LTSS*Maryland* Provider Billing Support Office

Developmental Disabilities Administration - Traditional Service Delivery Model

Guidance for Electronic Visit Verification Systems Use

Maryland Department of Health's (MDH) Electronic Visit Verification (EVV) System is used for billing Personal Supports (both in person and virtual) and Respite Care 15-minute services under the Developmental Disabilities Administration's traditional service delivery model. **Respite Day and Respite Camp will continue to be billed using the non-EVV module of Provider Portal or PCIS2 if providers are not presently billing in LTSS*Maryland* Provider Portal for non-EVV Respite services.** EVV is not used to bill Respite Care daily services provided by a licensed provider or camp.

Important Notes:

- In the event of a public health emergency or state of emergency, the approval of federal disaster relief under the Medicaid State Plan, Emergency Preparedness and Response Appendix K, or other State and/or federal authorities may supersede this policy, standards, and requirements.
- Live-in caregivers may request exemption from some EVV service recording requirements. For more information on exemptions, go to this page on the MDH website.

Policy	Explanation	Dates	Guidance
1. Using MDH's EVV System			
1.1 Staff Profile	All Direct Support Professionals (DSPs), including temporary staff, must have a staff profile that includes a valid and accurate social security number or Individual Taxpayer Identification Number (ITIN), in the Provider Portal prior to the DSP's first service.	**Effective Date:** January 1, 2021	COMAR 10.09.36.03-2
1.2 Staff Training	Agencies are responsible for properly training all DSPs on how to use the EVV system before DSPs provide services. **Note:** LTSS*Maryland* includes user manuals including DDA's Provider Portal manual and EVV manual, found on the LTSS*Maryland* training website.	**Effective Date:** January 1, 2021	COMAR 10.09.36.03-2
1.3 Requirements for Recording Services with EVV	Staff providers must use the LTSSMaryland EVV Mobile App when clocking in and out. If the mobile app is not available, staff providers must use the ISAS Telephone EVV with a phone number that is authorized in the participant's LTSSMaryland client profile to record their service times. Use of an unauthorized phone number will be investigated and will impact provider payment.	**Effective Date:** January 1, 2021	COMAR 10.09.36.03-2

Policy	Explanation	Dates	Guidance
1.4 Accurate Service Information	The service times, staff name, and staff social security number listed on a service must be accurate. Providing incorrect or inaccurate information is considered fraudulent billing and is subject to payment denial or recovery of payment.	**Effective Date:** January 1, 2021	COMAR 10.09.36.03-2
1.5 Provider Portal User Profiles	All Provider administrators and office staff accessing the Provider Portal must have a unique username and password.	**Effective Date:** January 1, 2021	COMAR 10.09.36.03-2
1.6 Log in credentials/passwords	All users must have confidential individual log-in credentials and passwords. The sharing of log-in credentials and/or passwords is strictly prohibited.	**Effective Date:** January 1, 2021	COMAR 10.09.36.03-2
2. OTP Policy			
2.1 One Time Passcode (OTP) Device Must Stay With the Participant	A One Time Passcode (OTP) device must always remain with the participant to whom it was assigned. DSPs and Providers should not keep OTP devices in their possession. It is considered fraudulent behavior for a DSP or provider to take the OTP device out of the participant's possession and use it.	**Effective Date:** January 1, 2021	COMAR 10.09.36.03-2
3. Service-related Policies			
3.1 Protection of Confidential Information	Providers must not share Protected Health Information (PHI). When emailing ISAS please only send the Participant's 15-digit Client ID, found in the Provider Portal. **Recommended Subject Line:** "Personal Supports Billing Issue – [Insert Client ID]" "Respite Care Services Billing Issue – [Insert Client ID]"	**Effective Date:** January 1, 2021	COMAR 10.09.36.03-2
3.2 Payment Only for Direct Services	Providers will only be paid for direct services provided to participants unless otherwise authorized by the DDA. Direct services require the DSP to be **physically present** with the participant and provide personal supports (unless virtual supports are included in the participant's Person Centered Plan (PCP)) or respite care services. The following do **NOT** constitute Personal Supports direct services and cannot be billed for payment: ● Running errands without the participant present. ● Services provided to the participant while under the care of another entity (e.g., the participant is admitted to a nursing facility/rehab facility, imprisoned, etc.) The following do NOT constitute Respite Care Service direct services and cannot be billed for payment:	**Effective Date:** January 1, 2021	COMAR 10.09.36.03-2

Policy	Explanation	Dates	Guidance
	• Running errands without the participant present. • Services provided to the participant while under the care of another entity (e.g., the participant is admitted to a nursing facility/rehab facility, imprisoned, etc.) • Services provided to the participant during an acute care hospital stay		
3.3 Verifying Eligibility	MDH can only reimburse agencies for services provided to eligible participants. Providers must check participants' eligibility daily within the provider portal and Eligibility Verification System (EVS).	**Effective Date:** January 1, 2021	COMAR 10.09.36.03 COMAR 10.09.36.03-2
3.4 Clocking In and Out During Periods of Ineligibility	If the participant has lost eligibility and/or filed an appeal to regain eligibility, the provider can choose to continue providing services at their own risk; however providers will not be paid during periods of participant ineligibility. **Important:** If eligibility is regained, the provider will receive retroactive pay only if staff continued to use EVV to clock in/out for services provided during the period of ineligibility. If the staff did not use EVV, payment will not be issued.	**Effective Date:** January 1, 2021	COMAR 10.09.36.03-2
3.5 Participants Cannot Receive Services in a Provider –Owned or Controlled Residence	Personal Supports and Respite Care Services 15 minute services can only be provided to participants who live in their own or family homes. Therefore, MDH can **NOT** pay for Personal Supports or Respite Care 15 minute services provided in Provider Licensed settings, including Community Living Group Homes, and Community Living Enhanced Supports settings or within Shared Living and Supported Living service.	**Effective Date:** January 1, 2021	COMAR 10.09.36.03-2
4. Exception Resolution Policies			
4.1 Overlapping Services	Providers cannot be paid for service times that overlap.	**Effective Date:** January 1, 2021	COMAR 10.09.36.03-2
4.2 Missing Time Submission Deadline	Missing Time Requests (MTRs) must be submitted within 30 calendar days from the original Date of Service.	**Effective Date:** January 1, 2021	COMAR 10.09.36.03-2
4.3 Six (6) Missing Time Limit	Unless a valid and verifiable excuse is given, MDH will only approve up to 6 MTRs per month per DSP.	**Effective Date:** January 1, 2021	COMAR 10.09.36.03-2
5. Payment Policies			
5.1 Claim Adjustments	Claims must be submitted and processed for payment within one year of the date of service delivery. No claims may be paid or adjusted one year after the date of service.	**Effective Date:** January 1, 2021	COMAR 10.09.36.03-2

Policy	Explanation	Dates	Guidance
5.2 Repayment of Over-Paid Funds	Providers must reimburse MDH for any overpayment of funds.	**Effective Date:** January 1, 2021	COMAR 10.09.36.03-2
5.3 EVV Work Week	The EVV workweek is from Thursday to Wednesday.	**Effective Date:** January 1, 2021	COMAR 10.09.36.03-2
5.4 PCP Authorized Hours	MDH will only pay providers up to the maximum monthly units for Personal Supports or annual units for Respite Care Services that are authorized on a participant's PCP. Services that exceed the PCP authorization require review.	**Effective Date:** January 1, 2021	COMAR 10.09.36.03-2

Contacts and Resources

Billing Questions **Policy Questions**	**LTSSMaryland Provider Billing Support Office**	**MDH.LTSSBilling@maryland.gov** **410-767-1719**
Technical Issues **How to Questions** **Account Registration**	**LTSSMaryland Help Desk**	ltsshelpdesk@ltssmaryland.org 1-855-463-5877
OTP Device Issues **Plan of Service Questions** **Client Eligibility Issues**	**Coordinator of Community Services**	Specific to Client
Register for Direct Deposit **Missing Checks**	**Maryland Comptroller**	1-800-638-2937 410-260-7980