



Our Webinar Will Begin Shortly

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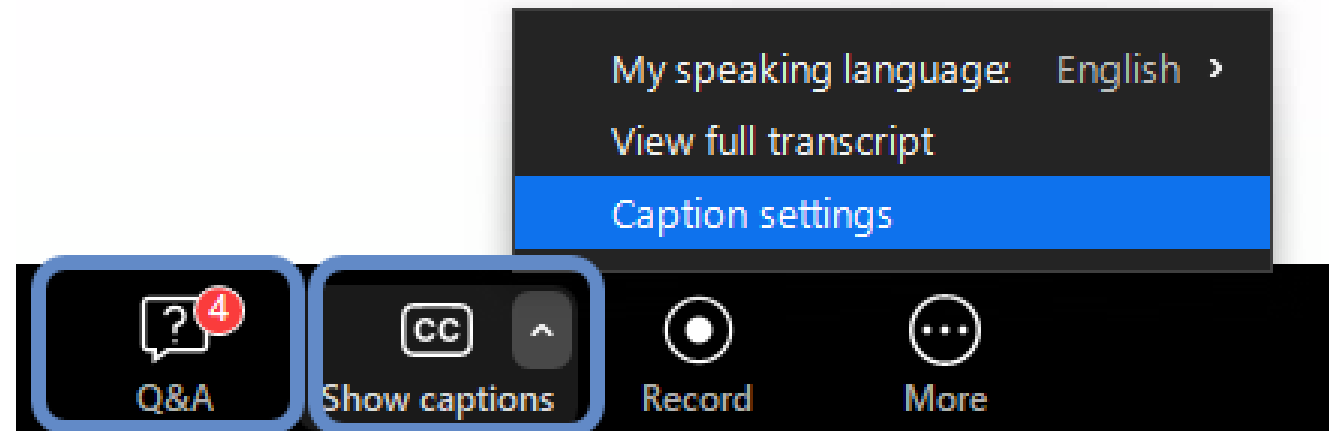


Accessibility Options

Enabling Closed Caption



- This webinar is being recorded. We will email the recording and slides after the session.
- Your camera and mics are turned off.
- Q&A will be answered throughout the presentation. Please submit your questions in the Q&A box by selecting the Q&A button at the bottom of the screen to pop out this box.
- This webinar is Closed Caption enabled. Please proceed by selecting Show Captions option at the bottom of your screen to enable feature.





Meet the Trainer!



Alejandra Cordova



- **Role: Sponsored Provider Training Specialist**
- **Tenure at HHAeXchange: 3 years**
- **Areas of Expertise: Sponsored Training**
- **Fun Fact: If it involves food, I'm there!**

Claims Matching

November 2025


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EVV Claims Adjudication Phases





EVV

Claims Adjudication Phases

PHASE 1 March 1, 2025	PHASE 2 June 1, 2025	PHASE 3 June 1, 2025	PHASE 4 August 1, 2025	PHASE 5 October 1, 2025	PHASE 6 January 1, 2026	PHASE 7 March 1, 2026
Billed to ODM FFS		Billed to Next Gen MCEs		Billed to DODD	Billed to ODM or AGE	Billed to MyCare
HOME HEALTH SERVICES	PRIVATE DUTY NURSING, NURSE ASSESSMENT AND CONSULT	HOME HEALTH SERVICES	PRIVATE DUTY NURSING NURSE ASSESSMENT AND CONSULT	10, Level 1, SELF WAIVER PROGRAM SERVICES	OHIO HOME CARE, PASSPORT WAIVER SERVICES	HOME HEALTH PDN, NURSE ASSESSMENT AND CONSULT, WAIVER SERVICES
						

**Based on claim line date of service.*

List of Services



Phase 1: 3/1/2025 • Billed to ODM FFS (SP)	Phase 2: 6/1/2025 • Billed to ODM FFS (SP)	Phase 3: 6/1/2025 • Billed to Next Gen MCE's (SP)	Phase 4 : 8/1/2025 • Billed to Next Gen MCE's (SP)
G0156 - Home health aide G0151 - Home health physical therapies G0152 - Home health occupational therapies G0153 - Home health speech language pathology therapies G0299 - Home health nursing registered nurse (RN) G0300 - Home health nursing licensed practical nurse (LPN)	T1000 - State plan private duty nursing T1001 - State plan T1001_U9 – RN Consultation (T1001)	G0156 - Home health aide G0151 - Home health physical therapies G1052 - Home health occupational therapies G0153 - Home health speech language pathology therapies G0299 - Home health nursing registered nurse (RN) G0300 – Home health nursing licensed practical nurse (LPN)	T1000 - State plan private duty nursing T1001 - State plan T1001_U9 – RN Consultation (T1001)

List of Services Billed to DODD



- All nursing codes billed directly to Medicaid require EVV.
- Homemaker personal care (including overtime and longevity add-on codes).
- All 15-minute unit direct care residential based service codes EXCEPT on-site-on-call service codes.

[EVV Program and Service Code Guide](#)

Ohio Department of Developmental Disabilities

Waiver Services



Subject to EVV

Homemaker/Personal Care (HPC)

Participant-Directed HPC

Waiver Nursing

Nursing Consultation

Nursing Assessment

Residential Respite (15-minute units)



NOT Subject to EVV

Shared Living

Services billed per diem (including per diem
Residential Respite)

Facility-based services

Services, subject to EVV, provided by live-in
caregivers (with approved exemption)

For a comprehensive list of services requiring EVV under DODD waivers, please refer to the [eMBS Service Codes document](#).



Claims Matching



This training will address the EVV claim errors and how to resolve them through Sandata EVV. We will also provide solutions to resolve errors for Alt EVV providers.

Who should take this training?

Agency staff whose role is to ensure visit exceptions are resolved, and visits are verified.

Alt EVV providers may experience the same EVV claim errors and must resolve in their Alt EVV system. For additional support, please contact the Technical Support Alternate EVV team at either of the options below:

- Phone: 1-844-289-4246
- Email: OHAltEVV@Sandata.com

Sandata Standard System Terminology

Corresponding Terminology

CONTRACT / PAYER	<ul style="list-style-type: none"> - FFS - HHS 	<ul style="list-style-type: none"> - MCO - State 	<ul style="list-style-type: none"> - Plan
Recipient	<ul style="list-style-type: none"> - CDS Employer - Consumer 	<ul style="list-style-type: none"> - Patient - Client 	<ul style="list-style-type: none"> - Participant - Beneficiary
DCW/Employee	<ul style="list-style-type: none"> - Aide - Homecare Aid - Homecare Worker 	<ul style="list-style-type: none"> - Worker - Direct Support Professionals (DSP) - Service Provider 	<ul style="list-style-type: none"> - Attendant - Caregiver - Independent Provider
AGENCY / PROVIDER	<ul style="list-style-type: none"> - FMSA - Vendor 	<ul style="list-style-type: none"> - Program Provider - Independent Provider 	
COORDINATOR	<ul style="list-style-type: none"> - Care Coordinator - Case Coordinator 	<ul style="list-style-type: none"> - Service Coordinator - Care Types 	
UNITY NUMBER	<ul style="list-style-type: none"> - EMPI - Master Patient Number 	<ul style="list-style-type: none"> - Shared Patient Number 	
SECONDARY IDENTIFIER	<ul style="list-style-type: none"> - MPI - Promise Code 		

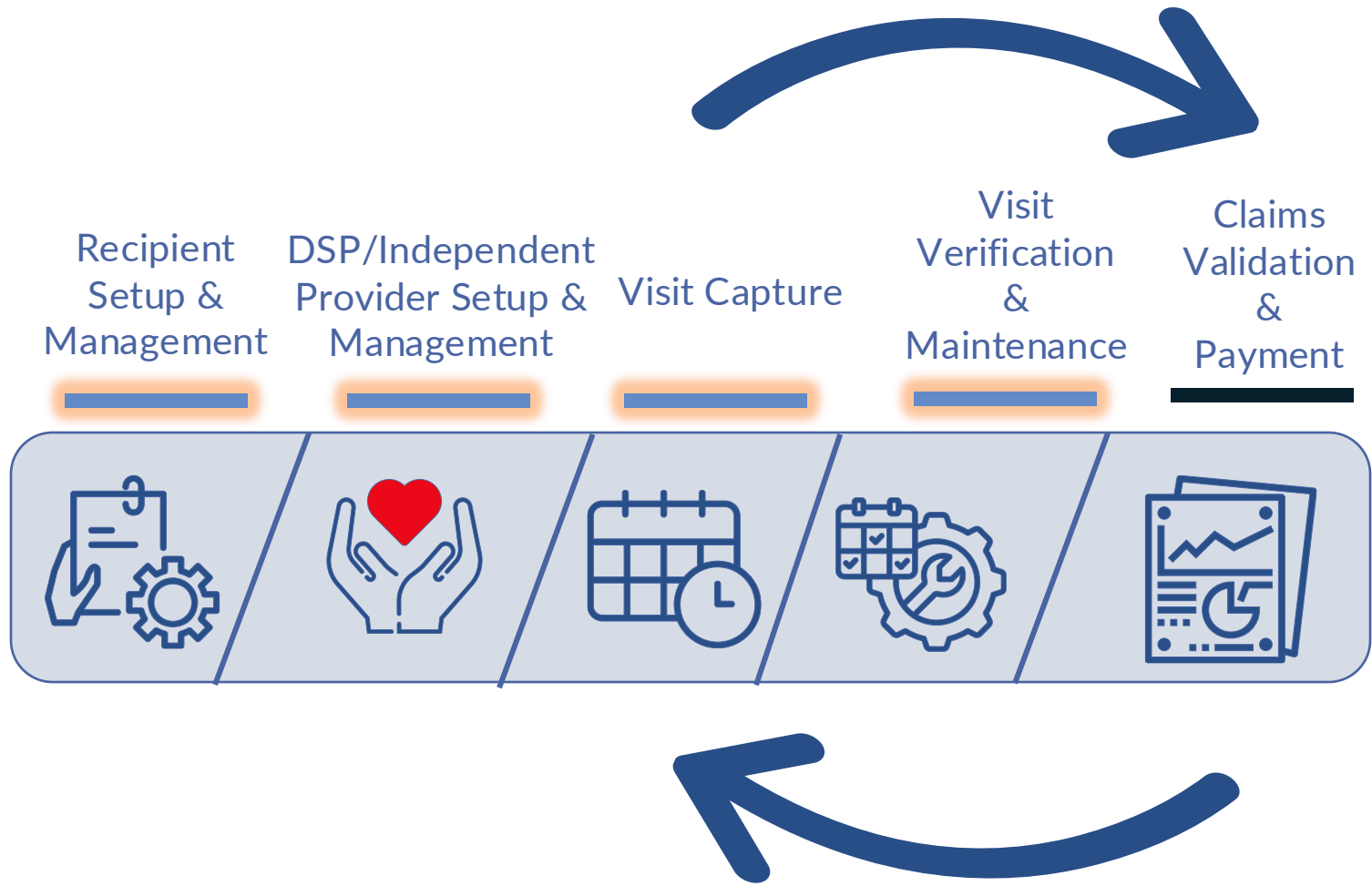


Objectives of Today's Training

You will be able to:

- Summarize the claim validation process.
- Identify the EVV claim errors.
- Resolve visit exceptions.
- Prepare your DCW/DSP's for success using on-demand resources.





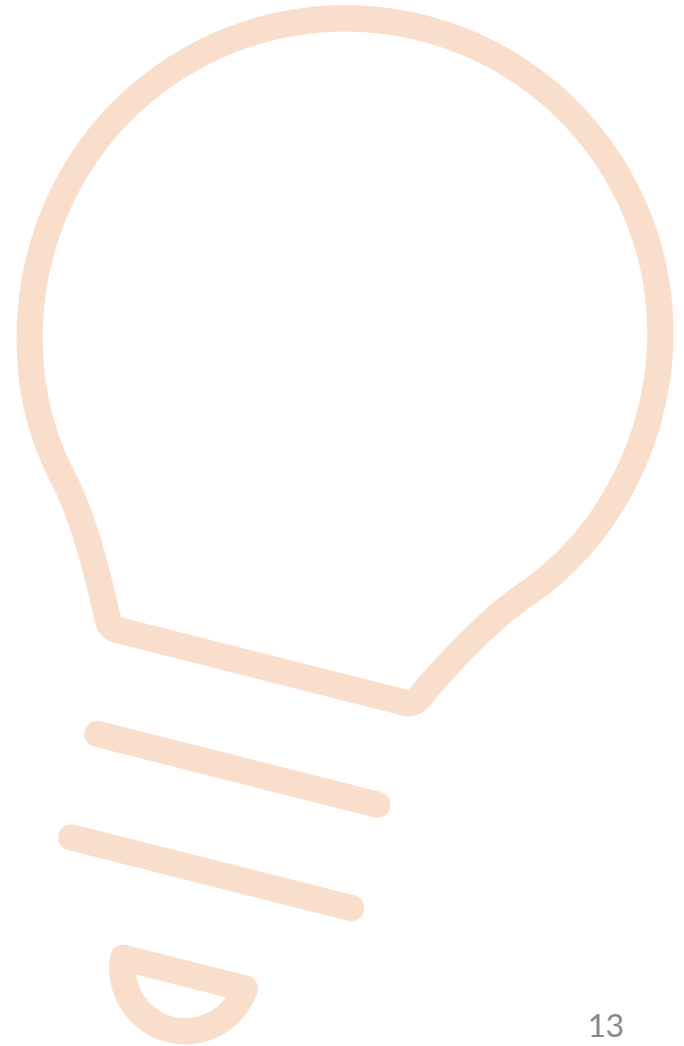
Knowledge Checks

You'll see these throughout the presentation!



What's the name of the presenter of this webinar?

- A. George
- B. Bill
- C. Janny
- D. Ashley





Agenda

- Overview of Claims Validation Process
- How to Resolve DODD Claim Errors
- How to Resolve ODM Claim Errors
- Preparing Your DSP/Independent Providers
- Key Takeaways
- Support & Resources
- Q & A

Claims Validation Process

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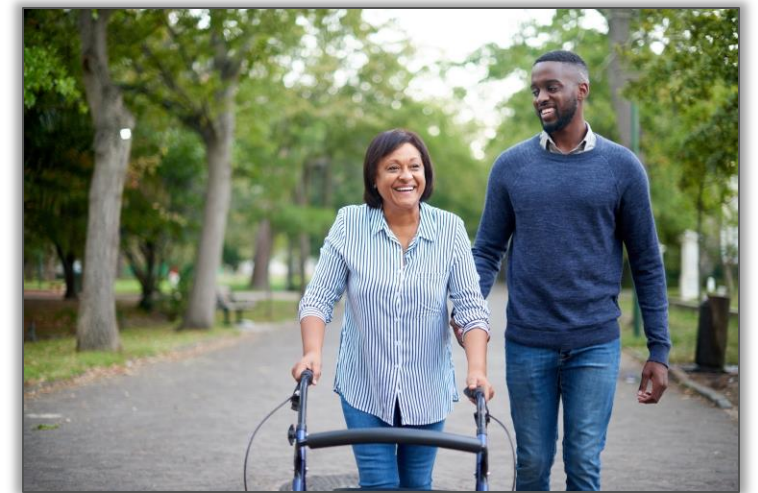
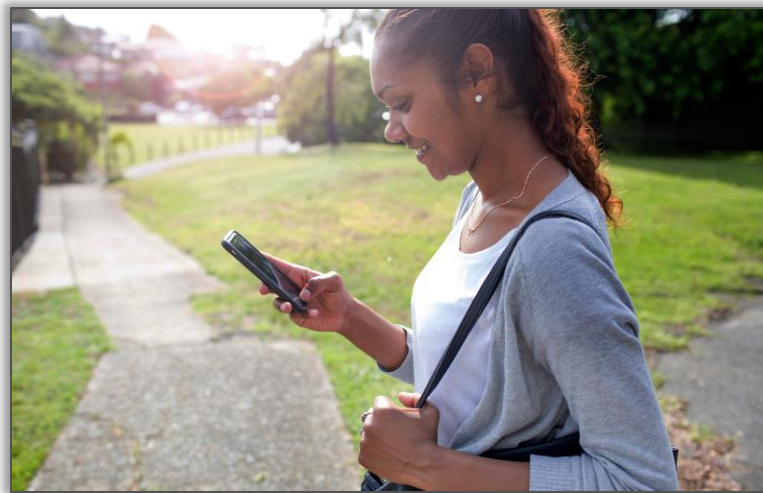
What is Claims Validation?

Definition:

The process of ensuring every claim subject to Electronic Visit Verification (EVV) requirements has a matching EVV visit record.

Who is impacted by claims validation:

Your agency, DCW/DSP, IP, recipient, admin.



List of Services

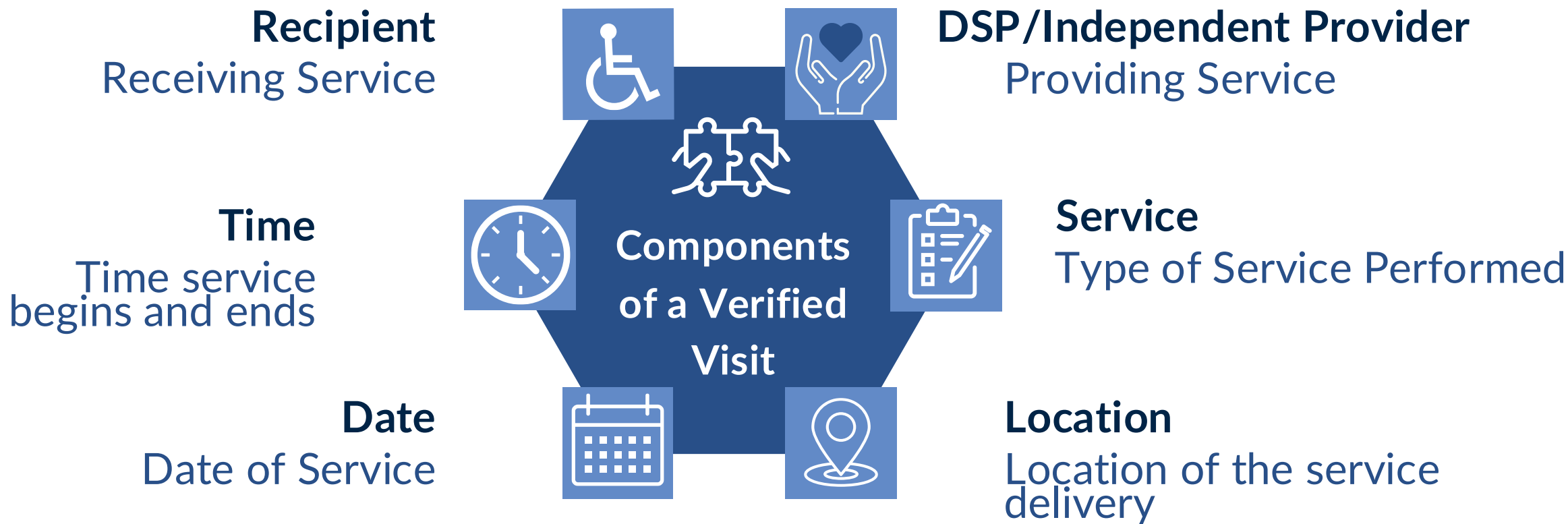


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What Happens during the Claims Validation Process?

Step 1: DCW/Independent Provider captures the visit using Sandata Mobile Connect (SMC) app, Telephonic Visit Verification (TVV), or provider manually creates visit.





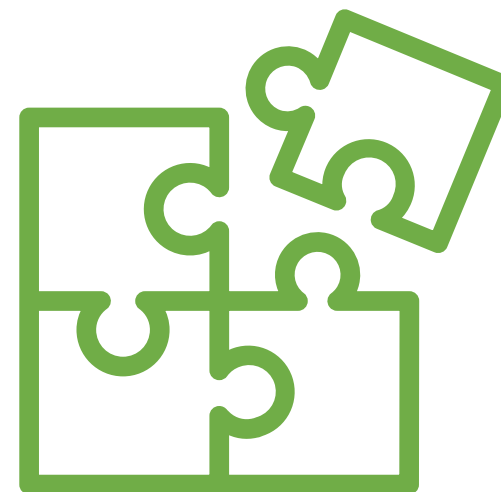
What Happens during the Claims Validation Process?



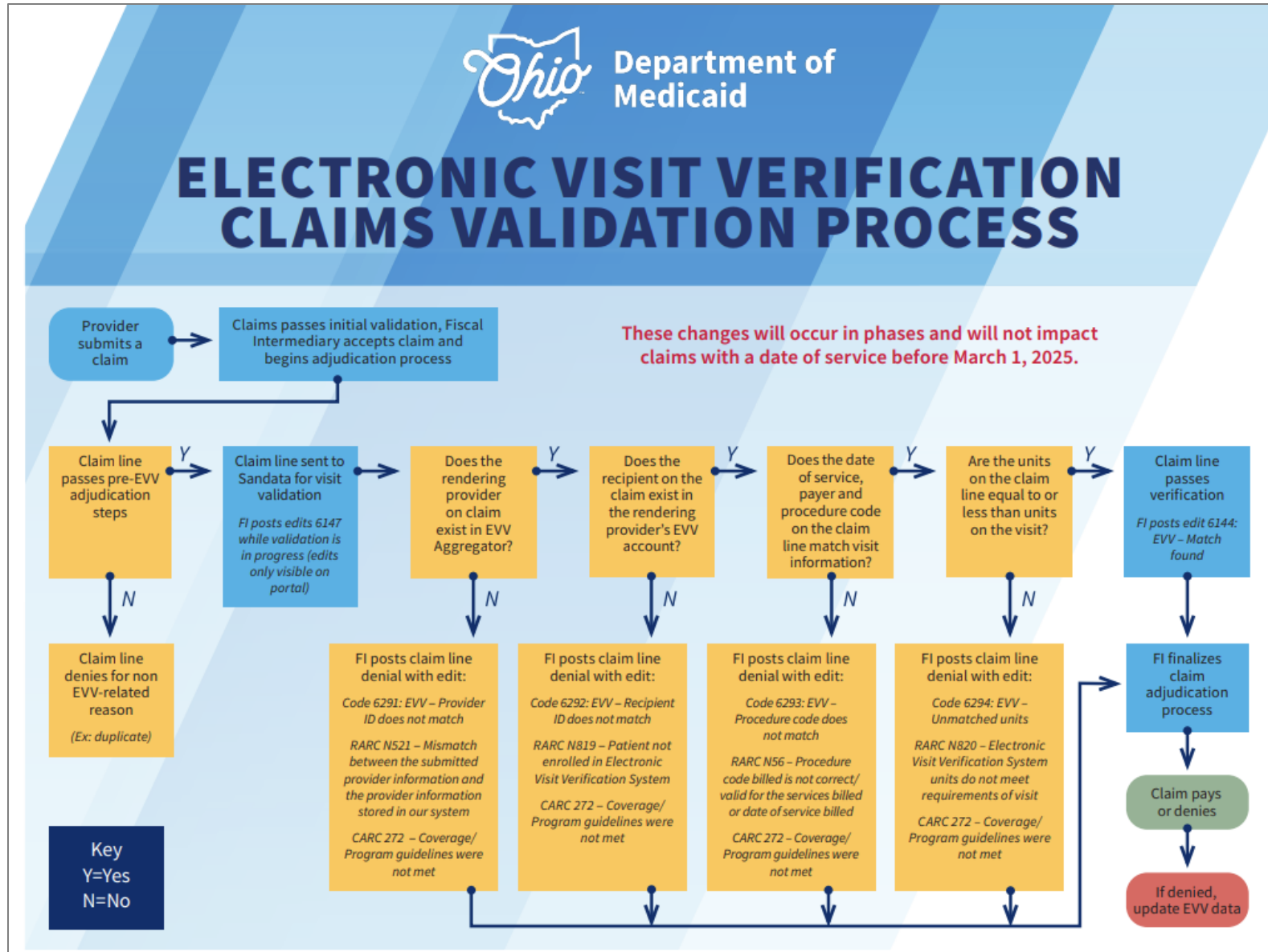
Step 2: Provider performs visit maintenance and resolves any EVV exceptions to turn visit into a verified status.



Step 3: Payer can now match claims to EVV visits.



Electronic Visit Verification Claims Validation Process



List of Services Billed to DODD



- All nursing codes billed directly to Medicaid require EVV.
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Facility-based services

Services, subject to EVV, provided by live-in
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For a comprehensive list of services requiring EVV under DODD waivers, please refer to the [eMBS Service Codes document](#).



What Happens during the Claims Validation Process?



Step 1: DSP captures the visit using Sandata Mobile Connect (SMC) app, Telephonic Visit Verification (TVV), or provider manually creates

The screenshot shows the Sandata Mobile Connect login interface. At the top is the Sandata logo with 'Mobile Connect' underneath. Below this are two input fields: the first contains the email 'Cjones2025@yopmail.com' and the second is labeled 'Password' with an eye icon for toggling visibility. A 'Remember Me' toggle switch is positioned below the password field. A large white 'Sign In' button is centered below the inputs. Underneath the button are links for 'Reset Password' and '3.3.1'. At the bottom of the main content area is a link for 'User Manual'. A green banner at the very bottom of the screen contains the text 'Starting a visit with an unknown Recipient/Medicaid ID'.

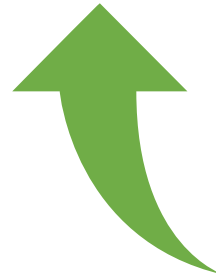
> What Happens during the Claims Validation Process?



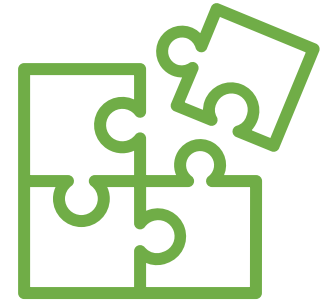
Step 2: Provider performs visit maintenance and resolves any EVV exceptions to turn visit into a verified status.



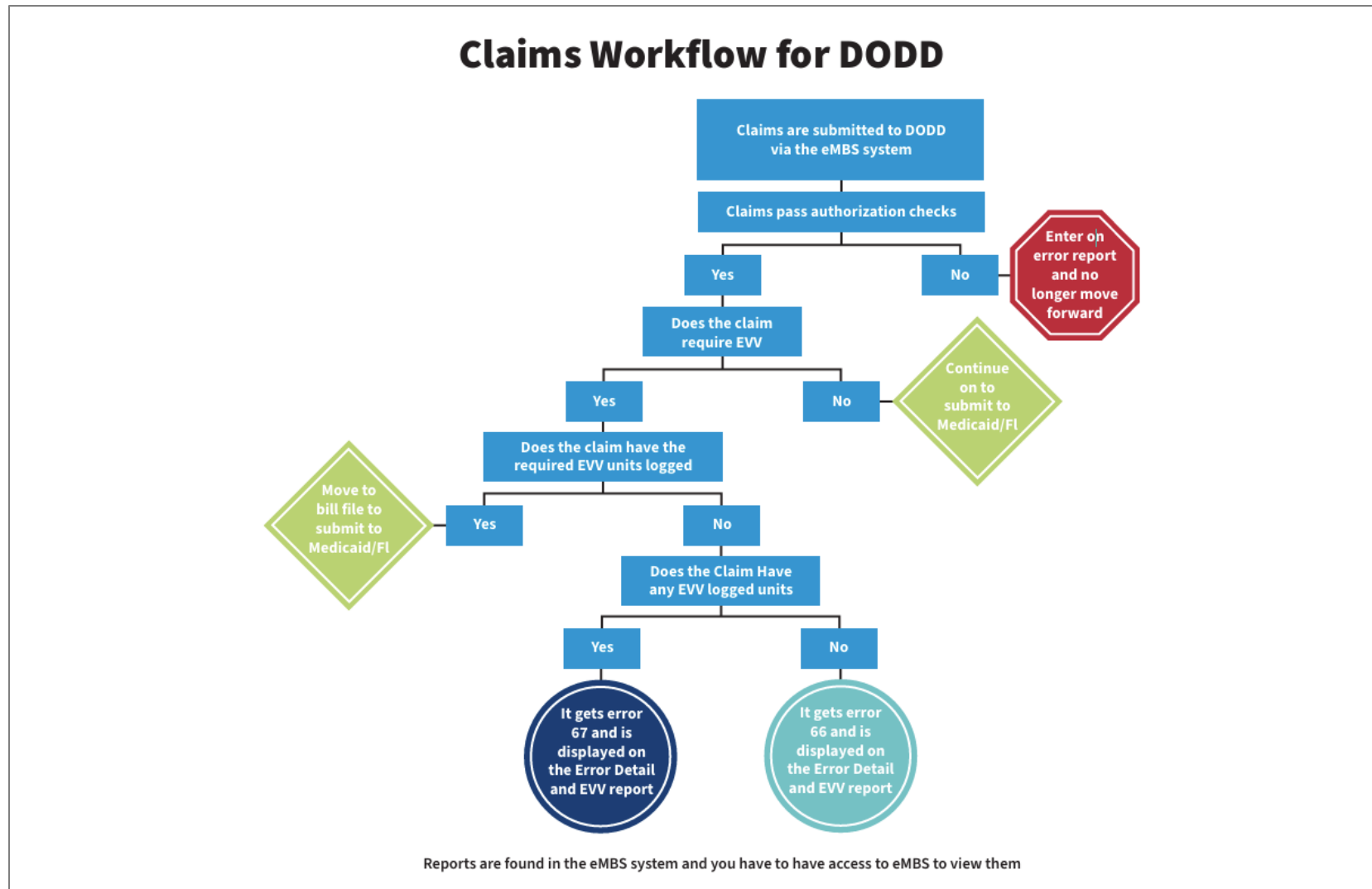
Step 3: Provider submits claims to DODD via eMBS system.



Step 4: DODD as the Payer can now match claims to EVV visits.



Claims Workflow for DODD



Resolving EVV Claims Errors for DODD

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EVV Claim Errors DODD



This comparison table outlines the differences between the error messages displayed in Sandata EVV and those found in the ODM Claims Lines Subject to the EVV Diagnostics Dashboard, and ODM Remittance Advice (RA).

EVV RA Message	Sandata Visit Exception
Error 66	No EVV Timesheet data Found.
Error 67	EVV Units are Insufficient
Error 70	Provider Not Found in Sandata EVV System
Error 71	Provider/Individual Connect Not Found in EVV



Error 66: No EVV Timesheet Data Found



Cause: There is no EVV record in Sandata to match the claim submitted to DODD via eMBS system.

Resolution: Navigate to Visit Maintenance module and create a visit. Ensure the visit is in a verified status before resubmitting claim.

Alt EVV Resolution: The visit did not cross over to the Aggregator as expected or the visit was not in verified status; provider must identify what may cause the exception and work with their vendor to resolve.

For detailed steps, review article: [Creating a Visit](#)



Error 70: Provider Not Found in Sandata EVV System



Electronic Visit Verification (EVV) is an electronic-based system that verifies when provider visits occur and documents the precise time services begin and end. Ohio Department of Medicaid has contracted with Sandata Technologies LLC to deliver the EVV system.

A provider account matching the Provider Medicaid number with DODD was not found. Please set up an account in EVV that is associated with the Medicaid number on file with DODD.

For detailed steps, review article: [Provider Identification \(ID\) Does Not Match](#)



Error 71: Provider/Individual Connection Not Found in EVV



Electronic Visit Verification (EVV) is an electronic-based system that verifies when provider visits occur and documents the precise time services begin and end. Ohio Department of Medicaid has contracted with Sandata Technologies LLC to deliver the EVV system.

Please update your account in EVV to connect the individual to the provider.

For detailed steps, review article: [Adjusting Call Times and Dates](#) and [Ohio Units Conversion Table](#)

Error 67: EVV Units are Insufficient



Cause: There is partial or mismatched EVV data in Sandata EVV compared to claim submitted to DODD via eMBS system.

Resolution: Navigate to Visit Maintenance module and edit Visit Details to update missing call. Make sure to add reason code for adjusting visit.

Alt EVV Resolution: The visit did not cross over to the Aggregator as expected or the visit was not in verified status; provider must identify what may cause the exception and work with their vendor to resolve.

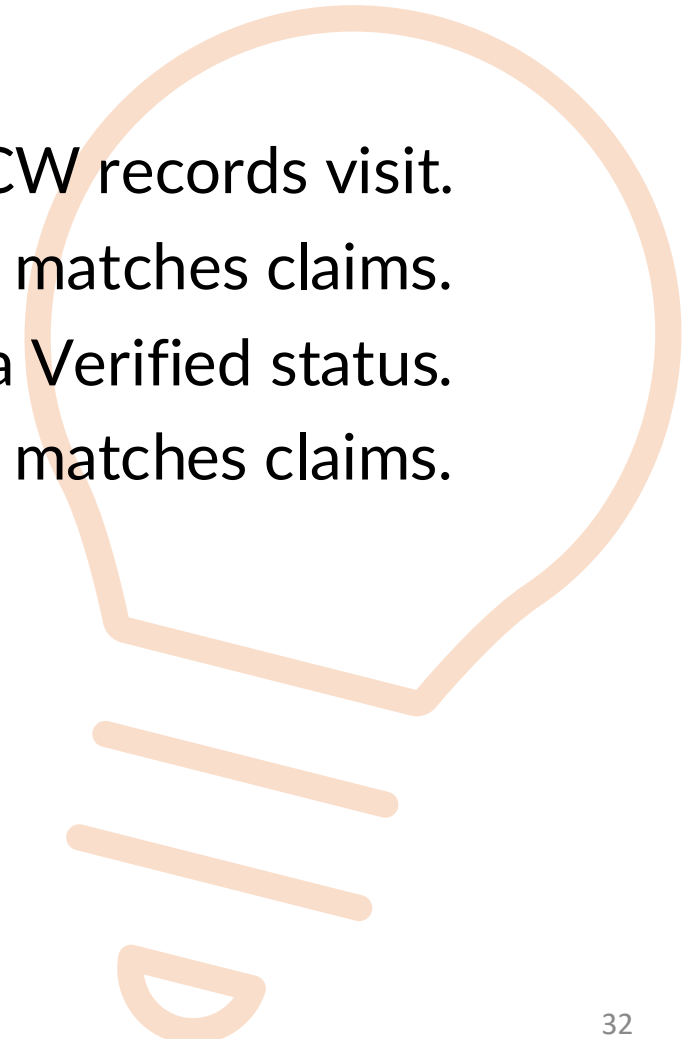
For detailed steps, review article: [Adjusting Call Times and Dates](#) or [Adding a Manual Call to an Existing Visit](#)

Knowledge Check – Claims Validation



List the steps in order for claims validation.

- A. Payer matches claims > Visit is in a Verified status > DCW records visit.
- B. DCW records visit > Visit is in a Verified status > Payer matches claims.
- C. DCW records visit > Payer matches claims > Visit is in a Verified status.
- D. Visit is in a Verified status > DCW records visit > Payer matches claims.





Resolving EVV Claims Errors for ODM

EVV Claim Errors



This comparison table outlines the differences between the error messages displayed in Sandata EVV and those found in the ODM Claims Lines Subject to the EVV Diagnostics Dashboard, and ODM Remittance Advice (RA).

EVV RA Message	Sandata Visit Exception
Provider ID does not match	Note: No exception appears; please review Provider Medicaid ID associated with your Sandata EVV portal.
Recipient ID does not match	Unknown Recipient
Procedure code does not match	Incorrect Service Code (unauthorized service exceptions)
Units do not match	Note: no exceptions appears, please review number of units on visit to claim

What if I'm an Alt EVV Provider?



Question: I am a provider who uses an Alternate EVV system (3rd party system to capture EVV visits). Do I need to log in to the Aggregator to view my visits?

Answer: Yes! The Sandata Aggregator is what is used by payers to validate the claim. This is the source of truth for visit data – providers must ensure that the data in the aggregator shows as expected and visits are in a verified status before billing.

Question: If I am using an Alt EVV system and need to update visits in the Aggregator, where do I make these changes?

Answer: Make updates to your visits in your Alt EVV system. The Aggregator is read-only; therefore, any changes must be updated in your Alt EVV system, and then resent to the Aggregator.



Provider ID Does Not Match



Provider ID Doesn't Match



EVV RA Message	Sandata Visit Exception
Provider ID does not match	Note: No exception appears; please review Provider Medicaid ID associated with your Sandata EVV portal.

Cause: “Provider ID Does Not Match” means the Medicaid ID on your claim is not in the Sandata Electronic Visit Verification (EVV) system or the Sandata Aggregator.

Example: The provider agency registered for the EVV portal with a provider ID number that does not match the provider Medicaid ID number.

Resolution: First, identify what Medicaid ID is associated with the account you are using to record visits. This can be found by running the Full Visit Export report. Then, compare this value to the Medicaid ID associated with the claim; if there is a missing Sandata EVV account, provider must register with Sandata EVV portal; if the error persists, please contact support.

Alt EVV Resolution: ensure that the provider Medicaid ID is associated with a Sandata EVV portal. Please note, if the provider has multiple provider Medicaid IDs, they must register each Medicaid ID with a Sandata EVV portal.

For detailed steps, review article: [Provider Identification \(ID\) Does Not Match](#)



Run Full Visit Export Report



Navigate to **Reports > Date Range Reports > Full Visit Export**

- 1. This report is in Excel format. Scroll all the way to the right of the spreadsheet until you reach the Provider ID column. This will contain the Providers Medicaid ID associated with the visit.

BH	BI	BJ	BK	BL	BM
CLIENT_S	SERVICE_V	TOTAL_OR	TOTAL_CL	PROVIDER_ID	
		0	0	123456	
		1	1	123456	
		0	0	123456	
		0	0	123456	
		0	0	123456	
		0	0	123456	
		0	0	123456	
		0	0	123456	
		0	0	123456	
		0	0	123456	
		2	2	123456	
		0	0	123456	
		0	0	123456	
		0	0	123456	
		0	0	123456	
		3	3	123456	
		0	0	123456	
		4	4	123456	



Visit Counts By Exceptions

Visit Counts By Status

Date Range

Today

Visit Exceptions

Unknown Recipients	0
Unknown DCW/Employees	0
Visits Without Any Calls	1
Visits Without In-Calls	1
Visits Without Out-Calls	1
Late In-Call	0
No Show Exception	1
Missing Service	0

Visit Exception Count Per Day





Recipient ID Does Not Match



Unknown Recipient



EVV RA Message	Sandata Visit Exception
Recipient ID does not match	Unknown Recipient

Cause: The recipient record with the corresponding Medicaid ID does not match with the record in Sandata.

Example: The claim has a different Medicaid ID for the recipient than what is in Sandata.

Resolution: Navigate to recipient profile verify Medicaid ID and if incorrect, discharge the Recipients record along with each individual program. Next, you will create a New Recipient Medicaid ID record for the correct or updated Medicaid ID.

Alt EVV Resolution: Update the recipient’s Medicaid ID in the 3rd party system.

For detailed steps, review article: [Update an Unknown Recipient](#)

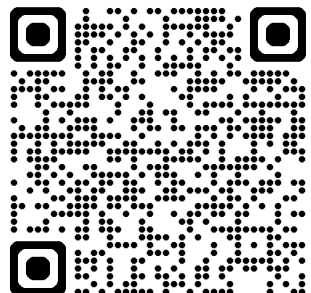
Run Active Recipients Report



Navigate to **Reports > Daily Reports > Active Recipient Report**

1. Review Recipient Medicaid ID that's associated to Recipient Profile to confirm if it matches with the claim in question.
2. Make updates to Medicaid ID in your Alt EVV system; wait 24 hours prior to resubmit claim.

ACTIVE RECIPIENT											
RECIPIENT ID	RECIPIENT MEDICAID ID	RECIPIENT NAME	RECIPIENT SSN	PHONE #	ADDRESS	CITY	ST	ZIP	LATITUDE	LONGITUDE	RECIPIENT ALTERNATE ID
						Columbus	OH				
						Columbus	OH				
						Columbus	OH				
						Columbus	OH				
						Columbus	OH				
						Dublin	OH				
						Galloway	OH				
						Columbus	OH				
						Columbus	OH				
						Bridgeport	CT				
						Columbus	OH				
						Columbus	OH				
						Columbus	OH				
						Columbus	OH				
						Columbus	OH				
						Bridgeport	CT				
						Columbus	OH				
						Columbus	OH				
						Hilliard	OH				
						Columbus	OH				



Recipient Medicaid ID



[< BACK](#) **Doe, Jane** MyC | Active HISTORY NOTES

Recipient ID: Medicaid ID: -- | Main Address: 101 Main Street | Phone No: (1) | Main Emergency Contact: --

Personal* **Program** Schedules

MyC - Personal Care Services - Aetna - 10/02/2025 - Authorized Active

Program Details ✎

Supervisor

-

Enrollment:

-

EOC Date

-

Created Date:

10/02/2025

Eligibility Begin Date

-

Effective Date:

10/02/2025

Eligibility End Date

-

SOC Date

10/02/2025

Reason For Change

-

Service Details ADD SERVICE

Service Name:

Code:

Start Date:

End Date:

Personal Care Services

T1019

10/09/2025

06/19/2026

✎ 🗑

Payer Details ADD PAYER

Payer Name: Aetna

Medicaid ID:

-

Rank: 1

Recipient Payer ID: 1111111

Start Date: -

Group Number: -

End Date: -

✎

☒ Voided Auth.

☒ Expired Auth.

ADD AUTHORIZATION

Authorization Details ✎ 🗑 ⬆

Payer: Aetna

Service: S5125

Event Code: NONE- None

Start Date: 10/14/2025

Authorization No: AMP20251014T185624918

Modifiers: -

Format: Hours

End Date: 07/10/2027

CREATE VISIT

CREATE CALL

FILTERS

SHOW DISPLAY OPTIONS

EXPORT DATA

Show Legend

APPROVE ALL

DISAPPROVE ALL

RECIPIENT NAME	DCW/EMPLOYEE NAME	SERVICE	VISIT DATE	SCHEDULED TIME IN	SCHEDULED TIME OUT	SCHEDULED HOURS	CALL IN	CALL OUT	CALL HOURS	ADJUSTED IN	ADJUSTED OUT	AI H
HHAXchange, Harold	Dowdrick, Eric	HPC	10/31/2025				11:19 AM			11:19 AM		
	Dowdrick, Eric	HPC	10/31/2025				11:11 AM	11:19 AM	00:08	11:11 AM	11:19 AM	
Sandata, Sandy	Dowdrick, Eric	RN Consultation (T1001)	10/31/2025				06:00 AM	07:00 AM	01:00	06:00 AM	07:00 AM	
Sandata, Sandy	Cordova, Alejandra	SPHH Aide (G0156)	10/30/2025				08:27 AM	09:00 AM	00:33	08:27 AM	09:00 AM	
Total: 01:41												



25 of 4 entries

« < 1 > »



Procedure Code Does Not Match (Incomplete Visit)



Incomplete Visit



EVV RA Message	Sandata Visit Exception
Procedure code does not match	Incomplete Visit (unauthorized service exceptions)

Cause: A DSP/Independent Provider misses a call in and/or out.

Example: DSP/Independent Provider starts a visit but forgot to clock out.

Resolution (missing call in or out): Navigate to Visit Maintenance module and edit Visit Details to update missing call. Make sure to add reason code for adjusting visit.

Alt EVV Resolution: The visit did not cross over to the Aggregator as expected or the visit was not in verified status; provider must identify what may cause the exception and work with their vendor to resolve.

For detailed steps, review article: [Adding a Manual Call to an Existing Visit](#) or [Creating a Visit](#)



Navigate Modules

Dashboard

Recipients

DCW/Employees

Scheduling

Visit Maintenance

Reports

XREF

Security

Messaging

CREATE VISIT

CREATE CALL

FILTERS

SHOW DISPLAY OPTIONS

EXPORT DATA

Show Legend

APPROVE ALL

DISAPPROVE ALL

RECIPIENT NAME	DCW/EMPLOYEE NAME	SERVICE	VISIT DATE	SCHEDULED TIME IN	SCHEDULED TIME OUT	SCHEDULED HOURS	CALL IN	CALL OUT	CALL HOURS	ADJUSTED IN	ADJUSTED OUT	AI H
HHAExchange, Harold	Dowdrick, Eric	HPC	10/31/2025				11:19 AM			11:19 AM		
Doe, Jane	Dowdrick, Eric	HPC	10/31/2025				11:11 AM	11:19 AM	00:08	11:11 AM	11:19 AM	
Sandata, Sandy	Dowdrick, Eric	RN Consultation (T1001)	10/31/2025				06:00 AM	07:00 AM	01:00	06:00 AM	07:00 AM	
Sandata, Sandy	Cordova, Alejandra	SPHH Aide (G0156)	10/30/2025				08:27 AM	09:00 AM	00:33	08:27 AM	09:00 AM	
Total: 01:41												



25 of 4 entries

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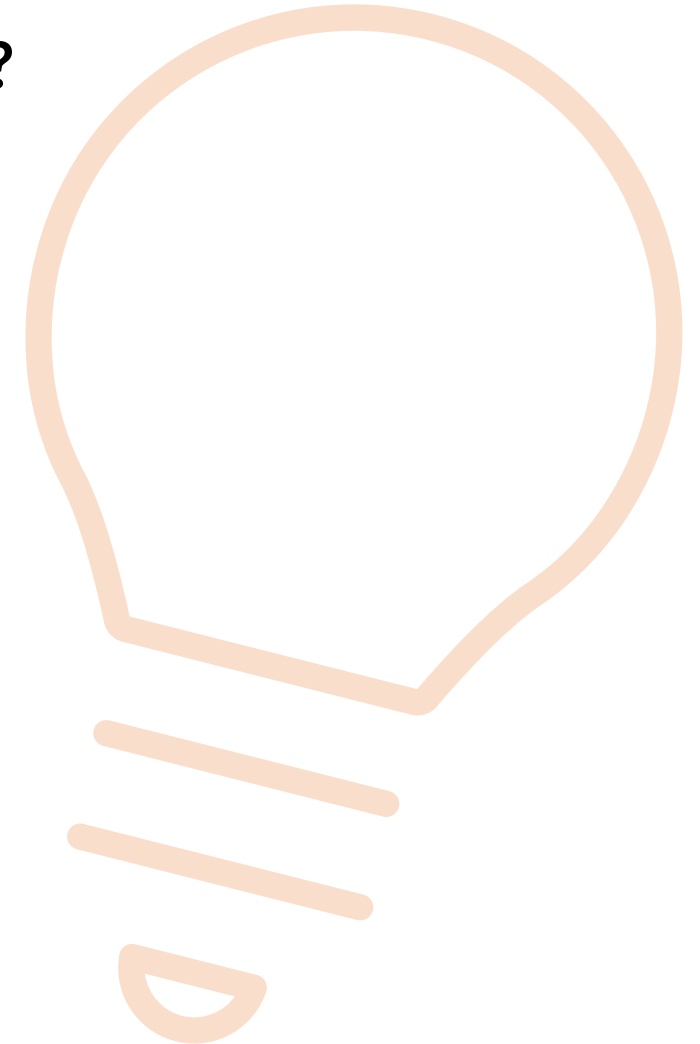


Knowledge Check – Editing an Incomplete Visit



What is required to save an edit to an incomplete visit?

- A. Provider ID
- B. Recipient ID
- C. Reason Code
- D. Action Code





Procedure Code Does Not Match (Incorrect Service Code)



Incorrect Service Code



EVV RA Message	Sandata Visit Exception
Procedure code does not match	Incorrect Service Code (unauthorized service exceptions)

Cause: The incorrect service is associated with the visit.

Example: DSP/Independent Provider started an unknown visit without the recipient’s ID. When selecting from the list of services, every option is exposed, which can lead to selecting the incorrect service.

Resolution: Navigate to Recipient Management screen and ensure the correct program, authorization, and services are in scope. Navigate back to Visit Maintenance module and edit the visit detail to reflect the proper service for visit.

Alt EVV Resolution: The visit did not cross over to the Aggregator as expected or the visit was not in verified status; provider must identify what may cause the exception and work with their vendor to resolve.

For detailed steps, review article: [Correcting an Unauthorized Service Exception](#)



Recipient Program Tab



BACK

Doe, Jane

MyC | Active

HISTORY

NOT

Recipient ID:

Medicaid ID: --

Main Address: 101 Main Street

Phone No: (1)

Main Emergency Contact: --

Personal*

Program

Schedules

MyC - Personal Care Services - Aetna - 10/02/2025 - Authorized

Active

Program Details

Supervisor

-

Enrollment:

-

Created Date:

10/02/2025

Effective Date:

10/02/2025

SOC Date

10/02/2025

EOC Date

-

Eligibility Begin Date

-

Eligibility End Date

-

Reason For Change

-

ADD PAYER

Service Details

Service Name:

Personal Care Services

Code:

T1019

Start Date:

10/09/2025

End Date:

06/19/2026

ADD SERVICE

Authorization Details

Payer: Aetna

Service: S5125

Event Code: NONE- None

Start Date: 10/14/2025

Medicaid ID:

-

Rank: 1

Recipient Payer ID: 1111111

Start Date: -

Group Number: -

End Date: -

Authorization No: AMP20251014T185624918

Modifiers: -

Format: Hours

End Date: 07/10/2027

Voileded Auth.

Expired Auth.

ADD AUTHORIZATION

Sandata EVV | Manage Visits

evv-ui.sandata.com/visit-maintenance

Sandata Home Care

Navigate Modules

Dashboard

Recipients

DCW/Employees

Scheduling

Visit Maintenance

Reports

XREF

Security

Messaging

Visit Maintenance / Manage Visits

Account: 43866 - HHAX Training - ALCORDOVA@HHAEXCHANGE.COM

Select Agency

LOG OUT

CREATE VISIT

CREATE CALL

FILTERS

SHOW DISPLAY OPTIONS

EXPORT DATA

APPROVE ALL

DISAPPROVE ALL

Show Legend

RECIPIENT NAME	DCW/EMPLOYEE NAME	SERVICE	VISIT DATE	SCHEDULED TIME IN	SCHEDULED TIME OUT	SCHEDULED HOURS	CALL IN	CALL OUT	CALL HOURS	ADJUSTED IN	ADJUSTED OUT	AI H
HHAAExchange, Harold	Dowdrick, Eric	HPC	10/31/2025				11:19 AM	12:00 PM	00:41	11:19 AM	12:00 PM	
Doe, Jane	Dowdrick, Eric	HPC	10/31/2025				11:11 AM	11:19 AM	00:08	11:11 AM	11:19 AM	
Sandata, Sandy	Dowdrick, Eric	RN Consultation (T1001)	10/31/2025				06:00 AM	07:00 AM	01:00	06:00 AM	07:00 AM	
Sandata, Sandy	Cordova, Alejandra	SPHH Aide (G0156)	10/30/2025				08:27 AM	09:00 AM	00:33	08:27 AM	09:00 AM	
Total: 02:22												

25 of 4 entries

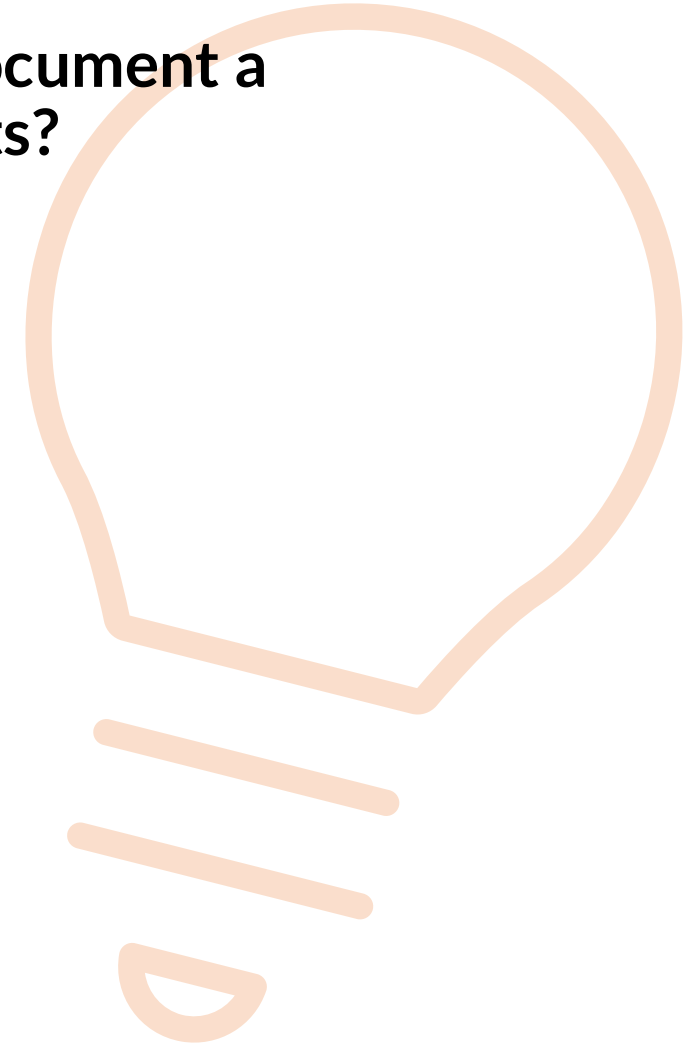


Knowledge Check – Reducing the Number of Service Options



What do your DCW/Employee's need to accurately document a visit with the correct service options for your recipients?

- A. Reason Code
- B. Provider ID
- C. Recipient ID
- D. Service Code





Units Do Not Match



Adjusting Time Calls/Dates



EVV RA Message	Sandata Visit Exception
Units do not match	Note: no exceptions appears, please review number of units on visit to claim

Cause: Visit units are less than what was billed.

Example: The provider billed the payer 4 units for a visit, equating to an 1 hour. However, the DCW/Employee accidentally clocked out of their visit early. The provider confirmed with the DCW/Employee that the full hour of service was rendered.

Resolution: Navigate to Visit Maintenance module. Update billing to align with the services rendered.

Alt EVV Resolution: Log into Aggregator and ensure the visit is accurate prior to submitting the claim

For detailed steps, review article: [Adjusting Call Times and Dates](#) and [Ohio Units Conversion Table](#)



Navigate Modules

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Recipients

DCW/Employees

Scheduling

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CREATE VISIT

CREATE CALL

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SHOW DISPLAY OPTIONS

EXPORT DATA

Show Legend

APPROVE ALL

DISAPPROVE ALL

RECIPIENT NAME	DCW/EMPLOYEE NAME	SERVICE	VISIT DATE	SCHEDULED TIME IN	SCHEDULED TIME OUT	SCHEDULED HOURS	CALL IN	CALL OUT	CALL HOURS	ADJUSTED IN	ADJUSTED OUT	AD. HO
HHaExchange, Harold	Dowdrick, Eric	HPC	10/31/2025				11:19 AM	12:00 PM	00:41	11:19 AM	12:00 PM	
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Sandata, Sandy	Dowdrick, Eric	SPHH Nsg - RN (G0299)	10/31/2025				06:00 AM	07:00 AM	01:00	06:00 AM	07:00 AM	
Sandata, Sandy	Cordova, Alejandra	SPHH Aide (G0156)	10/30/2025				08:27 AM	09:00 AM	00:33	08:27 AM	09:00 AM	
Total: 02:22												

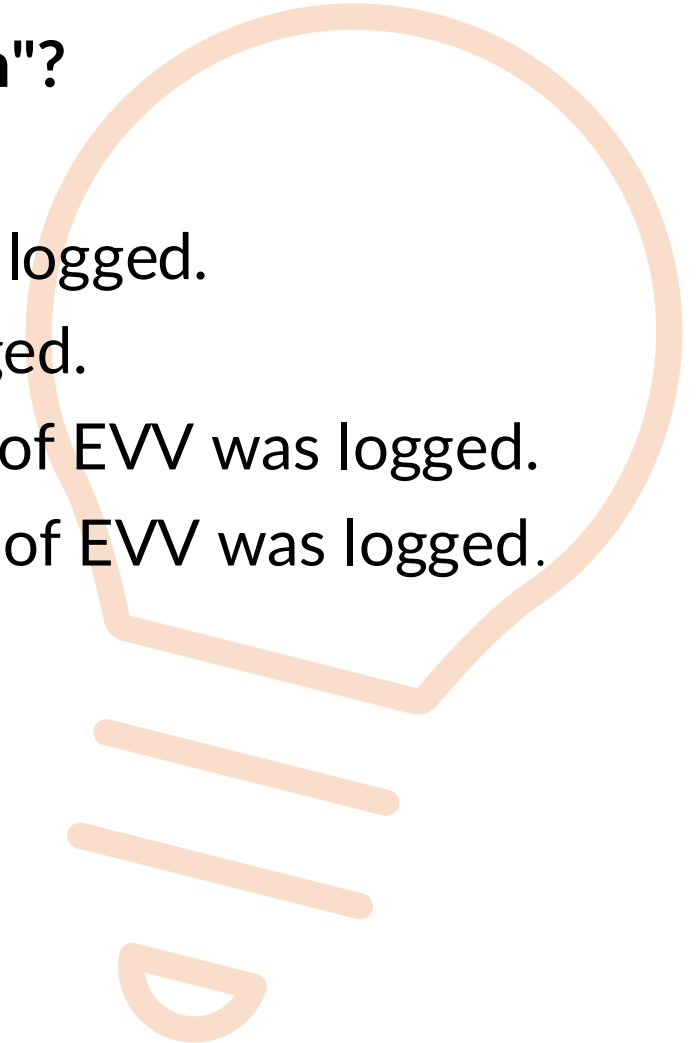


Knowledge Check – Units Do Not Match



What could lead to the claim error "Units do not match"?

- A. Billing 1 hour of service but 30 minutes of EVV was logged.
- B. Billing 1 hour of service but 1 hour of EVV was logged.
- C. Billing 1 hour of service but 1 hour and 15 minutes of EVV was logged.
- D. Billing 1 hour of service but 1 hour and 30 minutes of EVV was logged.





Claims Validation Rejection Report



Need to further research reason for rejections? Providers can use this report to identify rejected claims, review the visits in Sandata EVV, and make the required updates prior to resubmission.

Navigate to **Reports->Reports-Billing->Claims Validation Rejection**

1 of 1Find | Next

Report Parameters

Account:

For: 2/18/2025 - 2/18/2025 11:59:59 PM

CLAIMS VALIDATION REJECTION

Account:

Provider:

RECEIVED	BATCH ID	TRANS ID	INVOICE CONTROL NO	LINE NO	RECIPIENT ID	VISIT RANGE	PAYER	PROGRAM	SERVICE	BILL UNITS	PROVIDER MEDICAID ID	RECIPIENT MEDICAID ID	RECIPIENT NAME	UNITS FOUND	VISITS	ERROR MESSAGE	ERROR REASON
2/18/2025 12:01:23 PM				33	01	02/10/2025 02/10/2025			T1019	20				0	0	Procedure code does not match	
2/18/2025 12:01:24 PM				33	02	02/12/2025 02/12/2025			T1019	20				0	0	Procedure code does not match	
2/18/2025 12:01:25 PM				33	03	02/14/2025 02/14/2025			T1019	20				0	0	Procedure code does not match	
2/18/2025 12:01:25 PM				33	04	02/15/2025 02/15/2025			T1019	20				0	0	Procedure code does not match	



Preparing Your DSP/Independent Providers

➤ Preparing DSP/Independent Providers

You should determine...

- How do your DSP/Independent Providers use technology today?
- What appeals to your DSP/Independent Providers?
- Where they are in the DSP/Independent Providers lifecycle?

Training DSP/Independent Providers

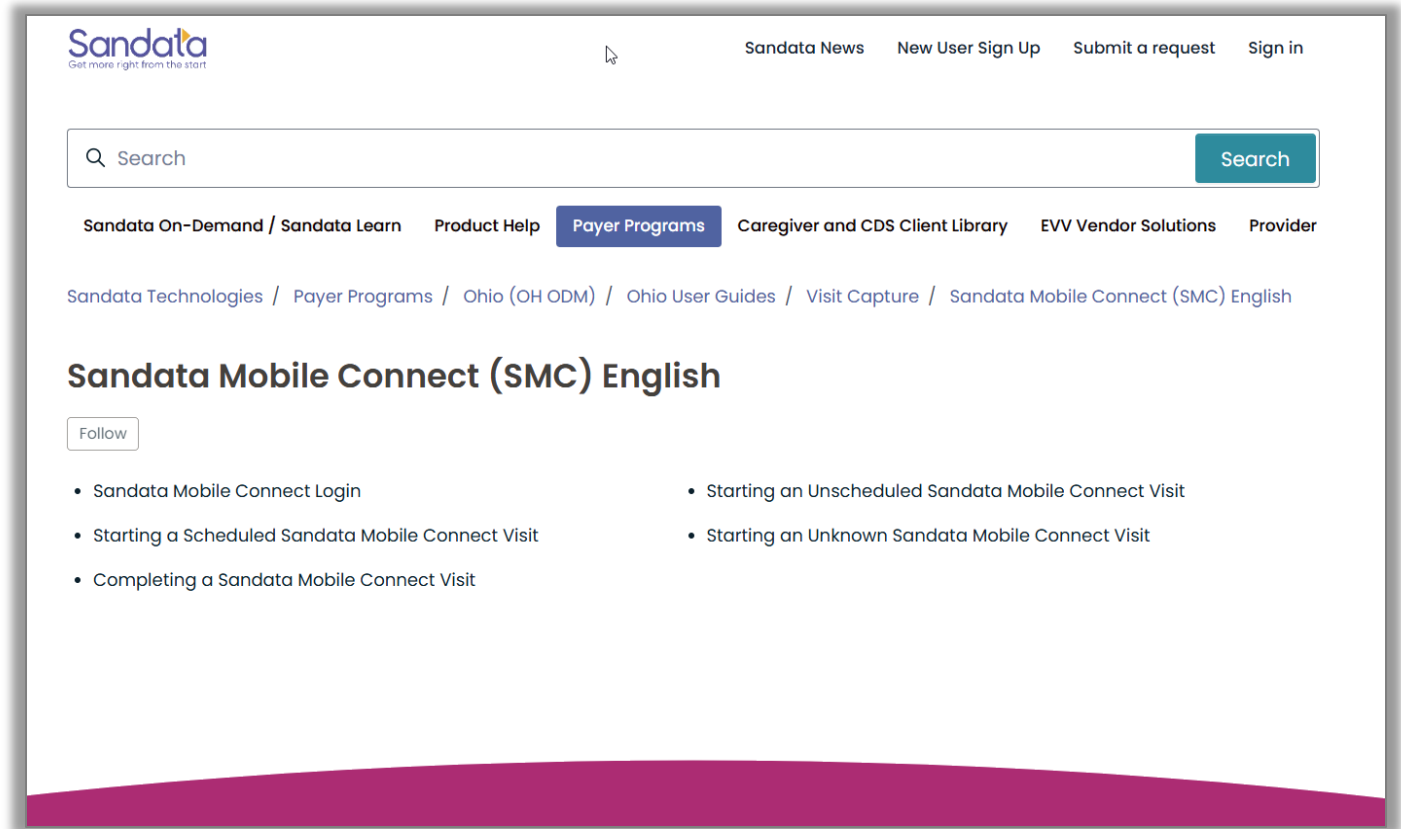
1. Require your DSP/Independent Provider to download the SMC mobile app during training.
2. Take advantage of EVV training tools and provide documentation.
3. Document the recipient ID and leave it in a folder near the phone in the recipient's home.
4. Set expectations and check in.



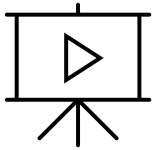
DSP/Independent Provider Training Resource



- [Sandata Mobile Connect Documentation](#)
- Documentation on:
 - Downloading and Logging in to mobile app.
 - Starting a visit using the mobile app.
 - [Ohio Service List](#)

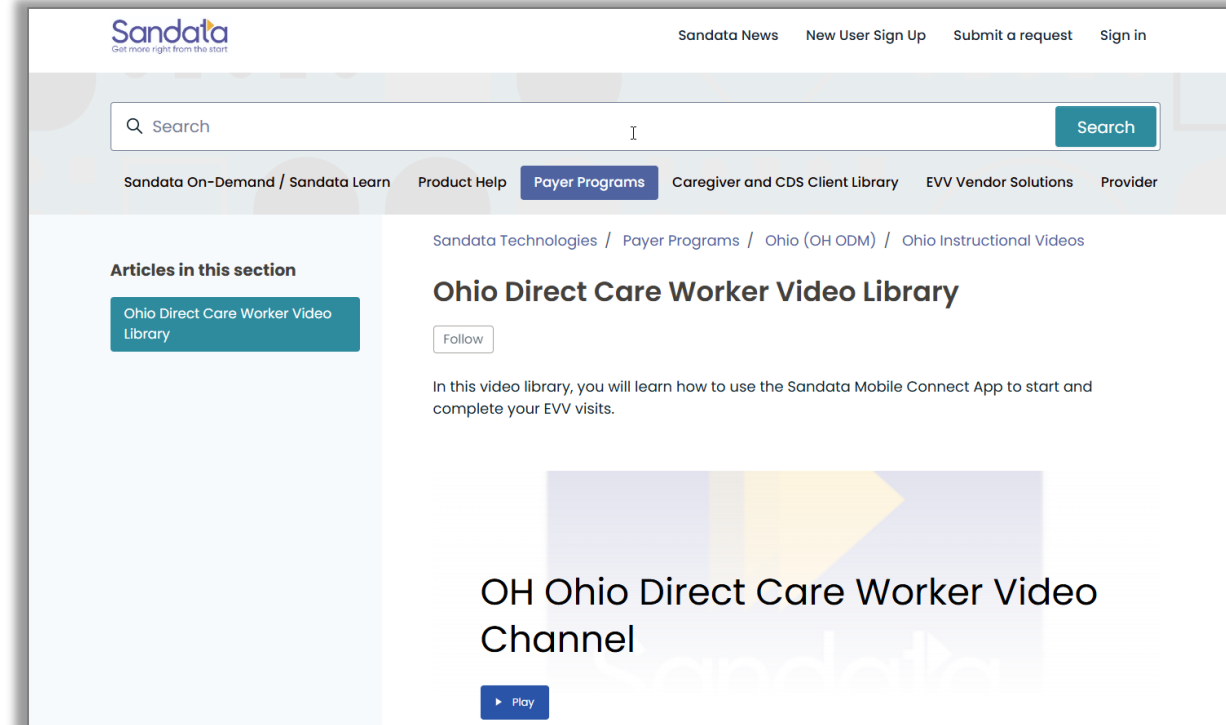


DSP/Independent Provider Video Library



- [Ohio Direct Care Worker Video Library](#)

- Videos on:
 - Starting and completing a visit
 - Resetting and changing a password
 - TVV call in and out





Key Takeaways

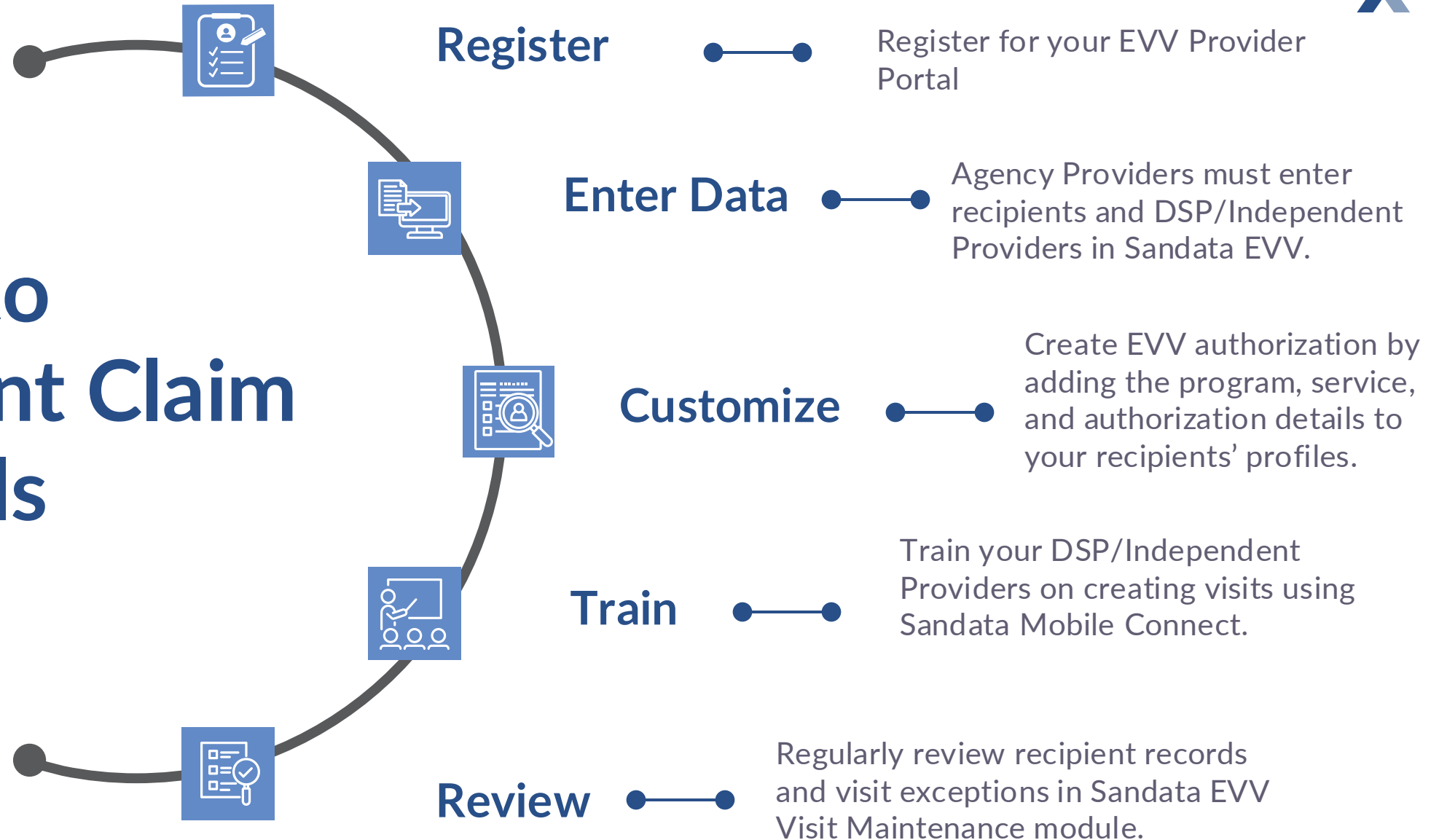
Key Takeaways



- Claims matching for **Phase 5** DODD IO, Level 1, Self Waiver Program Services started for visits with dates of service beginning on **10/1/2025**; claims that do not match will be denied.
- Claim errors can be resolved by reviewing Recipient records as well as the Visit Maintenance module on a regular basis.
- Ensure that all visits are in a Verified status.
- Provide resources to your DSP/Independent Providers for training to reduce visit exceptions.



How to Prevent Claim Denials





Support & Resources



Resources for New Providers



1. Take required EVV training on [Sandata Learn](#) if not done so already. Ohio ODM Learner Access to the Sandata Learn Learning Management Service (LMS): [Logging into LMS steps](#)
2. Upload certificate to PNM (Provider Network Management) Portal. Email with Medicaid ID will be sent to you.
3. All New providers are required to register for an EVV account through the [Provider Self-Registration Portal](#). You will also identify if you're using Sandata EVV or a Alternate EVV solution (3rd Party Alternate EVV Solution).
4. Register for [eTrac](#) , to access and retrieve Welcome Kit.
5. Log into Sandata EVV Portal.
6. Follow remaining steps on the linked [OH Provider Onboarding Checklist](#).





Provider Resources



- [Ohio User Guides](#)

Top Visit Maintenance Errors and How to Resolve:

- [Provider ID Matching Resource](#)
 - [Updating an Unknown Recipient](#)
 - [Managing Exceptions](#)
 - [Adjusting Call Times and Dates](#)
-
- [Ohio Claims Validation: Handling Claims Denials- Sandata Technologies](#)
 - [Ohio Agency Provider Training](#)

Need Assistance?

- Contact the EVV Provider Hotline at 855-805-3505 [Submit a Zendesk Ticket](#)
 - **Ensure that you have your STX (account #) when calling hotline or submitting ticket!**
- Attend Daily Office Hours – [Register for ODM EVV Office Hours!](#)

Alt EVV Providers – need help?

For additional support, please contact the Technical Support Alternate EVV team at either options below:

- Phone: 1-844-289-4246
- Email: OHAltEVV@Sandata.com
- Include the following in the email:
 - ✓ Provider Medicaid ID
 - ✓ Alt EVV Vendor
 - ✓ Include Examples (Universal Unique Identifier, copy of payloads) - **ensure this is sent securely via Zendesk portal if there is PHI data.**

Ohio Department of Medicaid

- [Ohio Department of Medicaid Website](#)
 - Resources available for how to file live-in caregiver exemption
- [Electronic Visit Verification](#)



Ohio Sandata On
Demand Training
Website



Questions?

**THANKS FOR
ATTENDING!**



*Please provide us your feedback
after exiting the webinar.*