

Electronic Visit Verification Stakeholder Workgroup

February 23, 2026



Today's Agenda

- 1** Welcome and Housekeeping
- 2** Claims Validation Success Rates for Phases 1-6
- 3** Phase 7: Claims Validation for MyCare
- 4** Phase 6: Ohio Department of Aging (AGE) Error Codes
- 5** Electronic Visit Verification (EVV) Live-In Caregiver Exemption
- 6** Announcements and Resources

Access, Inclusion, and Reasonable Accommodation

The Ohio Department of Medicaid (ODM) is committed to providing access, inclusion, and reasonable accommodation in its services, activities, programs, and employment opportunities in accordance with the Americans with Disabilities Act (ADA), Title VI of the Civil Rights Act, and other applicable laws. To request an interpreter, written information in a language other than English or in other formats (large print, audio, accessible electronic formats, other formats), or a reasonable accommodation due to a disability, please contact ODM's Civil Rights/ADA Coordinator at 614-446-1948/TTY 711, fax 614-644-1434, or email: ODM_EEO_EmployeeRelations@medicaid.ohio.gov. Requests should be made at least three business days prior to the scheduled event.

If you believe ODM has failed to provide these services or discriminated in another way, you can file a grievance with ODM's Civil Rights Coordinator and/or file a civil rights complaint with the U.S. Department of Health and Human Services (HHS) Office for Civil Rights. Further information on these processes and ODM's compliance with civil rights and other applicable laws can be found in our [Notice of Nondiscrimination](#).

Unless ODM's Civil Rights/ADA Coordinator approves in advance, individuals may not record the meeting using the recording function in Teams, GoToMeeting, Zoom, or any virtual meeting platform used by the department, nor may individuals utilize artificial intelligence (AI) technologies to transcribe meetings.

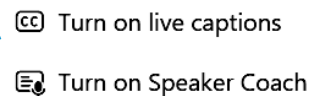
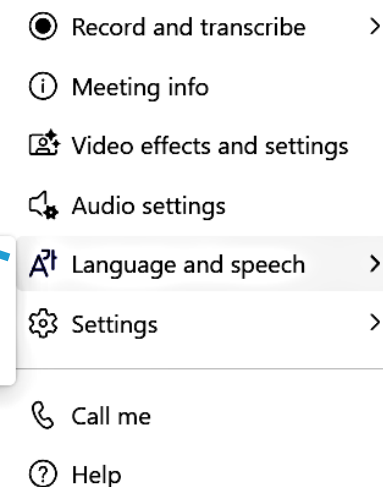
Accessibility (1 of 3)

You can turn on closed captioning for this webinar by following the steps below in Microsoft Teams.

Step 1. Click on the **More** button at the top of the screen.



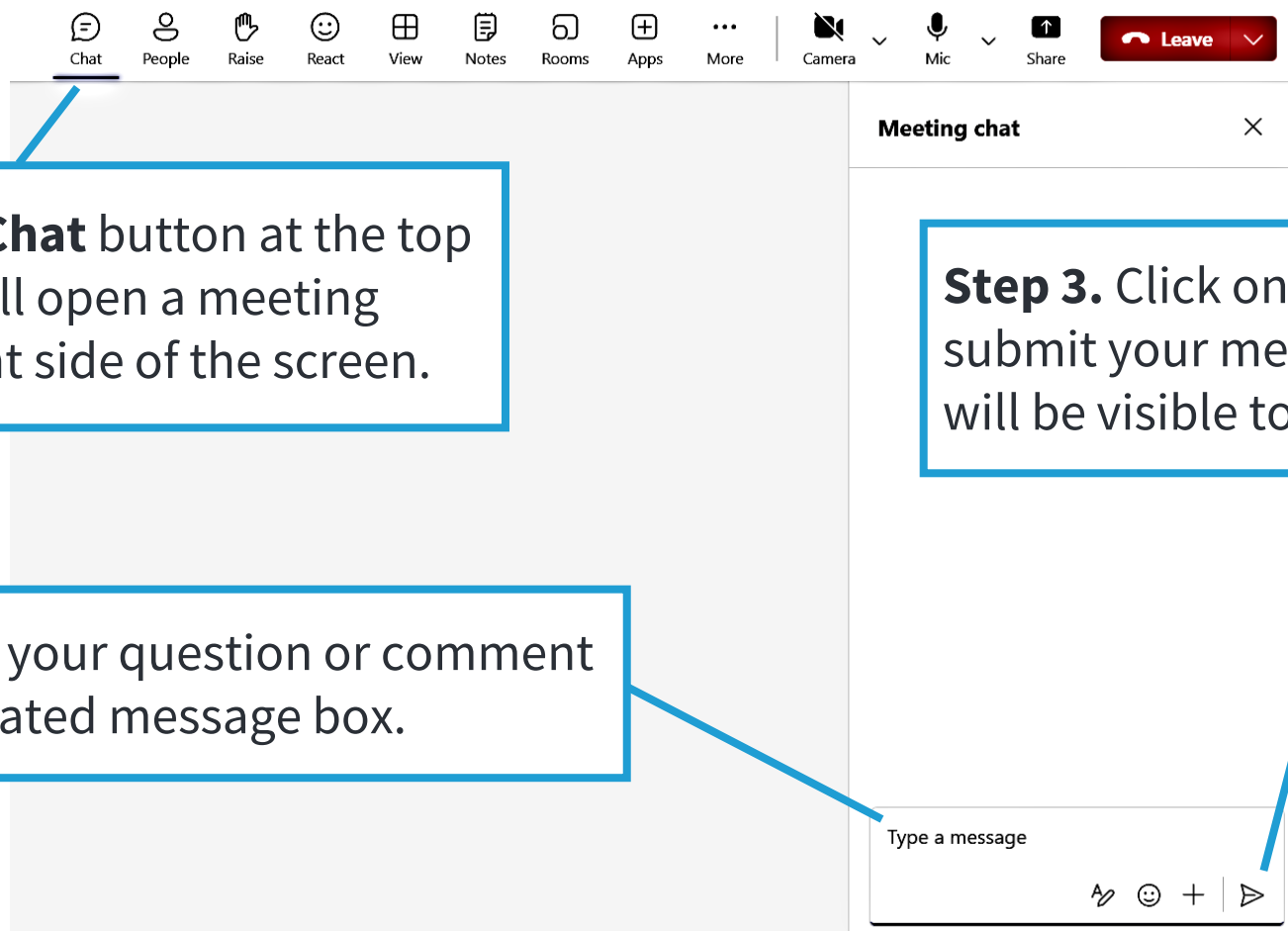
Step 2. Hover your mouse over the **Language and speech** button in the dropdown.



Step 3. Click on the **Turn on live captions** button.

Accessibility (2 of 3)

If you would like to submit a question or comment through the chat, please feel free to do so by following the steps below.



Step 1. Click on the **Chat** button at the top of the screen. This will open a meeting chat pane on the right side of the screen.

Step 2. Type your question or comment in the designated message box.

Step 3. Click on the send icon to submit your message. Your message will be visible to all attendees.

Accessibility (3 of 3)

If you would like to verbally comment or ask a question, please raise your hand by following the steps below.



Step 1. Click on the **Raise** button at the top of the screen. This will notify the presenter that you have a comment or question.

Step 2. Please wait for the presenter to acknowledge your raised hand before you begin speaking.

Step 3. If you are still muted, your mic will look like this. Please click on the mic icon to unmute.



We're Here to Help: Ways to Engage and Get Assistance

We encourage all participants to share their questions and feedback—either in the chat or by raising your hand to speak.

If you have a more detailed or situation-specific question, please take advantage of the following support options:



Sandata Office Hours

Connect one-on-one with a Sandata trainer during daily office hours.

[Register here](#) for an upcoming session.



24/7 Sandata Provider Support

Reach out by phone at 1-855-805-3505 or email us at ODMCustomerCareEmail@sandata.com for personalized assistance.

Claims Validation Success Rates for Phases 1-6

Current Status of Compliance – Success Rate Phases 1-6

Success Rate = Claims that match with a visit in the EVV system.

Phase	Effective Date	Pre-Go-Live Success Rate	Post-Go-Live Success Rate
1	March 1, 2025	46.9%	90.6%
2	June 1, 2025	55.8%	90.7%
3	June 1, 2025	51.1%	91.7%
4	August 1, 2025	60.7%	97.5%
5 – ODM	October 1, 2025	46.6%	88.09%
5 – DODD	October 1, 2025	60.0%	99.9%
6 - ODM	January 1, 2026	61.0%	86.51%









The data above covers the period from the phase start (effective) date through January 31, 2026, except for Phase 6 – Direct Bill, which covers January 1, 2026 through February 11, 2026.

Phase 7: Claims Validation for MyCare

Electronic Visit Verification Claims Processing Phases

Beginning **March 1, 2026**, MyCare service claims that require EVV must have a matching EVV visit record upon submission. Claims that do not match will be denied.

If you need help with Next Generation MyCare, refer to the [Next Generation MyCare Program Provider Help Desk One-Pager](#) to find the right contact.

 EVV Claims Adjudication Phases						
PHASE 1	PHASE 2	PHASE 3	PHASE 4	PHASE 5	PHASE 6	PHASE 7
March 1, 2025	June 1, 2025	June 1, 2025	August 1, 2025	October 1, 2025	January 1, 2026	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	IO, 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.

MyCare Claims Processing



MyCare claims are submitted in one of two ways:

Direct Data Entry to MyCare plans

Electronic Data Interchange (EDI) through ODM's One-Front Door Claim Processing

MyCare claims are processed by the MyCare Plans, either PAID or DENIED.

MyCare Remittance Advice

Electronic Data Interchange Details

Claims submitted via EDI to ODM are in a file format called the '837.'

The response received by the trading partner (either PAID or DENIED) is called the '835' or an electronic remittance advice (ERA) **if** the provider has enrolled for the 835.

Providers can access their remittance advice in the Medicaid Provider Network Management (PNM) module.

EDI Billing Requirements

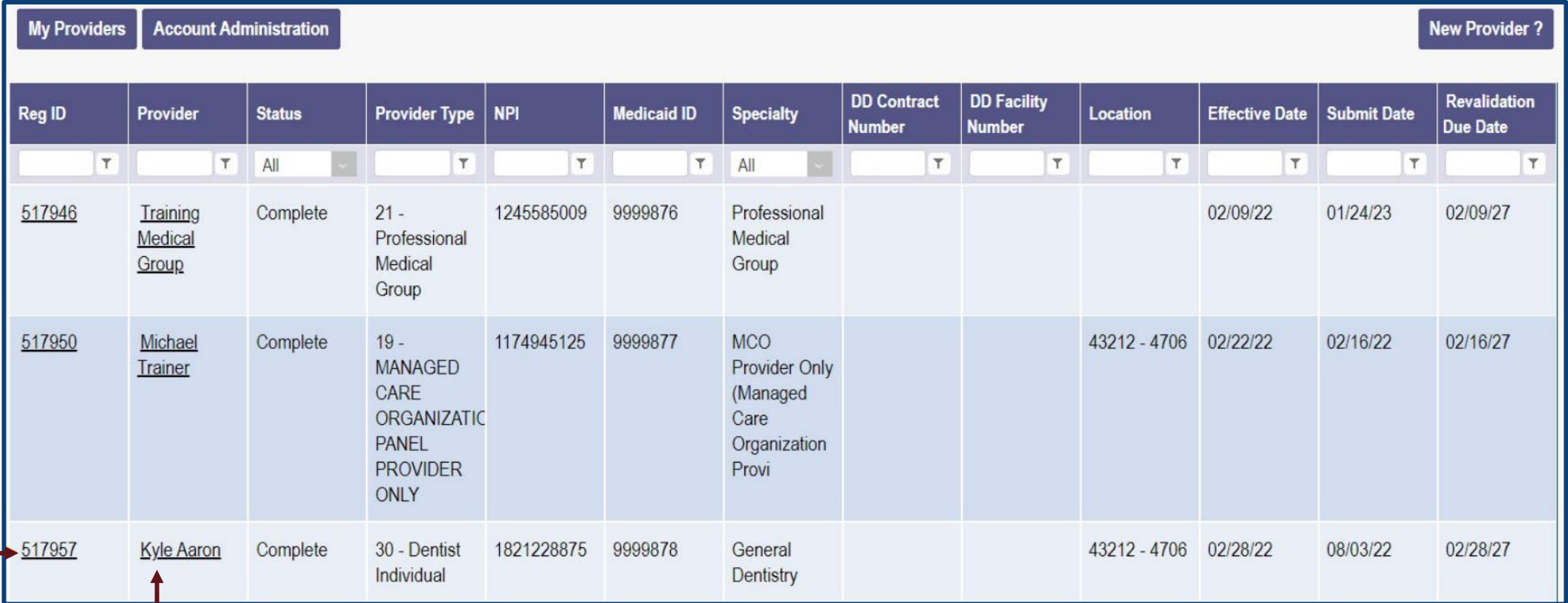
The **ODM-06306 835 designation form** must be on file, which identifies the trading partner for 835 / ERA.

Only one form is required for each Billing Provider.

For more information, visit [Production References](#).

How to Access PNM MyCare Remittance Advice: Step 1

Access the file in your PNM dashboard for which you want to view Remittance Advice. Click on the **Reg ID** or **Provider Name** hyperlink.



Reg ID	Provider	Status	Provider Type	NPI	Medicaid ID	Specialty	DD Contract Number	DD Facility Number	Location	Effective Date	Submit Date	Revalidation Due Date
517946	Training Medical Group	Complete	21 - Professional Medical Group	1245585009	9999876	Professional Medical Group				02/09/22	01/24/23	02/09/27
517950	Michael Trainer	Complete	19 - MANAGED CARE ORGANIZATIONAL PROVIDER ONLY	1174945125	9999877	MCO Provider Only (Managed Care Organization Provi			43212 - 4706	02/22/22	02/16/22	02/16/27
517957	Kyle Aaron	Complete	30 - Dentist Individual	1821228875	9999878	General Dentistry			43212 - 4706	02/28/22	08/03/22	02/28/27

Screenshots are illustrative and for discussion purposes only

How to Access PNM MyCare Remittance Advice: Step 2

Under the Manage Application section, click the + symbol to expand the Self Service Selections.

The screenshot displays a 'Manage Application' interface with three main sections, each with a plus sign (+) to its right, indicating it can be expanded:

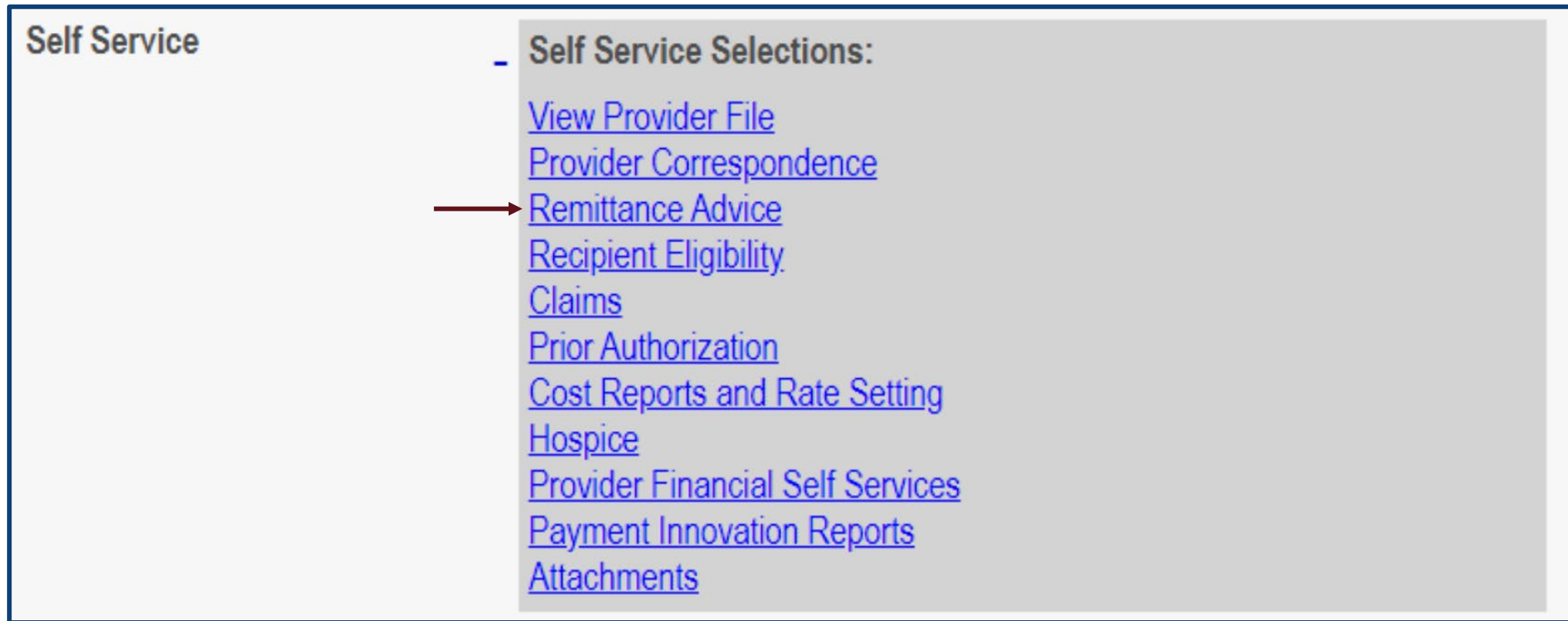
- Enrollment Actions** + Enrollment Action Selections:
- Programs** + Program Selections:
- Self Service** + Self Service Selections:

A red arrow points to the plus sign next to the 'Self Service' section.

Screenshots are illustrative and for discussion purposes only

How to Access PNM MyCare Remittance Advice: Step 3

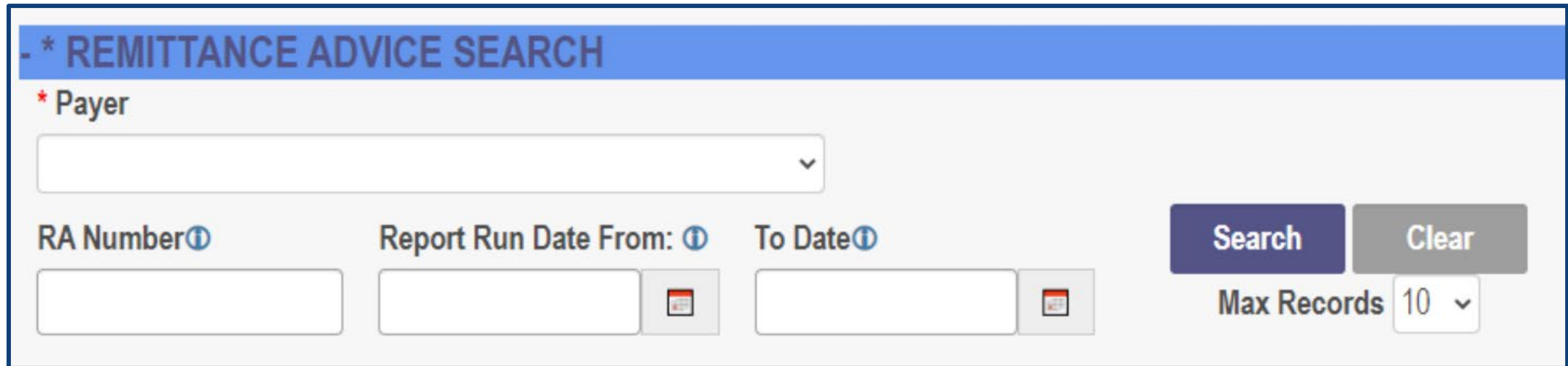
Within the Self Service Selections, click on the **Remittance Advice** hyperlink.



Screenshots are illustrative and for discussion purposes only

How to Access PNM MyCare Remittance Advice: Step 4

Select a **Payer** from the drop-down menu. Additionally, enter the **Remittance Advice (RA) number** if available, a **Report Run Date From**, and a **Report To Date**. Then, click **Search**.



The screenshot shows a web form titled "REMITTANCE ADVICE SEARCH". It includes a dropdown menu for "Payer", a text input for "RA Number", and two date pickers for "Report Run Date From" and "To Date". There are "Search" and "Clear" buttons, and a "Max Records" dropdown set to "10".

* REMITTANCE ADVICE SEARCH

* Payer

RA Number ⓘ

Report Run Date From: ⓘ To Date ⓘ

Search Clear

Max Records 10 ▾

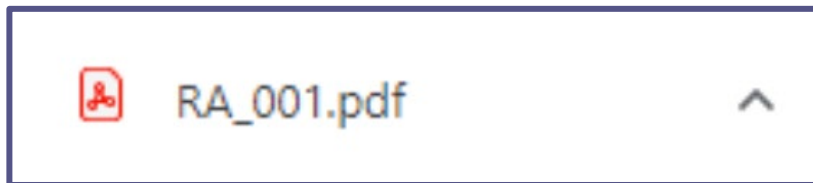
Screenshots are illustrative and for discussion purposes only

How to Access PNM MyCare Remittance Advice: Step 5

Search results will appear at the bottom of the page. Click **Download Report** to open a copy of the RA report. Once downloaded, open the document.

Note: The PDF copy of the report will download to the designated download folder for your browser.

REMITTANCE ADVICE SEARCH RESULT		
RA Search Results		
RA Number	Report Run Date ▼	
123456780	4/8/2022 12:00:00 AM	Download Report



Screenshots are illustrative and for discussion purposes only

MyCare Remittance Advice: Denial Reasons

Starting March 1, providers who deliver services billed to MyCare will see these four denial reasons listed on their remittance advice if their visits do not meet EVV requirements.

Rule Description	RARC	CARC	What does this mean?
Provider ID does not match	N521 Mismatch between the submitted provider information and the provider information stored in our system.	272 Coverage or program guidelines were not met	The provider Medicaid ID on the claim request does not have an EVV account in Sandata's system.
Recipient ID does not match	N819 Patient not enrolled in EVV system	272 Coverage or program guidelines were not met	The recipient Medicaid ID on the claim is not in the provider's EVV account.
Procedure Code does not match	N56 Procedure code billed is not correct or valid for the services billed, or for the date of the service billed.	272 Coverage or program guidelines were not met	A verified visit was not found in the provider's EVV account with the following details from the claim: recipient Medicaid ID, date of service, payer, and service.
Unmatched Units	N820 EVV system units do not meet requirements of visit	272 Coverage or program guidelines were not met	A verified visit was found but has less units than what was on the claim.

Phase 7 Claims Validation Resources and Trainings

ODM and Sandata offer a variety of trainings and resources to help providers prepare for the new EVV claims validation requirements effective March 1, 2026. Please see these opportunities below.

Sandata EVV Phase 7 Training Series

- Data Entry Training – 2/3 at 2 p.m. ([Replay](#))
 - Q&A Session – 2/5 at 11 a.m. ([Replay](#))
- Alternate EVV Provider Training – 2/11 at 11 a.m. ([Replay](#))
- Visit Maintenance Training – 2/17 at 11 a.m. (Replay coming soon)
 - Q&A Session – 2/19 at 11 a.m. (Replay coming soon)
- Get Ready for Claims Matching 2/26 at 11 a.m. ([Register](#))
- Alternate EVV Provider Training – 3/18 at 11 a.m. ([Register](#))
- Get Ready for Claims Matching – 4/1 at 11 a.m. ([Register](#))

Additional Resources

- ✓ [EVV Live-In Caregiver Exemption Streamlined System Transition Guide](#)
Instructions for transferring multiple live-in caregiver exemptions when switching from Sandata EVV to another vendor (or between vendors).
- ✓ [How to Future Date Recipient Records](#)
How-to guide for providers to set up a new recipient record in Sandata EVV with a future effective date.

Phase 6: Ohio Department of Aging Error Codes

EV002

Provider not found in Sandata

EV003

Consumer not found in Sandata

EV004

Provider and consumer not found in Sandata

EV005

Consumer not found for the provider in Sandata

Cause

The Medicaid ID for the provider, the recipient, or both on your claim does not match the information in the Sandata EVV system.

Resolution

Provider Medicaid ID

- Identify the Medicaid ID associated with the account you are using to record visits and compare this value to the Medicaid ID associated with your claim.
 - For detailed steps, refer to the Sandata resource [Provider ID does not match](#).
- If there is a missing Sandata EVV account, create a Sandata account using the Medicaid ID associated with the service being rendered if EVV is applicable.

Recipient Medicaid ID

- Verify the Recipient Medicaid ID and if incorrect, deactivate the recipient's record. Then, create a new recipient record with the correct or updated Medicaid ID.
 - For detailed steps, refer to the Sandata resource [Creating a New Recipient Record](#).
- If the individual does not have a Medicaid ID yet, follow the steps outlined [here](#).

EV006

Verified service not found in Sandata

EV007

Service date not found in Sandata

Cause

There is no matching visit in the EVV account with both the Provider and Recipient Medicaid ID for this service. This could mean that:

- The visit does not appear in Sandata;
- The visit is not in Verified status;
- The visit does not have the correct payer and/or service;
- The visit does not have an EVV authorization, or it is expired/incorrect for the service; or
- The DCW started an unknown visit without the Recipient's Medicaid ID. When selecting from the list of services, every option is exposed, which can lead to selecting the incorrect service.

Resolution

- Ensure the correct program, authorization, and services are in scope in the recipient record. Update services to match within visit maintenance.
 - To address this issue, visit the Sandata resource [Correcting an Unauthorized Service Exemption](#).

EV008

Units billed more than in Sandata

Cause

The units on the claim line do not meet the requirements of visit (“equal to or less than units on the visit”). This means the visit is in a Verified status and would match to a claim request, except there are not enough units on the visit.

Resolution

- Update your billing to align with the services rendered in Visit Maintenance.
- If the units on your claim do not meet the requirements of a visit, you may need to adjust your call times and dates. Please see below resources to assist with making this change:
 - [Adjusting Call Times and Dates](#)
 - [Ohio Unit Conversion Table](#)

EV000

Unable to verify EVV check
Sandata

Cause

An error during the validation process (unable to verify claim – catchall error).

Resolution

- Reach out to the AGE Help Desk for support:
 - Email: ODA_ISD_HelpDesk@age.ohio.gov
 - Phone number: 1-866-243-5678

For more information, refer to the following resources:

- [EVV Error Messages Resource](#)
- [EVV Claims Validation Process for PASSPORT Waiver](#)

Electronic Visit Verification Live-In Caregiver Exemption

Live-In Caregiver Exemption: Process (1 of 2)

If a direct care worker (DCW) lives in the same household as the individual receiving services, they may be exempt from visit logging requirements. To submit an EVV live-in caregiver exemption request, follow the steps below.

1

Fill out the online Exemption Request Form

<https://medicaid.ohio.gov/home/evv-exemption-request>

Providers must complete all sections.

Required Information

- EVV Account Number
- Provider Medicaid ID
- Recipient Santrax ID
- DCW Santrax ID

2

Upload required documentation to the Exemption Request Form

This documentation will be used to verify the shared address.

Examples may include:

- Utility bills
- Current state ID or driver's license
- W2
- Tax return

3

Confirm the DCW & recipient records are in the Sandata system

If using a different EVV vendor for visit capture, the DCW and recipient records must be documented in the Sandata Aggregator system.

Live-In Caregiver Exemption: Process (2 of 2)

If a direct care worker (DCW) lives in the same household as the individual receiving services, they may be exempt from visit logging requirements. To submit an EVV live-in caregiver exemption request, follow the steps below.

4

Click “Submit” on the online Exemption Request Form

You will receive an automated email that your request was successfully submitted and received by the ODM EVV team.

5

ODM will review your request

You will be notified via email that the exemption was either approved or denied.

If approved, the Sandata EVV System is updated to reflect the exemption. This could take a few days to complete.

Resources

- ✓ [EVV Live-In Caregiver Infographic](#)
Step-by-step guide for submitting an EVV live-in caregiver exemption request using the online form.
- ✓ [Live-In Caregiver Checklist for Sandata EVV Exemption](#)
Printable checklist that outlines the required steps providers must complete before requesting an EVV Live-In Caregiver Exemption.

Live-In Caregiver Exemption: Data

- ODM staff is working diligently to process all live-in caregiver exemption requests.
- To obtain approval quickly, providers should be submitting all requests through the [online form](#).
- Highlighted below is the total number of live-in caregiver exemption requests that ODM has received, processed, and approved as of February 2, 2026.

20,093
Received

19,912
Processed

11,143
Approved

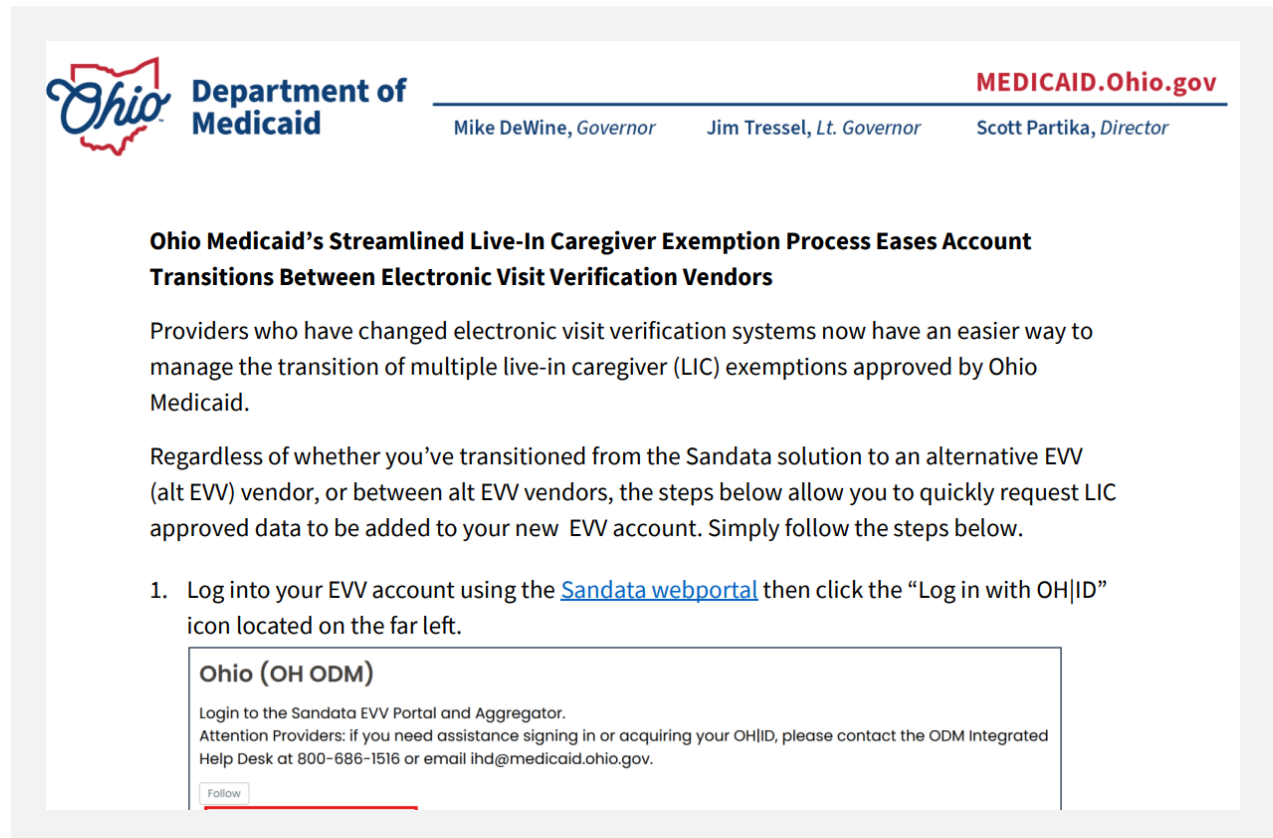
* The received and processed totals above include resubmissions when an initial request could not be processed.

Transitioning a Live-In Caregiver Exemption

ODM and Sandata have implemented a simpler way for providers to transition multiple live-in caregiver exemptions if they have switched EVV systems, either from Sandata EVV to an alt EVV vendor (or between alt EVV vendors).

The steps in the below guide explain how to quickly request that your approved live-in caregiver data be added to your new EVV account.

[EVV Live-In Caregiver Exemption Streamlined System Transition Guide](#)



The screenshot shows a press release from the Ohio Department of Medicaid. At the top left is the Ohio Department of Medicaid logo. To the right of the logo are the names of the Governor (Mike DeWine), Lt. Governor (Jim Tressel), and Director (Scott Partika). Further right is the website URL MEDICAID.Ohio.gov. The main heading of the press release is "Ohio Medicaid's Streamlined Live-In Caregiver Exemption Process Eases Account Transitions Between Electronic Visit Verification Vendors". The text explains that providers who have changed their EVV systems now have an easier way to manage the transition of multiple live-in caregiver (LIC) exemptions. It states that regardless of whether the provider has transitioned from Sandata to an alternative EVV vendor, the steps below allow for a quick request for LIC data. The first step listed is to log into the Sandata webportal and click the "Log in with OH|ID" icon.

Ohio (OH ODM)
Login to the Sandata EVV Portal and Aggregator.
Attention Providers: if you need assistance signing in or acquiring your OH|ID, please contact the ODM Integrated Help Desk at 800-686-1516 or email ihd@medicaid.ohio.gov.

Electronic Visit Verification Announcements and Resources

Upcoming Alternate EVV Town Hall

Sandata, in cooperation with the Ohio Department of Medicaid (ODM), will host an informational Alternate Electronic Visit Verification (Alt EVV) Town Hall for provider vendors.



Alt EVV Town Hall

- **Thursday, March 19 from 11 a.m. – 12 p.m.**
- What will be covered?
 - EVV background and claims validation
 - Review of the alt EVV specifications and services
 - Alt EVV vendor options for independent providers
 - April 1 enforcement of reason code 99 requirements
- Register here: <https://info.hhaexchange.com/marchtownhall>

Schedule of Meetings

EVV Stakeholder Workgroup meetings are held virtually every month.



Upcoming meetings are scheduled for the following days and times:

- **Monday, March 23 from 2:30 – 4 p.m.**
- Monday, April 27 from 2:30 – 4 p.m.
- Tuesday, May 26 from 2:30 – 4 p.m.*

*The May workgroup meeting has been rescheduled due to Memorial Day.

What EVV topics would you like to discuss in upcoming workgroups?

Do you know someone who may be interested in joining EVV Stakeholder Workgroup meetings to listen in?

They can visit medicaid.ohio.gov/evv for meeting information.

Resources and Additional Information

Slides from today's meeting will be posted on ODM's website.

Please refer to medicaid.ohio.gov/evv for additional information about the EVV program.

Helpful Resources and Trainings

- Browse the [Resource Guide](#) to find helpful resources on the EVV website.
- Sign up for the monthly EVV newsletter using the [ODM Subscriber Form](#).
- If you need assistance with the Sandata system, you can [register here](#) for office hours.
- ODM is developing a series of short videos to assist you with EVV. Watch them here:
 - [What is EVV?](#)
 - [Getting Started with EVV](#)
 - [EVV Login Challenges](#)
- If you have additional questions, send an email to interagencypolicy@medicaid.ohio.gov.

THANK YOU

medicaid.ohio.gov