

# Let's simplify EVV for facility Virginia Medicaid providers.

Learn everything you need to know so your claims are always approved the first time.

Starting **July 1, 2023**, Aetna Better Health of Virginia will accept 837i with EVV details. Claims will be denied beginning **January 1, 2024**, for not following EVV guidelines.

## What is EVV?

Electronic Visit Verification (EVV) was implemented in coordination with the Virginia Department of Medical Assistance Services (DMAS) and Virginia managed care organizations (MCOs) to comply with the *21st Century Cures Act* and the *Virginia Appropriations Act*. Together, we are embracing technology to verify, simplify, and improve service delivery to our members.

The Commonwealth of Virginia implemented a **Provider Choice Model** for EVV. This model requires you to select and implement the EVV application that suits your business requirements.

**Be aware that neither DMAS nor Aetna Better Health will endorse, approve, or recommend any specific EVV vendor to a provider.**

## Make sure your system meets requirements.

The EVV claims processing on behalf of the Virginia MCOs requires your EVV system to meet minimum requirements. Some of these requirements include:

- Adhering to *HIPAA* compliance.
- Operating in an offline mode when cellular or Wi-Fi connectivity is unavailable.
- Ensuring PHI is always encrypted.
- Maintaining historical data via backups for the minimums defined by DMAS.
- Capturing the required six data points.
- Submitting claims electronically on the 837i.

## Don't let your claims get denied.

There are six required data elements to be considered a valid EVV submission. If any of these EVV data elements are missing, the claim will be denied. If the EVV claim submission passes the intake rules, the standard claim processing rules will apply. The six required data elements include:



1. Member ID
2. Rev. code of the service provided
3. Date of the service (single date)
4. Time the service begins *and* ends (do not cross over days)
5. Physical location for the service (i.e., a street address)
6. Attendant's name and unique ID created by the facility

## Important Coding Information for EVV Providers

There are unique codes and processes for submitting EVV claims. Make sure you are using correct codes and are adding each unit correctly. Otherwise, your claim might be denied.

### Rev Codes for EVV for facility providers rendering service with facility types 32 or 34:

- 0550 Skilled Nursing Assessment
- 0551 Skilled Nursing Care, Follow-Up Care
- 0559 Skilled Nursing Care, Comprehensive Visit
- 0571 Home Health Aide Visit (no PA required)
- 0424 Physical Therapy, Home Health Assessment
- 0421 Physical Therapy, Home Health Follow-Up Visit
- 0434 Occupational Therapy, Home Health Assessment
- 0431 Occupational Therapy, Home Health Follow-Up Visit
- 0444 Speech-Language Services, Home Health Assessment
- 0441 Speech-Language Services, Home Health Follow-Up Visit



### Where to fax prior authorization:

Fax requests to **855-661-1828**.

Questions? Call **1-800-279-1878**.

## DMAS Resources

DMAS provides additional information and insight in their DMAS Provider Manuals. DMAS Provider Manuals can be found by visiting the link below.

**[vamedicaid.dmas.virginia.gov/manuals/provider-manuals-library](http://vamedicaid.dmas.virginia.gov/manuals/provider-manuals-library)**

## Get your claims right the first time.

Make sure you know when EVV is required. Also, make sure that you're using the right revenue codes in your submissions.

## Need more information?



Visit the DMAS website to learn more about EVV. Go to **[dmas.virginia.gov/for-providers/long-term-care/programs-and-initiatives/electronic-visit-verification](http://dmas.virginia.gov/for-providers/long-term-care/programs-and-initiatives/electronic-visit-verification)**.

### Visit us online.

Find this resource, plus many more, by scanning the QR code here or by visiting our website at **[AetnaBetterHealth.com/Virginia/providers/materials-forms.html](http://AetnaBetterHealth.com/Virginia/providers/materials-forms.html)**.



## Your patients have extra benefits that can improve their health.

By being a member of Aetna Better Health, your patients have access to a wide range of added benefits that can help them better meet their health needs, all at no cost. Call **1-800-279-1878 (TTY: 711)** to speak to a Care Manager to learn more about these benefits.

### For all members

**Extra help with rides:** Members can enjoy free rides to local resources or services — up to 30 round trips or 60 one-way trips each year.

**Free cell phone:** Free Android™ smartphone with free data, texts, and minutes, plus 10 GB monthly hotspot

**General Educational Development (GED) incentive:** CampusEd is an online resource that can help members earn their GED and start a new career. We'll also pay for members' GED test (up to \$120).

**Hearing care:** One hearing exam, \$1,500 toward hearing aids, plus 60 batteries each year, plus unlimited visits for hearing aid fittings

**Home meal delivery:** Home-delivered meals after hospital discharge for seven days.

**Mental health support through Pyx:** A personalized program to support members' health. Pyx Health helps members get the most from their health plan, at no cost, whether it's help finding a doctor, food, transportation, or just needing someone to talk to.

**MyActiveHealth Management:** A personalized and interactive mobile program that sends texts regarding diabetes education and support; personal care management; appointment and medication reminders; and exercise/weight goal setting and tracking

**Over-the-Counter Health Solutions® period stipend:** \$20 monthly for members with periods to spend on period products through CVS Pharmacy®

**Vision care:** One eye exam and \$250 toward eyewear

**Weight management:** Personalized weight management with a registered dietitian, which includes a 12-week certified nutritionist program and six counseling visits

**Wellness Rewards:** Members can get gift cards for taking care of their health. Kids also get extra perks,

like free swimming lessons and sports physicals, plus up to a \$25 gift card when they join the Ted E. Bear, M.D.® Wellness Club!

### For moms and children

**Benefits for new moms:** Eligible members who are pregnant through one year postpartum can get \$25 monthly to spend on over-the-counter items for them and their baby through CVS Pharmacy. New moms can also attend baby showers and earn prizes. Plus, new moms can get 300 free size 1 baby diapers delivered to their home after their baby is born.

**Breastfeeding support through Pacify:** 24/7 access to a national network of International Board-Certified Lactation Consultants® and doulas via live video consultation

**Youth sports physicals:** Annual sports participation physical for members 7 to 18 years old

**Youth swimming lessons:** Water safety and swimming lessons for members 6 years and younger

**Healthy food card:** Eligible members can get \$50 added to a special debit card every month to buy healthy groceries at nearby stores.

### For members with certain health conditions

**Asthma program:** Members with asthma can get one set of hypoallergenic bedding and between \$150 and \$400, depending on area of service, to use towards one deep carpet cleaning annually.

**Memory care:** Two door alarms and six window locks available to members diagnosed with dementia or Alzheimer's disease (requires prior authorization)

**Therapeutic shoes or shoe inserts:** Eligible members with diabetes with a prescription from a podiatrist or orthopedic doctor can get pair of therapeutic shoes or shoe inserts per year (up to \$200 annually).

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