

Electronic Visit Verification (EVV)

Provider Phase 2 Checklist – Providers Implementing Tellus EVV System

This Phase 2 checklist is for administrators of **Providers who will use [the Tellus EVV system](#) to capture EVV data for Personal Support Services (PSS) and Community Living Supports (CLS)** provided to Georgia’s Medicaid members. The checklist includes activities that should be completed for Phase 2 of the EVV Program implementation, which includes claims functionality and processing.

Note: There are three (3) phases for the EVV Program implementation. Checklists for previous and subsequent implementation phases are published on the DCH [“EVV Service Providers”](#) website prior to the start of each phase. Checklists should be completed in order, e.g., the [Phase 1 checklist](#) must be completed before the Phase 2 checklist.

For Phase 2 of the EVV Program implementation, Providers should complete the steps listed below.

- Complete all applicable activities on the [“EVV Provider Phase 1 Checklist – Providers Implementing Tellus EVV System.”](#)
- Register for and complete the Tellus Claims Console training again as a refresher. Visit the [Tellus EVV Training website](#) to review all training options.
- Print or download the [Tellus Claims User Guide](#) for your reference while completing claims activities.
- Confirm all completed visits are listed in the Visit Tab with a status of “Completed.”
- Confirm “Visit to Claim” status is “Success” for all completed visits in the Visit Tab.
- Confirm completed visits are in the Visit Maintenance Tab.
- Confirm “Unmatched” visits can be remediated as “New” and then “Matched” in the Visit Maintenance Tab. This can be confirmed by clicking on the visit and remediating the stated error code, i.e., PNOT, VDUR, etc. Any remediation or edit to a visit will temporarily place the visit in a “New” status while the system automatically rematches the visit and places the visit in a “Matched” status if all remediations are correct.
- Confirm the “Calculated Amount” and “Calculated Units” are correct for all line items in the Visit Maintenance Tab.
- Establish a schedule and process for reviewing visit information and releasing matched visit data.
- Establish a schedule and process for remediating unmatched visit information.
- Schedule Tellus Mobile Application periodic refresher training for staff.
- Develop an onboarding plan and training schedule for newly hired aides. Refer to [“EVV Provider Phase 1 Checklist – Providers Implementing Tellus EVV System”](#) for activities and guides to support new hires.
- Develop any necessary communications materials for onboarding new Medicaid Members (i.e., a [one-pager](#) describing EVV, the mandate, and your process for EVV use or a letter introducing new clients to EVV).



Electronic Visit Verification (EVV)

Provider Phase 2 Checklist – Providers Implementing Tellus EVV System

Here are a few best practices to consider as you complete your EVV Checklist!

- Prepare staff by making sure they complete training. Take training early and as many times as needed to be ready.
- Attend [DCH townhalls](#), as applicable.
- Develop EVV policies and procedures so staff understand your expectations of them.
- Determine which recipient (Medicaid member) locations may have connectivity issues so that you can train staff on alternate methods of recording the visit.
 - If there is no internet connectivity, the Tellus EVV+ Mobile App has an offline mode.
 - If there is no internet connectivity and [Interactive Voice Response \(IVR\)](#) is the only option to log EVV visit data, be sure to apply and receive approval to use this alternative methods with DCH ahead of the state's mandatory EVV implementation deadline.
 - Please note, all questions regarding the application and approval process are to be directed to DCH and not the State EVV solution vendor.
- Once your agency has begun using EVV, assign trained administrative staff to review EVV visit data for accuracy.
- If you have questions, reach out to [DCH or Tellus for support](#).