours or adding EVV Reason Codes). The auto-verify flag represents if the EVV System initially auto-verified or did not auto-verify the EVV Visit Transaction.

Question: When entering a reason code for a visit, do we need to also provide an explanation or additional details?

Answer: Not for all EVV Reason Codes. Per HHSC EVV policy, two reason codes require free text. Reason code 210-I Emergency and Reason Code 600 Other require documentation in the free text field in the EVV system. If the System User desires to add additional information in the free text field when adding an EVV Reason Code other than 210-I for 600, the System User may optionally do so.

Question: Once visit maintenance is complete and we need to go back to update the visit, is it required to provide a reason for the update each time? Specifically, should we select a new reason code when making any changes or updates to the visit, even if it was already updated previously? What is the correct procedure for this process?

Answer: Each time the System User performs Visit Maintenance and makes a change to the EVV Visit Transaction, the EVV System must require the System User to enter an EVV Reason Code to indicate the reason why the System User performed Visit Maintenance. If you make a change to the EVV Visit Transaction, you must select the most appropriate EVV Reason Code.

Question: How should we handle visits that are linked to other scheduled visits, which are also planned for the same day?

Answer: This is a question that you should send to your Proprietary System Vendor.

3. EVV System & Operations Questions:

Question: What is "AMD"?

Answer: AMD refers to the TMHP Application Maintenance and Development vendor. The TMHP AMD vendor is responsible for supporting and maintaining Texas Medicaid information technology applications, including the EVV Portal and EVV Aggregator.

Question: Can you clarify the start dates for state fiscal year quarters related to EVV data measurement? Specifically, which calendar months will be included in the first active EVV measurement quarter for compliance, considering that calendar and fiscal years do not align?

Answer: The state fiscal year begins Sept. 1st and ends August 31st each year. The EVV usage review period schedule follows the state fiscal year quarters. Payers may begin

reviews any time after the visit maintenance time frame has expired from the last date of the specified quarter. The visit maintenance timeframe is 95 days. Quarter 3 of Fiscal Year 2025, which includes the months of March, April, and May, will be the first quarter that payers will review EVV Usage Scores and possibly take enforcement actions based on your EVV Usage Score during that quarter.

Question: Will PSO's still have to pay for EVV systems?

Answer: This can't be answered at this time. If either Senate Bill 1334 or House Bill 3355 passes, the implementation of the provisions of the bill will be developed upon passage.

Question: Will HHSC select the operating systems that will be available for us to use, or will the bill indicate which system(s) we can choose from?

Answer: This can't be answered at this time. If either Senate Bill 1334 or House Bill 3355 passes, the implementation of the provisions of the bill will be developed upon passage.

Question: So therefore, there's a chance that PSO can be eliminated?

Answer: This can't be answered at this time. If either Senate Bill 1334 or House Bill 3355 passes, the implementation of the provisions of the bill will be developed upon passage.

Question: If we have been, and continue to be, PSO's, do we need to complete any additional sessions or trainings to maintain our compliance?

Answer: Program providers and FMSAs are required to complete all mandatory EVV training on an annual basis. This includes EVV Policy training, EVV system training specific to the proprietary system you're using, and EVV Portal training. For full details on training requirements and how to complete them, refer to the EVV Required Training Checklists on the HHSC EVV webpage. Additionally, operational PSOs and their proprietary system vendors may be required to complete a compliance operational readiness review (ORR) demonstration session when HHSC releases new EVV Business Rules for Proprietary Systems (BRs). All operational proprietary system vendors recently completed the compliance ORR for BR v3.1.

Question: How can we confirm that we are one of the 12 vendors that successfully passed Phase 2?

Answer: PSOs using a proprietary system that passed both phases of the Business Rule (BR) v3.1 compliance operational readiness review (ORR) received a revised Certification Form in February. New Approval Letters will be mailed out the first week of April. PS

vendors were notified of their compliance ORR completion at the end of their compliance ORR session.)

Question: Have you already communicated with the PS vendors regarding whether they are currently experiencing issues with the auto confirm flag changing? Or will they be aware of the issue since the transactions are coming back with a rejection?

Answer: Yes, the vendors have been made aware of the issue. They are currently researching and providing feedback on this topic.

Question: Do we need to renew our Proprietary system on a yearly basis, or is there another process for maintaining compliance?

Answer: There are no yearly renewals required for Proprietary systems. Operational Proprietary Systems may be required to complete a compliance operational readiness review (ORR) when HHSC publishes a new version of the EVV Business Rules for Proprietary Systems. Impacted proprietary system vendors and PSOs will be notified when a business rule compliance ORR is required.

4. Visit Scheduling & Billing Questions:

Question: Does the home landline report need to be submitted on a monthly basis, or should it only be submitted when we receive a notification from the EVV TMHP?

Answer: The EVV Landline Home Phone Verification report should be provided when requested by a payer. (HHSC or MCO)

Question: Regarding the EVV verify hours, if the attendant clocks in and out but works beyond the scheduled hours, can we leave the clock-in time as is and just adjust the clock-out time without unlinking the calls?

Answer: If the service attendant worked extra time after clocking out, the program provider, FMSA, or CDS employer would need to add a manual clock in and clock out for the hours worked over. For example, if the service attendant worked until 6 pm but clocked out at 5 pm, you would add a manual visit for 5 pm to 6 pm.

5. EVV Reason Codes Questions:

Question: Are there any trainings available for EVV reason code usage?

Answer: HHSC has an [EVV Reason Code Quick Reference Guide \(PDF\)](#) available on the [HHSC EVV webpage](#) that includes all EVV Reason Code Numbers and Descriptions and examples of when to use them. In addition, the EVV Policy Training for Program Providers and FMSAs course on the [HHS Learning Portal](#) includes a Reason Code Practice Module (Module 5.1) to help you learn more about when to use EVV Reason Codes, depending on the visit maintenance situation.

Refer to the TMHP EVV Training web page. <https://www.tmhp.com/topics/evv/evv-training>.

Question: When performing visit maintenance, we do not adjust the actual clock-in or clock-out times. However, we do adjust the billable in and out times, which in turn adjusts the billable units up or down. At times, we may only adjust the billable units down without changing the billable in and out times. Is it acceptable to handle visit maintenance in this way?

Answer: Yes, System Users may perform Visit Maintenance by directly adjusting the Bill Hours or Units on an EVV Visit Transaction. When performing Visit Maintenance, the EVV System must require the System User to enter an EVV Reason Code.

Question: Why do two visits for different clients, with the same attendant and overlapping call times, auto-verify without any schedule conflict?

Answer: The system may auto-verify overlapping visits if the total hours and visit details align with the requirements for each individual client.

6. Rejection Code and Error Questions:

Question: Regarding rejection code EX00031C: If the MCO does not provide an authorization, will the agency still be penalized for this rejection?

Answer: Rejection code Ex00031C is returned when the Member's payer on the EVV visit does not match our records for this Member. If a program provider or FMSA submits a visit to the EVV Aggregator that does not have the correct payer listed on it, the EVV Aggregator will reject the visit, and it will count against your usage score. The program provider or FMSA should verify each visit has the correct information before submitting it to the EVV Aggregator.

Question: If a visit is outside the appropriate correction timeframe, how should providers request a deletion of the visit from TMHP to update the required information?

Answer: If an EVV Visit Transaction requires Visit Maintenance and the Visit Maintenance Time Frame has expired, the Program Provider, FMSA, or CDS Employer must submit a Visit Maintenance Unlock Request (VMUR) to the Payer listed on the EVV Visit Transaction. More information on submitting a VMUR can be found on the HHSC EVV Webpage.

7. State Legislation & Changes Questions:

Question: Could you please provide a link to or the name of the bill that was being discussed, which proposes to eliminate the PSO Operator requirement?

Answer: They are Senate Bill 1334 and House Bill 3355. For more information please visit Texas Legislature Online: <https://capitol.texas.gov>. Please note the content of the bills may change as they goes through the legislative process. Check the bill language often.

Question: How will approved operating systems get paid - by state or agency?

Answer: This can't be answered at this time. If either Senate Bill 1334 or House Bill 3355 passes, the implementation of the provisions of the bill will be developed upon passage.

Question: What percent of TX providers are now PSOs? In other words, what percent is 882 providers of total TX providers?

Answer: Out of a total of 2,680 Texas providers currently performing EVV services, 882 are PSOs and 1,798 are using HHAeXchange. Approximately 32.91% of all TX providers are PSOs.

Question: Which bills are currently being discussed related to Texas Legislature?

Answer: They are Senate Bill 1334 and House Bill 3355. For more information, please visit Texas Legislature Online: <https://capitol.texas.gov>. Please note the content of the bills may change as they go through the legislative process. Check the bill language often.

Question: We need the compliance policies as soon as possible. September is only 5 months away, and it's been very difficult to transition our tech-averse members and caregivers to EVV with GPS. The sooner we know the official guidance, the better we can prepare for September.

Answer: The alternative device reduction will not begin until January 1, 2026. HHSC is finalizing the alternative device reduction compliance policies and will release them as a standalone policy document as soon as they are approved.