



**TMHP**  
TEXAS MEDICAID  
&  
HEALTHCARE PARTNERSHIP

**A STATE MEDICAID CONTRACTOR**

**HHSC Electronic Visit Verification (EVV)  
Business Rules for Proprietary Systems  
January 31, 2020 v1.0**

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## Proprietary System Operator Compliance and Processing Guidelines

This document outlines the set of standards that any ‘Proprietary System Operator’ must adhere to as a condition of participation in the Texas Medicaid EVV Program. The standards cover the processing guidelines for business processes related to EVV, and compliance with them is critical to producing successful outcomes for the program.

The guidelines govern the system set up (onboarding) for ‘Proprietary System Operators’, the documentation and verification of services requiring EVV, the maintenance of the visit data, and transmission of the data to ‘Accenture/TMHP’ for inclusion in the ‘EVV Aggregator’.

### Onboarding

If a ‘Proprietary System Operator’ does not serve any ‘CDS Employers’, the references to ‘CDS Employer’ and ‘FMSA’ in the business rules in this section do not apply to the ‘Proprietary System Operator’s ‘EVV System’.

#### *Program Provider or FMSA Profile Set-Up and Data Elements Validation*

Id	Program Provider or FMSA Profile Set-Up and Data Elements Validation Business Rule
PAO-3P	‘EVV System’ must create a unique profile for each distinct ‘Business Unit’ the ‘Program Provider’ or ‘FMSA’ will use to submit ‘EVV Visit Transactions’ to the ‘EVV Aggregator’. This includes distinct profiles for each type of ‘System User’ in each ‘Business Unit’.
PAO-4P	‘EVV System’ may electronically document identification information data elements for each distinct ‘Business Unit’ through the EVV Master Provider web service described in Appendix D.
PAO-5P	‘EVV System’ must validate identification data entered by the ‘System User’ against the ‘EVV Aggregator’ using the EVV Master Provider web service. An error must be communicated to the ‘System User’ for any required data elements that do not match and creation of the distinct ‘Business Unit’ profile must not occur until the errors are corrected. See Appendix D for details on EVV Master Provider web service.
PAO-6P	‘EVV System must allow the ‘System User’ with appropriate security access to initiate ‘Business Unit’ profile updates. All ‘System User’-initiated updates must be validated against the EVV Aggregator as described in PAO-5P.

Id	Program Provider or FMSA Profile Set-Up and Data Elements Validation Business Rule
PAO-30P	<p>'EVV System' must allow the following relationships, at a minimum:</p> <ul style="list-style-type: none"> <li>• An 'Enrolled, Contracted, or Subcontracted Provider' (or 'FMSA') can be associated with multiple 'Members'.</li> <li>• An 'Enrolled, Contracted, or Subcontracted Provider' (or 'FMSA') can be associated with multiple 'Service Attendants'.</li> <li>• An 'Enrolled or Contracted Provider' (or 'FMSA') can be associated with multiple 'Subcontracted Providers'.</li> <li>• A 'Contracted or Subcontracted Provider' (or 'FMSA') can be associated with multiple 'CDS Employers'.</li> <li>• A 'CDS Employer' can be associated with multiple 'Members'.</li> <li>• A 'CDS Employer' can be a 'Member'.</li> <li>• A 'CDS Employer' can be associated with multiple 'Service Attendants'.</li> </ul>
PAO-31P	<p>'EVV System' must allow 'CDS Employer' to identify a 'Designated Representative' (DR) to perform all system actions on behalf of 'CDS Employer'.</p>

*Service Attendant Profile Set-Up and Data Elements Validation*

Id	Service Attendant Profile Set-Up and Data Elements Validation Business Rule
PAO-8P	<p>'EVV System' must create a unique profile for each 'Service Attendant' containing the 'Service Attendant' identification Information listed in PAO-9P (at a minimum). This includes 'CDS Employees'.</p>
PAO-9P	<p>'EVV System' must electronically document the following data elements for the 'Service Attendant' identification information:</p> <ul style="list-style-type: none"> <li>• 'Texas EVV Service Attendant Identification Number'</li> <li>• Legal Name (Last, First, MI)</li> <li>• Permanent address (Street, City, State, ZIP+4)</li> </ul>
PAO-32P	<p>'EVV System' must allow the following relationships, at a minimum:</p> <ul style="list-style-type: none"> <li>• A 'Service Attendant' can be associated with multiple 'CDS Employers'.</li> <li>• A 'Service Attendant' can be associated with both 'Enrolled, Contracted, or Subcontracted Providers' (or 'FMSAs') and 'CDS Employers'.</li> <li>• A 'Service Attendant' can be associated with multiple 'Members'.</li> </ul>

*Member Profile and Data Elements Validation*

Id	Member Profile and Data Elements Validation Business Rule
PAO-14P	<p>'EVV System' must create a unique profile for each 'Member' receiving services containing the identification Information listed in PAO-15P (at a minimum).</p>
PAO-15P	<p>'EVV System' must electronically document the following data elements for the 'Member's identification information:</p> <ul style="list-style-type: none"> <li>• Texas Medicaid Identification Number</li> <li>• Legal Name (Last, First, MI)</li> <li>• Date of Birth</li> <li>• Medicaid Eligibility start date</li> <li>• Medicaid Eligibility end date</li> <li>• Managed Care Eligibility start date</li> <li>• Managed Care Eligibility end date</li> </ul>

Id	Member Profile and Data Elements Validation Business Rule
	<ul style="list-style-type: none"> <li>• Address (Street, City, State, ZIP+4)</li> <li>• Landline Home phone number</li> </ul>
PAO-16P	‘EVV System’ must validate any ‘Member’ data entered by the ‘System User’ against the ‘EVV Aggregator’ using the x12 270/271 exchange. An error must be communicated to the ‘System User’ for any required data elements that do not match, but must not prevent the creation of the profile.
PAO-17P	‘EVV System’ must allow the ‘System User’ with appropriate security access to initiate ‘Member’ profile updates. All ‘System User’-initiated updates must be validated against the ‘EVV Aggregator’ as described in PAO-16P.
PAO-33P	‘EVV System’ must allow the following relationships, at a minimum: <ul style="list-style-type: none"> <li>• A ‘Member’ can be associated with only one ‘CDS Employer’.</li> <li>• A ‘Member’ can be associated with both ‘Enrolled, Contracted, or Subcontracted Providers’ (or ‘FMSAs’) and a ‘CDS Employer’.</li> <li>• A ‘Member’ can be associated with multiple ‘Service Attendants’.</li> </ul>

*EVV System Training*

Id	EVV System Training Business Rule
PAO-21P	‘Proprietary System Operator’ must provide ongoing system training, as needed, to ‘HHSC’ and ‘MCO’ staff. The training must include access to, and use of, the system where full system functionality is demonstrated.

**Establishing Service**

*Prior Authorizations/Service Authorizations*

Id	Prior Authorizations/Service Authorizations Business Rule
ESA-2P	‘EVV System’ must request, receive and store electronic Fee For Service ‘Prior Authorization/Service Authorization’ data from the payer (‘Accenture/TMHP’) using the standardized file format found in Appendix F. This activity must occur at least once daily.
ESA-3P	‘EVV System’ must allow the ‘System User’ to confirm ‘Member’ ‘Prior Authorization/Service Authorization’ using the authorization data received from the payer. A ‘Prior Authorization/Service Authorization’ not confirmed by the ‘System User’ must be rejected by the ‘EVV System’, unless it matches what was created manually by the ‘System User’.
ESA-4P	‘EVV System’ must alert the ‘System User’ to changes in ‘Prior Authorization/Service Authorization’ data received from the payer.
ESA-7P	‘EVV System’ must verify the accuracy of the ‘EVV Visit Transaction’, prior to confirmation and transmission to the ‘EVV Aggregator’, to ensure it matches the ‘Prior Authorization/Service Authorization’ data. The verification must ensure that the relationship between the Provider ID (NPI, API, TIN, Contract Number), the Medicaid ID for the ‘Member’ and the Service Codes match the ‘Prior Authorization/Service Authorization’ data. If they do not match then the ‘EVV System’ must allow for corrections by the ‘System User’ prior to transmission of the visit to the ‘EVV Aggregator’.

Id	Prior Authorizations/Service Authorizations Business Rule
ESA-15P	'EVV System' must allow the 'System User' to manually create a 'Prior Authorization/Service Authorization' for a 'Member' if one from the payer does not exist. 'Prior Authorization/Service Authorization' data that is subsequently received from the payer will take precedence and must be confirmed by the 'System User', unless they match what was created manually by the 'System User'.
ESA-16P	'EVV System' must validate manually entered 'Prior Authorization/Service Authorization' data against existing data in the system.
ESA-17P	'EVV System' must validate electronic 'Prior Authorization/Service Authorization' data received from the payer to ensure that the data format is correct and that required fields are populated. The 'EVV System' must report discrepancies to the payer and work to resolve them.

*Schedules*

Id	Schedules Business Rule
ESA-8P	'EVV System' must allow 'Schedules' for service delivery to be entered and maintained in support of 'Pending Visits'. These 'Schedules' will be required for some Texas Medicaid programs and optional for others. 'Schedules' are optional for 'CDS Employers' regardless of program rules.
ESA-9P	'EVV System' must allow the 'System User' to document a service that was delivered, but not 'Scheduled'.

**Electronic Verification Methods**

The following business rules are intended to address multiple, different verification methods. It is acknowledged that a specific 'EVV System' may not include all of the available methods, and in that case the rules related to the unused method do not apply to that 'EVV System'.

*Home Landline*

Id	Home Landline Business Rule
EVM-3P	'EVV System' must accept clock-in and clock-out data via 'Member' home landline phone.
EVM-4P	'EVV System' must verify home landline phone number on 'EVV Visit Transaction' is associated with 'Member' profile. If a mismatch is found, the transaction must be flagged, and the 'System User' alerted.

*Alternative Methods/Devices*

Id	Alternative Methods/Devices Business Rule
EVM-5P	'Proprietary System Operator' must provide 'HHSC'-approved alternatives for clock-in/clock-out in the event a 'Member' does not have a landline, or a 'Member' is

Id	Alternative Methods/Devices Business Rule
	unwilling to allow 'Service Attendant' use of landline.
EVM-6P	'EVV System' must identify a 'Service Attendant's use of alternative methods/devices used for clock-in/clock-out and confirm association to 'Member'. If a mismatch is found, the transaction must be flagged, and the 'System User' alerted.

*Mobile Method*

Id	Mobile Method Business Rule
EVM-7P	'Proprietary System Operator' must allow clock-in/clock-out via mobile methods. The mobile methods must be provided at no charge to the 'Member'.
EVM-8P	'Proprietary System Operator' must receive consent from a 'Service Attendant' when a personal cell phone is used for clock-in/clock-out through EVV.
EVM-9P	'EVV System' must verify that the mobile method used for clock-in/clock-out is associated with the 'Member'. If a mismatch is found, the transaction must be flagged and the 'System User' alerted.
EVM-10P	'EVV System' must capture longitude and latitude ('Geo-Location') only at clock-in and clock-out via mobile methods. System must not allow for persistent tracking. System must not allow data captured via mobile method to be altered by the user.
EVM-11P	'EVV System' must allow the 'System User' to access mobile methods.
EVM-12P	'EVV System' must not require significant data usage through cellular network for the mobile methods when the cost associated with that data use is the responsibility of the 'Service Attendant'.
EVM-17P	The mobile method must allow multiple users to use the same device, but must require logon credentials unique to each person/user.
EVM-18P	The mobile method provided by the 'Proprietary System Operator' must allow the user to download, set up and begin using the mobile method without hands on interaction by the 'Proprietary System Operator' or 'System User'.
EVM-19P	Location data must only be used for the purpose of documenting the location of the service delivery visit. Location data cannot be sold, shared, or used by a third party for any reason.
EVM-20P	'EVV System' must not restrict usage of the mobile method based on the proximity of the home address of the 'Service Attendant' and the 'Member' receiving services.

**Service Delivery Verification**

*Service Delivery (EVV Visit) Transaction Documentation*

Id	Service Delivery (EVV Visit) Transaction Documentation Business Rule
SDV-1P	<p>'EVV System' must capture and verify the following data points for each EVV visit:</p> <ul style="list-style-type: none"> <li>• 'Member' receiving the service</li> <li>• 'Service Attendant' providing the service</li> <li>• 'Proprietary System Operator' 'Business Unit' the 'Service Attendant' is performing the service on behalf of</li> <li>• Location where the service is delivered (home or community location, and 'GPS' coordinates when the mobile method is used to clock in/out)</li> <li>• Date the service is performed</li> </ul>



Id	Service Delivery (EVV Visit) Transaction Documentation Business Rule
	<ul style="list-style-type: none"> <li>• Time the service is performed (start and end)</li> <li>• Type of service performed</li> </ul> <p>The system must capture this data even in the absence of verification.</p> <p>The specific data elements required to support this data capture and validation can be found in Appendices C and H.</p>
SDV-2P	'EVV System' must capture the clock-in/clock-out method used for each transaction.
SDV-3P	'EVV System' must allow log in as well as the capture of clock-in/clock-out data when using a mobile method in instances when internet connection or cellular data is unavailable. This must not require manual entry of data by the 'System User'.
SDV-4P	'EVV System' must allow for manual data entry of 'EVV Visit Transactions'. All 'EVV Visit Transactions' entered using this manual method must identify the input method and output method as "GUI" (manual entry). 'EVV System' must require extra certification that supporting documentation is available when the visit is manually entered by the 'System User'.
SDV-5P	'EVV System' must calculate service delivery time using clock-in and clock-out time in standard format (MMDDYYYY HH:MM AM).
SDV-6P	'EVV System' must round actual service delivery time to the nearest quarter hour increment where program rules require and submit this separately as billed hours.
SDV-7P	'EVV System' must allow the 'System User' the ability to adjust billed hours in cases where 'Service Attendant' clock-in/clock-out were not appropriate. The billed hours may not be adjusted by the 'System User' to an amount greater than the actual hours recorded by the 'EVV System'.
SDV-8P	'EVV System' must allow for multiple 'Service Attendants' to deliver the same service at the same location, same date and time with the same 'Member'.
SDV-9P	'EVV System' must support overnight shifts.
SDV-10P	'EVV System' must allow the 'System User' to document the amount of time associated with non-EVV relevant services that are delivered during an EVV service delivery period. The system must store that data, not require multiple clock-in/clock-out activity in order to account for non-EVV relevant service delivery and must not use the non-EVV relevant service time in the calculation of the units.
SDV-11P	'EVV System' must identify duplicate 'EVV Visit Transactions' and not allow transmission of the duplicate transaction to the 'EVV Aggregator'. 'EVV System' must alert the 'System User' when the duplicate is identified and allow for correction.
SDV-58P	'EVV System' must not allow the 'System User' to create a new 'EVV Visit Transaction' to replace an existing 'EVV Visit Transaction'. Instead, the 'System User' must perform 'Visit Maintenance' to make changes to the existing 'EVV Visit Transaction', as needed.
SDV-42P	'EVV System' must identify service delivery to multiple 'Members' at the same time at separate locations by the same 'Service Attendant', and not allow transmission of those transactions to the 'EVV Aggregator'. 'EVV System' must alert the 'System User' when these transactions are identified and allow for correction or attestation that the service delivery was accurate using the most appropriate 'Reason Code', if allowed by program rules. Service delivery could be occurring at the same time for these multiple 'Members' at the same location and the system capture of the service delivery must be user-friendly and efficient to reduce input by the 'Service Attendant'.

*Service Delivery (EVV Visit) Transaction Validation*

Id	Service Delivery (EVV Visit) Transaction Validation Business Rule
SDV-12P	'EVV System' must auto-verify a service delivery transaction received via approved method (except 'GUI') that matches to a previously entered 'Schedule' when applicable.
SDV-13P	'EVV System' must auto-verify a service delivery transaction received that matches Texas Medicaid EVV program criteria, in lieu of a 'Schedule', without the 'System User' performing 'Visit Maintenance'.
SDV-14P	'EVV System' must verify 'Member' profile using the client Medicaid eligibility data available at 'Accenture/TMHP' for the Texas Medicaid program prior to verifying service delivery transaction. This validation may be completed using the x12 270/271. The 'System User' must be allowed to correct errors.
SDV-55P	'EVV system' must verify payer and plan code using the Payer Plan Code web service prior to verifying service delivery transaction. The 'System User' must be allowed to correct errors. See Appendix J for details on the Payer Plan Code web service.
SDV-15P	'EVV System' must verify 'Proprietary System Operator' 'Business Unit' profile prior to verifying service delivery transaction. The 'System User' must be allowed to correct errors.
SDV-16P	'EVV System' must accept only Texas Medicaid EVV program valid 'HCPCS' (procedure codes) and modifier(s). The 'System User' must be allowed to correct errors. 'EVV System' must use the EVV Service Bill Codes Table to identify these valid codes, see Appendix B.
SDV-19P	'EVV System' must adhere to the HHSC EVV Policy Handbook in regard to 'Call Matching Window'.
SDV-49P	'EVV System' must adhere to the HHSC EVV Policy Handbook in regard to 'Optional Expanded Time for Auto-Verification' if the 'Proprietary System Operator' chooses to implement this optional 'Visit Maintenance' reduction solution.
SDV-50P	'EVV System' must adhere to the HHSC EVV Policy Handbook in regard to 'Optional Automatic Downward Adjustment' if the 'Proprietary System Operator' chooses to implement this optional 'Visit Maintenance' reduction solution.
SDV-51P	'EVV System' must adhere to the HHSC EVV Policy Handbook in regard to 'Optional Alert for Reaching Weekly Authorized Hours' if the 'Proprietary System Operator' chooses to implement this optional 'Visit Maintenance' reduction solution.

*Visit Maintenance*

Id	Visit Maintenance Business Rule
SDV-20P	'EVV System' must allow the 'System User' to complete 'Visit Maintenance' for a period of time specified in the HHSC EVV Policy Handbook. 'Visit Maintenance' outside of the specified time period may be performed only after receiving payer approval.
SDV-21P	'EVV System' must restrict the 'System User' from performing 'Visit Maintenance' on the following fields at a minimum: <ul style="list-style-type: none"> <li>• Actual service delivery date</li> <li>• Actual service delivery clock-in time</li> <li>• Actual service delivery clock-out time</li> <li>• Actual hours worked</li> <li>• Auto-populated data fields</li> <li>• 'GPS' coordinates</li> </ul>

HHSC EVV Business Rules for Proprietary Systems

Id	Visit Maintenance Business Rule
SDV-46P	'EVV System' must identify the input method as "GUI" when the clock in time for an 'EVV Visit Transaction' is missing (missed clock in) and later manually entered.
SDV-47P	'EVV System' must identify the input method as "GUI" when the clock out time for an 'EVV Visit Transaction' is missing (missed clock out) and later manually entered.
SDV-48P	'EVV System' must require entry of a 'Reason Code' when changes are made to the service delivery transaction after the 'System User'/'Service Attendant' has documented the visit.
SDV-22P	'EVV System' must record changes made to the service delivery transaction after the 'System User'/'Service Attendant' has documented the visit. The following audit trail data must be collected at a minimum: <ul style="list-style-type: none"> <li>• Data elements changed (including the before and after values)</li> <li>• Name of the 'System User' making the changes</li> <li>• Date and time the changes were made</li> <li>• 'Reason Code'(s) with associated free text</li> </ul>
SDV-56P	'EVV System' must update the last visit maintenance date in the 'EVV Visit Transaction' to the current date, whenever a change to one or more fields identified as impacting the last visit maintenance date in the HHSC EVV Policy Handbook are saved to the 'EVV Visit Transaction' after the 'System User'/'Service Attendant' has documented the visit.
SDV-23P	'EVV System' must perform comparison of data elements from original record to updated record according to Texas Medicaid EVV program criteria to confirm updates were actually made, prior to establishing the 'Visit Maintenance' date in the 'EVV Visit Transaction'.
SDV-24P	'EVV System' must re-validate service delivery details, when the 'System User' has updated the visit record, using the same validations as an initial record. Should any errors be found, the 'System User' must be alerted and errors must be corrected before the changes are transmitted to the 'EVV Aggregator'.
SDV-25P	'EVV System' must allow the 'System User' to confirm service delivery transaction after completing 'Visit Maintenance' prior to transmitting to the 'EVV Aggregator'.
SDV-26P	'EVV System' must not allow delivered/documented services to be deleted from the system. This includes instances of 'Visit Maintenance' where a 'Reason Code' has been added to an 'EVV Visit Transaction', that 'Reason Code' and associated free text must not be deleted once the 'EVV Visit Transaction' has been submitted to the 'EVV Aggregator'.
SDV-44P	'EVV System' must allow a 'CDS Employer' to designate an 'FMSA' 'Contracted or Subcontracted Provider' to perform 'Visit Maintenance' on behalf of a 'CDS Employer' associated with that 'FMSA'.
SDV-45P	'EVV System' must allow a 'CDS Employer' to designate an 'FMSA' 'Contracted or Subcontracted Provider' to perform 'Visit Approval' on behalf of a 'CDS Employer' associated with that 'FMSA'.
SDV-52P	'EVV System' must allow the 'System User' to modify billed hours by either entering bill time in and bill time out, or by directly modifying the billed hours, to reflect that actual visit hours will not be billed in full.
SDV-53P	'EVV System' must use bill time in and bill time out, when entered, to calculate billed hours in the same manner as actual service delivery time is calculated.

*Reason Codes*

<b>Id</b>	<b>Reason Codes Business Rule</b>
SDV-27P	'EVV System' must only accept valid 'Reason Codes' as defined in the Texas Medicaid EVV program documentation (HHSC EVV Reason Codes), see Appendix A.
SDV-28P	'EVV System' must allow for multiple 'Reason Codes' to be selected for a single visit.
SDV-29P	'EVV System' must allow for modification of the 'Reason Codes' following the 'Accenture/TMHP' Change Management process. Modifications may include adding new 'Reason Codes', discontinuing 'Reason Codes', changing 'Reason Code' usage guidelines, changing 'Reason Code' text.
SDV-30P	'EVV System' must capture free text/comments to allow further explanation from the 'System User' regarding the 'Visit Maintenance' reason. This free text/comments may be required when using certain 'Reason Codes'.
SDV-57P	'EVV System' must alert the 'System User' when the same 'Reason Code' number and description combination is used on a 'Member's visits for occurrences 10 through 14 during a calendar month, to notify the 'System User' that 'Reason Code' usage is approaching the limit specified in the HHSC EVV Policy Handbook.

*Transmission of Service Delivery (EVV Visit) Transactions*

<b>Id</b>	<b>Transmission of Service Delivery (EVV Visit) Transactions Business Rule</b>
SDV-31P	'EVV System' must transmit 'Confirmed EVV Visit Transactions' to the 'EVV Aggregator' in the standard format found in Appendix C.
SDV-32P	'EVV System' must transmit 'Confirmed EVV Visit Transactions' to the 'EVV Aggregator'. 'Proprietary System Operator' must ensure that 98% of initial transactions submitted to the 'EVV Aggregator' contain complete and accurate data elements and that 100% of subsequent transaction submitted to the 'EVV Aggregator' must contain complete and accurate data elements. For the purpose of this rule, "complete and accurate" is defined as no file-level errors, no field formatting errors and all required fields populated, per the EVV Visit Data Layout Edits Crosswalk, found in Appendix K.
SDV-33P	'EVV System' must process responses from 'EVV Aggregator' and alert the 'System User' to the status (acceptance or rejection) of each individual 'EVV Visit Transaction' within 24 hours of response receipt. Rejection alerts must include the reason for the rejection.
SDV-34P	'EVV System' must allow the 'System User' to correct errors in allowable data elements on the 'EVV Visit Transactions' previously submitted to the 'EVV Aggregator'. Once complete the 'EVV System' must allow the 'System User' to indicate the record is ready to be re-transmitted.
SDV-35P	'Proprietary System Operator' must collaborate with 'Accenture/TMHP' to correct any format/file errors as well as any business errors received from the 'EVV Aggregator'.
SDV-37P	'EVV System' must require 'CDS Employer' or designated 'FMSA' 'Contracted or Subcontracted Provider' to approve an 'EVV Visit Transaction' prior to export to the 'EVV Aggregator', even if the visit is 'Auto-Verified'.

## Reporting Requirements

### *Standard System Reports*

Id	Standard System Reports Business Rule
EVR-1P	<p>'Proprietary System Operator' must provide reporting to support program requirements and monitoring to the 'System User'. The following standard reports must be available on demand to the 'System User' (if applicable), see Appendix G:</p> <ul style="list-style-type: none"> <li>• EVV Attendant History Report</li> <li>• EVV CDS Service Delivery Log</li> <li>• EVV Clock-In/Clock-Out Usage Report</li> <li>• EVV Landline Phone Verification Report</li> <li>• EVV Reason Code Usage and Free Text Report</li> <li>• EVV Units of Service Summary Report</li> <li>• Non-EVV Relevant Time Logged</li> </ul>
EVR-4P	<p>'EVV System' must provide Service Delivery Exception Report to 'HHSC' monthly. The Service Delivery Exception Report must include the following data points at a minimum:</p> <ul style="list-style-type: none"> <li>• Service 'Scheduled' but not performed</li> <li>• Service performed but not 'Scheduled'</li> <li>• Service performed but not authorized</li> <li>• Service authorized but not performed</li> <li>• Service performed but not approved/confirmed</li> </ul> <p>This data must include services regardless of service delivery locations (home or community location, and 'GPS' coordinates when the mobile method is used to clock in/out).</p>
EVR-7P	All standard system reports must comply with 'Accenture/TMHP' report specifications.

## EVV Proprietary System Specifications

### *EVV Proprietary System Specifications*

Id	EVV Proprietary System Specifications Business Rule
VSS-4P	'EVV System' must create a unique profile for individual 'HHSC' and 'MCO' users.
VSS-5P	'EVV System' must provide read-only access to 'HHSC' and 'MCO' staff to view the same information that the 'System User' can access and view. 'MCO' access must be limited to view only the data of their 'Members'.
VSS-23P	'Proprietary System Operator' must maintain a mapping of Texas-specific terms to the terms visible to users in the 'EVV System' User Interface (UI). Refer to Appendix I for a list of Texas-EVV specific terms.
VSS-9P	<p>'Proprietary System Operator' must establish an Issue Resolution Process. The process must include 'Proprietary System Operator' steps to respond to and resolve any complaints or issues with product(s) or service(s) as well as Root Cause Analysis and Corrective Action ('RCCA') information. The 'RCCA' must include the following at a minimum:</p> <ul style="list-style-type: none"> <li>• steps to prevent re-occurrence</li> <li>• the number of 'Members' affected by the issue</li> <li>• impacted stakeholders including 'MCOs' and 'HHSC'</li> </ul>

Id	EVV Proprietary System Specifications Business Rule
VSS-11P	'Proprietary System Operator' must have a documented 'EVV System' change management process in place.
VSS-12P	'EVV System' must support the requirements in this "HHSC EVV Business Rules for Proprietary Systems" document in their entirety, unless a portion of a rule or an entire rule is waived by HHSC as not applicable to the 'Proprietary System Operator's current situation. If that changes in the future, the 'EVV System' will be required to support the waived portion of the rule or the entire rule, as applicable.

*Audit Trail & Quality*

Id	Audit Trail & Quality Business Rule
VSS-13P	<p>'EVV System' must maintain audit trail for all data entered and updated in the 'EVV System', including the following data at a minimum:</p> <ul style="list-style-type: none"> <li>• 'EVV Visit Transaction' data elements</li> <li>• 'Program Provider' or 'FMSA' 'Business Unit' profile</li> <li>• 'Service Attendant' profile</li> <li>• 'Member' profile</li> <li>• 'Prior Authorization/Service Authorization' data</li> <li>• Service 'Schedule', if applicable</li> <li>• 'System User' credentials</li> </ul>

*System Security*

Id	System Security Business Rule
VSS-16P	'Proprietary System Operator' must give users secure access to the 'EVV System' in a way that creates unique login credentials which allows for the identification of users accessing the 'EVV System'.
VSS-18P	'EVV System' must comply with the Health Insurance Portability and Accountability Act (HIPAA) related to physical security and privacy. 'Proprietary System Operator' must notify 'HHSC' within 24 hours of any privacy breach or suspected breach.
VSS-19P	'EVV System' must meet secure data standards, especially those related to Confidential and Personal Information to protect it from unauthorized access, use, or disclosure. 'Proprietary System Operator' must notify 'HHSC' of any breach or suspected breach and follow up with a 'RCCA'.

**Operational Readiness**

*Proprietary System Operator Testing/Preparedness*

Id	Proprietary System Operator Testing/Preparedness Business Rule
OPR-1P	'EVV System' must successfully execute a validation process conducted by 'HHSC' to confirm adherence to guidelines included in this document prior to participation in the Texas Medicaid EVV program.

## HHSC EVV Business Rules for Proprietary Systems

Id	Proprietary System Operator Testing/Preparedness Business Rule
OPR-2P	'EVV System' must conduct and successfully execute Trading Partner Testing process with 'Accenture/TMHP' and the 'EVV Aggregator' prior to implementing any system modification impacting these entities.

## Glossary

The terms defined in this glossary, when used in this document, have the following meanings.

Acronym/Term	Definition
Accenture/TMHP	The Texas Medicaid & Healthcare Partnership (TMHP) is a group of contractors under the leadership of Accenture. Accenture administers Texas Medicaid and other state health-care programs on behalf of the Texas Health and Human Services Commission.
Auto-Verified	EVV visits that match the planned 'Schedule' and have no exceptions.
Business Unit	A distinct entity within a 'Program Provider' or 'FMSA', as identified by a unique National Provider Identifier (NPI) or Atypical Provider Identifier (API), that will submit 'EVV Visit Transactions' to the 'EVV Aggregator'.
Call Matching Window	A visit maintenance reduction solution whereby an allowable span of time within which a clock-in/clock-out can occur and still be considered a match to the 'Schedule', therefore not creating an alert to the 'System User'.
CDS	Consumer Directed Services. A service delivery option in which a 'Member' or 'Legally Authorized Representative' employs and retains service providers and directs the delivery of program services. This is an option given to 'Members' to coordinate their Texas Medicaid program services.
CDS Employee	A 'Service Attendant' age 18 years or older who meets eligibility requirements of the 'Member's program, is not prohibited by relationship from being a 'CDS Employee' and delivers services to the 'Member' as directed by the 'CDS Employer'.
CDS Employer	An adult 'Member' with no legally appointed guardian who is receiving services; or the parent or guardian of a minor 'Member', the 'Legally Authorized Representative' (LAR) of a 'Member', or a foster parent authorized by DFPS to be the 'CDS Employer', who coordinates the 'Member's services within the Texas Medicaid program.
Confirmed EVV Visit Transaction	An 'EVV Visit Transaction' to which visit maintenance was completed or otherwise verified.
Contracted Provider	A provider that is contracted by the State of Texas to provide Fee For Service (FFS) EVV services in Texas.
Designated Representative (DR)	A willing adult the 'CDS Employer' chooses to act as the primary contact and decision-maker for the 'CDS Employer' through the 'CDS' option, however the employer still retains responsibility for 'CDS' requirements.
Electronic Visit Verification (EVV)	Documentation and verification of service delivery to a 'Member' through an 'EVV System'.
Enrolled Provider	A provider that is enrolled by the State to provide Acute Care EVV services in Texas.
EVV Aggregator	A centralized database that collects, validates, and stores statewide EVV visit data transmitted by the 'EVV System'(s).
EVV Proprietary System	An 'HHSC'-approved 'EVV System' that a 'Program Provider' or 'FMSA' may opt to use instead of an EVV vendor system that: (A) is purchased or developed by a 'Program Provider' or



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Acronym/Term	Definition
	<p>‘FMSA’;                      (B) is used to exchange EVV information with ‘HHSC’ or an ‘MCO’; and                      (C) complies with the requirements of Texas Government Code §531.024172 or its successors.</p>
EVV System	<p>‘Electronic Visit Verification’ system that:                      (A) allows a service provider to electronically report:                      (i) the service recipient's identity;                      (ii) the service provider's identity;                      (iii) the date and time the service provider begins and ends the delivery of services;                      (iv) the location of service delivery; and                      (v) tasks performed by the service provider                      The system includes applications and tools used to clock in/clock out such as toll-free numbers, interactive voice response applications, mobile methods, and web applications. The system also includes mechanisms to perform ‘Visit Maintenance’ and interact with the ‘EVV Aggregator’.</p>
EVV Visit Transaction	<p>A complete, verified visit consisting of all required data elements (visit data and identification data) needed to verify a service delivery visit.</p> <p>EVV Visit Transactions can receive any of the following statuses:</p> <ul style="list-style-type: none"> <li>• Unsubmitted – visit that has been received by the ‘EVV System’ but has not yet been transmitted to the ‘EVV Aggregator’.</li> <li>• Submitted – visit that has been received by the ‘EVV System’ and transmitted to the ‘EVV Aggregator’ but which has not yet received a response from the ‘EVV Aggregator’.</li> <li>• Accepted – visit that has been submitted to the ‘EVV Aggregator’ from an ‘HHSC’-approved ‘EVV System’ and has successfully passed the ‘EVV Aggregator’ validation edits.</li> <li>• Rejected – visit that is submitted to the ‘EVV Aggregator’ from an ‘HHSC’-approved ‘EVV System’ that was not accepted because it did not pass the ‘EVV Aggregator’ validation edits.</li> </ul>
FMSA	Financial Management Services Agency is an entity that contracts with ‘HHSC’ or an ‘MCO’ to provide financial management services to a ‘Member’, ‘CDS Employer’ or ‘Designated Representative’.
Geo-Location	Physical location as determined by the ‘GPS’ (latitude/longitude) coordinates.
GPS	Global Positioning System
GUI	A term used in the Texas Medicaid EVV program to identify manually entered ‘EVV Visit Transactions’ using an ‘EVV System’.
HCPCS	Healthcare Common Procedure Coding System is a set of health care procedure codes based on the American Medical Association's Current Procedural Terminology (CPT).
HHSC	Texas Health and Human Services Commission. When used in this

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Acronym/Term	Definition
	document, the term also refers to HHSC's designees, identified by HHSC as needed, on a case by case basis.
Legally Authorized Representative (LAR)	A natural parent, legal/adopted parent, stepparent and/or a court-appointed guardian of a 'Member', or the legally appointed guardian of a 'Member' of any age.
MCO	Managed Care Organization. An entity that contracts with the State of Texas to provide health benefits and additional services and accepts a set capitation payment per 'Member', per month, for such services.
Member	A person enrolled in Medicaid FFS (Individual) or 'MCO' (Member) and receiving services through Texas Medicaid.
Optional Alert for Reaching Weekly Authorized Hours	A 'Visit Maintenance' reduction solution to notify the 'System User' when the 'Member's' authorized hours are close to being reached for the week.
Optional Automatic Downward Adjustment	A 'Visit Maintenance' reduction solution whereby the pay hours can be adjusted downwards to match the planned scheduled hours so the visit can still be considered a match to the 'Schedule', therefore not creating an alert to the 'System User'.
Optional Expanded Time for Auto-Verification	A 'Visit Maintenance' reduction solution whereby the auto-verified timeframe is expanded so the visit can still be considered a match to the 'Schedule', therefore not creating an alert to the 'System User'.
Pending Visit	An 'EVV Visit Transaction' that has not been confirmed and not submitted to the 'EVV Aggregator'.
Prior Authorization/Service Authorization	Documentation of a service authorized for a 'Member', the authorized units for the service, the provider authorized to provide the service, and the effective dates during which the service is authorized.
Program Provider	An 'Enrolled, Contracted, or Subcontracted Provider' required to use 'EVV' in Texas.
Proprietary System Operator	A 'Program Provider' or 'FMSA' that uses an 'EVV Proprietary System' to meet HHSC EVV Business Rules for Proprietary Systems.
RCCA	Root Cause Analysis and Corrective Action (RCCA) is a process where an incident or deficiency is reviewed and analyzed to determine root cause. Corrective action defines the actions put in place to prevent re-occurrence.
Reason Code	A standardized, 'HHSC'-approved three-digit number and description used during 'Visit Maintenance' to explain the specific reason for a change that was made to an EVV visit record.
Schedule	Planned time when the service delivery (EVV visit) is to occur.
Service Attendant	The person delivering services directly to the 'Member'.
Subcontracted Provider	A provider that is contracted by an 'Enrolled or Contracted Provider' to provide EVV services in Texas.
System User	A 'Program Provider' or 'FMSA' individual, or 'CDS Employer' required to interact with the 'EVV System'.
Texas EVV Service Attendant Identification Number	A unique identifier generated by the 'EVV System' for 'Service Attendants'. The number should be the last 4 digits of the 'Service Attendant's' SSN or passport number plus 'Service Attendant's' last name.
Visit Approval	The process by which the 'System User' confirms that all the

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Acronym/Term	Definition
	service delivery EVV visit information is accurate.
Visit Maintenance	The process by which the 'System User' can make adjustments in an 'EVV System' to certain data elements that electronically document service delivery EVV visit information.

## Appendices

**Note:** If clicking an appendix link will not open the document (PDF), copy and paste the link directly into your Internet browser instead.

### *Appendix A – HHSC EVV Reason Codes*

<https://hhs.texas.gov/doing-business-hhs/provider-portals/long-term-care-providers/resources/electronic-visit-verification#reason-codes>

### *Appendix B – EVV Service Bill Codes Table*

<https://hhs.texas.gov/doing-business-hhs/provider-portals/long-term-care-providers/resources/electronic-visit-verification#service-bill-codes-table>

### *Appendix C – EVV Visit Transaction File*

[http://www.tmhp.com/TMHP\\_File\\_Library/EVV/Appendix C – EVV Visit Transaction File.pdf](http://www.tmhp.com/TMHP_File_Library/EVV/Appendix_C_-_EVV_Visit_Transaction_File.pdf)

### *Appendix D – EVV Master Provider Web Service*

[http://www.tmhp.com/TMHP\\_File\\_Library/EVV/Appendix D – EVV Master Provider Web Service.pdf](http://www.tmhp.com/TMHP_File_Library/EVV/Appendix_D_-_EVV_Master_Provider_Web_Service.pdf)

### *Appendix E – x12 270/271*

Long Term Care:

<http://www.tmhp.com/EDI%20Companion%20Guides/Long%20Term%20Care/Version%205010/270-271%20Long%20Term%20Care%20Companion%20Guide.pdf>

Acute Care:

<http://www.tmhp.com/EDI%20Companion%20Guides/Acute%20Care/Version%205010/270-271%20Acute%20Care%20Companion%20Guide.pdf>

### *Appendix F – EVV Prior Authorization File*

[http://www.tmhp.com/TMHP\\_File\\_Library/EVV/Appendix F – EVV Prior Authorization File.pdf](http://www.tmhp.com/TMHP_File_Library/EVV/Appendix_F_-_EVV_Prior_Authorization_File.pdf)

### *Appendix G – EVV Standard Reports*

[http://www.tmhp.com/TMHP\\_File\\_Library/EVV/Appendix G – EVV Standard Reports.pdf](http://www.tmhp.com/TMHP_File_Library/EVV/Appendix_G_-_EVV_Standard_Reports.pdf)

### *Appendix H – Mobile Method Community Locations*

[http://www.tmhp.com/TMHP\\_File\\_Library/EVV/Appendix H – Mobile Method Community Locations.pdf](http://www.tmhp.com/TMHP_File_Library/EVV/Appendix_H_-_Mobile_Method_Community_Locations.pdf)

*Appendix I – Texas-EVV Specific Terms*

[http://www.tmhp.com/TMHP File Library/EVV/Appendix I – Texas-EVV Specific Terms.pdf](http://www.tmhp.com/TMHP_File_Library/EVV/Appendix%20I%20-%20Texas-EVV%20Specific%20Terms.pdf)

*Appendix J – Payer Plan Code Web Service*

[http://www.tmhp.com/TMHP File Library/EVV/Appendix J - Payer Plan Code Web Service.pdf](http://www.tmhp.com/TMHP_File_Library/EVV/Appendix%20J%20-%20Payer%20Plan%20Code%20Web%20Service.pdf)

*Appendix K – EVV Visit Data Layout Edits Crosswalk*

[http://www.tmhp.com/TMHP File Library/EVV/Appendix K - EVV Visit Data Layout Edits Crosswalk.pdf](http://www.tmhp.com/TMHP_File_Library/EVV/Appendix%20K%20-%20EVV%20Visit%20Data%20Layout%20Edits%20Crosswalk.pdf)

## Document Revision History

Version	Date	Responsible Party	Description
0.4	4/03/2019	HHSC	HHSC's internal draft, shared with TMHP.
0.5	4/11/2019	HHSC	Updated to include only the vendor pool EVV business rules (from v6.0, dated 4/01/19) that HHSC and TMHP agreed are applicable to proprietary systems.
0.6	4/29/2019	HHSC	Updated based on HHSC and TMHP feedback, and to account for the Prior Authorization Pilot being reduced in scope to Fee For Service only, rather than being ended (as originally planned) as of 6/01/19.
0.7	6/24/2019	HHSC	Final document cleanup.
0.8	10/22/2019	HHSC	Updates to mirror changes proposed in next draft version of the vendor pool rules.
0.91	11/08/2019	HHSC	Updates to mirror changes included in version 7.0 of the vendor pool EVV business rules, update links in the appendices, and include the EVV Master Provider Web Service and associated business rules.
0.92	1/15/2020	HHSC	Updates to replace all tables and lists in the appendices with publicly accessible links; add column headings to all tables (for accessibility); add/update business rules based on PS Workgroup feedback and lessons learned during vendor system rollout.
0.93	1/15/2020	HHSC	Clean copy for final review.
0.94	1/28/2020	HHSC	Rebranded from "Accenture/TMHP" to "TMHP" (title page logo change only) and added links to the appendix documents on TMHP.com.
1.0	1/31/2020	HHSC	Published version.