

March 22, 2019

Dear Medicaid Consumer,

Ohio Medicaid will be adding services (see attached table) to an existing program called Electronic Visit Verification (EVV). Our records indicate you receive some of these services. EVV will document when these services will begin and end. This will help Medicaid pay your providers for the services that you receive. You will be included in this program if you receive EVV eligible services billed through the following payers: Ohio Department of Medicaid (ODM), Ohio Department of Developmental Disabilities (DODD), Ohio Department of Aging (ODA) or Managed Care Plans.

You may have a small device in your home that your caregiver will use to check in and out with. The device looks like a smart phone, but the cameras are completely disabled. The microphone only comes on while the device is capturing a voice verification of service delivery.

Wherever you are, your caregivers will be able to use an EVV device. When your caregivers arrive to provide services, they will check in. Your caregivers will check out when they have finished your services. If you receive services outside of your home, you can take your EVV device with you.

EVV is free to you and your caregiver(s). Providers may begin training on May 6, 2019 and can begin using EVV as soon as training is completed. Your caregiver is responsible for using EVV. Your provider will request the device and you will receive it in the mail. When your provider no longer needs the device for EVV, you will receive an envelope in the mail to return the device at no cost to you. The process was designed to be simple and easy.

For more information, please visit <http://medicaid.ohio.gov/EVV> to read Frequently Asked Questions and to watch a video about EVV. Additional resources related to EVV can also be found there.

If you have any questions, please talk to your providers and, if you have one, your case manager. You can also call the Medicaid Consumer Hotline at 1-800-324-8680.

Sincerely,

The Ohio Department of Medicaid



PHASE 1 SERVICES	Implemented January 8, 2018	
	<p>EVV program for services billed directly to Medicaid for fee-for-service:</p> <ul style="list-style-type: none"> ▪ State Plan Home Health Aide ▪ State Plan Home Health Nursing ▪ State Plan RN Assessment ▪ Ohio Home Care Waiver (OHCW) Nursing ▪ OHCW Personal Care Aide ▪ OHCW Home Care Attendant ▪ OHCW RN Assessment ▪ Private Duty Nursing (PDN) 	
PHASE 2 SERVICES	All providers must be entering EVV visits beginning August 5, 2019.	
	<p>EVV Program for the following payers:</p> <p>Managed Care Organizations billing Medicaid (Aetna, United Healthcare, Molina, Centene, Paramount, and CareSource). EVV implementation in managed care will apply to the following services:</p> <ul style="list-style-type: none"> ▪ State Plan Home Health Aide ▪ State Plan Home Health Nursing ▪ State Plan RN Assessment ▪ HCBS 1915c Waiver Nursing ▪ HCBS 1915c Waiver Personal Care Aide ▪ HCBS 1915c Waiver Home Care Attendant ▪ Private Duty Nursing (PDN) 	
	<p>Ohio Department of Aging (ODA):</p> <ul style="list-style-type: none"> ▪ PASSPORT- Home Care Attendant Nursing ▪ PASSPORT- Home Care Attendant Personal Care ▪ PASSPORT- Personal Care ▪ PASSPORT- Waiver Nursing LPN ▪ PASSPORT- Waiver Nursing RN <p>**Self-directed services are not included in Phase 2</p>	<p>Ohio Department of Developmental Disabilities (DODD):</p> <ul style="list-style-type: none"> • Individual Options (IO) Waiver Nursing • IO/Level 1 Homemaker/Personal Care (HPC) <p>Exceptions:</p> <ul style="list-style-type: none"> • Will not apply to participant-directed services • Will not apply to the on-site/on-call component of HPC will not apply to services billed using the daily billing unit (DBU)

For a translated version of this letter, please visit the link below:

Para la versión traducida de esta carta, visite:	如需本函件的翻译版本，请访问：
للحصول على نسخة مترجمة من هذه الرسالة، يرجى زيارة:	Wixii nooca fasiran ee warqadaan, fadlan booqo:
С переводом этого письма можно ознакомиться по ссылке:	Pour une version traduite de cette lettre, veuillez cliquer sur:
Ili kupata toleo la tafsiri ya barua hii, tafadhali tembelea:	Để xem bản dịch thư này, vui lòng truy cập:
Prevedenu verziju ovog pisma potražite na adresi:	Ko larni d'erewol ndu je lornama, useni ngile:
यो पत्रको अनुवाद गरिएको संस्करण निम्ति, कृपया निम्न साइट हेर्नुहोस्:	इस पत्र के अनुवादित संस्करण के लिए, कृपया यहाँ विज़िट करें:
https://www.medicaid.ohio.gov/INITIATIVES/Electronic-Visit-Verification	