

NH EVV Training FAQs

This document includes the questions and answers gathered during Fiserv's in-person and virtual training sessions for NH's EVV AuthentiCare System.

Question	Is the Social Security number necessary?
Question Answer	Is the Social Security number necessary? DHHS has contracted with Fiserv to deliver the standard EVV solution, AuthentiCare. AuthentiCare uses Social Security Numbers as a worker's unique identifier across provider agencies. The AuthentiCare system has several security roles, only two of which would have access to enter an SSN: the Provider Administrator and the Human Resources Administrator. Once the SSN has been entered to the worker's profile which is a one-time process, AuthentiCare masks the entry so only last 4 digits are visible. Using SSN is not a requirement for AuthentiCare. However, the Fiserv team have recommended it over a concatenation of name/DOB/4 digits of SSN, as this option may not reliably map to workers and create usability issues. In order to prevent fraud, waste, and abuse, the project team determined that using the SSN is the most cost-effective
	way to ensure workers' efforts have been accurately captured in the system. The collection of SSN is also consistent with other state system requirements for Medicaid providers.

Question	What if the Authorization is not in the AuthentiCare System?
Answer	AuthentiCare does not prevent the rendering of services. The worker will still be able to
	check in and check out. For information on the Authorization, please contact MMIS
	Provider Services at 1-866-291-1614.

Question	Can providers update their information in the web portal?
Answer	Providers cannot update their information directly in the portal. To make changes,
	contact Provider Services at 1-866-291-1614 or complete the form on the website and
	send it via mail or fax.

Question	What is the Service ID?
Answer	The ServiceID is a concatenated field used specifically for AuthentiCare.

	For the users of the Web Portal, can they view all services, or can they only view specific services (that they may be assigned)?
Answer	Provider staff access is not limited by service.



Question	Can you print notes from the Mobile App that can then be scanned into an EMR or placed in a hard copy medical record?
Answer	No, printing notes directly from the Mobile App is not supported. You can however print the Claim details screen where the notes are viewable.

Question	Is client attestation required for the visits?
Answer	It is not a state requirement. You can skip the attestation in both the mobile application
	and the Interactive Voice Response System (IVR).

Question	Is there an ability to have an audit trail if the mobile app fails during the check in/check
	out process?
Answer	The AutheniCare system audit logs are not available. If there is a mobile issue, the worker
	should contact the help desk and we can review our logs to work to remedy the issue.

Question	Is SOC reporting available for patient records?
Answer	There are several reporting options in AuthentiCare, however none with data sets
	explicitly for SOC reporting.

Question	If the patient is a member of an MCO, do we obtain authorization from the MCO?
Answer	The MCO will transmit the authorization data to MMIS and MMIS then sends to
	AuthentiCare for import. Most MCO authorizations will not be required at go live.

Question	Did you say the email address would get all notices of missed punches?
Answer	Yes, the email address associated with the Provider Entity Settings page will receive the
	emails for late or missed check-ins.

Question	Are the User rights editable per role or are they hard set based on the roles?
Answer	The user roles and rights are preset by NH DHHS.

Question	Registered users are not caregivers, correct?
Answer	Correct, registered users are those that will be using the web portal. Caregivers will not
	have access to the web portal. Caregivers will be setup as workers in the portal.



Question	Can you add more than one language?
Answer	No, only one language can be selected.

Question	How is the worker setup different if you are not using the state's mobile option, but will be using a mobile device?
Answer	If you are using a third-party EVV vendor instead of the state's EVV solution, AuthentiCare, you should select "No" for mobile-enabled in AuthentiCare on both the
	provider entity settings page and the worker entity settings page.

Question	When client authorization numbers change, do we need to re-associate the client?
Answer	No, clients are associated with providers through authorizations and the association
	feature in AuthentiCare. If there is an authorization, you will not use the association
	feature in AuthentiCare.

Question	If workers/schedulers choose services that are not what has been authorized, those
	visits will not process for billing and will need to be changed or deleted/replaced?
Answer	AuthentiCare does not prevent the rendering of services. If the service is not authorized at the time, then an authorization can be added later. The unauthorized service can still be billed, however may deny at the payer. If a worker checks in for the wrong service,
	you can perform claim maintenance and edit the service.

Question	Do you have to enter a time on the schedule, or can you just add client to the date?
Answer	Entering a time is required when using the scheduling feature. However, doing so will not
	prevent the worker from checking in or checking out.

Question	If no units are left remaining, does that mean no more services authorized?
Answer	Yes, that is correct.

Question	What is the purpose of AuthentiCare? Will we be billing for services through AuthentiCare instead of MMIS portal?
Answer	AuthentiCare is an Electronic Visit Verification (EVV) solution that has been selected by
	the State of New Hampshire. The system will collect visit information including member,
	worker, service provided, date of service, time service began, time service ended, and
	location. AuthentiCare facilitates the billing of claims for these visits.

Question	Is there a limit of times we can submit a claim? How do we make adjustments after the claim has been submitted (For example, if a case manager back dates an authorization to change from a PCSP auth to a HHA auth and we already billed it.)
Answer	Once a claim has been submitted, it cannot be resubmitted in AuthentiCare until a denial has been received. Paid claims are not resubmitted as they would be denied by the payer as a duplicate. Adjustments are typically performed as they are today and are not processed through AuthentiCare.



Question	How long do we have to fix these exceptions and send them?
Answer	Visits with critical exceptions cannot be confirmed for billing and will not be exported for
	payment. Please refer to state policy for the timeliness for filing a claim after the service
	date.

Question	Do you provide a report that we can print off all caregiver and client ID numbers, so we do not have to look up each one?
Answer	Yes, the "Eligible Client Data Listing" and the "Worker By Provider" Reports would be
	great resources.

Question	If we are doing day program with a client, do we just check in when we are working with the client and check out after the day program is done? Or are we checking in and out during each activity/location?
Answer	AuthentiCare will support as many check ins/outs as necessary. Service change would be
	a time to check out and then in again.

Question	Are we supporting voids and adjustments in NH?
Answer	Changes to authorizations are sent to AuthentiCare by MMIS. Typically, used
	authorizations would be end dated and replaced by a new authorization with the correct
	data.

Question	What are the specifications to Upload Workers into Authenticare?
Answer	You can find the Worker upload specifications and template at
	https://www.dhhs.nh.gov/programs-services/adult-aging-care/electronic-visit-verification
	under Provider Information > Worker Upload Information.

Question	Will the Authenticare CVS template be uploaded by IT into Authenticare or sent to a
	point of contact? When will it be due for the 3/18 implementation date?
Answer	The CSV Template needs to be securely emailed to a designated email account before
	2/12 if your provider is part of pilot, otherwise before 3/5.

Question	We anticipate that certain client locations, such as an elderly complex will bring up more than one client in the app for a Worker; the Worker may not be assigned to all the clients that are visible – is that a HIPAA issue or concern?
Answer	The Authenticare system configuration does allow a worker to see another client affiliated with their provider if they are at the location of that client's home. The system shows the minimum necessary information, name and address, and this feature is not seen as a defect as a worker may need to provide coverage or services to a different client in that location on a given day. The Authenticare product is used in several other state Medicaid programs with this functionality. For providers who are concerned about this
	feature of the application, we would suggest reviewing guidance concerning the reasonableness standard for minimum necessary uses of patient data. We are happy to meet and discuss this as well.



Question	A device phone number is required to set up a Worker in Authenticare. What is to be used for devices without phone numbers
Answer	The Worker's cell phone number is not required but encouraged to be entered, even if it
	is not specific to the device with the application.

Question	On AuthentiCare upload template, is "begin date" the hire date of the Worker or is it the start date the Worker will be using AuthentiCare?
Answer	We prefer to have Date of Hire; however, if you feel that this is too heavy of a burden,
	please enter 3/17/2024 as the start date.

Question	When will the initial MMIS upload to AuthentiCare take place?
Answer	We have a pilot on 2/12 when initial productions loads will start. There will be a few
	weeks of setup where providers will add their workers and then another load from MMIS
	will occur on 2/26. For Providers not in the pilot, please send your worker uploads by 3/5.

Question	How should time be captured for time spent in the community prior to arrival at a
	client's home (example: food shopping for client prior to home visit)?
Answer	The worker would clock in as normal and indicate the services performed and where the
	shopping is being done. The Provider Administrator or biller will see the "geofence"
	exception and still be able to send the claim.