Electronic Visit Verification (EVV) Visit Maintenance Unlock Request (VMUR) for Consumer Directed Services (CDS) Employers
February 10, 2025 (version 9)

INSTRUCTIONS:
Please review these instructions before completing the CDS Visit Maintenance Unlock Request form.

*Important Information: Member Medicaid and payer information can only be updated by the Financial Management Services Agency (FMSA). If the request is submitted by the CDS employer, the CDS employer must notify their FMSA in writing. For example, copying the FMSA on the VMUR request email.

VMUR Field	Instructions
CDS Employers Must Complete the Following:	
Member Name*	Enter the Member's name that received services.
Member Date of Birth*	Enter the Member's date of birth (mm/dd/yyyy).
Medicaid Member ID*	Enter the Member's nine digit Medicaid ID.
Financial Management Services Agency (FMSA) Name	Enter the FMSA's name.
Payer (Listed on the visit)*	Double click to select the payer listed on the visit from the drop-down list.
Current EVV System	Double click to select the current EVV system from the drop-down list. This will be the State vendor or the legal entity name for your PSO.
Former EVV System (If applicable)	Double click to select the former EVV system from the drop-down list. Legacy visits must be exported to the current system.
Correction Request Information	**Instructions**
Request Row Number (Column A)	Row ID number for each entered visit ID. Add rows if needed.
EVV Visit ID (Column B)	Enter the complete EVV visit ID as seen in the EVV Portal.
EVV Visit Date 9 (Column C)	Enter the date of service.
Incorrect Data Element (Column D)	Double click to select from the approved data element options allowed for corrections from the drop-down list. Multiple corrections for one visit will require multiple line submissions. **Note:** "N/A – Export Only" may be selected for situations when a visit has been corrected but not exported to the EVV Aggregator because the visit is locked.
Incorrect Data Element Information (Column E)	Enter the incorrect data currently showing in the EVV system.
Correct Data Element Information (Column F)	Enter the data element that will show in the EVV system after the correction has been made.
Reason for Data Element Correction (Column G)	Enter the reason for the data element correction.

*Important Information: Member Medicaid and payer information can only be updated by the Financial Management Services Agency (FMSA). If the request is submitted by the CDS employer, the CDS employer must notify their FMSA in writing. For example, copying the FMSA on the VMUR request email.

Do not enter any information in fields that payers must complete (Yellow fields).

More Information
- Requests that are not sent securely could result in a Health Insurance Portability and Accountability Act (HIPAA) violation and the payer will deny the request.
- VMUR request emails must include a contact name, email address, and phone number.
- EVV system support staff cannot provide specific information or direction on updates to data elements.
- Review Section 9000 of the EVV Policy Handbook for more information about Visit Maintenance.

CDS Employers Must Complete the Following:

Member Name:

Member Date of Birth:

Medicaid Member ID:

Financial Management Services Agency (FMSA) Name:

Payer (listed on the visit):

Current EVV System:

Former EVV System (If applicable):

Payers Must Complete the Following:

FMSA's NPI or API:

FMSA's TIN:

FMSA's Provider Number:

Program:

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| | Correction Request Information | | | | | | PAYER USE ONLY | |
| | | | | | | | Date of Decision: | |
Request Row Number	EVV Visit ID	EVV Visit Date	Incorrect Data Element	Incorrect Data Element Information	Correct Data Element Information	Reason for Data Element Correction	Approval Status	Reason for Denial
1								
2								
3								
4								
5								
6								
7								
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11								
12								
13								
14								
15								
16								
17								
18								