



- Beginning Sept. 1, 2019, EVV-relevant claims with a date of service on or after Sept. 1, 2019 will be subject to the EVV claims matching process to confirm that a service visit occurred prior to payment of the claims.
- Providers must submit all claims for EVV-relevant services with a date of service on or after Sept. 1, 2019 to TMHP. Claims submitted to the MCO will be denied and the provider will be informed to submit their claims to TMHP.
- Claims submitted without a matching EVV visit transaction for the specified date(s) of service will be denied by the payer.
- Providers, or a provider's 3rd party billing service, who do not currently submit claims to TMHP, must establish a Compass 21 (C21) Submitter ID, and in order for providers to submit claims through electronic data interchange (EDI), a Receiver ID is also required prior to Sept. 1, 2019.
 - Program providers and FMSAs can access TMHP's [EDI homepage](#) for basic information needed to file claims electronically as well as user guides, forms, and technical information intended for billing agents that file claims for program providers.
 - Program providers and FMSAs that need assistance in setting up C21 or CMS Submitter IDs should contact the EDI Help Desk at: 1-888-863-3638, Option 4

Links:

[HHSC EVV Webpage](#)

[HHSC EVV Tool Kit Module 8: Submitting an EVV Claims](#)

[Billing Policy Changes for Providers Required to Use EVV](#)

[TMHP EDI Homepage](#)

Contact:

HHSC at electronic_visit_verification@hhsc.state.tx.us

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