Electronic Visit Verification (EVV) Visit Transaction Rejection Guide

Program providers and financial management services agencies (FMSAs) must correct EVV data element(s) when the EVV system sends an alert of a rejected EVV visit transaction from the EVV Aggregator. The program provider or FMSA must correct the EVV data element(s) causing the rejection and check the EVV Portal to ensure the EVV visit transaction was accepted before submitting a claim for EVV services.

This guide assists program providers and FMSAs with identifying and taking the necessary steps to correct an EVV visit transaction rejection.

If necessary, complete visit maintenance on the rejected EVV visit transaction:

- Visits within the standard visit maintenance timeframe Complete visit maintenance in the EVV system
- Visits beyond the standard visit maintenance timeframe Submit an EVV Visit Maintenance Unlock Request to the appropriate payer for approval

After making the necessary corrections to the rejected EVV visit transaction, program providers and FMSAs must follow the appropriate process for their EVV system to have the EVV visit transaction reexported to the EVV Aggregator.

Program providers and FMSAs can view the EVV visit transaction rejection code(s) associated with a rejected EVV visit transaction in the EVV system and in the EVV Portal.

For instructions on how to view accepted and rejected EVV visit transactions in the EVV system, contact your EVV vendor or EVV Proprietary System Operator (PSO).

For instructions on how to view accepted and rejected EVV visit transactions in the EVV Portal, refer to the *Electronic Visit Verification (EVV) Portal Standard Reports and Search Tools Job Aid for Program Providers and Financial Management Services Agencies (FMSAs)* on the <u>TMHP EVV Training webpage</u>.

	Resolution lips
Usage Score	
Usage Score No	 The Taxpayer Identification Number (TIN) in the EVV system must match the TIN in the Health and Human Services Commission (HHSC) systems. Verify the TIN for your program provider or FMSA. To correct your TIN in the HHSC systems, use the appropriate method below based on your program: Acute care fee-for-service (FFS) program providers and FMSAs can update and verify information through the Provider Information Management System (PIMS), or by fax or mail using the <u>Provider Information Change Form</u>. Access PIMS through My Account on <u>TMHP.com</u> and search by National Provider Identifier (NPI).* Home and Community-based Services (HCS), Texas Home Living (TxHmL), Community Living Assistance and Support Services (CLASS), and Deaf Blind with Multiple Disabilities (DBMD) program providers and FMSAs - email IDDwaivercontractenrolIment@hhsc.state.tx.us or call (512) 438-3234. Youth Empowerment Services (YES) Waiver program providers - email <u>YESWaiver@hhsc.state.tx.us</u> Home & Community-Based Services - Adult Mental Health (HCBS-AMH) program providers - email <u>HCBS-AMH.Services@hhsc.state.tx.us</u> or call (512)-206-
	 (PHC) program providers - email <u>hhseopcm@hhsc.state.tx.us</u> or call (512)-206-3979. Managed care organization (MCO) Long-term Services and Supports (LTSS) providers email <u>MCO_LTSS_Provider_Re-Enrollment@hhsc.state.tx.us</u>.
	Usage Score No

Rejection Number	Rejection Description	Impact to EVV Usage Score	Resolution Tips
Ex0002C	Provider NPI cannot be validated as active for the visit date.	Yes	 The NPI for this date, for this service, and for this member must match the NPI in the HHSC systems. To confirm the NPI has active enrollment and matches the NPI in the HHSC systems for the visit date, check the following HHSC records: Acute care FFS program providers and FMSAs can contact TMHP Acute Care at 1-800-925-9126, Option 2, or can verify information through PIMS. Access PIMS through My Account on TMHP.com and search by NPI.* Long-Term Care (LTC) FFS program providers and FMSAs can contact TMHP LTC at 1-800-626-4117, Option 2. MCO LTSS providers can contact HHSC at MCO LTSS Provider Re-Enrolment@hhsc.state.tx.us.
Ex0003C1	It is not possible to validate provider API as active for the visit date.	Yes	 Verify the Atypical Provider Identifier (API) for your program provider or FMSA. Confirm the API has active enrollment for the visit date in the HHSC systems: Acute care FFS program providers and FMSAs can contact TMHP Acute Care at 1-800-925-9126, Option 2, or can verify information through PIMS. Access PIMS through My Account on <u>TMHP.com</u> and search by API.* LTC FFS program providers and FMSAs can contact TMHP LTC at 1-800-626-4117, Option 2. MCO LTSS providers can contact HHSC at <u>MCO_LTSS_Provider_ReEnrollment@hhsc.state.tx.us</u>.

Rejection	Rejection	Impact to EVV	Resolution Tips
Number	Description	Usage Score	
Ex0004C	The Provider TPI on the EVV visit is not associated with this provider NPI/API for the visit date.	Νο	 Verify the Texas Provider Identifier (TPI) for your program provider or FMSA. Confirm the TPI has active enrollment for the visit date and is associated to the NPI in the provider enrollment system: Acute care FFS program providers and FMSAs can contact TMHP Acute Care at 1-800-925-9126. Option 2, or can verify information through PIMS. Access PIMS
			through My Account on <u>TMHP.com</u> and search by NPI.*
Ex0007C1	The Provider Number on the EVV visit is not	No	Confirm association of the NPI/API on the EVV visit transaction to the LTC provider number (i.e., contract number):
	associated with this provider NPI/API for the visit date.		 Contact TMHP LTC at 1-800-626-4117, Option 2, for enrollment questions. Confirm that your provider number and associated NPI/API are correct and appear correctly in your provider profile in the EVV system.

Rejection	Rejection	Impact to EVV	Resolution Tips
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Ex0007C2	Member on the EVV visit is not authorized for this Provider Number on this visit date in our records.	No	Confirm that the member is authorized for this program provider or FMSA using the Medicaid Eligibility and Service Authorization Verification (MESAV) system on <u>TMHP.com</u> .* HCS and TxHmL program providers and FMSAs must use the Client Assignment and Registration (CARE) system to check for authorization information.
			HCBS-AMH program providers should email <u>HCBS-AMH.Services@hhsc.state.tx.us</u> to confirm a member's Medicaid eligibility.
			YES program providers should <u>submit a Medicaid Eligibility Verification (MEV) request</u> through the Clinical Management for Behavioral Health Services (CMBHS) system and verify the member's Medicaid status through the <u>Texas Integrated Eligibility Redesign</u> <u>System (TIERS)</u> .
			Confirm that the member's authorization displays the correct Provider Number in the EVV system.
Ex00031C	The Member's Payer on the EVV visit does not match our records for this Member.	Yes	 Confirm the member's payer by checking the eligibility record for the visit date: LTC FFS program providers and FMSAs can check MESAV through their <u>TMHP.com</u> account.* Acute care FFS program providers and FMSAs or MCO LTSS providers can check Eligibility Verification (EV) through their <u>TMHP.com</u> account.
			Confirm the payer information is correct on the member's authorization in the EVV system.

Rejection Number	Rejection Description	Impact to EVV Usage Score	Resolution Tips
Ex00034C1	The Member Medicaid ID on the EVV visit is not found in our records.	Yes	 Confirm the member's Medicaid ID is correct: LTC FFS program providers and FMSAs can check MESAV through their <u>TMHP.com</u> account.* Acute care FFS program providers and FMSAs or MCO LTSS providers can check Eligibility Verification (EV) through their <u>TMHP.com</u> account.
Ex00034C2	The Member Medicaid ID on the EVV visit does not have active Medicaid eligibility for the visit date.	Yes	 Confirm the member's Medicaid eligibility for the visit date: LTC FFS program providers and FMSAs can check MESAV through their <u>TMHP.com</u> account.* Acute care FFS program providers and FMSAs or MCO LTSS providers can check Eligibility Verification (EV) through their <u>TMHP.com</u> account.
Ex00043C	The MCO Member SDA on the EVV visit does not match the Plan Code associated with the Member's payer.	Yes	 Confirm the member's Service Delivery Area (SDA) by checking the eligibility record for the visit date: LTC FFS program providers and FMSAs can check MESAV through their <u>TMHP.com</u> account.* Acute care FFS program providers and FMSAs or MCO LTSS providers can check Eligibility Verification (EV) through their <u>TMHP.com</u> account. Confirm the correct authorization is assigned to the member in the EVV system.
Ex00049C1	Duplicate EVV visit transaction found with this Visit ID.	No	Contact your EVV vendor or PSO to correct this issue. The EVV system already submitted an EVV visit transaction with this Visit ID to the EVV Aggregator. Request that your EVV vendor or EVV PSO verify the reason for the duplication and confirm if visit maintenance is needed so that the EVV system can send this EVV visit transaction to the EVV Aggregator as an update.

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Ex00049C2	No previous record found with this Visit ID for update.	No	Contact your EVV vendor or EVV PSO to correct this issue. The EVV visit transaction record is marked as an update, but the EVV Aggregator does not have a record of this EVV visit ID. Confirm with your EVV vendor or EVV PSO if you need to resolve any issues so the EVV system can send this EVV visit transaction to the EVV Aggregator as a new EVV visit transaction.
Ex00057C1	The Service Group and Service Code combination on the EVV visit are not eligible for EVV.	Yes	Refer to the HHSC EVV Service Bill Codes table to confirm EVV Service Groups and Service Codes. https://hhs.texas.gov/sites/default/files/documents/doing-business-with-hhs/providers/long-term-care/evv/evv-service-bill-codes-table.xlsx Confirm that the member's authorization displays the correct Service Group/Service Code in the EVV system.
Ex00057C2	The Service Group and Service Code combination on the EVV visit are not valid for the Provider number on the EVV visit.	Yes	 Confirm active enrollment for the LTC provider number (i.e., contract number) for the Service Group and Service Code for the EVV visit date: Contact TMHP LTC at 1-800-626-4117, Option 2, for enrollment questions. Confirm that the member's authorization displays the correct Service Group/Service Code and/or the correct provider number in the EVV system.

Rejection	Rejection	Impact to EVV	Resolution Tips
Number	Description	Usage Score	
Ex00057C3	The Member on the EVV visit is not authorized for this Service Group/Service Code on this visit date in our records.	Yes	Confirm the member's LTC FFS authorization using MESAV on <u>TMHP.com</u> .* HCS and TxHmL program providers and FMSAs must use the CARE system to check for authorization information. HCBS-AMH program providers should email <u>HCBS-AMH.Services@hhsc.state.tx.us</u> to confirm a member's Medicaid eligibility. YES program providers should <u>submit a Medicaid Eligibility Verification (MEV) request</u> through CMBHS and verify the member's Medicaid status through the <u>Texas Integrated</u> <u>Eligibility Redesign System (TIERS)</u> . Confirm the member's authorization displays the correct Service Group/Service Code in the EVV system.
Ex00059C	The EVV HCPCS Code and EVV Modifier combination on the EVV visit is not eligible for EVV.	Yes	Refer to the HHSC EVV Service Bill Codes table to confirm EVV-relevant Healthcare Common Procedure Coding System (HCPCS) code and modifier combinations. https://hhs.texas.gov/sites/default/files/documents/doing-business-with-hhs/providers/long-term-care/evv/evv-service-bill-codes-table.xlsx Review the member's authorization to confirm EVV-relevant services. Confirm that the member's authorization displays the correct HCPCS code/modifier(s) combination in the EVV system.

Rejection Number	Rejection Description	Impact to EVV Usage Score	Resolution Tips
Ex00065C	The EVV Actual Hours calculation on the EVV visit is not correct for the Call In and Call Out time on the visit.	No	Confirm that the actual hours on the EVV visit transaction match the time difference between EVV Call In and EVV Call Out time in the EVV system. Contact your EVV vendor or EVV PSO to assist with resolving the rejection.
Ex00067C	The EVV Units on the EVV visit do not match the EVV Billed Hours based on the Unit of Measurement.	No	In the EVV system, confirm that the EVV units calculated/entered on the EVV visit transaction match the billed hours based on the Unit Type as specified on the HHSC EVV Service Bill Codes table. <u>https://hhs.texas.gov/sites/default/files/documents/doing-business-with-hhs/providers/long-term-care/evv/evv-service-bill-codes-table.xlsx</u> If this was an auto verified EVV visit, contact your Program Provider or FMSA EVV System Administrator to assist with resolving the rejection. If you cannot update the units, contact your EVV vendor or EVV PSO to assist with resolving the rejection.

* Program providers and FMSAs should contact the TMHP EDI Help Desk at 888-863-3638, Option 4, for assistance with creating a TMHP account.