

**State of New Jersey - Department of Human Services  
Division of Medical Assistance and Services**

# Electronic Visit Verification

## **Phase 2: Provider Workgroup Meeting #6**

Thursday May 5, 2022

3:00 pm – 4:00 pm

Zoom Meeting

# Today's Agenda



- Welcome and Introductions
- DDD and DMAHS Updates
- EVV Phase 2
  - Certification/Licensing Number Policy
  - Caregiver Setup Demo
- Follow Up Questions
- Open Discussion
- Next Steps

# DIVISION OF DEVELOPMENTAL DISABILITIES

## Welcome Webinar

Initial webinar regarding new procedure codes held on April 26, 2022. Webinar will be posted on our Division website for any provider who may have missed it.

## Provider Training

Second webinar to be held in June. In the interim, providers are working on trainings and becoming familiar with their portal.

## On-Boarding Completion

It is anticipated that as of July 1, 2022, all providers should complete their onboarding and begin to process billing through HHAexchange.

## On-Boarding

All "New" providers have completed their onboarding survey, and moved to provisionally engaged, as of April 1, 2022.



**100%**

### On-Boarding

All new providers, who are not exempt, are now provisionally engaged.

**80%**

### Welcome Webinar

Estimated that approximately 80% of new providers attended. Remaining 20% assumed to be exempt.

**80%**

### Provider Training

Estimated percent, based on helpdesk questions and portal creations, that have begun basic trainings.

**100%**

### On-Boarding Completion

100% compliance expected as of July 1, 2022.

# DMAHS EVV Updates

## MCO enrolled members

- Phase I
  - Following Provider Inquiries
  - Resolution by MCOs
  - Reviewing KPI reports
    - (compliance measures)
- Phase II
  - Following status of on-boarding process for individual Providers
  - Coordinating with HHAx on training
  - Working directly with the Provider Training regarding the following:
    - Prior Authorization
    - Billing

# EVV Phase 2

# Certification/Licensing Number Policy

- The DMAHS requires the license or certification number information in the EVV aggregation system for rendering service providers of personal care services (PCS) and home health care services (HHCS).
- The certification/licensing requirement is intended to ensure NJ FamilyCare members are receiving care from qualified providers.
- Compliance timeline: Providers have until 12/31/22 to add this information to rendering providers' profiles.
- Provider training will be offered to walk through this process.

# HHAXchange (EVV vendor)



HHAXchange

# Caregiver Setup

- Required field
- Caregiver's SSN# (on the Caregiver Profile) – Provider and EVV vendors should only send a default value of '999999999' for the social security number field
- Employment types – Home Health Care
- Assigning Secondary Offices



# Caregiver Setup continued

- Caregiver's Professional License Number is required when billing on the HHAeXchange portal.
- This can be entered on the caregiver's profile page under "Employment Info" as seen below

Employment Info

PROVIDER CATEGORY: [dropdown]      COUNTRY OF ORIGIN: [dropdown]

Referral Source: [Select]

Referral Person: [text]

Type: [Select]

Employee ID: [text]

**HHA/PCA Registry Number: [text]**

**Professional License Number: [text]**

NYC Registry References Checked On: [text]

Location: [Select]

Employment Type:

<input type="checkbox"/> PCA	<input type="checkbox"/> HHA	<input type="checkbox"/> RN
<input type="checkbox"/> LPN	<input type="checkbox"/> PT	<input type="checkbox"/> OT
<input type="checkbox"/> ST	<input type="checkbox"/> MSW	<input type="checkbox"/> HSK
<input type="checkbox"/> HMK	<input type="checkbox"/> NT	<input type="checkbox"/> RT
<input type="checkbox"/> PA	<input type="checkbox"/> HCSS	<input type="checkbox"/> CNA
<input type="checkbox"/> COMP	<input type="checkbox"/> APC	<input type="checkbox"/> SCM
<input type="checkbox"/> SCI	<input type="checkbox"/> ILST	<input type="checkbox"/> PBIS
<input type="checkbox"/> RESP	<input type="checkbox"/> ESC	<input type="checkbox"/> SDP
<input type="checkbox"/> CBSA	<input type="checkbox"/> Other (Non Skilled)	<input type="checkbox"/> Other (Skilled)
<input type="checkbox"/> PC	<input type="checkbox"/> CH	<input type="checkbox"/> SPC
<input type="checkbox"/> SHHA	<input type="checkbox"/> SHC	

Application Date: [text]

Status: [Select]

Reason: [Select]

Notes: [text]

Signed Payroll Agreement: [checkbox]

Added/Checked Registry Date: [text]

NPI Number: [text]

Team: [Select]

Branch: [Select]

# Caregiver Setup continued

- Caregiver's Professional License Number is required when billing on the HHAeXchange portal.
- This can be entered on the caregiver's profile page under "Employment Info" as seen below

Employment Info

PROFESSOR: [dropdown] Country of Birth: [dropdown]

Referral Source: [Select]

Referral Person: [text]

Type: [Select]

Employee ID: [text]

**HHA/PCA Registry Number: [text]**

**Professional License Number: [text]**

NYC Registry References Checked On: [dropdown]

Location: [Select]

Employment Type:

<input type="checkbox"/> PCA	<input type="checkbox"/> HHA	<input type="checkbox"/> RN
<input type="checkbox"/> LPN	<input type="checkbox"/> PT	<input type="checkbox"/> OT
<input type="checkbox"/> ST	<input type="checkbox"/> MSW	<input type="checkbox"/> HSK
<input type="checkbox"/> HMK	<input type="checkbox"/> NT	<input type="checkbox"/> RT
<input type="checkbox"/> PA	<input type="checkbox"/> HCSS	<input type="checkbox"/> CNA
<input type="checkbox"/> COMP	<input type="checkbox"/> APC	<input type="checkbox"/> SCM
<input type="checkbox"/> SCI	<input type="checkbox"/> ILST	<input type="checkbox"/> PBIS
<input type="checkbox"/> RESP	<input type="checkbox"/> ESC	<input type="checkbox"/> SDP
<input type="checkbox"/> CBSA	<input type="checkbox"/> Other (Non Skilled)	<input type="checkbox"/> Other (Skilled)
<input type="checkbox"/> PC	<input type="checkbox"/> CH	<input type="checkbox"/> SPC
<input type="checkbox"/> SHHA	<input type="checkbox"/> SHC	

Application Date: [text]

Status: [Select]

Reason: [Select]

Notes: [text]

Signed Payroll Agreement: [checkbox]

Added/Checked Registry Date: [text]

NPI Number: [text]

Team: [Select]

Branch: [Select]



**HHAExchange**

# Caregiver Setup Demo

# Follow Up Questions

# Open Discussion & Next Steps

- Open Discussion
- Next Steps:
  - Next Meeting: May 19, 2022 3-4pm
  - Resources:

DMAHS: <https://www.state.nj.us/humanservices/dmahs/info/evv.html>

DDD: <https://www.nj.gov/humanservices/ddd/providers/federalrequirements/verification>

## Contact Information:

General EVV e-mailbox: [Mahs.Evv@dhs.nj.gov](mailto:Mahs.Evv@dhs.nj.gov)

CSOC EVV mailbox: [dcf.evvcso@dcf.nj.gov](mailto:dcf.evvcso@dcf.nj.gov)

DDD EVV mailbox: [DDDEVV@dhs.nj.gov](mailto:DDDEVV@dhs.nj.gov)

Becky Thomas: [Rebecca.Thomas@dhs.nj.gov](mailto:Rebecca.Thomas@dhs.nj.gov)

Geralyn Molinari: [Geralyn.Molinari@dhs.nj.gov](mailto:Geralyn.Molinari@dhs.nj.gov)

Amy Hoffmaster: [ahoffmaster@chcs.org](mailto:ahoffmaster@chcs.org)



# HHAeXchange NJ EVVMS Support



## Support

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[NJsupport@hhaexchange.com](mailto:NJsupport@hhaexchange.com)  
[Edisupport@hhaexchange.com](mailto:Edisupport@hhaexchange.com)



## NJ Support Phone Number

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(866) 245-8337

# EVV RESOURCES

## Contents:

- The Federal Mandate
- EVV Vision & North Star Principles
- NJ EVVMS – Provider Onboarding
- Provider Outreach to DMAHS EVV
- EVV Inquiry Form
- EVV Payer Contacts
- When to Contact HHAeXchange
- Provider Outreach to HHAeXchange
- Support Center in HHAeXchange
- Client Support Portal in HHAeXchange
- EVV Rounding Rules
- 2023 HHCS Codes

# The Federal EVV Mandate

Section 12006 of the Twenty First Century Cures Act (Cures Act) and The Centers for Medicare & Medicaid Services (CMS) has mandated that Electronic Visit Verification (EVV) will be required for all Personal Care Services by January 1, 2020 and **all Home Health Care Services by January 1, 2023.**

NJ DMAHS received approval from CMS for a good faith effort exemption to the January 2020 implementation mandate. The new implementation deadline was **January 1, 2021.**

## **Mandate Requirements:**

1. Type of service performed;
2. Individual receiving the service;
3. Date of the service;
4. Location of service delivery;
5. Individual providing the service;
6. Time the service begins and ends.

**Future focus to include program integrity, CM/missed visits, data completeness**



# EVV Vision & North Star Principles

**Vision:** To implement an EVV system that meets state and federal requirements with broad public support and a strong/enthusiastic stakeholder process.

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We will serve people the best way possible.

We will create an electronic visit verification system that ensures New Jersey FamilyCare members receive the home care services authorized in their care plans.

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We will keep communication clear and simple.

We will communicate to build understanding as we respond to the federal mandate and roll out this new technology.

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We will support accurate and efficient data exchange.

The new system will support data exchange between providers and MCOs to promote strong collaboration, timely claims processing, and accurate payment.

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We will use data to solve real-life problems

We will work with health plans and providers to use EVV data to reduce missed visits, address trends, and improve our program in measurable ways.

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We will support our community through this change.

Empathy, positive energy, and collaborative focus will be our hallmark, internally and externally.

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# NJ EVVMS – Provider Onboarding



- Visit the New Jersey Home Health Information Center: *to go live next week on 4/11/2022*
  - [www.hhaexchange.com](http://www.hhaexchange.com) > Resources > Provider Information Center > NJ Home Health

## New Providers

- **Welcome Letter for Phase 2: Week of 4/11/2022**
- Complete the Provider Portal Survey – under the “Overview” tab
- Sign up for the Provider Information Sessions and attend the webinar to learn next steps/details
- Be on the lookout for additional communication regarding training and implementation timelines
- For 3<sup>rd</sup> Party / EDI Providers ONLY:
  - Review the BRD and API specifications
  - Complete the attestation
  - Contact HHAX Provider Integration team to begin onboarding process  
[edisupport@hhaexchange.com](mailto:edisupport@hhaexchange.com)
  - Register for EDI Training Session – link will be sent via email

## Existing Providers

- Complete the Provider Portal Survey – under the “Overview” tab & sign up for Info Sessions
- **Welcome Letter for Phase 2: Week of 4/11/2022**
- Ensure you are training any staff that handle home health services for Phase 2 on the EVV tools you selected
- 3<sup>rd</sup> Party / EDI Providers ONLY:
  - Consult with your EVV vendor to ensure the solution you have implemented can support EVV for the additional service
  - Keep your vendor informed of any implementation timelines communicated

# Provider Outreach to DMAHS EVV

## Addressing Provider Issues /Concerns

1. Provider contact Payer (MCOs and/or FFS)
2. If issue is not resolved and/or payment is interrupted contact DMAHS using the EVV Mailbox and /or Provider Resource account
  - [mahs.evv@dhs.nj.gov](mailto:mahs.evv@dhs.nj.gov)
  - [mahs.provider-inquiries@dhs.nj.gov](mailto:mahs.provider-inquiries@dhs.nj.gov)
3. DMAHS Providers must submit detail that EVV guidelines were followed and MCO and/or EVV Vendor was contacted prior to outreach to DMAHS - (Refer to the EVV Inquiry Form)

# EVS Inquiry Form

<b>EVS Inquiry Form</b>		
<b>Provider:</b> ( email /phone number of individual making the Inquiry):		
<b>Service Information</b>	<b>MCO/Health Plan if applicable</b>	
	<b>Type of Inquiry</b>	<i>EVS Implementation/Operations</i>
	<b>Service Provider</b>	
	<b>Service</b>	
<b>Contact at MCO:</b>		
<b>Specify if existing inquiry or email sent to HHAX and/or DMAHS</b>		
<b>Summary of follow-up with HHAX: Specify Ticket Number:</b>		
<b>Member's Impacted if Prior Authorization</b>		
<b>Member's Impacted if Prior Authorization Notes (if needed)</b>		
<b>NOTES</b>		

# Provider Issues Reporting – EVV Payer Contacts

Payer	Payer Contact information for EVV Questions	EVV Solution for Data Submission and Technical Support	Claims submission Portal for services after *July 1, 2021
FFS Medicaid	<a href="mailto:EVV@dhs.nj.gov">EVV@dhs.nj.gov</a>	HHAeXchange: <a href="mailto:Njsupport@hhaexchange.com">Njsupport@hhaexchange.com</a> 866-245-8337	All EVV mandated services will be submitted and billed through HHAeXchange as of 7/1/2021
FFS Medicaid DDD	<a href="mailto:DDDEVV@dhs.nj.gov">DDDEVV@dhs.nj.gov</a>	HHAeXchange: <a href="mailto:Njsupport@hhaexchange.com">Njsupport@hhaexchange.com</a> 866-245-8337	All EVV mandated services will be submitted and billed through HHAeXchange as of 7/1/2021
FFS Medicaid CSOC	<a href="mailto:dcf.evcsoc@dcf.nj.gov">dcf.evcsoc@dcf.nj.gov</a>	HHAeXchange: <a href="mailto:Njsupport@hhaexchange.com">Njsupport@hhaexchange.com</a> 866-245-8337	All EVV mandated services will be submitted and billed through HHAeXchange as of *10/8/2021
Aetna	Joseph Manger <a href="mailto:MangerJ@aetna.com">MangerJ@aetna.com</a> Namrata Sood: <a href="mailto:SoodN@aetna.com">SoodN@aetna.com</a> Constance Offer: <a href="mailto:OfferC@aetna.com">OfferC@aetna.com</a>	HHAeXchange: <a href="mailto:Njsupport@hhaexchange.com">Njsupport@hhaexchange.com</a> 866-245-8337	All EVV mandated services will be submitted and billed through HHAeXchange as of 7/1/2021
Amerigroup	Eyreny Mekhaiel: <a href="mailto:eyreny.mekhaiel@amerigroup.com">eyreny.mekhaiel@amerigroup.com</a> Lynelle Steele: <a href="mailto:fannie.steele@amerigroup.com">fannie.steele@amerigroup.com</a> Keisha J Woodson: <a href="mailto:keisha.woodson@amerigroup.com">keisha.woodson@amerigroup.com</a>	CareBridge: <a href="mailto:njevv@carebridgehealth.com">njevv@carebridgehealth.com</a>	All EVV mandated services will be submitted and billed through CareBridge as of 7/1/2021
Horizon	Denaire Johnson: <a href="mailto:Denaire_Johnson@horizonblue.com">Denaire_Johnson@horizonblue.com</a> Stephen Fitch: <a href="mailto:Stephen_Fitch@horizonblue.com">Stephen_Fitch@horizonblue.com</a>	CareBridge: <a href="mailto:njevv@carebridgehealth.com">njevv@carebridgehealth.com</a>	All EVV mandated services to be billed directly to Horizon. No Change to claims submission - Refer to Section 9.3 – Electronic Billing Guide in the <a href="#">Provider Manual</a>
United HealthCare	<a href="mailto:nj_hcbs_pr@uhc.com">nj_hcbs_pr@uhc.com</a>	HHAeXchange: <a href="mailto:Njsupport@hhaexchange.com">Njsupport@hhaexchange.com</a> 866-245-8337	All EVV mandated services will be submitted and billed through HHAeXchange as of 7/1/2021
WellCare	Marjorie Forgang: <a href="mailto:Marjorie.Forgang@wellcare.com">Marjorie.Forgang@wellcare.com</a> Elaine M Aguirre: <a href="mailto:Elaine.Aguirre@wellcare.com">Elaine.Aguirre@wellcare.com</a> Joan Cosme: <a href="mailto:Joan.Cosme@wellcare.com">Joan.Cosme@wellcare.com</a>	HHAeXchange: <a href="mailto:Njsupport@hhaexchange.com">Njsupport@hhaexchange.com</a> 866-245-8337	All EVV mandated services will be submitted and billed through HHAeXchange as of 7/1/2021



## When to Contact HHAeXchange

- ✓ Issues/questions regarding system functionality or anything relating to your HHAeXchange portal – **Reach out to HHAeXchange Support.**
- ✓ Issues/questions regarding your 3<sup>rd</sup> Party EDI Integration- **Reach out to [edisupport@haexchange.com](mailto:edisupport@haexchange.com)**
- Missing Authorizations and or members and information relating to Claims Payments– **Reach out to your Payer directly.**

Link to NJ DMAHS Provider Resource Page: <https://haexchange.com/nj-dmahs/>

- **In the FAQ section you can access a NJ Specific FAQ document for more details on commonly asked questions and scenarios.**

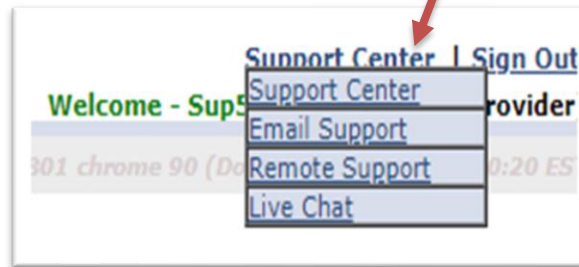
The screenshot shows the HHAeXchange website interface. At the top, there is a navigation bar with the HHAeXchange logo, a 'Login' button, and a 'Request a Demo' button. Below the navigation bar, there are several menu items: 'Who We Help', 'Provider Platform', 'Payer Platform', 'Resources', and 'About'. A secondary navigation bar contains 'OVERVIEW', 'FREE HHAEXCHANGE SOLUTION', 'TRAINING', 'EDI PROCESS', 'INFO SESSIONS', 'FAQs', and 'SERVICES IN SCOPE'. The 'CONTACT' section is visible, featuring a red circle around a link that reads: 'Click here to review the detailed FAQ document in regard to the NJ DMAHS Implementation which will provide you with more insight on the program, patient placement, billing, EVV, Communications, as well as EDI and other functionalities.' Below this link, there are two FAQ items: 'What is HHAeXchange?' and 'What are the benefits of the HHAeXchange Portal?'. The 'MILY CARE' logo is visible in the bottom right corner of the screenshot.



## Provider Outreach to HHAeXchange

How to access HHAeXchange Support :

- Within your HHAeXchange Portal select the Support Center Link:



Here you can select multiple options:

- **Support Center** – this is where you can find job aides, process guides, and videos on specific functionality within the HHAeXchange portal.
- **Live Chat Support** – this will connect you with a live support agent via a chat box while you continue to work in your portal.
- **Client Support Portal** – Allows a user to create and track system issues and questions in one portal.
- **Email Support** – you can also email directly to [njsupport@hhaexchange.com](mailto:njsupport@hhaexchange.com)
  - EDI Provider should reach out to [edisupport@hhaexchange.com](mailto:edisupport@hhaexchange.com)

You can also call our NJ specific Support Line at (866) 245-8337.

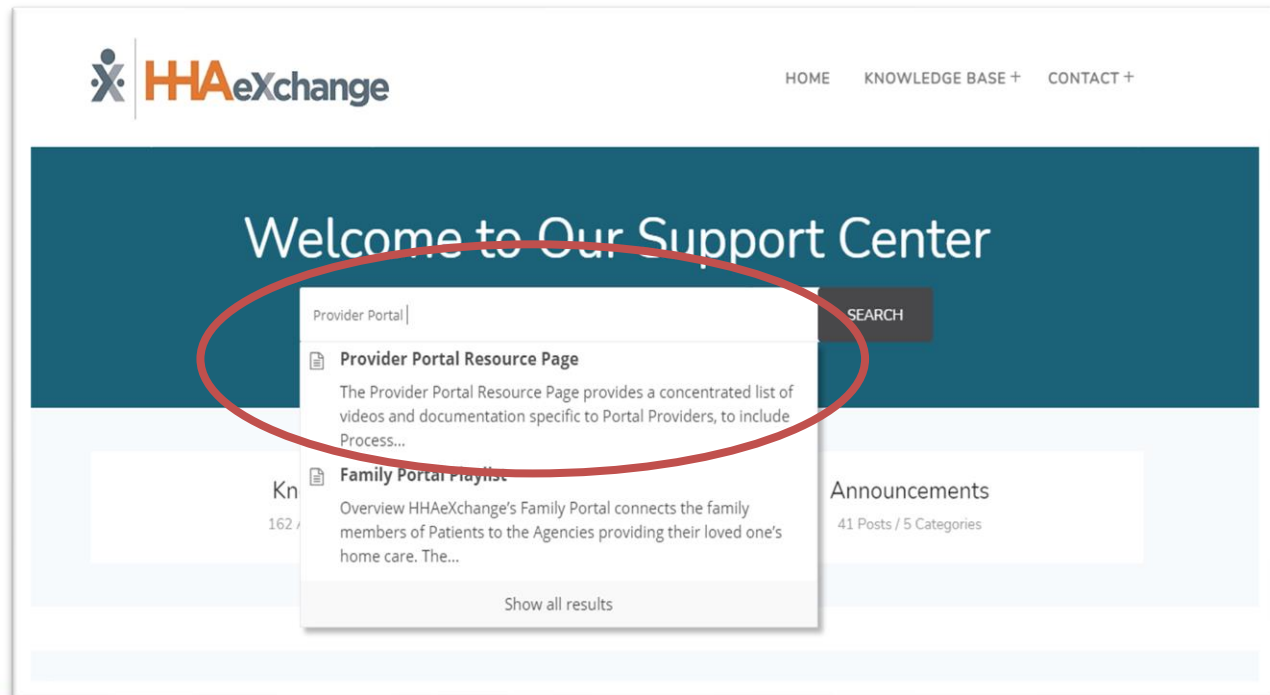
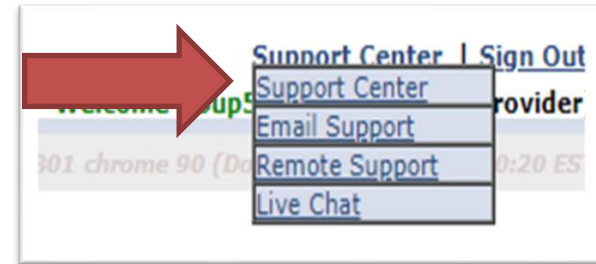
\*Any time you reach out to Support via email, phone or chat a support ticket will be generated. Please make sure out support emails are not blocked by your SPAM filters.



## Support Center in HHAeXchange

Once in the Support Center search: “Provider Resource”

- Select “Provider Portal Resource Page”







## Provider Portal Resources in HHAeXchange

Within the Provider Portal Resource Page, you can access:

- **Process Guides:** Provide full details and instructions of a particular system function
- **Job Aides:** Concentrated instructions of a specific function
- **Training Videos:** Video playlists providing step-by-step system function instructions

### Process Guides –

- [System Introduction](#)
- [Patient Placement & Management\\*](#)
- [Communications \(Linked Contracts\)](#)
- [Caregiver Management](#)
- [Scheduling Visits\\*](#)
- [Visit Confirmation\\*](#)
- [Quick Visit Entry](#)
- [Evv Management\\*](#)
- [Mobile App \(Agency\)](#)
- [Mobile App \(Caregiver\)](#)
- [Reporting](#)
- [Prebilling\\*](#)
- [Billing\\*](#)
- [Admin Functions\\*](#)

### Job Aids –

- [Evv Provider Resources](#) (Includes links to EVV documentation and videos for Caregivers)\*
- [Evv Phone Instructions](#)
- [Evv Phone Instructions \(Spanish\)](#)
- [Call Dashboard Resolutions\\*](#)
- [Mobile App Clock In/Out – Linked and Mutual Patients](#)
- [Mobile App Consecutive Shifts](#)
- [Mobile App Language Options](#)
- [Creating a New Patient and TEMP Authorization\\*](#)

### Videos

- [HHAX System Overview\\*](#)
- [HHAeXchange Management Playlist](#)
- [Scheduling and Visit Management Playlist\\*](#)
- [Billing Processes Playlist\\*](#)
- [EDI Integration Playlist\\*](#)
- [HHAX Administration](#)

\* Most frequently used resources

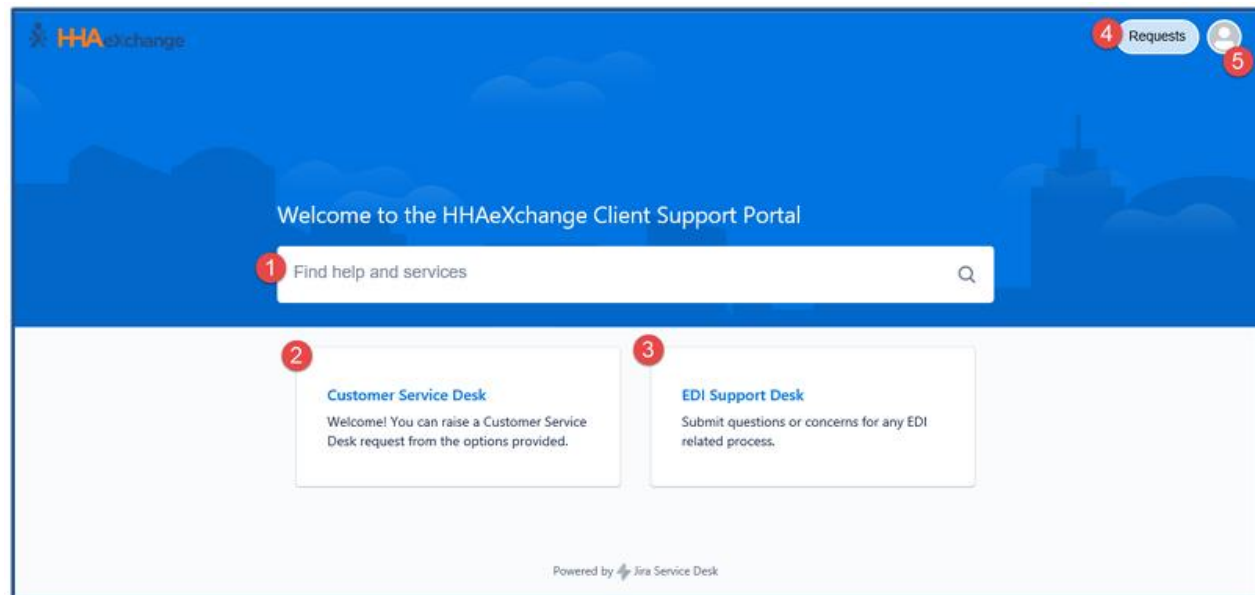


## Client Support Portal in HHAeXchange

The Client Support Portal is designed to allow clients to submit and track all questions and system issues submitted by the user to the Client Support Team.

The link below provide instructions on how to set up access to your own Client Support Portal:

[Client Support Portal Job Aide](#)



# EVV Rounding Rules

DMAHS Newsletter Volume 28 No. 1 Rounding of Service Units – **Home Care:** Home care has explicit time requirements listed in N.J.A.C. 10:60. If a unit of service is defined as a 15 minute interval of face-to-face service, the provider must provide the required 15 minutes and rounding up is not allowed. For example, one unit of service shall be billed for services provided from the first minute through 29 minutes. The second unit of service shall be billed for services provided from 30 minutes through 44 minutes. The third unit of service shall be billed for services provided from 45 minutes to 59 minutes, etc.’

<https://www.njmmis.com/downloadDocuments/28-01.pdf>

# EVV Rounding Rules

DMAHS Newsletter Volume 29 No. 19 PCA Rounding and EVV - **This policy speaks to PCS and ABA services** 'Beyond the initial unit, service times less than half of the unit shall be rounded down while service time equal to or greater than half shall be rounded up. For example, with a 15 minute unit of billing, 53 minutes would consist of 3 full fifteen minute units and a partial unit of 8 minutes. Eight minutes is greater than half. This total may be rounded up to 4 full units. A total of 52 minutes would consist of 3 full fifteen minute units and a partial unit of 7 minutes. Seven minutes is less than half of the unit. This total would be rounded down to 3 full units. The total used for rounding may only include services provided that calendar day. The same process applies for an hourly unit. If 85 minutes are provided, the provider can bill for the first full 60 minute unit but the second 25 minutes would be less than half and would be rounded down. If 100 minutes is provided, the first full 60 minutes is payable as a full unit and the remaining 40 minutes, which is greater than half, would be billable as a second unit.'

<https://www.njmmis.com/downloadDocuments/29-19.pdf>

# EVV Cohort 1

## COHORT 1 Skilled Nursing / Private Duty Nursing / Home Health

Codes	Procedure Name	Unit of Measure	Service Requirements
97597	Debridement , open wound, wound assessment, use of a whirlpool, when performed and instruction(s) for ongoing care, total wound(s) surface area; first 20 sq cm or less	Per visit	PA - REQUIRED POS 12
99601	Infusion- Skilled nursing	Up to 2 hours	PA - REQUIRED POS 12
99602	Infusion- Skilled nursing-additional hour(s)	Each additional hour	PA - REQUIRED POS 12
G0299	Direct skilled nursing services of a registered nurse (run) in the home health or hospice setting	15 mins	PA - REQUIRED POS 12
S9122	Home Health Aide/Certified Nurse Assistant	Per hour	PA - REQUIRED POS 12
S9123	Nursing care, in the home; by registered nurse,	Per hour	PA - REQUIRED POS 12
S9124	Nursing care, in the home; by licensed practical nurse	Per hour	PA - REQUIRED POS 12
S9127	Social work visit, in the home	Per diem	PA - REQUIRED POS 12
T1000	Private duty / independent nursing service(s)	15 mins	PA - REQUIRED POS 12
T1002	Private duty / independent nursing service(s) / RN	15 mins	PA - REQUIRED POS 12
T1003	LPN/LVN SERVICES	15 mins	PA - REQUIRED POS 12
T1030	Nursing care, in the home, by registered nurse	Per diem	PA - REQUIRED POS 12
T1031	Nursing care, in the home, by licensed practical nurse	Per diem	PA - REQUIRED POS 12

# EVV Cohort 2

COHORT 2 Therapies			
Codes	Procedure Name	Unit of Measure	Service Requirements
92507	Speech, Language and Hearing Therapy Individual	Per diem	PA - REQUIRED POS 12
97110	Physical Therapy, Therapeutic procedure, 1 or more areas; therapeutic exercises to develop strength and endurance, range of motion and flexibility	15 mins	PA - REQUIRED POS 12
97129	Cognitive Therapy, Individual	15 mins	PA - REQUIRED POS 12
97130	Therapeutic interventions that focus on cognitive function and compensatory strategies to manage the performance of an activity, direct (one-on-one) patient contact (List separately in addition to code for primary procedure)	Each additional 15 mins	PA - REQUIRED POS 12
97535	Occupational Therapy, Individual - Self-care/home management training (e.g., activities of daily living (ADL) and compensatory training, meal preparation, safety procedures, and instructions in use of assistive technology devices/adaptive equipment) direct one-on-one contact	15 mins	PA - REQUIRED POS 12
G0151	Services performed by a qualified physical therapist in the home health or hospice setting	15 mins	PA - REQUIRED POS 12
G0152	Services performed by a qualified physical therapist in the home health or hospice setting	15 mins	PA - REQUIRED POS 12
S9128	Speech therapy, in the home	Per diem	PA - REQUIRED POS 12
S9129	Occupational therapy, in the home	Per diem	PA - REQUIRED POS 12
S9131	Physical therapy; in the home	Per diem	PA - REQUIRED POS 12

# EVV Cohort 3

## COHORT 3 Applied Behavioral Analysis (ABA) Services

Codes	Procedure Name	Unit of Measure	Service Requirements
97151	Behavior assessment by physician, QHP	15 min units	PA - REQUIRED POS 12
97152	Supporting assessment by Tech	15 min units	PA - REQUIRED POS 12
97153	Adaptive treatment by tech	15 min units	PA - REQUIRED POS 12
97154	Group adaptive treatment by tech	15 min units	PA - REQUIRED POS 12
97155	Adaptive treatment with modification by QHP	15 min units	PA - REQUIRED POS 12
97156	Family adaptive treatment by QHP with or without patient present	15 min units	PA - REQUIRED POS 12
97157	Multiple family group adaptive guidance by QHP	15 min units	PA - REQUIRED POS 12
97158	Group adaptive treatment by QHP	15 min units	PA - REQUIRED POS 12
0362T	Behavior identification assessment requiring administration by QHP, assistance of two or more techs, to address destructive behavior, in a customized environment	15 min units	PA - REQUIRED POS 12
0373T	Adaptive treatment with modifications by QHP, assistance of two or more techs, to address destructive behavior, in a customized environment to address behavior	15 min units	PA - REQUIRED POS 12
96156_EP	DIR Health behavior assessment or re-assessment	Per diem, updated per SME	PA - REQUIRED POS 12
96158_EP	DIR Health behavior intervention	Initial 30 mins	PA - REQUIRED POS 12
96159_EP	DIR Health behavior intervention	Each additional 15 mins	PA - REQUIRED POS 12
96164_EP	DIR Health behavior intervention	Initial 30 mins	PA - REQUIRED POS 12
96165_EP	DIR Health behavior intervention	Each additional 15 mins	PA - REQUIRED POS 12
96167_EP	DIR Health behavior intervention, family	Initial 30 mins	PA - REQUIRED POS 12
96168_EP	DIR Health behavior intervention, family	Each additional 15 mins	PA - REQUIRED POS 12
96170_EP	DIR Health behavior intervention	Initial 30 mins	PA - REQUIRED POS 12
96171_EP	DIR Health behavior intervention	Each additional 15 mins	PA - REQUIRED POS 12