



**MISSOURI DEPARTMENT OF SOCIAL SERVICES
MISSOURI MEDICAID AUDIT AND COMPLIANCE
ATTESTATION FOR ELECTRONIC VISIT VERIFICATION (EVV) SYSTEM**

IMPORTANT – ALL PERSONAL CARE SERVICES (PCS) PROVIDERS – ACTION REQUIRED

Effective January 1, 2021, all Medicaid PCS providers enrolled with MO HealthNet must use an EVV system. This applies to PCS provided under sections 1905(a) (24), 1915(c), 1915(j), 1915(k), and Section 1115 of the Social Security Act.

Effective January 1, 2021, Medicaid participants cannot opt out of using the PCS provider’s EVV system. Providers must submit notice to MMAC of any participants who refuse to use EVV after the effective date. Providers must do this by sending an email to MMAC.EVV@dss.mo.gov

EVV systems utilized for Missouri Medicaid PCS must verify the following information:

- Type of PCS tasks performed
- Identity of the individual receiving the service
- Identity of the individual providing the service
- Month, day and calendar year PCS was provided
- Hour and minute, including AM or PM, delivery of PCS began and ended
- Location where the service was delivered

All PCS providers are required to use this form to attest their EVV system is compliant with the applicable federal/state regulations and PCS program requirements.

Name of Medicaid Enrolled Agency:

Agency Email and Contact Number:

NPI numbers Covered by this Attestation:

Name of Agency’s EVV Vendor:

Contact Number for EVV Vendor:

Name and Title of Authorized Agency Representative:

By signing this form, or typing your full name, you are attesting that the EVV system used by your agency complies with applicable federal/state regulations and the Missouri Medicaid program requirements.

Signature of Authorized Agency Representative:

Email completed forms to MMAC.EVV@dss.mo.gov (preferred) or fax to 573-526-4375

Questions regarding EVV can be emailed to ASK.EVV@dss.mo.gov