

Electronic Visit Verification

Upcoming Changes
State of Nebraska DHHS

Agenda

- EVV Solution Updates/Demonstration
 - Force Pay by State Adjustment Request Objectives
 - Force Pay by State Adjustment Request Demonstration
 - Resources and Support
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Update # 4 – Force Pay by State Adjustment Request Objective

- The Force Pay by State Adjustment Request process enables Agency and Independent providers to request payment reconsideration for unmatched visits affected by critical errors— **NOSL**, **VVER**, **VIVR**, and **VLOC**—caused by unforeseen circumstances beyond the provider’s control. This process ensures equitable resolution and supports Providers in addressing issues outside their direct influence.
- This process also enables Nebraska DHHS to address these unmatched visits, without necessitating an appeal. Proper documentation is needed for a valid submission and approval is not guaranteed.
- The Force Pay by State functionality is **NOT** intended as a way to submit manual claims.
- The State will carefully review and monitor provider usage patterns to ensure the process is used appropriately.

Force Pay By State Critical Errors

Error Code	Definition
NOSL	There is no scheduled start and/or end location on the visit.
VVER	The visit is missing GPS or IVR as a start and/or end verification method. Billable start time was adjusted to a time before the actual start time, or the billable end time was adjusted to a time after the actual end time after the visit was completed.
VIVR	The phone number used for IVR does not match the phone number on record.
VLOC	The actual start and/or end location of the visit is outside the Geofence radius of the scheduled start and/or end location.

Force Pay by State Reason Codes

Reason Code	Number	Reason Code Description
Overnight (If applicable)	100	This Reason Code is system-generated (cannot be selected by the user) to split overnight visits by automatically clocking out at 11:59 p.m. and creating a new visit by clocking in at 12:00 a.m.
Service Delivery Exception	110	This Reason Code and appropriate Reason Code Description is used when the EVV hours (based on clock in and clock out) represent a service delivery exception: A. Service delivery differs from schedule B. Fill-in service provider C. Allowable overlapping visits
Eligibility or Service Authorization Exception	120	This Reason Code and appropriate Reason Code Description is used when services are required to comply with Recipient retro Medicaid eligibility or when an authorization has been approved but not available in the EVV System yet: A. Services provided without eligibility; retro eligibility B. Services provided with authorization not in EVV system

Force Pay by State Reason Codes

Reason Code	Number	Reason Code Description
Disaster	130	This Reason Code and appropriate Reason Code Description is used when service delivery is impacted by a natural disaster: A. Flood B. Hurricane C. Earthquake D. Ice/snow storm E. Tornado F. House Fire G. Wildfire H. Power Outage I. Declared Public Health Disaster/Emergency
No Electronic Clock In or Clock Out	140	This Reason Code and appropriate Reason Code Description is used when a State override is necessary to address critical errors: A. Failure to clock in, clock out or both B. Mobile device not available C. GPS Location not available D. Physical address not available E. Landline phone not available F. EVV system down G. Emergency; Free text is required to document the nature of emergency when using description
Other	150	This Reason Code is allowable for any other reasons not listed above. There will also be a free text option to further describe the reason.

Force Pay by State FAQs

Question 1: What Adjustment Reason Codes are applicable to the three strikes?

Answer: The three-strikes rule applies exclusively to reason code **140A – Failure to clock in, clock out or both**. This code (140 A) is used when a caregiver fails to clock in and/or clock out and the VVER critical error must be resolved.

Agency and Independent providers are responsible for submitting the Adjustment Request form and can track the number of times your caregivers have failed to clock in and/or clock out.

Once a caregiver reaches three adjustment requests for failing to clock in/clock out, any additional payment reconsideration requests would require a formal appeal.

Important Reminder:

It is essential that the date and time stamp of the visit is electronically verified. Agency providers must ensure their caregivers are properly trained to consistently clock in and out of visits using the Mobile Application or IVR. Additionally, the State, as part of Program Integrity, is responsible for ensuring that providers and caregivers adhere to all program rules and regulations. The Three Strikes rule is consideration from the State to allow time for Caregivers to be properly trained.

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Force Pay by State FAQs

Question 2: Will the three strikes follow the caregiver?

Answer: Nebraska DHHS will be tracking and monitoring the three strikes at the caregiver level to assist the Provider's in identifying the need for training.

Question 3: Can a hiring agencies review the caregiver's three strikes metrics?

Answer: It is the obligation of the Agency provider to properly vet their caregiver's level of experience and past performance as part of the hiring process. Nebraska DHHS will not share the metrics with a hiring agency.

Question 4: Will I get fired for having three strikes?

Answer: Generally, the State does not get involved in Agency provider human resource matters. The State does have an obligations as part of Program Integrity to ensure providers and caregivers are following program rules and regulations.

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Update # 4 – Force Pay by State Adjustment Request Process

1. Provider has a visit that is unmatched due to **NOSL**, **VVER**, **VIVR**, and or **VLOC**.
2. Provider gathers the necessary documentation and determines the reason(s) to validate why the visit should be matched and paid.
3. Provider submits an Adjustment Request along with the necessary documentation.
4. Nebraska DHHS EVV Program Leads reviews the Adjustment Request and documentation the Provider submitted.
5. Nebraska DHHS EVV Program Leads approves or denies the Adjustment Request. Providers will be notified via email or the approval or denial.
6. Provider will then match any additional error codes and release the visit for payment.

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Update # 4 – Force Pay by State

Demonstration: How an Agency or Independent provider will complete the Adjustment Request Form

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Adjustment Request Form Confirmation of Submission Email

DHHS has received your request (8355501742) to adjust a critical error for the following Visit ID: 0975592523.

You will be notified once the Adjustment Request is approved or denied.

Thank you,
DHHS EVV Program Management

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Adjustment Request Form Confirmation of Approval Email

DHHS has reviewed your request to adjust a critical error for the following Visit ID: 2028171307.

Your request has been approved.

Please release your claim for payment.

Thank you,
DHHS EVV Program Management

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Adjustment Request Form Confirmation of Denial Email

DHHS has reviewed your request (8355343220) to adjust a critical error for the following Visit ID: 2679075244.

Your request has been denied.

In accordance with 471 NAC 2-007.01(A), you have the right to appeal this denial within 90 days of the date of this notice. If you want to appeal, you may submit a written request for a hearing to the MLTC Appeals Coordinator, P.O. Box 94967, Lincoln NE 68509-4967. The request must identify the basis of the appeal. At that time, you may submit documentation or written arguments against the denial. The appeal form can be found here:

<https://dhhs.ne.gov/Pages/Developmental-Disabilities.aspx>.

Thank you,
DHHS EVV Program Management Team

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Update #4 Force Pay by State Adjustment Request Process

Additional Information

- Link to [Adjustment Request Form](#)
 - State will begin reviewing Adjustment Requests on 02/19/2025
- Link to Adjustment Request Quick Reference Guide will be available once completed
- If you need to follow up on the status of an Adjustment Request, please email DHHS.MedicaidFA-EVV@nebraska.gov and include the applicable Adjustment Request ID Number and Visit ID with your inquiry

Resources and Support

Please submit all policy related questions to: DHHS.MedicaidFA-EVV@Nebraska.gov.

Please see the link for updates on the February 19, 2025, EVV Changes: <https://mobilecaregiverplus.com/ne-dhhs-training-recordings/>.

Please subscribe to the NE DHHS webpages to stay up to date on the latest EVV information and FAQs updates.

<https://dhhs.ne.gov/Pages/Therap-Electronic-Visit-Verification.aspx>

<https://dhhs.ne.gov/Pages/Electronic-Visit-Verification.aspx>

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Resources and Support

Please follow this link to the [Netsmart Triage Guide](#) for trouble shooting guidelines.

For Netsmart EVV solution questions

Netsmart CONNECT

1-833-483-5587 – follow prompts to select Nebraska

Training Resources Site: <https://mobilecaregiverplus.com/ne-dhhs/ne-dhhs-training-resources/>

- Training Webinars:

<https://mobilecaregiverplus.com/training/>

- User Guides:

<https://mobilecaregiverplus.com/training-resources/user-guides/>

- Video Tutorials:

<https://mobilecaregiverplus.com/training-resources/video-tutorials/>

- Quick Reference Guides:

<https://mobilecaregiverplus.com/quick-reference-guide/>

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