

Presentation to the State Plan Related Services Workgroup: Electronic Visit Verification (EVV)

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Making Ohio Better

What is EVV?

- Electronic Visit Verification (EVV) is a tool for electronically capturing point-of-service information for certain home and community-based services.
 - Sandata Technologies is the ODM vendor
 - Near real-time processing capability
 - GPS-based system with telephony-based workarounds as needed

Why do we need it?

- The Centers for Medicare and Medicaid Services (CMS) established requirement for all states to use an EVV system, in accordance with the 21st Century CURES Act.
 - Personal Care Services must use EVV by January 1, 2019
 - Home Health Care Services must use EVV by January 1, 2023
 - Failure to meet these deadlines results in reduction of Federal Financial Participation for those services

21st Century CURES Act Requirements

- “Electronic Visit Verification System” means, with respect to personal care services or home health care services, a system under which visits conducted as part of such services are electronically verified with respect to:
 - » The type of service performed;
 - » The individual receiving the service;
 - » The date of the service;
 - » The location of service delivery;
 - » The individual providing the service; and
 - » The time the service begins and ends.

What are the benefits?

- ODM is adopting an EVV system to promote two key outcomes:
 - **Promote quality outcomes for individuals (Quality of Care)**
 - Greater opportunity for enhanced care coordination and data sharing
 - **Reduce billing errors and improve payment accuracy (Program Integrity)**
 - Electronically verifies that a caregiver is physically present for a visit

What Services will be included?

- State Plan Home Health Aide
- State Plan Home Health Nursing
- State Plan RN Assessment
- Private Duty Nursing (PDN)
- Ohio Home Care Waiver Nursing
- Ohio Home Care Waiver Personal Care Aide
- Ohio Home Care Waiver Home Care Attendant

EVV Stakeholders - Collaboration

- Individuals
- Provider Community
- Trading Partners and Billers
- Partner Agencies

Getting the Message Out

- Sharing the message early to enable a smooth Go Live.
- Individuals (Recipients)
 - » Stakeholder Meetings
 - » Written Correspondence
 - » Consumer groups
 - » Introductory video
- Providers
 - » Stakeholder meetings
 - » Correspondence
 - » Access to specifications prior to launch
 - » Interactive Voice Response (IVR)



How Does EVV Work?

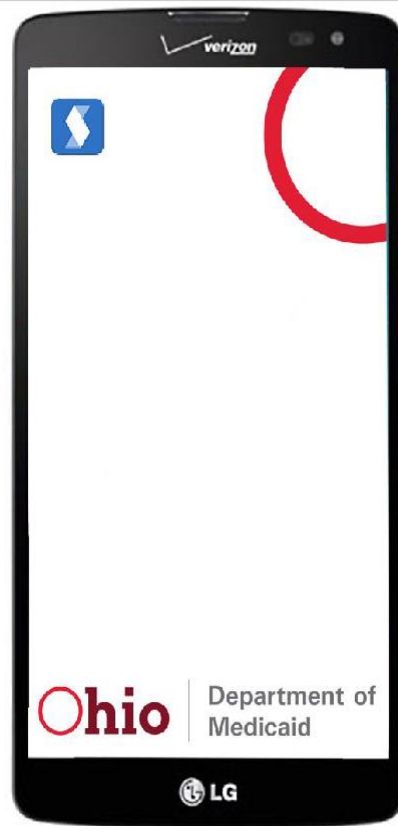
Two System Choices For Agencies - Same Functionality

- Agency Providers have two system choices:
 - » Use ODM's system, currently operated by Sandata, free of charge
 - » Implement and create their own "Alternate EVV System" that meets ODM's specifications

How will visit information be collected?

- Confidential visit information is collected through the use of a GPS enabled Mobile Device, used to sign in and sign out.
- Every EVV System must have two backup methods for collecting data.

EVV mobile device



EVV devices have been purchased and are in the process of configuration for use with the Sandata system.

Device Specs:

- Caterpillar and LG Devices
- Android Operating System
- Large Screens

OAC 5160-1-40 (Electronic Visit Verification)

- Identifies services subject to EVV
- Identifies exceptions to EVV Requirements
 - » Group Visits
 - » Anticipated duration of service is 90 days or less
 - » Managed Care
- The department will provide an EVV system to providers
- Only claims that match a verified visit will be reimbursed by Medicaid

OAC 5160-1-40 (Electronic Visit Verification) cont.

- Data Collection Requirements
 - » Individual receiving service
 - » Direct Care Worker providing service
 - » Location and Time at start of visit
 - » Service Provided
 - » Location and Time at end of visit
 - » Verification of visit time and service by Individual

OAC 5160-1-40 (Electronic Visit Verification)

- Provider requirements
 - » Current providers must complete required training
 - » New providers will complete training during provider application process
 - » Maintain required information with respect to individuals and direct care workers
 - » Device Requests
 - » Notification of End of Service
 - » Failure to meet EVV requirements may lead to termination of provider agreement.

Home Health, PDN, RN Assessment Rules

5160-12-04 Home health and private duty nursing: visit policy.

- (A) Reimbursement of home health or private duty nursing (PDN) services in accordance with this chapter are on a per visit basis. A "visit" is the duration of time that a covered home health service or private duty nursing (PDN) service is provided during an in-person encounter to one or more individuals receiving medicaid at the same residence on the same date during the same time period. ~~;~~ ~~and~~
- (1) A visit begins ~~Must~~ **begins** with the provision of a covered service and ends when the in-person encounter ends. ~~;~~ ~~and~~
 - (2) A visit must ~~Must~~ **must** have a lapse of time of two or more hours between any previous or subsequent visit for the provision of the same covered service unless the length of a private duty nursing visit requires an agency to provide a change in staff. ~~;~~ ~~and~~
 - (3) A visit must ~~Must~~ **must** have a lapse of two or more hours between the provision of home health nursing and PDN service.
 - (4) A visit must be verified using an ODM-approved electronic visit verification (EVV) system in accordance with rule 5160-1-40 of the Administrative Code.

5160-12-08 Registered nurse assessment and registered nurse consultation services.

(B) RN assessment service.

- (7) RN assessments must be verified using an ODM-approved electronic visit verification (EVV) system in accordance with rule 5160-1-40 of the Administrative Code.

OAC 5160-45-10 (ODM-administered Waiver Programs: Provider Conditions of Participation)

- Modifies paragraph (B):
 - » Verification of service delivery shall include, but not be limited to:
 - date/location of service delivery;
 - start/end times; and
 - signatures of the provider and individual/authorized representative.
 - » Acceptable signatures modified to include EVV.
- Adds new paragraph (C) requiring EVV for providers of nursing, personal care and home care attendant services under the Ohio Home Care Waiver in accordance with OAC rule 5160-1-40.

Ohio Home Care Waiver Amendment

- Ohio Home Care Waiver amendment regarding EVV to be proposed October 2017 for January 2018 effective date.
- Adds language to Appendix A (Contracted Entities) and Appendix I (Flow of Billings).
- Public comment period held August 15 – September 15, 2017.

Ohio Home Care Waiver Amendment

- 18 comments received
 - » Waiver participants
 - » Providers
 - » Advocates
- Common themes:
 - » Privacy/security
 - » Flexibility (time/community)
 - » Provider accountability
 - » Quality of care
 - » Training
 - » Cost

Looking Ahead

- ODA and DODD
 - » ODM is working with ODA and DODD currently to establish a timeline and requirements for implementing EVV within their community.
 - » The goal is to bring EVV to ODA and DODD in Phase Two.
- Managed Care
 - » MCPs have been part of the EVV build from the beginning.
 - » Goal is to bring EVV to the MCPs in Phase Three.

More information to come

- ODM has a webpage for EVV, which can be found at <http://medicaid.ohio.gov/INITIATIVES/ElectronicVisitVerification.aspx>.
- ODM continues outreach efforts to our provider community to deliver EVV updates.
- ODM has also included an email address on this webpage for any EVV related questions. EVV@Medicaid.ohio.gov.
- The webpage will be updated as more information is available, so we encourage you to visit it often.

Questions?

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