

MEDICAID POLICY INFORMATION SHEET

Policy Analyst: Aimee Khaled

Phone Number:

Initial ☐

Public Comment ☒

Final ☐

Brief description of policy:

The purpose of this policy is to clarify time of visit requirements for Electronic Visit Verification (EVV) required Home Health Care Services. Overlapping visits for any Home Health EVV service will not be paid. The first Home Health service submitted to HHAeXchange will be processed. If another Home Health service visit uses the same time in full or in part, it will not be paid. If overlapping visits are submitted simultaneously, the visit with the earlier start time will be processed.

Reason for policy (problem being addressed):

To clarify existing Home Health policy due to provider questions on overlapping EVV visits.

Budget implication:

☒ budget neutral

☐ will cost MDHHS \$, and (select one) budgeted in current appropriation

☐ will save MDHHS \$

Is this policy change mandated per federal requirements?

No.

Does policy have operational implications on other parts of MDHHS?

No.

Does policy have operational implications on other departments?

No

Summary of input:

☐ controversial (Explain)

☒ acceptable to most/all groups

☐ limited public interest/comment

Supporting Documentation:

State Plan Amendment Required: ☐ Yes ☒ No

If Yes, please provide status:

☐ Approved

☐ Pending

☐ Denied

Date:

Approval

Date:

Public Notice Required: ☐ Yes ☒ No

If yes,

Submission Date:

DRAFT FOR PUBLIC COMMENT Michigan Department of Health and Human Services		
	Project Number: 2504-LTC	Date: March 25, 2025

Comments Due: April 29, 2025
Proposed Effective Date: July 1, 2025
Direct Comments To: Aimee Khaled
E-Mail Address: khaleda@michigan.gov

Policy Subject: Clarification on Electronic Visit Verification (EVV) Home Health Care Service Visits

Affected Programs: Medicaid

Distribution: Home Health Care Services Providers, Medicaid Health Plans

Summary: The purpose of this policy is to clarify time of visit requirements for Electronic Visit Verification (EVV) required Home Health Care Services. Overlapping visits for any Home Health EVV service will not be paid. The first Home Health service submitted to HHAeXchange will be processed. If another Home Health service visit uses the same time in full or in part, it will not be paid. If overlapping visits are submitted simultaneously, the visit with the earlier start time will be processed.

Purpose: To clarify existing Home Health policy due to provider questions on overlapping EVV visits.

Cost Implications: Budget neutral

Potential Hearings & Appeal Issues: None

State Plan Amendment Required: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, date submitted:	Public Notice Required: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Submitted date:
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Tribal Notification: Yes ☐ No ☒ - **Date:**

THIS SECTION COMPLETED BY RECEIVER

<input type="checkbox"/> Approved	<input type="checkbox"/> No Comments
	<input type="checkbox"/> See Comments Below
<input type="checkbox"/> Disapproved	<input type="checkbox"/> See Comments in Text

Signature:	Phone Number
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Signature Printed:

Bureau/Administration <i>(please print)</i>	Date
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Proposed Policy Draft

Michigan Department of Health and Human Services
Behavioral & Physical Health and Aging Services Administration

Distribution: Home Health Care Services Providers, Medicaid Health Plans

Issued: May 30, 2025 (proposed)

Subject: Clarification on Electronic Visit Verification (EVV) Home Health Care Service Visits

Effective: July 1, 2025 (proposed)

Programs Affected: Medicaid

Purpose

The purpose of this policy is to clarify time of visit requirements for Electronic Visit Verification (EVV) required Home Health Care Services (HHCS).

Background

The 21st Century Cures Act (the Cures Act), enacted by the U.S. Congress in December 2016, added Section 1903(l) to the Social Security Act to require all states to use EVV for personal care services (PCS) and HHCS provided under a Medicaid State Plan of the Social Security Act or under a waiver of the State Plan.

The Michigan Department of Health and Human Services (MDHHS) implemented EVV requirements for Medicaid fee-for-service (FFS) HHCS on April 1, 2024, and for Medicaid Health Plan HHCS on September 3, 2024. (Refer to the Home Health chapter and Electronic Visit Verification chapter of the [MDHHS Medicaid Provider Manual](#) for additional information.)

The Billing and Reimbursement for Institutional Providers chapter of the MDHHS Medicaid Provider manual, Home Health Claim Completion section, states that for claim completion “the time counted must be the time spent actively treating the beneficiary”.

Clarification on Time of Visit Requirements For EVV

Two or more service visits occurring at the same time are considered “overlapping visits.” If a single service visit overlaps with another, it is also considered an “overlapping visit.” For example, if a service visit start time is prior to the end time of a service visit on the same day, it is considered an “overlapping visit”

Overlapping visits for any Home Health EVV service will not be paid. The first HHCS visit submitted to HHAeXchange will be processed. If another HHCS visit uses the same time in full or in part, it will not be paid. If overlapping visits are submitted simultaneously, the visit with the earlier start time will be processed.