PSO Detailed Questionnaire

Effective Date: 2/17/2020

1.0 Introduction

The purpose of this Proprietary System (PS) Detailed Questionnaire is for the Proprietary System Operator (PSO) to provide details about their business and their Electronic Visit Verification (EVV) system to determine if any of the HHSC EVV Business Rules for Proprietary Systems will be waived by Health and Human Services Commission (HHSC) for development, readiness review and implementation.

2.0 Proprietary System Detailed Questionnaire

Proprietary System Background

Question 1a: Your EVV Proprietary Systems Request Form indicates you will be using a software company for your Proprietary System. Please confirm.

PSO Response:

Question 1b: Your EVV Proprietary System Request Form indicates you will be developing an "in-house" Proprietary System. Please confirm.

PSO Response:

Question 2a: Please provide more information about the software company, type of vendor, system version/model, type of customization needed, and if you purchased or leased the system.

PSO Response:

Question 2b: Please provide more information about the 'in house' to be developed (such as, is it an outsourced vendor developed solution or in-house IT department), technology platform, and system location.

PSO Response:

Question 3: How would HHSC or a managed care organization (MCO) receive training on the EVV system?

PSO Response:

Provider Operations Background

Question 4: How many service attendants do you have that currently use EVV, and separately, how many service attendants will be new to using EVV due to the Cures Act?

PSO Response:

Question 5: Do you utilize a subcontractor to perform any of your EVV services (and are they enrolled with the Texas Medicaid & Healthcare Partnership [TMHP]?)

PSO Response:

Question 6: Do you create schedules for any of your members receiving EVV services?

PSO Response:

Question 7: Do your attendants perform non-EVV services with their EVV services?

PSO Response:

Question 8: If you use schedules, do you plan to use the "Optional Expanded Time for Auto-Verification" visit maintenance reduction solution per the HHSC EVV Policy Handbook?

PSO Response:

Question 9: If you use schedules, do you plan to use the "Optional Automatic Downward Adjustment" visit maintenance reduction solution per the HHSC EVV Policy Handbook?

PSO Response:

Question 10: If you use schedules, do you plan to use the "Optional Alert for Reaching Weekly Authorized Hours" visit maintenance reduction solution per the HHSC EVV Policy Handbook?

PSO Response:

Provider Type/Clients Supported

Question 11: Do you provide long-term care EVV services where HHSC is the payer as fee-for-service (FFS)?

PSO Response:

Question 12: Do you provide acute care where HHSC is the payer as fee-for-service (FFS)?

PSO Response:

Question 13: Do you provide services where an MCO is the payer as Medicaid Managed Care (STAR+PLUS, STAR Kids, STAR Health)?

PSO Response:

Question 14: Do you provide services to people who are enrolled in Medicaid Managed Care, and are also receiving services under HHSC FFS?

PSO Response:

Question 15: Are you a managed care organization (MCO)-only enrolled program provider?

PSO Response:

Question 16: Please indicate which programs you participate in (please respond with "Yes" or "No").

PSO Response:

1. STAR Health:
2. STAR Health MDCP:
3. STAR Kids:
4. STAR Kids MDCP:
5. STAR+PLUS:
6. STAR+PLUS Medicare-Medicaid Plan:
7. STAR+PLUS Home and Community Based Services:
8. AMH:
9. CAS/FC/PHC:
10. CFC:
11. CLASS:

12. DBMD:
13. HCS:
14. PCS:
15. TxHmL:
16. YES:

Proprietary System Verification Methods

Question 17: Will your attendants use a member's home landline to collect EVV data at the time of service delivery?

PSO Response:

Question 18: Will your attendants use an alternative method/device to collect EVV data at the time of service delivery?

PSO Response:

Question 19: Will your attendants use a mobile method via Global Positioning System (GPS) coordinates to collect EVV data at the time of service delivery?

PSO Response:

Question 20: Will your attendants be limited in the electronic verification methods they can use for collecting EVV data at the time of service delivery, or can they use multiple methods?

PSO Response:

Technology

Question 21: Do you currently have a submitter ID with TMHP and perform electronic eligibility verification? If so, please provide your submitter ID below.

PSO Response:

Question 22: How do you perform electronic eligibility verification with TMHP (i.e., X12 270/271 or TMHP Portal)?

PSO Response:

Question 23: How often does your system plan to transmit visit data to the EVV Aggregator?

PSO Response:

Consumer Directed Services (CDS)

Question 24: Do you deliver services to individuals who participate in the Consumer Directed Service option within their enrolled program?

PSO Response:

Question 25: Are you a financial management services agency (FMSA)?

PSO Response:

Question 26: Are you a Provider Agency?

PSO Response:

Other

Question 27: Do you use the following methods and/or systems to submit your EVV claims (please respond with "Yes" or "No")?

PSO Response:

1. Paper claim submission

2. TMHP TexMedConnect Acute Care FFS Portal

3. TMHP TexMedConnect Long-Term Care FFS Portal

4. TMHP Electronic Data Interchange (EDI)

5. In-house electronic claims submission

6. HHSC ID CARE

7. Clearinghouse or third-party submitter (list the name of the vendor and system)

   a.

8. Medicaid Managed Care online portals (list all MCOs)

  a.

Question 28: Please list all your identifiers that will utilize this EVV proprietary system:

PSO Response (please repeat the responses for each identifier and mark "N/A" if not applicable):
  National Provider Identifier (NPI) or Atypical Provider Identifier (API):
  Doing Business As (DBA) Name:
  Taxpayer Identification Number (TIN):
  TPI (list multiple if needed):
  Provider Contract Number (list multiple if needed):

3.0 Document Change Log

Revision History

Version	Date MM/DD/YYYY	Name	Description