OPRA Ohio Provider Resource Association | **GREAT PROVIDER SERIES**

All Things Electronic Visit Verification (EVV)

Great Providers Have Strong Operations: EVV At-A-Glance

Why EVV?

- Required by federal law to ensure accountability, accuracy, and integrity in Medicaid services

- Protects people served by confirming visits occur as authorized.

- Helps prevent fraud, waste, and errors.

October 1 Deadlines

- Claims without EVV will be denied.

- Error reports now limited to post-October 1 service dates.

Tips to Stay Compliant

- Review weekly provider reports for mismatches.

- Double-check provider and individual connections in Sandata.

- Keep staff trained on logging visits accurately.

- Use the EVV Provider Dashboard to track and resolve issues.

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Electronic Visit Verification

Electronic Visit Verification (EVV) isn't new—but October 1, 2025, marks a turning point. Beginning this month, claims that require EVV and do not have a matching EVV record will be **denied**.

EVV is a federally mandated system under the 21st Century Cures Act. It verifies when provider visits occur and documents the start and end times. In Ohio, EVV applies to:

- **Homemaker/Personal Care (HPC)** and participant-directed HPC billed in 15-minute units
- **Residential respite** billed in 15-minute units
- **Waiver nursing**
- **Waiver nursing delegation** (RN/LPN consultation)
- **Waiver nursing assessment**

EVV: We're in it Together

We've said it before, and it's worth repeating: **compliance is no longer optional when it comes to EVV.** October 1 is here, and with it comes real consequences for providers who aren't ready.

I know this feels like another layer of administrative burden on top of an already complex system. I also know our provider community is resilient. We adapt. We prepare. And we support one another in navigating these changes.

That's the power of being part of OPRA—**you're not facing these challenges alone**. Together, we advocate for clarity, push back when rules go too far, and share resources to keep one another moving forward.

As claims begin to deny this month, let's keep communication open, share what's working, and make sure no provider is left behind.

We've got this. Together.

Pete

Pete Moore, *President & CEO*

What This Means for Providers

- **No Match, No Pay**: If claims lack corresponding EVV records, they will be denied and unpaid.
- **Error Reporting**: As of September 28, EVV error reports only include claims for dates of service after October 1. Denials must be corrected and resubmitted.
- **Common Errors**:
  - (66) No EVV Timesheet Data Found
  - (67) EVV Units Are Insufficient
  - (70) Provider Not Found in EVV System
  - (71) Provider/Individual Connection Not Found
- **Compliance Rates Are Low**: DODD reports current compliance at only 48.6%. **That means more than half of claims risk denial if not corrected.**

Support for Providers

- EVV Error Reports & Weekly Provider Reports in eMBS
- **Call Center Support**: EVV-only weekend call center hours in October (Sat/Sun, 9 a.m.–4 p.m.) at 1-800-617-6733
- **Sandata Provider Hotline**: Available 24/7 at 855-805-3505
- **Direct Help**: Email DODD-EVV@dodd.ohio.gov for report and error questions

EVV is not just about compliance—it's about sustainability. Providers who fail to meet EVV requirements risk cash flow disruption and instability in service delivery.

For questions or more information, contact Christine Touvelle, OPRA's Director of Advocacy.