

Provider Newsbrief

May 15, 2023

Important EVV Updates

*Note: An incomplete version of this information was included in the **B – UHP Provider Update** on May 12. We apologize for any confusion this may have caused.*

We understand Electronic Visit Verification (EVV) has been a learning curve and an adjustment for everyone: members, families, direct care workers, provider agencies and health plans. Banner Health is here to support you, to answer questions and to provide technical assistance and/or education as needed. We are sending this communication to keep you updated on the most pressing topics based on our day-to-day interactions with you. Please review the following updates and/or changes listed below:

Clarification on hourly (S-codes) and information for Sandata Users billing hourly nursing codes (S9123 and S9124)

- This communication is being sent to clarify that while the hourly nursing codes (S9123 and S9124) have been designated as private duty nursing or continuous nursing codes for the purposes of EVV, they are not exclusive to the provision of private duty nursing. The codes may also be utilized for the provision of home health or intermittent services. When providing private duty nursing, only the hourly nursing codes are allowed to be billed for those services.
- AHCCCS will be working on policy revisions in the AHCCCS Medical Policy Manual, Home Health (310-I) and Private Duty Nursing Policies (1240-G) to offer clarification on the permitted use of the billing codes. For providers using the Sandata system, the short definition of the S-codes in the system is designated as “private duty nursing” which may lead to some confusion. AHCCCS will work with Sandata to update the description to be more general and reflect the hourly billing nature of the code. In the interim, providers should simply ignore the description and select the code that they are authorized and contracted to provide when navigating the EVV system.

Clarification on rule 2 procedure codes and provider outreach to resubmit claims.

- Sandata uses rules to determine which visits are going to pass EVV validation. Due to how the Rule 2 validations were set up by Sandata, there are no per diem or per visit services that align with these parameters (see chart below for more details). Therefore, for any service that is paid on a per diem or per visit basis (and subject to EVV), the provider is not getting paid because they are not passing EVV unit validation performed by Sandata. Until Sandata can have their system appropriately process these situations (anticipated to be June 21, 2023), we will manually override EVV claims that are for the below HCPCs and units that come back from Sandata as a unit mismatch per AHCCCS

request. AHCCCS will be doing the same process to override the encounters in the scenarios below that would pend for Z942. AHCCCS is also requesting that plans reprocess any denied claims that fell into one of the categories below with a date of service on or after Jan. 1, 2023.

- *Note: Providers will need to log into AHCCCS Service Confirmation Portal to manually enter the code into this system. Please click on the link below and view the section under "AHCCCS Service Confirmation Portal" for step-by-step instructions on how to manually enter codes into the system. Electronic Visit Verification (EVV) Website (azahcccs.gov)*

Per Diem/Per Visit Services

Code	Description	Unit Guidance	Coding Standards/System Edits
S5151	Respite	Per Diem - anything more than 49 units would pass	Per the document linked anything 49 units and over is a per diem
S5136	Companion Care	Per Diem - anything more than 24 units would pass	24 units or more according to the system would be a per diem S5136
S5181	Respiratory Therapy	Per Visit - anything more than 0 units would pass	Only allowed once per day per the code description and there is not a 15-minute code, there is an initial evaluation S5180 allowed once per day and then the actual treatment
S9128	Speech Therapy	Per Visit - anything more than 0 units would pass	Only allowed once per day per the code description and there is not a 15-minute code, this is an all-inclusive code
S9129	Occupational Therapy	Per Visit - anything more than 0 units would pass	Only allowed once per day per the code description and there is not a 15-minute code, this is an all-inclusive code
S9131	Physical Therapy	Per Visit - anything more than 0 units would pass	Only allowed once per day per the code description and there is not a 15-minute code, this is an all-inclusive code.
T1021	Home Health Aide	Per Visit - anything more than 0 units would pass	One unit of LHA services is one visit. A visit is usually two hours.

If you have any questions, please contact the Provider Experience Center at (800)582-8686, TTY 711, Monday through Friday, 7:30 a.m. -5:00 p.m.