EVV Provider Forum

October 9, 2025

Delaware Division of Medicaid and Medical Services

Agenda

- Hard Edit
- Troubleshooting
- Reminders
- Rounding Rules
- Q & A

Hard Edit Date

- The hard edit has been moved to March 31, 2026. Claims for services subject to EVV with a date of service 3/31/26 or later that fail matching to visit data will be denied.

- Messages indicating mismatches are posted on RAs.

- Work with the MCOs directly to address issues.

Instructions for Obtaining Member Medicaid ID

Providers **must use the member's Medicaid ID (MID) as the identifier** in the Sandata EVV system. This number is also a required data element in the alternate EVV vendor visit file. Providers can obtain this number in a variety of ways as described below.

- **Members Medicaid/MCO Card —** The member's Medicaid/MCO card will contain both the MCO assigned ID and the MID.

- **Call the Automated Voice Response System (AVRS) —** Call 1.800.999.3371 option 1. The following will be needed for the call:
  - NPI
  - PIN (last 4 of Tax ID or SSN — if individual)
  - Taxonomy
  - Zip Code that matches what is in DMES

- **Contact the MCO with whom the member is enrolled**

Instructions for Obtaining Member Medicaid ID

- Search on the DMES provider portal— In order to use the portal, providers must first register. You register using your MCDID and PIN (last 4 of Tax ID or SSN — if individual). Once registered, providers have access to the secure portal where eligibility can be verified. Providers can also create delegates to work on your behalf. Delegate access can be limited to verifying eligibility only. Each delegate would register with their own account based on the creation of the delegate account by the provider. Below is a link to instructions on how to verify eligibility on the portal: https://medicaidpublications.dhss.delaware.gov/docs/search?Command=Core_Download&EntryId=566

Trouble Shooting-Visit and Claim Mismatches

1. Log into the Sandata aggregator to check the status of visits in the Sandata system.
   a. If no visit is recorded in the aggregator for this date of service confirm the following:
      i. Worker provided service as claimed
      ii. Worker signed in/out of visit using your alt EVV system
      iii. Your alt EVV system, recorded the visit data
      iv. Your alt EVV system, sent the visit data to the Sandata aggregator
         1. If the answer to any of these questions are no, you must resolve the identified issue with the visit in your alternative EVV system and then resubmit the visit to Sandata.
   b. The visit should be in a verified status. If the visit is in a verified status go to Step 2.
   c. If the visits are not in a verified status, there is an issue with the visit data that needs to be corrected.
   d. Corrections to visit data must be completed in your alternate EVV system and sent to Sandata. Once the visit is corrected, resubmit claim.

Trouble Shooting-Visit and Claim Mismatches

2. Compare the visit data to the claim and review for accuracy.
    a. If the visit data reflects a visit on that date of service, for the member, by your provider agency, that is equal to or less than the units billed, then the claim will pay.
        i. If your claim reflects this but you received a RA message it could be that you broke a fundamental requirement for EVV claims. Span Billing.
            1. Claims for services subject must be broken out into separate claim detail lines. You can no longer put more than one date of service on a claim detail line, or the claim will deny.
    b. If the visit data reflects a visit on the date of service, for the member, by your provider agency, that is more than the units billed, then the claim will deny.
    c. In this, you need to determine if the visit record or claim is correct and adjust the other documentation as needed.
        i. If you determine that the visit data requires modification, make the change in your alternative EVV system and resubmit visit data to Sandata; or
        ii. If you determine the claim requires modification, please adjust the claim and resubmit to the appropriate payer (DMES for FFS, MCO for Managed Care)

Trouble Shooting-Visit and Claim Mismatches

Step 1: Log into the Sandata aggregator

- Check visit status.
    - Incomplete means there is an issue with the data. Red dots identify missing information (update in Alt EVV system and resubmit)

Service		Visit Date	Scheduled Time In	Scheduled Time Out	Scheduled Hrs	Call In	Call Out	Call Hours	Adjusted In	Adjusted Out	Adjusted Hours	Bill Hours	Visit Status	Do Not Bill
\CDE Attendant Care - Self-Directed		04/05/2025	11:30 AM	10:00 PM	10:30	11:00 AM	●		11:00 AM				Incomplete	☐
\CDE Attendant Care - Self-Directed		04/04/2025	07:00 AM	03:00 PM	08:00	06:55 AM	●		06:55 AM				Incomplete	☐

- Verified status means there are no issues with the visit data.
- Processed status means a claim has matched against the visit data

Rounding Rules

- Be sure your Alternate EVV vendor applies NO rounding rules to data
  - Some alternate EVV vendor systems are configured to apply rounding rules to clock in and clock out times. Providers should confirm their vendor applies no rounding rules to data.

Reminders

- Submit visit data as quickly as possible
- Claims for services subject to EVV must still go through all "typical" claim edits in addition to the EVV edits.
  - Just because a claim passes EVV edits does not guarantee payment.
- TU modifier should aways be placed in the last position
- Use CG modifier on claims for visits that do not require EVV.
  - Examples: EVV services that are provided by live-in caregivers
  - CG should always be placed in the first position

No Span Billing

- Claims for EVV services must list each date of service on a separate claim detail line.

- If a caregiver provided the same services daily from Monday to Friday, each day must appear on a separate claim detail line.

- All five days can be billed on the same claim, but each date of service must be on a separate claim detail line.

Span Billing Change to Daily Billing

The example below illustrates the change from Span Billing to Daily Billing

Individual received 2 hours of service a day (8 units) from 1/4/2023 to 1/8/2023.

SPAN BILLING			
DATE	CODE	Units	COST
1/4/2023 to 1/8/2023	T1019	40	$150.00

DAILY BILLING			
DATE	CODE	Units	COST
1/4/2023	T1019	8	$30.00
1/5/2023	T1019	8	$30.00
1/6/2023	T1019	8	$30.00
1/7/2023	T1019	8	$30.00
1/8/2023	T1019	8	$30.00

EVV Claims
Multiple Visits on Same Day

a. Multiple visits for the same service on the same date of service must be included on the same claim line.

- For example, the individual receives 1 hour (4 units) of service 3 x a day.

DAILY BILLING (Multiple Visits in Same Day)			
DATE	CODE	Units	COST
1/4/2023	T1019	12	$45.00

Registering New MCDIDs

- If you have a change of address, you must register a new MCDID with the new service location.

- Providers must register with taxonomies that align with their licensure/certification type.
  - Agencies that are not licensed to provide skilled services (nursing, skilled rehab therapies) may not register with skilled taxonomies.

HHAeXchange recommends use of the Chrome browser

Additional Questions and Information

- Sandata/HHAeXchange Customer Service:
  - Sandata users: 1.833.542.2603 or decustomercare@sandata.com.
  - Alternate EVV system users: DEaltevv@sandata.com.
- When emailing Sandata/HHAeXchange, include Agency Name, STX, and "Delaware" in the subject line.
- In body of the email: Agency Name, Medicaid ID, Email Address, Vendor Name, Vendor Contact, Vendor email address and a brief description of the issue.
- Include screenshots, if applicable.

Additional Questions and Information

- DMMA email: DHSS_DMMA_EVV@delaware.gov

- DMMA website: https://dhss.delaware.gov/dmma/info_stats.html

- ACDE email: EVV_Provider_Notification@amerihealthcaritasde.com

  - Rahneesha Redd: rredd@amerihealthcaritasde.com

- DEFH email: EVVProviderCommunication@delawarefirsthealth.com

  - Beau Thompson: William.thompson@delawarefirsthealth.com

Additional Questions and Information

- HHO email: EVVProviderCommunication@highmark.com
  - Skilled providers from all counties can contact Santana Mechtenberg: Santana.mechtenberg@highmark.com
  - Unskilled providers from New Castle County can contact Christina Hales at Christina.hales@highmark.com
  - Unskilled providers from Kent and Sussex County can contact Sarah Pearson at Sarah.pearson@highmark.com
  - Hospital Agencies from all counties can contact Desiree Charest at desiree.charest@highmark.com

Q&A/Wrap Up