

Date: September 15, 2021

DDSD-SW Numbered Memo 2021-03

DDSD- DDW Numbered Memo 2021-08

To: DD Waiver and Supports Waiver agency-based providers of Electronic Visit Verification (EVV) services and Interested Parties.

From: Jason Cornwell, DDSD Director

CC: Marie Velasco, DD Waiver Manager, Jennifer Roth Supports Waiver Manager 

Re: Readiness for claims processing changes in Phase 2 Implementation of Electronic Visit Verification (EVV)

Electronic Visit Verification (EVV) for Personal Care Services (PCS) is a federal requirement under the 21st Century Cures Act. All providers are required to comply with all EVV requirements and use AuthentiCare[®], the state selected EVV vendor, for EVV required services.

As part of the EVV Phase 2 Implementation, New Mexico Medicaid will implement changes to how fee-for services (FFS) EVV claims are billed. Today, agencies have the option of submitting claims directly to the Medicaid Management Information System (MMIS) via the Medicaid Portal or Electronic Data interchange (ED). During Phase 2, AuthentiCare[®] will be responsible for generating and submitting claims for payment for all FFS EVV services directly to MMIS. Once the new billing process is in place if a provider (or their billing agent) submits a claim for an EVV required service the MMIS will deny the claim and the portal will reject it.

As a reminder, Supports Waiver and DD Waiver Services requiring EVV include:

Name	Description	Procedure Code/Modifier(s)
Supports Waiver Respite	Supports Waiver Respite	T1005
Supports Waiver Personal Care	Supports Waiver Personal Care	99509
DDW CIHS-IND	DD Waiver Customized In-Home Supports - Independent Living	S5125/HB/UA
DDW CIHS-F N	DD Waiver Customized In-Home Supports - Family Natural Supports	S5125/HB
DDW Respite-GP	DD Waiver Respite-Group	T1005/HB/HQ
DD Waiver Respite	DDW Respite	T1005/HB

This memo details steps providers may take now to increase competence using AuthentiCare®. The following is intended to help providers ensure readiness for changes to the billing process during Phase 2 implementation of EVV.

1. Agency EVV administrators and billers should plan to attend AuthentiCare® training. Information on when and how to register for AuthentiCare® training is provided in the *Weekly EVV and Transition Newsletters*. Past newsletters are available on the NM Medicaid Portal under provider information at:
<https://nmmedicaid.portal.conduent.com/static/ProviderInformation.htm#Palco-Welcome>.
2. Complete the **EVV Phase 2 Readiness: Provider Assessment** at this link by October 30, 2021: <https://www.surveymonkey.com/r/Q5B532P>. The tool is intended to help agencies assess their readiness for Phase 2 and to identify areas the agency may work on now to help prepare for upcoming changes. Completing this tool takes just a few minutes and provides agencies immediate feedback about their level of readiness including a checklist that identifies areas the agency can work on to avoid claims processing issues processing in Phase 2. The tool will also help DDS identify provider needs for assistance or additional training.
3. Ensure your agency captures and maintains accurate and complete information within the AuthentiCare® system for all EVV required services provided, and claims submitted for payment, during Phase 1 of EVV implementation and ongoing.
 - a) When a claim is missed by an employee through the IVR or mobile app, the agency must create a web claim or complete an incomplete claim. Information about how to do this can be found in the AuthentiCare® Manual on the PALCO New Mexico Website. See [Agency AuthentiCare User Guide \(palcofirst.com\)](#).
 - b) Web claims entered in AuthentiCare® should include, in the notes section of the claim, one of the following reasons that a web claim was created:
 - Device malfunction
 - Landline/IVR unavailable
 - Authorization Issue
 - Inclement weather
 - Electrical Outage
 - Transition period (First 90-days after billing go-live or new agency onboarding after EVV implementation)
 - *Worker Issue
 - *Admin Issue