



# Partners' Tailored Plan Provider EVV Information Session

June 17, 2024

12-1 p.m.

# Agenda

- EVV Guidelines
- HHAeXchange Vendor
- Soft/Hard Launch July 1, 2024
- Workflow Process
- Code Crosswalk
- Provider Resources

# What Is Electronic Visit Verification (EVV)?

- Electronic Visit Verification is used to track and monitor timely service delivery
- EVV technology records the following:
  - Type of service performed
  - Person receiving the service
  - Date
  - Location
  - Person providing the service
  - Time of day for service start and end
- 21st Century Cares Act mandate for Home Health Care Services (HHCS) and Personal Care Services (PCS)

# Who is Partners EVV Vendor Solution

- HHAeXchange is the vendor solution utilized by Partners Health Management and Carolina Complete Health.
- Providers Connecting with HHAeXchange.
  - Option 1: Agencies currently without an EVV solution should use the free EVV tools provided by HHAeXchange and Partners.
  - Option 2: Agencies **currently** using a different third party EVV solution should use their existing EVV system and import the visit data into HHAeXchange. HHA will then route the visit data to Partners.

# HHAeXchange Resources

- Requirements to set up access within HHAeXchange:
  - [HHAeXchange Provider Enrollment Form](#)
  - [HHAeXchange Information Hub](#)



# EVV Soft Launch versus Hard Launch

## ➤ Soft Launch

- During the soft launch Home Health Care Services (HHCS) providers are encouraged to submit EVV visit information to HHAeXchange. This is critical to ensuring that the configurations are working as anticipated. This will also ensure a successful hard launch.
- Claims submitted outside of HHAeXchange will not deny for EVV for the duration of the soft launch period.

## ➤ Hard Launch

- EVV visit information for Personal Care Services (PCS) is required to be submitted using the HHAeXchange platform.
- Claims submitted outside of HHAeXchange will deny for EVV for July 1, 2024, hard launch period.



# Authorizing EVV Services

- All EVV service authorization requests will come through Partners ProviderCONNECT secure provider portal using the ProAuth system.
- PCS requests will be submitted by the member's assigned Tailored Care Manager.
- Providers will submit Home Health Care Services authorization requests through ProviderCONNECT using ProAuth.

# ProviderCONNECT

- Partners ProviderCONNECT portal access
  - In-net providers must identify a person to serve as their Local Administrator. This person will be responsible for managing all other users who access ProviderCONNECT for their organization.
  - Local Administrators must complete the Partners ProviderCONNECT setup form: [surveymonkey.com/r/MBXQSBF](https://surveymonkey.com/r/MBXQSBF).
  - After completion of the form, you will receive an email from Partners within two business days on further details to access ProviderCONNECT.
  - For questions on the form or process, contact [CredentialingTeam@PartnersBHM.org](mailto:CredentialingTeam@PartnersBHM.org).

# ProviderCONNECT Resources

➤ Additional Resources:

- [providers.partnersbhm.org/providerconnect-local-administratorinstructions/](https://providers.partnersbhm.org/providerconnect-local-administratorinstructions/)
- [providers.partnersbhm.org/provider-alert-local-administrators-can-nowset-up-users-in-providerconnect/](https://providers.partnersbhm.org/provider-alert-local-administrators-can-nowset-up-users-in-providerconnect/)

# Home Health Care Services Code Crosswalk

- Service Descriptions: Home Health Aide, Occupational Therapy, Speech Therapy, Physical Therapy and Skilled Nursing.
- This service code listing can be found on the Partners Provider Knowledge Base website.
- This Home Health Care Service Code Crosswalk (.xlsx) link automatically redirects to a download of the file: [providers.partnersbhm.org/home-health-care-service-code-crosswalk/](https://providers.partnersbhm.org/home-health-care-service-code-crosswalk/).

# Personal Care Services Code Crosswalk

Service Code	Modifier	Description	Program Description
99509:HA	HA	Attendant Care Services	Personal Care Services, Private Residences, Beneficiaries under 21 years
99509:HB	HB	Attendant Care Services	Personal Care Services, Private Residences, Beneficiaries 21 years and older

# Scheduling and Visit Confirmation Reminders

- Visits will be confirmed using EVV, either using the HHAeXchange EVV Tools or sent to HHAeXchange via third party integration.
- For Home Health Care Services, visits will remain white on the calendar and will never link to an auth, even if one is present.



# Billing and Claims Submission Reminders

## ➤ Home Health Care Services:

- If an auth is sent to HHA by Partners, it will only include the service code. The provider must specify the correct **Service Code + Rev Code** combination to ensure a revenue code is sent on the claim. (Vendor Configuration)
- Ensure that the vendor is using only the codes on the code's crosswalk
- Vendor must ensure they are sending the third-party invoice number to ensure the visit will bill out of HHA.

*\*Failure to do this will cause the claim to reject or deny.*

# Provider Resources

NC Medicaid Behavioral Health and Intellectual/Developmental Disabilities Tailored Plan will launch July 1, 2024.

If you are experiencing a behavioral health crisis, call Partners new Behavioral Health Crisis Line: 833-353-2093.

The Tailored Plan Primary Care Provider Choice Period ends May 15. Call 1-888-235-4673 to select your Primary Care Provider or fill out the Choose or Change Your PCP form.

1-877-864-1454 | [Training Resource and Collaborative](#) | [Provider Knowledge Base](#) | [Find a Provider](#) | [ProviderCONNECT](#) | [MemberCONNECT](#)



[Tailored Plan Home](#) | [Members](#) | [Recipients](#) | [Pharmacy](#) | [Providers](#) | [Contact](#)

## Partners Tailored Plan

Partners Tailored Plan covers services for mental health, substance use disorders, intellectual & developmental disabilities, physical health and pharmacy. If you have questions or want more information, contact Member and Recipient Services at 1-888-235-4673.

If you are a provider in the Partners network, or are interested in joining our network, please call our dedicated Provider Line at 1-877-398-4145.



### Members

If you have Medicaid, we have a lot of information to help you get or use services. You can select a topic from the Members tab at the top of the page. If you need to talk to someone, you can call our Member and Recipient Services Line at 1-888-235-4673. We want to help you get the most out of your benefits plan.

[Learn More](#)

### Recipients

If you do not have Medicaid, are uninsured or under insured, you may get services using state funds. The Recipients tab at the top of the page will give you information on many topics. You may also call Member and Recipient Services for more information. That number is 1-888-235-4673.

[Learn More](#)

### Pharmacy

Partners Tailored Plan works with CVS Health to ensure your pharmacy needs are met. You can find information on the pharmacy program by selecting a topic from the Pharmacy tab located at the top of the page, including a link to the NC Medicaid Preferred Drug List.

[Learn More](#)

### Provider

Providers may use the Provider tab to find information on joining the Partners Tailored Plan network, manuals and forms, how to access ProviderCONNECT, our secure provider portal and how to access online training materials. We truly see our providers as partners and are here to help you succeed.

[Learn More](#)

## Learn More About Partners Health Management

- [Partners Provider Knowledge Base: Electronic Visits Verification](#)
- [Partners Electronic Visits Verification Bulletin](#)

# Provider Support for Questions

Partners Health Management would love to assist you with detailed questions related to EVV :

Our Support Team email:

[EVVsupport@partnersbhm.org](mailto:EVVsupport@partnersbhm.org)

Provider Line Number: 1-877-398-4145  
Monday – Saturday (7 a.m.-6 p.m.)



# Questions?

