## **Electronic Visit Verification (EVV) Visit Transaction Rejection Guide**

Program providers and financial management services agencies (FMSAs) who receive EVV visit transaction rejections in the EVV system from the EVV Aggregator must correct the EVV data element(s) that are causing the rejection before submitting a claim for EVV services.

This guide assists program providers and FMSAs with identifying and taking the necessary steps to correct an EVV visit transaction rejection. After making the necessary corrections to clear the rejection, the EVV system automatically resubmits the corrected EVV visit transaction to the EVV Aggregator to validate the data element(s).

Program providers and FMSAs can view the rejection number(s) and description(s) associated with a rejected EVV visit transaction in the EVV system and in the EVV Portal.

For instructions on how to view rejected EVV visit transactions in the EVV system, contact your EVV vendor or Proprietary System Operator (PSO).

For instructions on how to use the EVV Portal to view rejected EVV visit transactions, refer to the *Electronic Visit Verification (EVV) Portal Standard Reports and Search Tools Job Aid for Program Providers and Financial Management Services Agencies (FMSAs)* on the TMHP EVV Training webpage.

Rejection	Rejection	Resolution Tips
Number	Description	
Ex0001C	The Provider TIN on	The Taxpayer Identification Number (TIN) in the EVV system must match the TIN in the Health and
	the EVV visit does	Human Services Commission (HHSC) systems.
	not match our	
	records for this provider.	Verify the TIN for your program provider or FMSA.
		To correct your TIN in the HHSC systems, use the appropriate method below based on your program:
		<ul> <li>Acute care fee-for-service (FFS) program providers and FMSAs can update and verify information</li> </ul>
		through the Provider Information Management System (PIMS), or by fax or mail using the
		<u>Provider Information Change Form</u> . Access PIMS through My Account on <u>TMHP.com</u> and search by National Provider Identifier (NPI).*
		<ul> <li>Home and Community-based Services (HCS), Texas Home Living (TxHmL), Community Living</li> </ul>
		Assistance and Support Services (CLASS), and Deaf Blind with Multiple Disabilities (DBMD)
		program providers and FMSAs - <u>IDDwaivercontractenrollment@hhsc.state.tx.us</u> or call (512) 438-
		3234.
		<ul> <li>Youth Empowerment Services (YES) Waiver program providers - YESWaiver@hhsc.state.tx.us</li> </ul>
		<ul> <li>Home &amp; Community-Based Services - Adult Mental Health (HCBS-AMH) program providers -</li> </ul>
		HCBS-AMH.Services@hhsc.state.tx.us
		o Community Attendant Services (CAS), Family Care (FC), and Primary Home Care (PHC) program
		providers - email <a href="mailto:hhseopcm@hhsc.state.tx.us">hhseopcm@hhsc.state.tx.us</a> or call (512)-206-3979.
		<ul> <li>Managed care organization (MCO) Long-term Services and Supports (LTSS) providers -</li> </ul>
		MCO LTSS Provider Re-Enrollment@hhsc.state.tx.us.
		After you make the appropriate updates and confirm the changes, the EVV system will resubmit the EVV
		visit transaction to the EVV Aggregator.
		* Program providers and FMSAs should contact the TMHP EDI Help Desk at 888-863-3638, Option 4, for
		assistance with creating a TMHP account.
		assistance with creating a rivini account.

Rejection Number	Rejection Description	Resolution Tips
Ex0002C	Provider NPI cannot be validated as active for the visit date.	The NPI for this date, for this service, and for this member must match the NPI in the HHSC systems.  To confirm the NPI has active enrollment and matches the NPI in the HHSC systems for the visit date, check the following HHSC records:  O Acute care FFS program providers and FMSAs can contact TMHP Acute Care at 1-800-925-9126, Option 2, or can verify information through PIMS. Access PIMS through My Account on TMHP.com and search by NPI.*  O Long-Term Care (LTC) FFS program providers and FMSAs can contact TMHP LTC at 1-800-626-4117, Option 2.  O MCO LTSS providers can contact HHSC at MCO LTSS Provider Re-Enrollment@hhsc.state.tx.us.  * Program providers and FMSAs should contact the TMHP EDI Help Desk at 888-863-3638, Option 4, for assistance with creating a TMHP account.

Rejection Number	Rejection Description	Resolution Tips
Ex0003C1	It is not possible to validate provider API as active for the visit date.	Verify the Atypical Provider Identifier (API) for your program provider or FMSA.  Confirm the API has active enrollment for the visit date in the HHSC systems:  Acute care FFS program providers and FMSAs can contact TMHP Acute Care at 1-800-925-9126, Option 2, or can verify information through PIMS. Access PIMS through My Account on TMHP.com and search by API.*  ITC FFS program providers and FMSAs can contact TMHP LTC at 1-800-626-4117, Option 2.  MCO LTSS providers can contact HHSC at MCO LTSS Provider Re-Enrollment@hhsc.state.tx.us.  *Program providers and FMSAs should contact the TMHP EDI Help Desk at 888-863-3638, Option 4, for assistance with creating a TMHP Portal Account.

Rejection Number	Rejection Description	Resolution Tips
Ex0004C	The Provider TPI on the EVV visit is not	Verify the Texas Provider Identifier (TPI) for your program provider or FMSA.
	associated with this provider NPI/API for the visit date.	Confirm the TPI has active enrollment for the visit date and is associated to the NPI in the provider enrollment system:
		<ul> <li>Acute care FFS program providers and FMSAs can contact TMHP Acute Care at 1-800-925-9126,         Option 2, or can verify information through PIMS. Access PIMS through My Account on         <u>TMHP.com</u> and search by NPI.*</li> </ul>
		*Program providers and FMSAs should contact the TMHP EDI Help Desk at 888-863-3638, Option 4, for assistance with creating a TMHP Portal Account.

Rejection Number	Rejection Description	Resolution Tips
Ex0007C1	The Provider Number on the EVV visit is not associated with this provider NPI/API for the Visit Date.	Confirm association of the NPI on the EVV visit transaction to the LTC provider number (i.e., contract number):  O Contact TMHP LTC at 1-800-626-4117, Option 2, for enrollment questions.  Confirm that your provider number and associated NPI are correct and show up in your provider profile in the EVV system.  If necessary, perform visit maintenance on the rejected EVV visit transaction: O Visits within 60 days – Perform visit maintenance in the EVV system O Visits beyond 60 days – Submit a visit maintenance unlock request to the appropriate payer for approval

Rejection	Rejection	Resolution Tips
Number Ex0007C2	Description  Member on the EVV	Confirm that the program provider or FMSA is authorized for the member using MESAV on TMHP.com.*
2,000,02	visit is not	estimination that the program provider of rivis/vis duthorized for the member daing (vies/v) on him that the program provider of rivis/vis duthorized for the member daing (vies/v) on him that the program provider of rivis/vis duthorized for the member daining (vies/v) on him that the program provider of rivis/vis duthorized for the member daining (vies/v) on him that the program provider of rivis/vis duthorized for the member daining (vies/v) on him that the program provider of rivis/vis duthorized for the member daining (vies/v) on him that the program provider of rivis/vis duthorized for the member daining (vies/v) on him that the program provider of rivis/vis duthorized for the member daining (vies/v) on him that the provider of the prov
	authorized for this Provider Number on this visit date in our	HCS and TxHmL program providers and FMSAs must use the CARE system to check for authorization information.
	records.	HCBS-AMH program providers should email <a href="https://example.com/html/&gt; HCBS-AMH.Services@hhsc.state.tx.us">hhsc.state.tx.us</a> to confirm a member's Medicaid eligibility.
		YES program providers should <u>submit a Medicaid Eligibility Verification (MEV) request</u> through CMBHS and verify the member's Medicaid status through the <u>Texas Integrated Eligibility Redesign System</u> ( <u>TIERS</u> ).
		Confirm that the member's authorization displays the correct provider number in the EVV system.
		After you make the appropriate updates, perform visit maintenance on the rejected EVV visit transaction:
		<ul> <li>Visits within 60 days – Perform visit maintenance in the EVV system</li> </ul>
		<ul> <li>Visits beyond 60 days – Submit a visit maintenance unlock request to the appropriate payer for approval</li> </ul>
		*Program providers and FMSAs should contact the TMHP EDI Help Desk at 888-863-3638, Option 4, for assistance with creating a TMHP Portal Account.

Rejection Number	Rejection Description	Resolution Tips
Ex00031C	The Member's Payer on the EVV visit does not match our records for this Member.	Confirm the member's payer by checking the eligibility record for the visit date:  O LTC FFS program providers and FMSAs can check Medicaid Eligibility and Service Authorization Verification (MESAV) through their TMHP.com account.*  O Acute care FFS program providers and FMSAs or MCO LTSS providers can check Eligibility Verification through their TMHP.com account.  Confirm the payer information is correct on the member's authorization in the EVV system.  After you make the appropriate updates, perform visit maintenance on the rejected EVV visit transaction:  O Visits within 60 days – Perform visit maintenance in the EVV system  Visits beyond 60 days – Submit a visit maintenance unlock request to the appropriate payer for approval  *Program providers and FMSAs should contact the TMHP EDI Help Desk at 888-863-3638, Option 4, for assistance with creating a TMHP Portal Account.
Ex00034C1	Our records do not indicate the Member Medicaid ID on the EVV visit.	Confirm the member's Medicaid ID is correct and that the member has eligibility for the visit date:  o LTC FFS program providers and FMSAs can check MESAV through their TMHP.com account.*  o Acute care FFS program providers and FMSAs or MCO LTSS providers can check Eligibility Verification through their TMHP.com account.  *Program providers and FMSAs should contact the TMHP EDI Help Desk at 888-863-3638, Option 4, for assistance with creating a TMHP Portal Account.

Rejection Number	Rejection Description	Resolution Tips
Ex00034C2	The Member Medicaid ID on the EVV visit does not have active Medicaid eligibility for the visit date.	Confirm the member's Medicaid eligibility for the visit date:  o LTC FFS program providers and FMSAs can check MESAV through their TMHP.com account.*  o Acute care FFS program providers and FMSAs or MCO LTSS providers can check Eligibility Verification through their TMHP.com account.  *Program providers and FMSAs should contact the TMHP EDI Help Desk at 888-863-3638, Option 4, for assistance with creating a TMHP Portal Account.
Ex00043C	The MCO Member SDA on the EVV visit does not match the Plan Code associated with the Member's payer.	Confirm the member's Service Delivery Area (SDA) by checking the eligibility record for the visit date:  O LTC FFS program providers and FMSAs can check MESAV through their TMHP.com account.*  O Acute care FFS program providers and FMSAs or MCO LTSS providers can check Eligibility Verification through their TMHP.com account.
		Confirm the correct authorization is assigned to the member in the EVV system.
		After you make the appropriate updates, perform visit maintenance on the rejected EVV visit transaction:  O Visits within 60 days – Perform visit maintenance in the EVV system O Visits beyond 60 days – Submit a visit maintenance unlock request to the appropriate payer for approval
		*Program providers and FMSAs should contact the TMHP EDI Help Desk at 888-863-3638, Option 4, for assistance with creating a TMHP Portal Account.

Rejection	Rejection	Resolution Tips
Number	Description	
Ex00049C1	Duplicate visit transaction found with this Visit ID.	Contact your Program Provider or FMSA EVV System Administrator to correct this issue. The EVV system already submitted this EVV visit transaction to the EVV Aggregator.
		Request your Program Provider or FMSA EVV System Administrator verify the reason for the duplication and confirm if you need to perform visit maintenance so that this EVV visit transaction can be sent to the EVV Aggregator as an update instead.
		If necessary, perform visit maintenance on the rejected EVV visit transaction:  O Visits within 60 days – Perform visit maintenance in the EVV system
		<ul> <li>Visits beyond 60 days – Submit a visit maintenance unlock request to the appropriate payer for approval</li> </ul>
Ex00049C2	No previous record found with this Visit ID for update.	Contact your Program Provider or FMSA EVV System Administrator to correct this issue. The EVV Aggregator does not have a record of this EVV visit transaction.
		Confirm with your Program Provider or FMSA EVV System Administrator if you need to resolve any issues within your EVV system so that this EVV visit transaction can be sent to the EVV Aggregator as a new EVV visit transaction instead.
		If necessary, perform visit maintenance on the rejected EVV visit transaction:  O Visits within 60 days – Perform visit maintenance in the EVV system
		<ul> <li>Visits beyond 60 days – Submit a visit maintenance unlock request to the appropriate payer for approval</li> </ul>

Rejection	Rejection	Resolution Tips
Number	Description	
Ex00057C1	The Service Group and Service Code combination on the EVV visit are not eligible for EVV.	Refer to the HHSC EVV Service Bill Codes table to confirm EVV Service Groups and Service Codes.  https://hhs.texas.gov/sites/default/files/documents/doing-business-with-hhs/providers/long-term-care/evv/evv-service-bill-codes-table.xlsx  Confirm that the member's authorization displays the correct Service Group/Service Code in the EVV system.
		After you make the appropriate updates, perform visit maintenance on the rejected EVV visit transaction:  O Visits within 60 days – Perform visit maintenance in the EVV system O Visits beyond 60 days – Submit a visit maintenance unlock request to the appropriate payer for approval
Ex00057C2	The Service Group and Service Code combination on the EVV visit are not valid for the Provider number on the visit.	Confirm active enrollment for the LTC provider number (i.e., contract number) for the Service Group and Service Code for the EVV visit date:  O Contact TMHP LTC at 1-800-626-4117, Option 2, for enrollment questions.  Confirm that the member's authorization displays the correct Service Group/Service Code and/or the correct provider number in the EVV system.  After you make the appropriate updates, perform visit maintenance on the rejected EVV visit transaction:  O Visits within 60 days – Perform visit maintenance in the EVV system  Visits beyond 60 days – Submit a visit maintenance unlock request to the appropriate payer for approval

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Rejection Number	Rejection Description	Resolution Tips
Ex00057C3	Description  The Member on the EVV visit is not authorized for this Service Group/Service Code on this visit date in our records.	Confirm the member's LTC FFS authorization using MESAV on TMHP.com.*  HCS and TxHmL program providers and FMSAs must use the Client Assignment and Registration (CARE) system to check for authorization information.  HCBS-AMH program providers should email HCBS-AMH.Services@hhsc.state.tx.us to confirm a member's Medicaid eligibility.  YES program providers should submit a Medicaid Eligibility Verification (MEV) request through CMBHS and verify the member's Medicaid status through the Texas Integrated Eligibility Redesign System (TIERS).
		Confirm the member's authorization displays the correct Service Group/Service Code in the EVV system.  After you make the appropriate updates, perform visit maintenance on the rejected EVV visit transaction:  O Visits within 60 days – Perform visit maintenance in the EVV system  O Visits beyond 60 days – Submit a visit maintenance unlock request to the appropriate payer for approval  *Program providers and FMSAs should contact the TMHP EDI Help Desk at 888-863-3638, Option 4, for assistance with creating a TMHP Portal Account.

Rejection	Rejection	Resolution Tips
Number	Description	
Ex00059C	The EVV HCPCS Code and EVV Modifier	Refer to the HHSC EVV Service Bill Codes table to confirm EVV-relevant Healthcare Common Procedure Coding System (HCPCS) code and modifier combinations.
	combination on the EVV visit is not eligible for EVV.	https://hhs.texas.gov/sites/default/files/documents/doing-business-with-hhs/providers/long-term-care/evv/evv-service-bill-codes-table.xlsx
		Review the member's authorization to confirm EVV-relevant services.
		Confirm that the member's authorization displays the correct HCPCS code/modifier(s) combination in the EVV system.
		After you make the appropriate updates, perform visit maintenance on the rejected EVV visit transaction:
		<ul> <li>Visits within 60 days – Perform visit maintenance in the EVV system</li> </ul>
		<ul> <li>Visits beyond 60 days – Submit a visit maintenance unlock request to the appropriate payer for approval</li> </ul>
Ex00065C	The EVV Actual Hours calculation on the EVV visit is	Confirm that the actual hours on the EVV visit transaction match the time difference between EVV Call Out and EVV Call In time in the EVV system.
	not correct for the Call In and Call Out time on the visit.	If this was an auto verified visit, contact your EVV vendor or Proprietary System Operator (PSO) to assist with resolving.
		If necessary, perform visit maintenance on the rejected EVV visit transaction:
		<ul> <li>Visits within 60 days – Perform visit maintenance in the EVV system</li> </ul>
		<ul> <li>Visits beyond 60 days – Submit a visit maintenance unlock request to the appropriate payer for approval</li> </ul>



Rejection	Rejection	Resolution Tips
Number	Description	
Ex00067C	The EVV Units on the EVV visit do not match the EVV Billed Hours based on the Unit of Measurement.	In the EVV system, confirm that the EVV units calculated/entered on the EVV visit transaction match the billed hours based on the Unit Type as specified on the HHSC EVV Service Bill Codes table. <a href="https://hhs.texas.gov/sites/default/files/documents/doing-business-with-hhs/providers/long-term-care/evv/evv-service-bill-codes-table.xlsx">https://hhs.texas.gov/sites/default/files/documents/doing-business-with-hhs/providers/long-term-care/evv/evv-service-bill-codes-table.xlsx</a>
	Wedsurement.	If this was an auto verified visit, contact your Program Provider or FMSA EVV System Administrator to assist with resolving. If you cannot update the units, contact your EVV vendor or PSO to assist with resolving.
		If necessary, perform visit maintenance on the rejected EVV visit transaction:  O Visits within 60 days – Perform visit maintenance in the EVV system  O Visits beyond 60 days – Submit a visit maintenance unlock request to the appropriate payer for approval