

CHIP Perinatal Provider Notice – Urgent Request

Medicaid Provider Notification: HHSC Electronic Visit Verification (EVV)

HHSC EVV Notice: Revision to the Medicaid Electronic Visit Verification Provider System Selection Form

This notification is to inform service providers who are required to use the Health and Human Services Commission (HHSC) Electronic Visit Verification (EVV) that the *Medicaid Electronic Visit Verification Provider System Selection Form* has been revised.

A service provider (provider agencies) requesting to change from one HHSC-approved EVV system to another HHSC-approved EVV system must complete and submit a new Medicaid Electronic Visit Verification Provider System Selection Form 120 calendar day in advance of the effective change date (Effective Date). The Effective Date must be 120 calendar days or more from the date of form submission (Submission Date). The *Medicaid Electronic Visit Verification Provider System Selection Form* must be completed in its entirety and sent via fax or email to Texas Medicaid & Healthcare Partnership (TMHP).

The 120 calendar day advance notice to change from one HHSC-approved EVV system to another HHSC-approved EVV system does not apply to those providers who are required to change from CM2000 to another HHSC-approved EVV system as of October 1, 2015.

Note: Providers should evaluate an alternate vendor system prior to submitting a change request. Once a change request has been submitted, the process must be completed and cannot be modified or stopped.

Email questions to: Electronic_Visit_Verification@hhsc.state.tx.us.