

Provider Bulletin

Molina Healthcare of California

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January 9, 2024

- Imperial
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- San Bernardino
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California Electronic Visit Verification Codes Update

This is an advisory notification to Molina Healthcare of California (MHC) network providers applicable to the Medi-Cal line of business.

What you need to know:

Effective January 1, 2024, the California Electronic Visit Verification (CalEVV) team implemented updates for the programs below:

- Multipurpose Senior Services Program (MSSP)
- Home Health Care Services (HHCS) - Managed Care Plan (MCP) and Fee-for-Service (FFS)
- Home and Community-Based Alternatives (HCBA)

These changes include the addition of new EVV services and the removal of existing services that are no longer required. The following are impacted:

- Client-payer records must be updated prior to service delivery.
- New Healthcare Common Procedure Coding System (HCPCS) codes for MSSP, HCBA, and Home Health Agency services have been added.
- Caregivers logging visits for these programs using CalEVV will now choose the new services.
- The existing MSSP Z codes have been removed and replaced with new HCPCS codes and units.

For general information about the CalEVV program, please visit the Department of Health Care Services (DHCS) EVV website at: <https://www.dhcs.ca.gov/provgovpart/Pages/EVV.aspx>

Provider Action

Providers who use CalEVV for the impacted programs are expected to:

1. Review the new services and verify whether they affect their agency. Providers can view the updated service codes at: <https://www.dhcs.ca.gov/provgovpart/Documents/EVV-Provider-Types-and-Codes-November.pdf>.
2. Update the client payer section for **each** impacted member/client in CalEVV with the new services.

For additional questions, email:

- DHCS: EVV@dhcs.ca.gov

For technical assistance, contact:

- Phone: (855) 943-6070
- Email: CACustomerCare@sandata.com.



What if you need assistance?

If you have any questions regarding the notification, please contact your Molina Provider Relations Representative below.

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