



**CABINET FOR HEALTH AND FAMILY SERVICES  
DEPARTMENT FOR MEDICAID SERVICES**

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To: All 1915(c) Home and Community Based Services Waiver Providers

From: Pam Smith  
Director, Division of Community Alternatives

Date: January 14, 2021

Re: Electronic Visit Verification Updates

The Department for Medicaid Services (DMS) has some updates for 1915(c) Home and Community Based Services (HCBS) waiver providers who are required to use electronic visit verification (EVV).

**Getting Help from Tellus**

There is a new way to reach Tellus when your provider agency or financial management agency (FMA) encounters a technical issue with the Tellus EVV system. Tellus created a form provider agencies and FMAs can complete, which opens a ticket in the Tellus customer support system. The form prompts the user to include the detailed information Tellus needs to research and resolve the issue. To access the form, go to [4tellus.com](http://4tellus.com) and look for the yellow "Open Support Ticket" button.

**INNOVATIVE EVV SOLUTIONS**  
For Home Health and Long-Term Care that improve care delivery, drive efficiency, speed reimbursement and cut costs

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**IMPORTANT UPDATES**  
Netsmart Acquires Tellus. Adds seamless EVV capabilities and enhancements to the Netsmart population health management offering.  
VIEW RELEASE

**TRAINING WEBINARS**

**OPEN SUPPORT TICKET**

DMS encourages provider agencies and FMAs to use this option when they need Tellus support. If your provider agency or FMA is unable to enter a ticket, Tellus can still be contacted at (833) 483-5587, [support@4tellus.com](mailto:support@4tellus.com), or via online chat at [4tellus.com](https://4tellus.com).

### **Billing of Institutional Claims – Provider Type 42**

Institutional claims, which are billed using a UB claim form, must include the attending physician's national provider identifier (NPI) to receive payment. Tellus is not currently set up to collect this information, however, the system is being modified. Once this information can be entered into Tellus, providers will be able to list the attending physician's NPI in the participant's profile and will not need to change it unless the participant's attending physician changes. Until Tellus completes the modifications needed to collect this information, waiver provider type 42 should bill institutional claims using the Medicaid Management Information System (MMIS).

### **Use of Tellus EVV**

DMS encourages provider agencies and FMAs required to use EVV to begin having or continue having paid caregivers or participant-directed services employees capture the six data elements required by the 21<sup>st</sup> Century CURES Act using the Tellus EVV+ mobile app or the agency's third-party system. Those data elements include:

- The date of service.
- The start time of the service.
- The end time of the service.
- The location where the service begins and the location where the service ends.
- The name of the individual providing the service.
- The name of the individual receiving the service.

Provider agencies and FMAs can choose to bill EVV-affected services using Tellus or MMIS as the requirement to bill claims using the Tellus EVV system [remains delayed](#). DMS has not yet set a new date for this requirement to take effect. Once a new date is set, providers will be notified at least sixty (60) days in advance.

If you have questions about these updates, please contact the 1915(c) Waiver Help Desk at [1915cWaiverHelpDesk@ky.gov](mailto:1915cWaiverHelpDesk@ky.gov) or (844) 784-5614.

Sincerely,



Pam Smith  
Director, Division of Community Alternatives