

EVV Home Health FAQs

General Questions

What is EVV and why is it being implemented?

Centers for Medicare and Medicaid Services (CMS) mandated that all states implement Electronic Visit Verification (EVV) for agencies and/or caregivers providing in-home Personal Care, Attendant Care, and Respite services, as well as Home Health Services. This federal requirement is the result of the [21st Century Cures Act](#). EVV protects clients and ensures they get the care they need.

Visits will be electronically verified with the following information:

- Type of service performed
- Individual receiving the service
- Date of service
- Location of service delivery
- Individual providing the service
- Time service begins and ends

What is required of the agency?

Arkansas is providing a State-funded EVV solution called Sandata, which means there is no cost to providers for the software. You can choose to use a different EVV vendor (known as an Alternate EVV or third-party EVV vendor) at your expense. If you do this, it is critical that your chosen vendor integrates with the State's vendor, Sandata. Your vendor will be required to send the EVV data the State needs to verify visits and validate claims. If selecting an Alternate EVV / third-party EVV vendor, please ensure integration capabilities.

Can an agency opt-out?

You must comply with the 21st Century Cures Act, whether through the State-funded solution or through a third-party EVV vendor. If you chose to opt-out, you will not be reimbursed by Arkansas Medicaid for Home Health Services.

As an agency, is this going to cost me anything?

There is no charge to the provider agencies for the State-funded EVV system. If you choose a different solution the State will not cover those costs.

Is there a “soft” go-live date and a “hard” go-live date for implementation?

Arkansas is targeting a March 31, 2025 “soft” go-live. Providers will have at least 60 days to transition to EVV and comply with requirements. If the timeframe is adjusted, communication will be shared with providers and PASSEs.

Is Sandata replacing AuthentiCare?

AuthentiCare is still the vendor for Personal Care Services. Sandata will be used for Home Health Services and is not “replacing” AuthentiCare. If an agency chooses to pursue the use of AuthentiCare as an Alt-EVV/third-party EVV vendor for Home Health, it is the agency’s responsibility to discuss directly with AuthentiCare whether this is an option.

Will a website for billing be available to agency billing managers?

Agency billing managers will continue to submit Home Health claims to MMIS in the same manner they do currently. Claims will not be created out of the EVV system.

Are claims where Medicaid is the secondary biller subject to EVV (e.g., the primary payer is Medicare, but the secondary payer is Medicaid)?

Arkansas Medicaid is required to collect EVV visit data on all Medicaid claims for Personal Care Services (PCS) and Home Health services. There is a process currently in place for EVV PCS that requires submission of a claim in the MMIS provider portal with the denial response EOMB from the secondary payer attached. This will very likely be the same process used for EVV Home Health. DHS will provide confirmation and any additional details ahead of the go-live date.

Is there a plan to bring PCS onto Sandata?

No, not currently.

Should the employers retain a copy of each individual approval letter with the 9-digit practitioner ID number, or will that be available on your website?

Yes, employers should retain a copy of each individual approval letter. The information will be available on the portal, but it is best practice to keep all official correspondence from Arkansas Medicaid.

Will this affect Private duty nursing, as well?

Private Duty Nursing is not affected.

If the clinician PIN is required on claims, is there information regarding which loop and segment this should be included in on the 5010 file?

Yes, information is available and can be found in the Sandata Town Hall #3 slide deck, located at the following link: https://humanservices.arkansas.gov/wp-content/uploads/241212_AR-DHS_EVV_townHall3.pdf. Please refer to slides 11 through 15, specifically.

Where can I get more information?

More information can be found on the DHS website, at the [EVV webpage](#). There are also weekly opportunities for providers and PASSEs to join an EVV Home Health Open Forum. This meeting is held on Wednesday of each week and is a chance for providers and PASSEs to call in and ask questions, provide feedback, and talk with the project team. You can also join simply to listen and observe questions from others. If you did not receive an invitation to this weekly meeting, please email EVVarkansas@dhs.arkansas.gov and request to be added.

Sandata and System Functionality

Who / what is Sandata?

Sandata is the State-selected EVV solution vendor for Home Health services.

What if there is no mobile/cell phone service at the clients care location? If the device is not connected to a network and the staff log in time, how long does it take to have the information available to providers?

Sandata Mobile Connect will work offline. Visit data will be uploaded to EVV once there is a signal.

How accurate is GPS data? We have Location Services turned on for our clinician's iPads for visits and have found that the location indicated is not always showing the actual location of the clinician.

Accuracy is 100% dependent on the device. The Distance Exception is set to 1/8th of a mile. It is recommended that the Call-in & Call-out happen outside of the members' door to have a clear view of the sky.

Will our employees need to call in or use the mobile application to check in and out of a patient visit?

Yes. Employees will need to record visit information through Sandata Mobile Connect. Sandata also provides a Telephony Visit Verification system to capture visit data using the beneficiary's landline.

Registration

How does registration work for agencies and for each individual clinician?

Only the agency will register in the Sandata portal. The individual clinicians will enroll through Arkansas Medicaid as individual providers.

For clarification, each clinician will need their own Arkansas Medicaid ID, rather than using the Agency ID, and their own login for the Sandata portal?

This is correct. Each clinician will enroll with their own Arkansas Medicaid ID. They will have login credentials for Sandata Mobile Connect which will be created using their email address. Each clinician/employee will be required to have a unique email address, and not the agency email address.

Do PTs and PTAs need to register with Arkansas Medicaid as an individual, and receive an NPI?

PTs and PTAs that only work for a Home Health agency can enroll without an NPI as a provider type 95 with specialty NT. The ability to enroll as a non-traditional provider began 12/2/2024. If already enrolled with an NPI, there is no need to re-enroll as a Provider Type 95 with specialty NT.

However, each PT and PTA that works outside of a Home Health agency will need to have an NPI. This is required to enroll with Arkansas Medicaid. PTs and PTAs must 1) have an NPI, and 2) enroll with Arkansas Medicaid. For additional information, please refer to the Arkansas Medicaid Provider Manual. [Specifically, Section 1 - 141.000, Provider Enrollment.](#)

PTs and PTAs should enroll under provider type 21. Both physical therapists and physical therapy assistants should enroll with provider type 21 and the appropriate specialty, PT for therapists and PA for assistants.

Is there any change to the provider's billing process?

There is no change to the billing process yet, but it will be a recommended best practice to include the rendering provider on your claims. Including the rendering provider will be required in the future. When claims are submitted, there will be a verification done for EVV visit data prior to payment. Claims that are submitted when EVV visit data is not captured will be denied.

Training and Resources

Where can I sign up for Sandata system training?

Once training courses and sessions are available, provider administrators and their staff will need to sign up on Sandata Learn, Sandata's Learning Management System ("LMS").

When can we register to start training for the Sandata EVV system?

Training for the Providers who will be using Sandata EVV will be conducted just prior to go-live to ensure knowledge retention. Self-paced training will also be available on Sandata Learn. The self-paced training is now available in the Provider Self-Registration Portal.

If we have 20 employees in our agency, does this mean each one of them will have to complete training, and will each one require individual login credentials?

Agency administrators are required to complete a self-paced course on Sandata Learn on system security. Agency office staff can register for virtual instructor-led training or self-paced courses in Sandata Learn. Caregivers, therapists, and similar employees will be trained on Sandata Mobile Connect and Telephone Visit Verification by agency trainers who have gone through Sandata's training. The Caregiver Library is available without logging in to Sandata On-Demand and is available 24/7.

Can more than one user administrator be set up?

Only 1 agency contact can be entered during registration. Once the program is live in Aggregator or Sandata EVV, the agency administrator is responsible for creating and managing other agency users.

PASSE/MCO

Is Arkansas requiring EVV for MCO payors?

Yes, this is required for MCO (known as PASSEs in Arkansas).

Will MCOs use Sandata as well or another Aggregator?

The MCOs (PASSEs) in Arkansas will use the EVV vendor they select. Currently, the PASSEs and their chosen vendors are as follows:

- Arkansas Total Care – HHAeXchange
- Empower – HHAeXchange
- Summit – CareBridge
- CareSource - CareBridge

Both HHAeXchange and CareBridge are considered Alt EVV vendors. The PASSEs will have to access Sandata's Aggregator to ensure that the information their vendor is capturing is being sent correctly.

Is Home Health like Personal Care, where each PASSE has their own Alt EVV vendor with whom they would send data to the aggregator?

That is correct. Each PASSE can choose which EVV vendor they use, and that vendor sends visit data to the Sandata aggregator. Currently, the PASSEs and their chosen vendors are identified in the item above.

Will PASSE providers automatically be associated with an Alt EVV vendor, meaning providers for Summit and CareSource will be linked to CareBridge, and can CareBridge begin testing on 12/18 without provider action?

Correct: The impacted Alt EVV vendors are CareBridge and HHAX. The Sandata team will coordinate with these vendors to complete testing, certification, and provider linkage.

Alt-EVV / Third-Party Vendor

We are transitioning to EPIC Dorothy as our Home Health EHR next year. Do you already work with other agencies that use this EHR, and if so, how does that interface work and what steps need to be taken to prepare for that transition?

Each separate Alt EVV Vendor must complete the registration and testing process, to be certified to send data to production for that state. EPIC themselves is not a vendor. Each individual provider, using EPIC, must register in the Vendor Portal and complete the testing process. EPIC will need to follow the same steps as any other Alt EVV vendor. We prefer the new vendor's name to be the provider's name followed by Epic (i.e. Providence Home Health - EPIC).

If the provider is using AuthentiCare currently for EVV for Personal Care Services, is that an option for Home Health EVV as well?

Providers using the State-sponsored AuthentiCare EVV system for Personal Care services will not be able to use it for Home Health, unless they have a separate relationship with AuthentiCare as an Alt EVV vendor for their agency, specifically for Home Health.

For an Alt EVV vendor, when will testing credentials be provided?

Testing credentials will be available for testing and certification. Both the Provider Self-Registration and Vendor Registration portals are open as of January 15, 2025. Vendors being able to test is dependent upon the provider agency registering in the Provider Self-Registration portal. Once a provider has registered and associated their Alt EVV vendor, an email will be generated with the next steps so the Alt EVV vendor can proceed with registering in the Vendor portal.

Do you have a list of Alt EVV vendors that have already registered with you?

A list of Alt EVV vendors will be available for selection upon provider registration and will not be provided prior to registration. All Alt EVV vendors must go through a certification process for each new State implementation. This list will not be provided prior to registration because all Alt EVV vendors must go through a certification process for each new State implementation.

Is there a link available to the Alt EVV specifications for Arkansas?

Yes, a link to the Alt EVV tech specs can be found on the [AR-DHS EVV webpage](#) and [Sandata On-Demand](#).

Can Sandata provide clarification on the process for vendors who aggregate data on behalf of multiple provider agencies to manage credentialing / authentication with the removal of EntityGUIDs from the specifications / process. Will there be separate credentials for each provider, or will the Alt EVV Vendor be able to leverage a single credential without the use of an EntityGUID?

Yes. Each provider will have separate production credentials, for each solution. No vendor will be using an EntityGuid for Arkansas.

Will the PASSEs continue with the Alt EVV they use now such as CareBridge and HHAeXchange?

The PASSEs have indicated to us that they will continue to use their current EVV vendors for Home Health.

We will use Sandata initially because we are in the middle of a change in EHR systems. Will there be a process of moving to an Alt EVV vendor later?

There is a standard process where you can change your EVV solution. Please submit Provider Registration using Sandata EVV. When ready to change to Alt EVV, please submit a ticket request, via Sandata on Demand at <https://sandata.zendesk.com/hc/en-us>. Please select the appropriate web form, to capture the provider agency and Alt EVV vendor details.

After Sandata Support updates the provider profile, the Alt EVV vendor will use the Vendor Portal to generate production credentials, after they have completed testing.

Policy

Is there a “hard stop” regarding when an agency cannot provide Home Health services for a patient?

The go-live date for EVV is targeted for March 31, 2025. There will be, at a minimum, a 60-day period for agencies to transition to EVV and comply with requirements before potential impact to payment. There will not be a point at which agencies cannot provide Home Health services for a patient, but there will be a point—the EVV go-live date or, ideally, ahead of the go-live date—in which Home Health services must be provided using EVV.

What if I need more information?

For more EVV Home Health related information, please visit: [AR-DHS EVV webpage](#).

Additional questions can be submitted to the Arkansas EVV team directly, at

evvarkansas@dhs.arkansas.gov

If we previously did the attestation form, do we need to do a new one showing Sandata as one we are going with?

You will have to complete an attestation for Home Health if you are using an Alt EVV Vendor. If your agency has submitted an attestation for Personal Care, you will still be required to submit an attestation for Home Health.