Frequently Asked Questions (FAQ) Guide

Illinois Department on Aging (IDoA/DoA) & Illinois Division of Rehabilitation Services (DRS) Electronic Visit Verification (EVV) Implementation

Frequently Asked Questions

January 2026

Table of Contents

Implementation Onboarding

HHAeXchange Portal Enrollment

Do all providers need to submit the HHAeXchange Provider Enrollment Form, even if using a third-party EVV system?

Yes. All providers must submit the enrollment form, including those using a third-party (Alt EVV) system, so the agency is registered with HHAeXchange, which is the Illinois EVV state-wide aggregator.

If my agency serves both DoA and DRS members/customers, do I need to submit more than one enrollment form?

No. Providers serving both DoA and DRS should submit one enrollment form and select both payers (i.e., DoA and DRS) when prompted.

Is the HHAeXchange State-Sponsored portal free?

Yes. Illinois covers the cost of the state-sponsored HHAeXchange EVV portal, which includes the tools required to meet EVV rules.

What is the difference between the state-sponsored HHAeXchange portal and a third-party EVV system?

The state-sponsored portal is a free, full-service EVV solution provided by Illinois. A third-party EVV system is an external vendor solution that must integrate with HHAeXchange to submit EVV data to the State.

If we enrolled in 2024, do we need to enroll again?

No. HHAeXchange will review your prior submission and contact you only if updates are required. An error stating your Employer Identification Number (EIN) already exists means you should open a support ticket to ensure HHAeXchange has the appropriate provider agency contact information and identifiers (i.e., this error does NOT mean you should re-enroll).

When will we receive portal credentials?

Agencies new to HHAeXchange will receive login credentials **ahead of the February 2026 training**, with receipt expected around the end of January 2026. Login credentials go to the email provided on the enrollment form.

Is there a patient/customer size or agency size requirement to use the state-sponsored portal?

No. Agencies of all sizes may use the Illinois state-sponsored HHAeXchange EVV Portal at no cost.

Methods of Electronic Visit Verification

Will IDoA, DRS, HFS, or HHAeXchange pay for HHAeXchange users to have fobs?

No. HHAeXchange users should utilize the HHAeXchange mobile application, which is capable of offline mode (if needed) due to cellular connectivity issues.

Provider Support & Troubleshooting

What is the process for mismatch linked information (auth units, service codes)?

When the provider agency encounters an issue related to an inaccurate or absent authorization, the provider agency should contact the payer (MCO, DRS, or DoA). HHAeXchange Technical Customer Care (TCC) cannot assist with conflicts between what the payer told the provider agency is authorized and what the payer transmitted to HHAeXchange. **Provider agencies should not reach out to HFS with authorization requests. HFS cannot provide authorizations.** HHAeXchange will cover in training the option of provider driven placement (i.e., the provider agency manually links a member to the payer) for a provider agency to utilize while the provider agency awaits a corrected authorization from the respective payer.

What level of support will HHAeXchange, DoA, and DRS be offering to provider agencies?

The role of HHAeXchange Technical Customer Care (TCC) is to support providers on matters regarding the functionality of the HHAeXchange system. TCC offers technical guidance for provider onboarding and ongoing for system usage. Providers should outreach DRS or DoA on EVV policy matters or when they feel they are not receiving adequate technical assistance from HHAeXchange TCC. HHAeXchange TCC cannot advise provider agencies on DoA, DRS, or MCO authorization issues. When the provider agency encounters an issue related to an inaccurate or absent authorization, the provider agency should contact the payer (MCO, DRS, or DoA). **Provider agencies should not reach out to HFS with authorization requests. HFS cannot provide authorizations.**

Who do we contact for access issues, enrollment errors, or technical support?

Technical Customer Care Portal: https://hhaexchange.my.site.com/s/login/
(*Please Note: the technical customer care portal is accessible to DoA and DRS provider agencies after they receive portal credentials*)

- Support Request Form: hhaexchange.com/supportrequest
- Registration Help Line: (833) 961-7429
- Dedicated Illinois Support Email: ILsupport@hhaexchange.com

Electronic Visit Verification Compliance

What makes a visit "EVV compliant"?

A visit is compliant only when all **six EVV elements** are captured electronically (i.e., via the mobile app or Interactive Voice Response (IVR)): caregiver/provider, member/customer, service, date, times in and out, and GPS location. Missing or manually entering any element = **non-compliant.**

What should I do if my clinician or caregiver is confirmed to be in the home, but the GPS data for the visit clock-in or clock-out shows the location as out of range?

This scenario can occur in certain locations, such as apartment buildings or rural areas, where GPS accuracy may be limited. Provider agencies using HHAeXchange can update the member's "home" coordinates either directly in the HHAeXchange system or through the HHAeXchange Mobile App. Providers submitting visits via EDI should work with their third-party vendor to update the "home" coordinates within their system.

What does "75% EVV compliance" mean?

At least **75% of all visits** over a State Fiscal Year (SFY) quarter must be fully EVV-compliant. Up to 25% may be non-compliant due to issues like device problems, IVR failures, or manual entries. DoA and DRS provider agencies are expected to attain 75% overall visit compliance for the 04/01/2026 to 06/30/2026 SFY quarter.

If caregivers forget to clock in/out and we enter the visit manually, is it compliant?

No. Manual visits are always non-compliant, even if supported by a paper timesheet. You should still record the visit and keep documentation for audit purposes.

Do tasks impact EVV compliance?

No. Tasks/duties do not affect your EVV compliance percentage. However, tasks may still be required by payers for claims to be paid correctly.

Who will send compliance reports to DoA and DRS provider agencies?

After the 03/02/2026 go-live, HHAeXchange will transmit on the 15th of every month the monthly "Know Your Numbers" (KYN) compliance reports to provider agency representatives with administrator profiles in HHAeXchange. The provider representative who completed enrollment with HHAeXchange has access to add additional administrative staff within their HHAeXchange portal. HHAeXchange will cover these reports in training.

Will provider agencies be able to see their compliance rate in real time?

Every provider agency, whether using HHAeXchange or a third-party vendor for EVV, will have direct access within their HHAeXchange portal to run compliance reports, in addition to receiving the monthly KYN reports HHAeXchange sends. EDI provider agencies should be running compliance reports from HHAeXchange to ensure the compliance and visit data in HHAeXchange aligns with what they are seeing in their third-party systems. Guidance on provider ability to monitor compliance will be covered by HHAeXchange in a training post go-live.

Can we design and define what are considered acceptable manual edits?

There aren't any acceptable manual edits. If a provider manually changes or adds any of the six elements required for visit compliance (i.e., type of service performed, individual receiving the service, date of service, location of service delivery, individual providing the service, time the service begins and ends), the visit is considered non-compliant. If a visit is manually entered, it is considered non-compliant.

Are full caregiver social security numbers (SSNs) required to be entered in the system?

Yes. This is a statewide requirement.

How does a system wide outage impact compliance?

Illinois and other states keep compliance thresholds under 100% to account for technical issues, such as system outages. Illinois' 75% compliance threshold allows for a buffer, but it is worth noting that since 09/01/2023, there have not been repeated occurrences of system outages.

When a provider agency needs to manually edit a visit due to a system outage, the provider agency should cite the outage as the visit edit reason. Using a system outage for the visit edit reason will allow HHAeXchange to identify non-compliant visits due to system outages

Alternative EVV /Electronic Data Interchange (EDI)

Can we continue using our current EVV vendor (AxisCare, Generations, CareTime, Caresmartz360, etc.)?

Yes. You may continue using your third-party vendor. Your EVV system must send visit data to the HHAeXchange aggregator via Illinois' Electronic Data Interchange (EDI) specifications.

When should providers submit the Illinois Application Programming Interface (API) Attestation Form?

Providers should submit the attestation form once they are ready to begin integration setup with their EVV vendor. Submission of the Attestation Form triggers the Electronic Data Interchange (EDI) onboarding process.

What happens after the API Attestation Form is submitted?

Submitting the form automatically creates an EDI onboarding ticket. Providers then work with their EVV vendor and HHAeXchange to complete testing and validation.

Do proprietary or custom-built EVV systems require testing?

Yes. Proprietary or non-integrated EVV systems must complete testing with HHAeXchange before sending EVV data to the Illinois state aggregator.

Is Sandata considered a third-party (Alt EVV) system in Illinois?

Yes. Sandata is considered a third-party EVV system. Providers may continue using Sandata since Sandata meets Illinois' integration requirements.

If we currently use the free Sandata portal, can we continue using Sandata or another third-party EVV system after March 2, 2026?

If you are using the free Sandata solution, then you will transition to the free HHAX state solution. If you are using a paid version of Sandata's product, you can continue to use them as a 3rd party vendor, or you can move to the HHAX free state solution.

If we integrate with an Alt EVV now, can we still switch to the HHAeXchange portal later?

Yes. Providers may transition from a third-party EVV system to the HHAeXchange EVV Portal later if desired. If transitioning to the free HHAeXchange State solution after 03/02/2026, please submit a ticket to HHAeXchange.