

DDSD ELECTRONIC VISIT VERIFICATION GUIDANCE FOR DEVELOPMENTAL DISABILITIES SERVICES

STATE OF VERMONT
DEPARTMENT OF DISABILITIES, AGING AND INDEPENDENT LIVING
DEVELOPMENTAL DISABILITIES SERVICES DIVISION

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Revisions

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General Information

Electronic Visit Verification (EVV) is a telephone and computer-based system that records specific information about the services provided to Medicaid members who get specific personal care and residential care services. In accordance with the Cures Act, Vermont's Medicaid EVV system collects the following information:

1. Service Details
2. Person Receiving the Visit
3. Date of the Visit
4. Location of Visit Delivery
5. Person Providing the Visit
6. Time the Visit Begins and Ends

In Scope Services

EVV is *required* for residential care services that are provided inside the care recipient's home by a provider that is *not a live in caregiver*. Live in caregivers are defined as care providers that live in the same residence or dwelling as the care recipient. When the residential care service is provided inside the care recipients home by a non-live-in care provider, EVV is required for the following services:

1. **S5135 Supervised Living** (MMIS service description-Companion Services)
2. **S5150 Respite Supports; per 15 minutes** (MMIS service description-Unskilled respite care, not hospice; per 15 minutes)
3. **S5151 Respite Supports; daily** (MMIS service description- Unskilled respite care, not hospice; per diem)
4. **T2017 In-home Family Supports** (MMIS service description-Habilitation, residential; waiver; 15 minutes)
5. **T2017 Shared Living Hourly Supports** (MMIS service description-Habilitation, residential; waiver; 15 minutes)

Services Not in Scope for EVV

EVV is *not required* for residential care services that are provided outside the care recipient's home.

EVV is also *not required* for residential care services that are provided in the home by a *live in care giver*. For these situations, claims require modifiers to identify they are exempt:

1. **KX** – Use this modifier when the residential care service is provided outside the person's home to indicate service is *not* in EVV scope
2. **CG**-Use this modifier when the service is provided by the live in care giver to indicate the service is *not* in EVV scope.

When the out-of-scope service is delivered by *agency managed staff* it is the responsibility of the agency to apply the KX or CG modifier to the claim. When the out-of-scope service is delivered by *non-agency managed staff* (e.g., services paid via the fiscal/employer agent), it is the responsibility of the employer of record (EOR) to ensure that the F/EA timesheets indicate EVV is not required. The F/EA will code claims in the 837 file with the appropriate modifier to indicate the service was out of scope for EVV.

Match Logic

EVV Systems are configured to match an EVV claim with a CMS 1500 claim based on the following specifications:

1. The provider listed on the claim must be on a list of EVV providers
2. The residential service/modifier code is on a list of EVV services
3. The date of service on the EVV claim must match the date of service on the CMS 1500 claim
4. The recipient Medicaid unique ID

Once submitted, the encounter claim finds an EVV visit where the service, date of service, recipient, and provider matches. This verifies the in-scope EVV service was provided and completes the process.

Denials

EVV encounter claims that do not have a matching EVV claim will deny. EVV encounter claims are subject to the same processing rules as Medicaid claims. The billing provider on the claim will receive a report that includes EVV denials. For more specific information about denied claims, adjustment requests, and timely filing see section 3 of the [Vermont Medicaid Provider Manual \(vtmedicaid.com\)](https://www.vtmedicaid.com)

Reconciliation

This section will be updated to reflect the future reconciliation/recoupment process for denied EVV encounter claims.

Resources

6. For more information about EVV:

[Electronic Visit Verification \(EVV\) | Department of Vermont Health Access](#)

7. For Encounter Data Guidance:

[DDSD Encounter Data submission guidance \(vermont.gov\)](#)

8. For General Vt Medicaid Billing:

9. [Vermont Medicaid Provider Manual \(vtmedicaid.com\)](#)

The additional information in this document is related specifically to Home and Community Based Services (HCBS) that are in scope for EVV as described above.

Appendix A: Reportable & Non-Reportable Actions

HCBS Service	Reportable Actions	Non-Reportable Actions (for agency- staffed or contracted services paid through the agency)	Non-Reportable Actions (for services paid through ARIS)
Supervised Living (S5135)	<p>Direct service in accordance with the limitations and service definition (below) provided face to face with an individual. Travel time with the person. Services in and about the person’s residence. Data collection or progress notes while delivering direct service. Receipt of direct supervision and training while providing direct service with person present.</p> <p>May be provided 1:1, 2:1 or 1:2. Support in the community is allowable.</p>	<ul style="list-style-type: none"> • Travel time (without the person) • Paperwork/record keeping without person present • Receiving training without person present • Receiving supervision without person present • More than one staff reporting encounter data for same hours for the purpose of a staff person training another staff person 	<ul style="list-style-type: none"> • Travel time (without the person) • Paperwork/record keeping without person present • Receiving training without person present • Receiving supervision without person present • More than one staff reporting encounter data for same hours for the purpose of a staff person training another staff person • Completion of other employer required non-direct service tasks

HCBS Service	Reportable Actions	Non-Reportable Actions (for agency- staffed or contracted services paid through the agency)	Non-Reportable Actions (for services paid through ARIS)
	<p>Service definition: Supervised Living are regularly scheduled, or intermittent hourly supports provided to an individual who lives in his or her own home or apartment. Supports are provided on a less than full time (not 24/7) schedule.</p>	<ul style="list-style-type: none"> • Completion of other employer required non-direct service tasks • Attending ISA meetings • Staff paid time off • Not for people living with their family in their family's home (See in-home family supports - T2017). 	<ul style="list-style-type: none"> • Attending ISA meetings without the person present • Employee paid time off <p>Not for people living with their family in their family's home (See in-home family supports - T2017).</p>
Respite, per 15 minutes (S5150)	Direct service in accordance with the limitations and service definition in the System of Care Plan (below) provided to an individual on a 1:1 or 2:1 basis or	<ul style="list-style-type: none"> • Travel time (without the person) • Paperwork/record keeping without person present 	<ul style="list-style-type: none"> • Travel time (without the person) • Paperwork/record keeping without person present

HCBS Service	Reportable Actions	Non-Reportable Actions (for agency- staffed or contracted services paid through the agency)	Non-Reportable Actions (for services paid through ARIS)
	<p>small group of 2-3 individuals. Data collection or progress notes while delivering direct service. Staff receipt of direct supervision and training while providing direct service with person present.</p> <p>Service Definition: Respite Supports per 15 minutes) means (alternative caregiving arrangements for family members or home providers/foster families and the individual being supported, on an intermittent or time limited basis, because of the absence of or need for relief of those persons normally providing the care to the individual, when the individual</p>	<ul style="list-style-type: none"> ● Receiving training without person present ● Receiving supervision without person present ● More than one staff reporting encounter data for same hours for the purpose of a staff person training another staff person ● Completion of other employer required non-direct service tasks, ● Attending ISA meetings ● Staff paid time off 	<ul style="list-style-type: none"> ● Receiving training without person present ● Receiving supervision without person present ● More than one staff reporting encounter data for same hours for the purpose of a staff person training another staff person ● Completion of other employer required non-direct service tasks ● Attending ISA meetings without the person present ● Employee paid time off (sick time)

HCBS Service	Reportable Actions	Non-Reportable Actions (for agency- staffed or contracted services paid through the agency)	Non-Reportable Actions (for services paid through ARIS)
	needs the support of another caregiver.		
Respite, daily (S5151)	<p>Direct service in accordance with the limitations and service definition in the System of Care Plan (below) provided to an individual on a 1:1, 2:1 or 1:2 basis.</p> <p>Daily respite is used for respite provided for a continuous 24-hour period, which can include up to 8 hours of sleep time.</p> <p>Service definition: Respite Supports means (daily) alternative</p>	<ul style="list-style-type: none"> • Travel time (without the person), • Paperwork/record keeping without person present • Receiving training without person present • Receiving supervision without person present • More than one staff reporting encounter data for same hours 	<ul style="list-style-type: none"> • Travel time (without the person) • Paperwork/record keeping without person present • Receiving training without person present • Receiving supervision without person present • More than one staff reporting encounter data for same hours for the purpose of a staff person

HCBS Service	Reportable Actions	Non-Reportable Actions (for agency- staffed or contracted services paid through the agency)	Non-Reportable Actions (for services paid through ARIS)
	<p>caregiving arrangements for family members or home providers/foster families and the individual being supported, on an intermittent or time limited basis, because of the absence of or need for relief of those persons normally providing the care to the individual, when the individual needs the support of another caregiver.</p>	<p>for the purpose of a staff person training another staff person</p> <ul style="list-style-type: none"> • Completion of other employer required non-direct service tasks, • Attending ISA meetings, • Staff paid time off 	<p>training another staff person</p> <ul style="list-style-type: none"> • Completion of other employer required non-direct service tasks • Attending ISA meetings without the person present • Employee paid time off (sick time)
<p>In-home Family Supports (T2017)</p>	<p>Direct service in accordance with the limitations and service definition (below) provided face to face with an individual. Travel time with the person. Services in and about the person’s residence. Data collection or progress notes while delivering direct service. Receipt of</p>	<ul style="list-style-type: none"> • Travel time (without the person) • Paperwork/record keeping without person present • Receiving training without person present 	<ul style="list-style-type: none"> • Travel time (without the person) • Paperwork/record keeping without person present • Receiving training without person present • Receiving supervision without person present

HCBS Service	Reportable Actions	Non-Reportable Actions (for agency- staffed or contracted services paid through the agency)	Non-Reportable Actions (for services paid through ARIS)
	<p>direct supervision and training while providing direct service with person present.</p> <p>May be provided 1:1, 2:1 or in a small group of 2-3 living in the same home. Support in the community is allowable.</p> <p>Service definition: In-home Family Support are regularly scheduled, or intermittent hourly supports provided to an individual who lives in the home of unpaid family caregivers. Supports are provided on a less than full time (not 24/7) schedule.</p>	<ul style="list-style-type: none"> ● Receiving supervision without person present ● More than one staff reporting encounter data for same hours for the purpose of a staff person training another staff person ● Completion of other employer required non-direct service tasks ● Attending ISA meetings ● Staff paid time off 	<ul style="list-style-type: none"> ● More than one staff reporting encounter data for same hours for the purpose of a staff person training another staff person ● Completion of other employer required non-direct service tasks ● Attending ISA meetings without the person present ● Employee paid time off

HCBS Service	Reportable Actions	Non-Reportable Actions (for agency- staffed or contracted services paid through the agency)	Non-Reportable Actions (for services paid through ARIS)
<p>Shared Living, Hourly Supports (T2017)</p>	<p>Direct service in accordance with the limitations and service definition (below) provided face to face with an individual. Travel time with the person. Services in and about the person’s residence. Data collection or progress notes while delivering direct service. Receipt of direct supervision and training while providing direct service with person present.</p> <p>May be provided 1:1, 2:1 or 1:2. Support in the community is allowable. Note: If this service is provided at the same time as the shared living provider is providing support, the staffing ratio should</p>	<ul style="list-style-type: none"> • Travel time (without the person) • Paperwork/record keeping without person present • Receiving training without person present • Receiving supervision without person present • More than one staff reporting encounter data for same hours for the purpose of a staff person training another staff person • Completion of other employer required 	<p>For agency and shared-managed only:</p> <ul style="list-style-type: none"> • Travel time (without the person) • Paperwork/record keeping without person present • Receiving training without person present • Receiving supervision without person present • More than one staff reporting encounter data for same hours for the purpose of a staff person training another staff person • Completion of other employer required non-direct service tasks

HCBS Service	Reportable Actions	Non-Reportable Actions (for agency- staffed or contracted services paid through the agency)	Non-Reportable Actions (for services paid through ARIS)
	<p>be coded as 1:1 as shared living will be reported separately.</p> <p>Service definition: Shared Living, hourly is regularly scheduled, or intermittent hourly supports provided to an individual who lives in Shared Living.</p>	<p>non-direct service tasks</p> <ul style="list-style-type: none"> • Attending ISA meetings • Staff paid time off 	<ul style="list-style-type: none"> • Attending ISA meetings without the person present • Employee paid time off <p>N/A for self/family management</p>

Appendix B: Code/Modifier Combinations

Procedure Code	Modifier Position 1	Modifier Position 2	Modifier Position 3	Modifier Position 4
Supervised Living				
S5135	HW			
S5135	HW	XE		
S5135	HW	XP		
S5135	HW	U1		
S5135	HW	U1	XE	
S5135	HW	U1	XP	
S5135	HW	U1	CG	
S5135	HW	U1	KX	
S5135	HW	U2		
S5135	HW	U2	XE	
S5135	HW	U2	XP	
S5135	HW	U2	CG	
S5135	HW	U2	KX	
S5135	HW	UN		

S5135	HW	UN	XE	
S5135	HW	UN	XP	
S5135	HW	UN	CG	
S5135	HW	UN	KX	
S5135	HW	U1	XE	KX
S5135	HW	U2	XE	KX
S5135	HW	UN	XE	KX
S5135	HW	U1	XE	CG
S5135	HW	U2	XE	CG
S5135	HW	UN	XE	CG
S5135	HW	U1	XP	KX
S5135	HW	U2	XP	KX
S5135	HW	UN	XP	KX
S5135	HW	U1	XP	CG
S5135	HW	U2	XP	CG
S5135	HW	UN	XP	CG
Respite, hourly				
S5150	HW	UN	XE	CG

S5150	HW	UP	XE	CG
S5150	HW	U1	XP	CG
S5150	HW	U2	XP	CG
S5150	HW	UN	XP	CG
S5150	HW	UP	XP	CG
S5150	UJ	U1	XE	
S5150	UJ	U1	XP	
S5150	UJ	U1		
S5150	UJ	U1	KX	
S5150	UJ	U1	CG	
S5150	UJ	U2	XE	
S5150	UJ	U2		
S5150	UJ	U2	CG	
S5150	UJ	U2	KX	
S5150	UJ	U2	XP	
S5150	UJ	UN	XE	
S5150	UJ	UN	XP	
S5150	UJ	UN		

S5150	UJ	UN	CG	
S5150	UJ	UN	KX	
S5150	UJ	UP	XE	
S5150	UJ	UP	XP	
S5150	UJ	UP		
S5150	UJ	UP	CG	
S5150	UJ	UP	KX	
S5150	UJ	U1	XE	KX
S5150	UJ	U2	XE	KX
S5150	UJ	UN	XE	KX
S5150	UJ	UP	XE	KX
Respite, Daily				
S5151	HW	U1		
S5151	HW	U1		
S5151	HW	U2		
S5151	HW	U2		
S5151	HW	UN		
S5151	HW	UN		

S5151	HW	U1	KX	
S5151	HW	U1	CG	
S5151	HW	U2	KX	
S5151	HW	U2	CG	
S5151	HW	UN	KX	
S5151	HW	UN	CG	
In home supports AND Shared Living, hourly				
T2017	HW	UN	KX	
T2017	HW	UN		
T2017	HW	UN	XE	
T2017	HW	UN	XP	
T2017	HW	UP		
T2017	HW	UP	CG	
T2017	HW	UP	KX	
T2017	HW	UP	XE	
T2017	HW	UP	XP	

T2017	HW	U1	XE	KX
T2017	HW	U2	XE	KX
T2017	HW	UN	XE	KX
T2017	HW	UP	XE	KX
T2017	HW	U1	XP	KX
T2017	HW	U2	XP	KX
T2017	HW	UN	XP	KX
T2017	HW	UP	XP	KX
T2017	HW	U1	XE	CG
T2017	HW	U2	XE	CG
T2017	HW	UN	XE	CG
T2017	HW	UP	XE	CG
T2017	HW	U1	XP	CG
T2017	HW	U2	XP	CG
T2017	HW	UN	XP	CG
T2017	HW	UP	XP	CG

