



April 26, 2016

To: New Mexico Personal Care Service Provider Agencies

From: New Mexico Centennial Care Managed Care Organizations

Re: Electronic Visit Verification Implementation

This notice is applicable to all New Mexico Personal Care Service Provider Agencies who are contracted with at least one of the New Mexico Centennial Care MCOs. This includes providers who were previously granted a short term exemption from Electronic Visit Verification (EVV) or who were otherwise delayed in implementation.

On April 18, 2016 the New Mexico Human Services Department issued Letter of Direction (LOD) 53 to the MCOs. This communication will explain the implications of LOD 53 to your organization and the final implementation of EVV for all providers, in all areas of New Mexico. Please carefully review the program rules and criteria detailed below.

Timeline for EVV Implementation:

1. All temporary exemptions are rescinded effective June 1, 2016.
2. Providers who were not granted an exemption, but were otherwise delayed from EVV implementation, have a new go-live date of June 1, 2016.
3. The MCOs individually will be working with provider agencies regarding landline usage, and smartphone stipend incentives, that will be effective on June 1, 2016.
4. The MCOs individually will be working with provider agencies regarding Wi-Fi enabled tablets or other single-purpose devices that will be effective on August 1 for situations in which landlines and smartphone utilization with a stipend is not occurring.
5. Providers will have a grace period until September 1 before paper claims (or web-entered paper claims) will be denied.
6. Beginning September 1, all claims that are not submitted using EVV will be denied by all MCOs.

If you are a provider agency that was granted an exemption after you had already created your account with First Data you will need to call the First Data Help Desk to re-activate your account as soon as possible. In addition, all providers who were previously exempted or otherwise delayed in implementation will have the opportunity to attend refresher training. First Data will be sending out a communication to providers with the dates and times for this training. It is critical that your agency is ready to begin using EVV on June 1, 2016. Failure to do so will impact your claims.

One of the primary obstacles to full implementation of EVV is the rural and frontier nature of the state and the lack of technology in some areas. To address this, the Authenticare application used for EVV has been enhanced to allow visit

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data to be stored for seven (7) calendar days instead of 24 hours. This seven day window aligns with the prevalence of provider agencies collection of paper time sheets. Beginning on June 1, 2016 all caregivers must begin using the EVV system. No provider agencies will be exempt from using EVV. The options for access and criteria for each is listed below

Options and Criteria:

1. **Member's home phone/land line.** Criteria: Effective June 1, members must allow caregivers to use home phone if one is installed in the home to participate in the program, on a statewide basis. If a member refuses to allow the caregiver to use their home phone, the caregiver may use their personal smart phone as described below.
2. **Caregiver's Smart Phone with Stipend.** Effective June 1, 2016, each MCO will provide a stipend to the provider agency to create an incentive for caregivers utilize their personal smartphone and its' existing data plan. The entire stipend will be paid to the caregiver, and the agency may not retain any of it. All stipend payments made by the MCOs are inclusive of gross receipts tax (GRT). Provider agencies will be responsible for collecting information on which caregivers will be using a smart phone and submit one claim per month per caregiver, beginning in July for usage in June. Each MCO will individually provide the rate and code to be billed. For caregivers in areas with limited/no cellular service and no Wi-Fi availability the caregiver must travel to a location with reliable cellular service or Wi-Fi connectivity at least once every 7 calendar days. Provider agency will be responsible for enforcement.

In addition, for all options above the visit data must be electronically submitted. Provider may only manually enter visit data due in unique circumstances that are approved by the MCO authorizing PCS services to the member. Examples of "unique circumstances" include:

- Travel to an area with Wi-Fi or cellular availability would be considered hazardous due to **temporary** weather or road conditions
- The caregiver has a documented illness, injury or personal emergency that prohibits travel

Manual Entry of Visit Data in Authenticare:

In limited circumstances it may be necessary for provider agencies to continue to accept paper time sheets and bill the MCOs through following their normal business practice.

The MCOs reserve the ability to selectively audit visit data that was manually entered. Provider agencies must retain the manually entered documentation and within two (2) business days of receiving a request from the MCO provide the requesting MCO with the paper timesheet or other supporting documents for visit data that was manually entered.

Billing for the Caregiver Stipend:

Provider agencies may begin billing the MCOs for the monthly stipend beginning July 1, 2016 for utilization in June 2016. Agencies may not bill an MCO more than one stipend per caregiver per month. *Stipends will be billed per the Stipend Billing Example below.* MCOs will set individual reimbursement rates for the stipend. The entire stipend must be passed to the caregiver, the agency is not allowed to retain any portion of it.

The MCOs will allow provider agencies and caregivers a maximum of thirty (30) days to transition to the use of the smartphone with the Authenticare application. However, agencies may not submit for the stipend reimbursement unless the caregiver has used their personal smartphone for at least two weeks prior to the submission of the request for reimbursement.

The MCOs have the ability to determine if visit data was recorded via the Authenticare application or if it was manually entered. All MCOs will reconcile stipend payments and recoup any stipend payments that do not meet the criteria outlined above. Unique Circumstances:

- If a member has more than one caregiver and both caregivers utilize their smartphone, agencies may submit for a stipend payment for each caregiver.
- If a caregiver utilizing their smartphone provides services for more than one member and at least two of the members are enrolled with the same MCO agencies may only submit a single stipend payment.
- If a caregiver utilizing their smartphone provides services for more than one member and the members are enrolled with multiple MCOs, agencies may submit a stipend to each MCO. However, agencies will need to submit for reimbursement using the code G9006 with a U2 modifier. In these instances, each MCO will pay 50% of the total stipend amount.

Stipend Billing Example:

G9006 U1 - caregiver will receive the full stipend amount set by the MCO

G9006 U2 - caregiver will receive 50% of the stipend amount from each MCO. In unique circumstances there may be caregivers that provide services to members enrolled with three or more MCOs. In these circumstances, you may submit 50% reimbursement from each MCO.

If you have any questions or concerns regarding this notification please reach out to your Provider Representative from any of the MCOs you are contracted with. In addition to the above, each MCO reserves the right to separately communicate specific terms and conditions based on LOD 53 and the terms of the MCO's provider agreements.