Department of Medical Assistance Services
600 East Broad Street
Suite 1300
Richmond, VA 23219

https://dmas.virginia.gov

MEDICAID BULLETIN

Last Updated: 12/27/2023

Electronic Visit Verification Live-In Caregiver Exemption and Consumer-Directed Personal Care Overtime

The purpose of this bulletin is to notify providers of changes in electronic visit verification (EVV) requirements and overtime payments available to consumer-directed attendants. EVV changes apply to agency-directed and consumer-directed personal care, respite, and companion services. Overtime changes apply only to consumer-directed services. One or more of these services are available in the Commonwealth Coordinated Care Plus (CCC Plus), Community Living (CL), and Family and Individual Supports (FIS) waivers, as well as the Early and Periodic Screening Diagnosis and Treatment (EPSDT) and Medicaid Works programs.

These changes are relevant to services delivered through both fee for service and managed care.

Electronic Visit Verification: Live-In Caregiver Exemption

Effective January 1, 2021, DMAS will implement Item 313.HHH.1 of the 2020 Acts of Assembly, which exempts live-in caregivers from EVV requirements. Consumer-directed (CD) attendants or agency-directed aides who live in the same residence as the individual receiving personal assistance, respite, or companion services will no longer be required to use EVV compliant methods to submit work shift entries. Agency providers and Services Facilitators must have in their records objective, written documentation as to why there are no other providers available to render the service when there is a live-in aide or live-in CD attendant.

Consumer Directed Attendants

Live-in CD attendants must provide proof of residency by submitting documents to the respective Fiscal/Employer agent (F/EA). Verification documents may include a driver's license, voter registration card, utility bill, etc. All new live-in CD attendants on or after January 1, 2021 must provide verification documents at the time of hire. Current live-in CD attendants must provide verification documents to their F/EA no later than **June 30, 2021**. Each F/EA will communicate information to the Employers of Records (EORs) and attendants to provide details on the process

 to submit the documentation. EORs and CD attendants shall be required to notify the F/EA when the CD attendant no longer resides with the individual

receiving services.

Agency Directed Aides

Agency providers employing live-in caregivers will no longer be required to submit EVV data for claims in which a live-in aide provided care. Agency providers must use the modifier of "UB" in association with the procedure code to submit these claims. This modifier will notify DMAS or the managed care organization that the claim is exempt from EVV requirements.

Overtime

Effective January 1, 2021, DMAS will implement Item 313.ZZZZ of the 2020 Acts of Assembly which requires DMAS to "*authorize time and a half up to eight hours and effective July 1, 2021, up to 16 hours for a single attendant who works more than 40 hours per week for attendants providing Medicaid-reimbursed consumer-directed (CD) personal assistance, respite and companion services.*"

This item permits non live-in attendants to work up to 48 hours per week beginning January 1, 2021, and up to 56 hours per week effective July 1, 2021. A workweek starts on Thursday and ends the following Wednesday. Hours worked over 40 will be paid at 1.5 times the regular rate or time and a half. Attendants may continue to work for more than one EOR providing services. The hours for each EOR will be calculated separately based on the workweek. The hours worked must remain within the authorized service hours.

These limits do not apply to live-in attendants as they may continue to work over 40 hours a week and receive straight time pay. Live-in attendants are not eligible to receive overtime rates.

To implement these legislative actions, DMAS, in partnership with the managed care organizations and F/EAs will notify all current EORs and attendants of the changes by email blasts and postings on the F/EA's websites. Frequently asked questions will be posted on the DMAS website at **https://www.dmas.virginia.gov/#/longtermwaivers**

****

PROVIDER CONTACT INFORMATION & RESOURCES	
Virginia Medicaid Web Portal **Automated Response System (ARS)** Member eligibility, claims status, payment status, service limits, service authorization status, and remittance advice.	**www.virginiamedicaid.dmas.virginia.gov**

Medicall (Audio Response System) Member eligibility, claims status, payment status, service limits, service authorization status, and remittance advice.	1-800-884-9730 or 1-800-772-9996
KEPRO Service authorization information for fee-for-service members.	**https://dmas.kepro.com/**
Managed Care Programs Medallion 4.0, Commonwealth Coordinated Care Plus (CCC Plus), and Program of All-Inclusive Care for the Elderly (PACE). In order to be reimbursed for services provided to a managed care enrolled individual, providers must follow their respective contract with the managed care plan/PACE provider. The managed care plan may utilize different guidelines than those described for Medicaid feefor-service individuals.	
Medallion 4.0	**http://www.dmas.virginia.gov/#/med4**
CCC Plus	**http://www.dmas.virginia.gov/#/cccplus**
PACE	**http://www.dmas.virginia.gov/#/longtermprograms**
Magellan Behavioral Health Behavioral Health Services Administrator, check eligibility, claim status, service limits, and service authorizations for fee-for-service members.	**www.MagellanHealth.com/Provider** For credentialing and behavioral health service information, visit: **www.magellanofvirginia.com**, email: **VAProviderQuestions@MagellanHealth.com**,or Call: 1-800-424-4046
Provider HELPLINE Monday–Friday 8:00 a.m.-5:00 p.m. For provider use only, have Medicaid Provider ID Number available.	1-804-786-6273 1-800-552-8627
Aetna Better Health of Virginia	**www.aetnabetterhealth.com/Virginia** 1-800-279-1878
Anthem HealthKeepers Plus	**www.anthem.com/vamedicaid** 1-800-901-0020
Magellan Complete Care of Virginia	**www.MCCofVA.com** 1-800-424-4518 (TTY 711) or 1-800-643-2273
Optima Family Care	1-800-881-2166
United Healthcare	**www.uhccommunityplan.com/VA** and **www.myuhc.com/communityplan** 1-844-752-9434, TTY 711
Virginia Premier	1-800-727-7536 (TTY: 711),