

Navigating the EVV Provider Dashboard

To better understand your claim lines status, visit ODM's [EVV Provider Dashboard](#) to support providers in evaluating currently submitted claims that cannot be validated against EVV data. It does not provide specific information about each invalid claim or the gap in the matched data.

As you are utilizing the dashboard, please note the following:

- The dashboard contains claims data starting July 2023 and is updated monthly to incorporate claims data as it is received from providers.
- The dashboard will be updated to include each service subject to validation 2-3 months prior to enforcing these new claim validation requirements.

Navigating the EVV Provider Dashboard Instructions

Step 1: Click [here](#) to access the EVV Provider Dashboard homepage.

Step 2: Select the page that you would like to go to. The **Definitions Page** provides information on the language used in the dashboards. The **Provider Lookup Dashboard** produces a report showing claim lines submitted since July 2023 that may be missing complete EVV data. The **Error Diagnostic** dashboard provides information on the errors generated when claim lines are submitted for payment (See screenshot below).

Electronic Visit Verification Provider Dashboard

*Click on the links below to navigate to the dashboards and click on the Home icon available on dashboards to return to this page.

Definitions Page

Provider Lookup Dashboard

Error Diagnostic Dashboard

Navigating the Provider Lookup Dashboard Instructions:

Step 1: Click on the Provider Lookup Dashboard button on the homepage.

Step 2: Type your provider 7-digit Medicaid ID number into the “Type Provider ID” box, indicated by the black arrow in the image below, and then hit “enter”. If you do not know your Medicaid ID number, please access the Provider Network Management (PNM) Module by clicking where indicated by the orange arrow in the image below or visiting the PNM Module [here](#).

Instructions: Please type your **Medicaid ID** (including leading zeros, if applicable, as shown here: (0123123)) in the search box and press Ent please visit https://ohpnm.omes.maximus.com/OH_PNM_PROD/Account/Login.aspx over the KPI metrics (Total Claims Line Count, et click the **Diagnostic Dashboard** button to review claim mismatch errors.

Enter Medicaid ID	Total Claims Line Count	Claims Line Count Not Validated	% Claims Line Count Not Validated
<input type="text"/>			
Paid Month Year (None) ▼			
Plan Name (None) ▼			
Program Type (None) ▼			
Service Code (None) ▼			
Service Type (None) ▼			
Sort By Metrics Claims Line Count Not Valid... ▼			

% Not Validated Color

- 0 - 20%
- 20 - 40%
- 40 - 60%
- 60 - 80%
- 80 - 100%

Step 3: Once you have entered your provider Medicaid ID number, the dashboard will produce a report showing the claim lines you submitted for payment since July 2023 that are missing complete EVV data. This can be found in the “Percent (%) Claim Lines Not Validated” column. Higher percentages indicate larger volumes of claim lines that are experiencing error. As a provider, your goal should be to have as low a percentage in this field as possible.

Instructions: Please type your Medicaid ID (including leading zeros, if applicable, as shown here: 0123123) in the search box and press Enter. Please ensure there are no extra spaces before or after entering your ID. If you don't know your Medicaid ID, please visit: https://login.unms.maximus.com/014_PMA_PROD/Account/Login.aspx. Hover over the KPI metrics (Total Claims Line Count, etc.) or click the Definitions button for more information. Once you have reviewed the information on this page, click the Diagnostic Dashboard button to review claim mismatch errors.

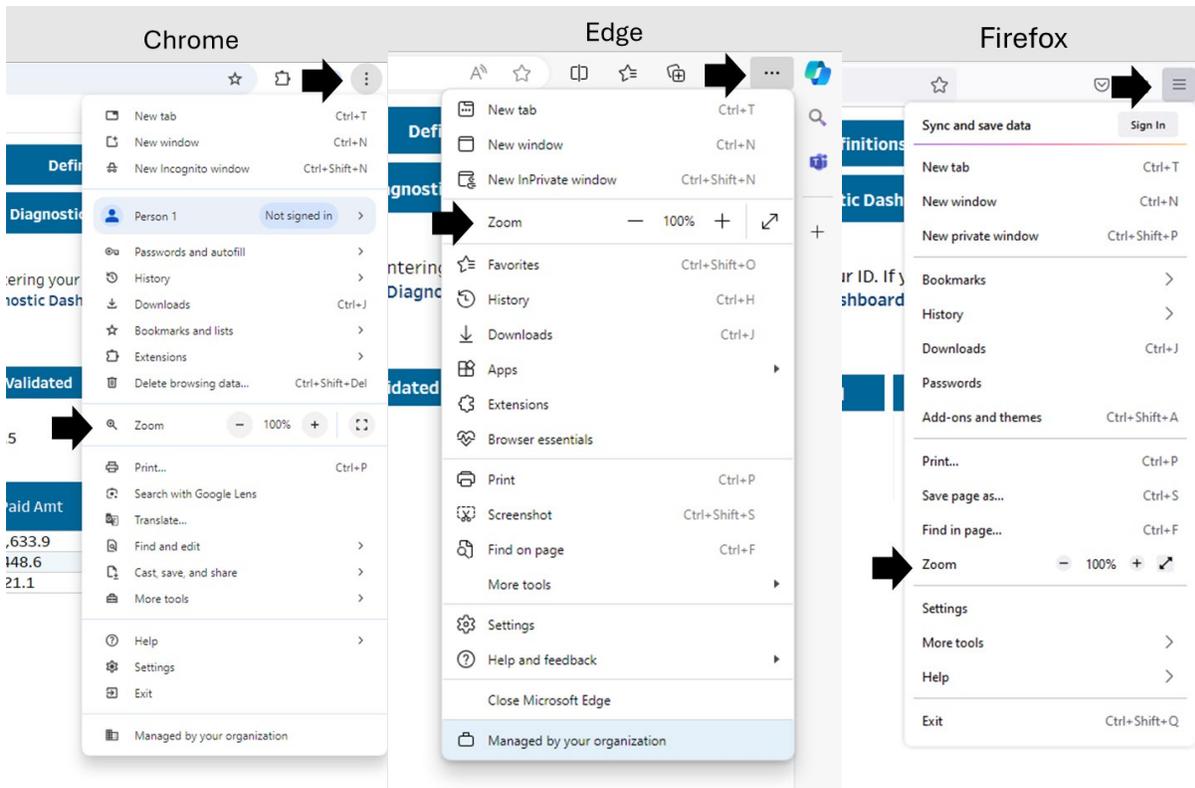
Enter Medicaid ID	Total Claims Line Count	Claims Line Count Not Validated	% Claims Line Count Not Validated	Total Paid Amount	Paid Amount Not Validated	% Paid Amount Not Validated
[All]	6,148	3,010	49.0%	\$248,403.6	\$131,344.5	52.9%

Plan Name	Provider ID	Detail Line Ser.	Service Description	Phone Number	Email Address	Total Claims Line Count	Total Claims Line Count Not Validat...	% Claims Lines Not Validated	Total Paid Amt	Paid Amt Not Validated	% Paid Amt Not Validated
FFS	G0156		Home Health Aide			6,115	2,977	48.7%	\$246,633.9	\$129,574.8	52.5%
Program Type	G0299		Home Health Nursing RN			27	27	100.0%	\$1,448.6	\$1,448.6	100.0%
Fee for Service (FFS)	G0300		Home Health LPN			6	6	100.0%	\$321.1	\$321.1	100.0%

% Not Validated Color
 = 0 - 20%
 = 20 - 40%
 = 40 - 60%
 = 60 - 80%
 = 80 - 100%



Please Note: If you are having issues reading the data on the page due to your device's screen resolution, there are several ways to make the data more readable. Utilize the fullscreen button indicated by the orange arrow in the image above or utilize the zoom out functionality of your web browser, as shown with black arrows in the images below.



Step 4 (Optional): Refine and sort the results of your report by using the filters to the right of the data.

- The **Paid Month Year** filter allows you to select and deselect certain months.

Paid Month Year

(All) ▾

- (All)
- July 2023
- August 2023
- September 2023
- October 2023
- November 2023
- December 2023
- January 2024
- February 2024
- March 2024
- April 2024
- May 2024
- June 2024

Cancel Apply

- The **Service Code** and **Service Type** filters allow you to search by specific services rendered in the claim line.

Service Code

(All) ▾

- (All)
- G0156
- G0299
- G0300

Cancel Apply

Claims Line Count Not Valid... ▾

Service Type

(All) ▾

- (All)
- Home Health Aide
- Home Health LPN
- Home Health Nursing RN

Cancel Apply

- Lastly, you can sort the results of your report by any of the KPI metrics by selecting them in the **Sort By Metrics** filter.

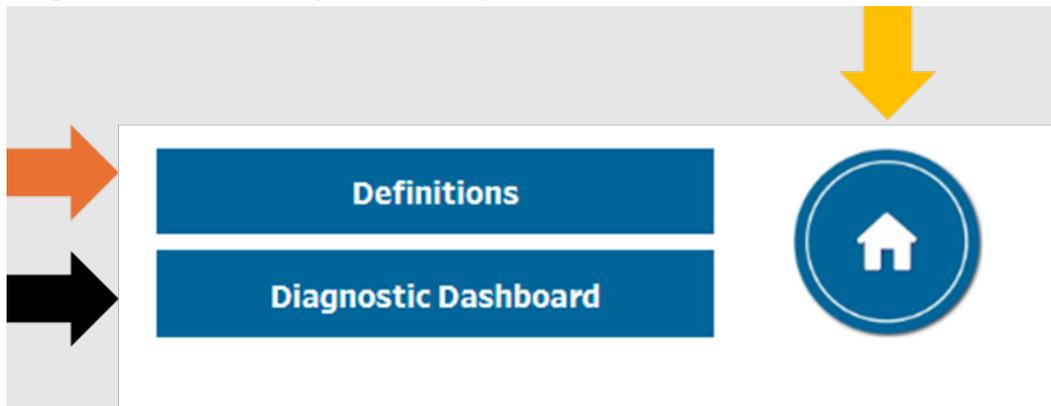
Sort By Metrics

Claims Line Count Not Valid... ▾

- Total Claims Line Count
- Claims Line Count Not Validated
- % Claims Line Count Not Validated
- Total Paid Amt
- Paid Amt Not Validated
- % Paid Amt Not Validated

Additional Features to Note:

- You can utilize the navigation buttons on the dashboard to return to the home page (yellow arrow), navigate to the definitions page (orange arrow), or continue to the diagnostic dashboard (black arrow)



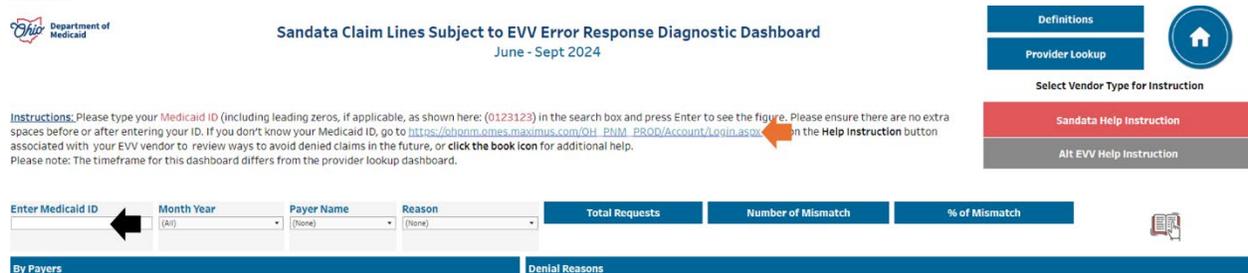
- You can hover over the KPI metrics (Total Claims Line Count, etc.) to receive additional information about the KPIs and how they are calculated.

% Claims Line Count Not Validated	Total Paid Amount	Paid Amount Not Validated	%
49.0%	\$248,403.6	\$131,344.5	
<p>Provider submitted 6,148 total claim lines subject to EVV in this period. 3,010 of the claim lines resulted in a validation error. Beginning on January 1, 2025, 49.0% of the claim lines subject to EVV submitted by provider would be subject to denial.</p>			

Navigating the Error Diagnostic Dashboard Instructions

Step 1: Click on the Error Diagnostic Dashboard button on the homepage.

Step 2: Type your provider 7-digit Medicaid ID number into the “Enter Provider ID” box, indicated by the black arrow in the image below, and then hit “enter”. If you do not know your Medicaid ID number, please access the Provider Network Management (PNM) Module by clicking where indicated by the orange arrow in the image below or visiting the PNM Module [here](#).



Step 3: Once you have entered your provider Medicaid ID number, the dashboard will produce a report showing the denial reasons associated with claim lines submitted for payment that are missing complete EVV data. **Please note:** the time frame for this dashboard covers a different period from the provider lookup dashboard. The number of claim lines are not expected to match between the two dashboards.

Sandata Claim Lines Subject to EVV Error Response Diagnostic Dashboard
June - Sept 2024

Instructions: Please type your Medicaid ID (including leading zeros, if applicable, as shown here: 0123123) in the search box and press Enter to see the figure. Please ensure there are no extra spaces before or after entering your ID. If you don't know your Medicaid ID, go to https://ohonm.ames.maximus.com/OH_PNM_PROD/Account/Login.aspx. Click on the **Help Instruction** button associated with your EVV vendor to review ways to avoid denied claims in the future, or click the **book icon** for additional help. Please note: The timeframe for this dashboard differs from the provider lookup dashboard.

Enter Medicaid ID	Month Year	Payer Name	Reason	Total Requests	Number of Mismatch	% of Mismatch
	(All)	ODM	(All)	142	142	100.0%

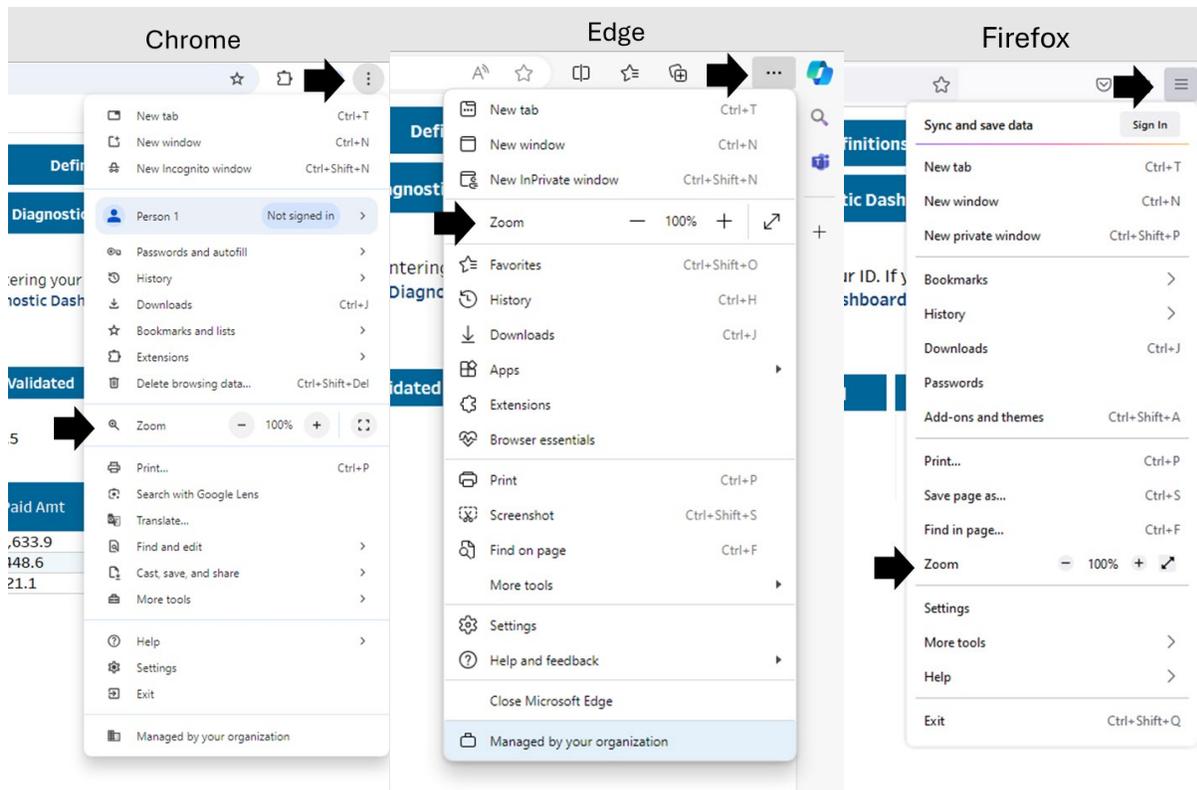
By Payers

Payer	Count
ODM	142

Denial Reasons

Reason	Count
No Visit Found	131
Procedure code does not match	4
Recipient ID does not match	7

Please Note: If you are having issues reading the data on the page due to your device's screen resolution, there are several ways to make the data more readable. Utilize the fullscreen button indicated by the orange arrow in the image above or utilize the zoom out functionality of your web browser, as shown with black arrows in the images below.

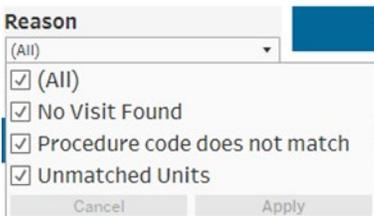


Step 3 (Optional): Refine the results of your report by using the filters above the data.

- The **Month Year** filter allows you to select and deselect months of data.

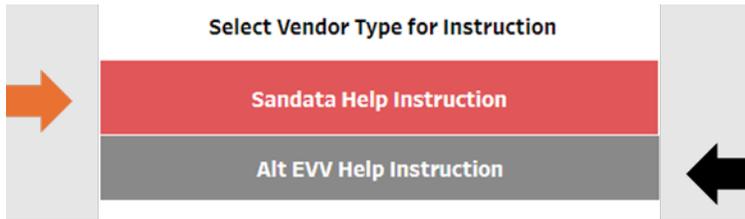


- The **Reason** filter allows you to select and deselect error reasons to review.



Step 4: Select a Vendor Type for Help Instruction. Once you have reviewed your claim line errors, you can receive information on how to correct these errors by selecting your EVV vendor in the upper left of the dashboard. If you utilize Sandata, please click the “Sandata Help Instruction” button, indicated by the orange arrow in the screenshot below. If you

utilize a vendor that is not Sandata, please click the “Alt EVV Help Instruction” button, indicated by the black arrow in the screenshot below.



Step 5: Depending on which EVV provider you selected in step 4, you will be taken to a help instruction page with guidance on how to correct common EVV errors. Please utilize the scroll bars on the right side of the screen, indicated by the orange arrows in the below screenshots, to view all the text.

Department of Medicaid		Sandata Error Reason and Help Instruction		Back to Diagnostic Dashboard
Reason	Solution			
Procedure Code Does Not Match	<p>We noticed that for the account and recipient you bill, the Sandata EVV system could not identify any verified or processed visits for the service and date(s) provided. To ensure that your future claims do not get denied, please consider the following:</p> <ul style="list-style-type: none"> • Are you collecting visit data in Sandata EVV? If not, please start submitting data right away. • Are you monitoring visits for a verified or processed status? Only visits in a Verified or Processed state will be considered for claims matching. • Does the recipient record contain the correct payer, program, and service combination? 			
Provider ID Does Not Match	<p>We noticed that Provider ID that you use to bill does not match a Provider ID in the Sandata EVV system. To ensure that you do not get claims denied in the future, here are some steps you can take now to prepare for this change.</p> <p>Do you have a Sandata EVV login?</p> <ul style="list-style-type: none"> • If Yes -> Please login, create records, and manage visits in Sandata EVV. • If No -> Where did you stop the onboarding process? Choose the step below where you stopped the onboarding process and navigate to the appropriate system to complete the step. <ul style="list-style-type: none"> ◦ If you didn't receive Med ID then complete application in PNM. Application must include training completion certificate from SandataLearn. ◦ If you have a Med ID, but didn't register in Provider Portal then click here to register in the Provider Portal. ◦ If you registered in Provider Portal, but didn't register in eTRAC then here click to register in eTRAC. 			
Recipient ID Does Not Match	<p>A Recipient Medicaid ID that you used to bill does not match a Recipient ID in the Sandata EVV system. To ensure that your future claims do not get denied, please consider the following actions now.</p> <ul style="list-style-type: none"> • Does the recipient record exist in Sandata EVV? • Is the recipient record in an active status? • Is the recipient Medicaid ID number present in the recipient record? <ul style="list-style-type: none"> ◦ If the recipient is a newborn, or only has a PASSPORT Information Management System (PIMS) number, the record will need to be updated with the valid recipient Medicaid ID number to resolve. 			
Unmatched Units	<p>We noticed that for one or more visits were found in Sandata EVV that the total units for all visits found were less than the units requested. To ensure that your future claims do not get denied, please consider the following:</p> <ul style="list-style-type: none"> • Have you performed Visit Maintenance to adjust the visit times to match the claimed units? AND/OR • Does the claim need to be resubmitted with the correct number of units? 			

Department of Medicaid		Alt Vendor Error Reason and Help Instruction		Back to Diagnostic Dashboard
Reason	Solution			
Recipient ID Does Not Match	<p>We noticed that a Recipient Medicaid ID that you use to bill does not match a Recipient Medicaid ID in the Sandata EVV system. To ensure that your future claims do not get denied, please consider the following actions now.</p> <ul style="list-style-type: none"> • Is your Alternate EVV system sending recipients for the provider? • If the answer is yes, and the Recipient is not found: <ul style="list-style-type: none"> ◦ Recipient Rejected - Recipient not matched to OMES Recipient Web Service when received (and not a newborn or having a PIMS ID). ◦ Recipient Rejected - Issues with recipient information causing a rejection. 			
Service Code Not Found	<p>We noticed that for the account and recipient you bill, the Sandata EVV system could not identify any verified or processed visits for the service and date(s) provided. To ensure that your future claims do not get denied, please consider the following:</p> <ul style="list-style-type: none"> • Is the Alternate EVV Vendor sending visits for the provider? • If so, and the Visit Not Found <ul style="list-style-type: none"> ◦ Recipient not in system <ul style="list-style-type: none"> □ Visit Rejected - Issues with timing (must be received prior to visit) causing the visit to reject. □ Recipient does not have a Medicaid ID (newborn or PIMS ID). ◦ Employer not in system. 			
Unmatched Units	<p>We noticed that for one or more visits were found in Sandata EVV that the total units for all visits found were less than the units requested. To ensure that your future claims do not get denied, please consider the following:</p> <ul style="list-style-type: none"> • Did you check the Sandata Aggregator to ensure that your visits are in a verified status? • Does the claim need to be resubmitted with the correct number of units? <ul style="list-style-type: none"> ◦ If so, please follow your process for updating visit data in your Alternate EVV system and resubmit the visit data to Sandata EVV. 			
Provider ID Does Not Match	<p>We noticed that Provider ID that you use to bill does not match a Provider ID in the Sandata EVV system. To ensure that you do not get claims denied in the future, here are some steps you can take now to prepare for this change.</p> <ul style="list-style-type: none"> • Have you completed the registration for your Alternate EVV system? • Have you completed your training and received credentials and using the Sandata Aggregator to ensure your visit data is correct? • Are you using the Alternate EVV system to capture visit data? • Do you have a process for editing and updating incorrect EVV data in your Alternate EVV system? 			

Additional Features to Note:

- You can utilize the navigation buttons on the dashboard to return to the home page (yellow arrow), navigate to the definitions page (orange arrow), or return to the provider lookup dashboard (black arrow).



- Click the book icon, indicated by the orange arrow in the below screenshot, to navigate to additional EVV help information on the Ohio Department of Medicaid website.

The screenshot shows the 'Sandata Claim Lines Subject to EVV Error Response Diagnostic Dashboard' for the period of June - Sept 2024. The dashboard includes the Ohio Department of Medicaid logo, navigation buttons for 'Definitions' and 'Provider Lookup', and a home icon. Below these are buttons for 'Sandata Help Instruction' and 'Alt EVV Help Instruction'. A search section contains fields for 'Enter Medicaid ID', 'Month Year', 'Payer Name', and 'Reason', along with summary buttons for 'Total Requests', 'Number of Mismatch', and '% of Mismatch'. An orange arrow points to a book icon representing help instructions. At the bottom, there are tabs for 'By Payers' and 'Denial Reasons'.

We recommend reviewing the dashboards at least once a month. If you have questions, please contact Sandata’s EVV Provider Hotline at 855-805-3505 so we can help. Office hours are also available for you to stop in for 1:1 assistance. Office hours are available daily at [SandataLearn.com](https://www.sandatalearn.com). Simply login in or register at SandataLearn and then click the Events tab to access Office Hours. You can also register directly here: [Sandata Office Hours Registration](#).