

EVV Stakeholder Advisory Group

October 20, 2021

Gov Delivery

ODM Has a New Email Platform: GovDelivery

Why GovDelivery?

- **It's the only messaging platform built exclusively for government and, as such, offers exceptional deliverability**
- More than 840 state departments use this vendor to deliver mission-critical communications to a network of millions of citizens, so we can learn best practices from them
- Strengthens our ability to target messages to the right audience at the right time
- Enables online channels like email, text messaging, or social media
- Easily deliver custom messages based on demographics, locations, interests, and more

ODM Has a New Email Platform: GovDelivery

Why GovDelivery?

- Leverages a user-friendly citizen interface and the ability to send secure, accessible communications
- Provides guidance on making emails more accessible so that can more easily be a focus
- Example: table-heavy Rate Increase email was formatted to be ADA compliant

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Ohio | Department of Medicaid

Home- and Community-Based Services Rate Increases for Providers Begin November 1.

Percentage increases for program-specific services are listed below. Increases are effective as of **November 1**.

NOTE: The MyCare Ohio plans' contracts for these waiver services are based on the Fee-for-Service rates and therefore will be applicable to the MyCare Ohio waiver providers.

If you would prefer to receive communications and updates via email, please click [Subscribe Form \(ohio.gov\)](#) to sign up for Ohio Medicaid news.

State Plan Services

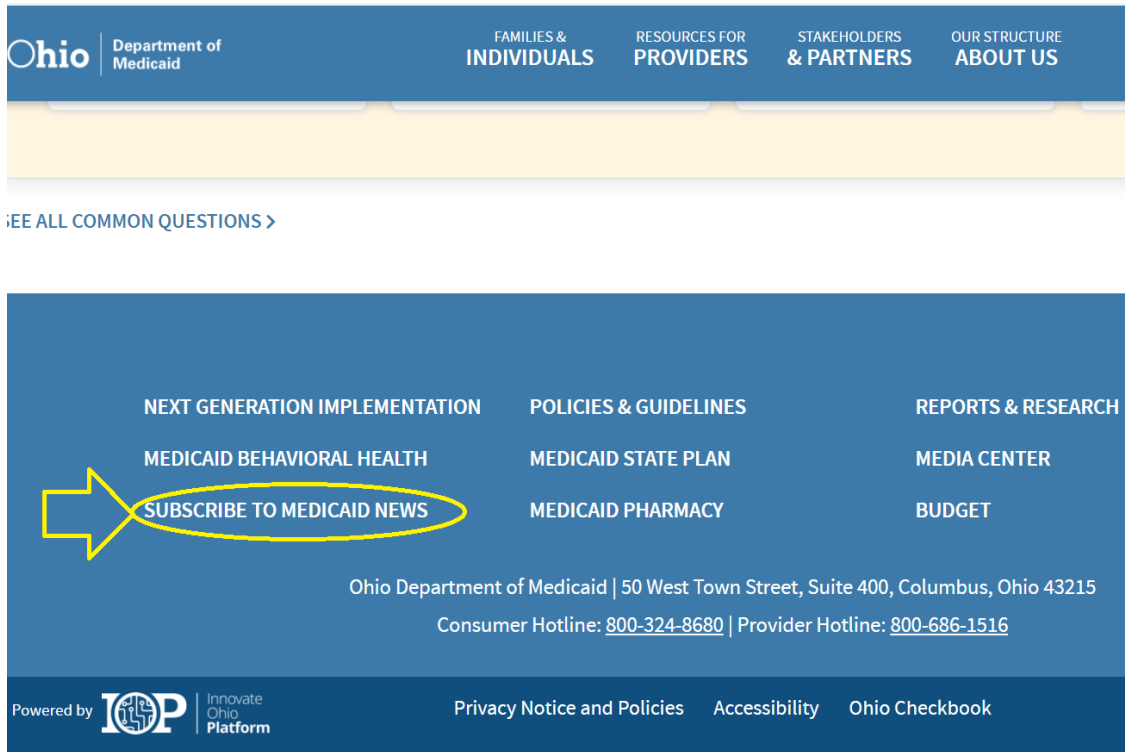
Service Type	Rate Increase
Home Health Services	6.1%
Private Duty Nursing Services	6.1%
RN Assessment and Consultation Services	6.1%

What Does this Mean to You?

- **Communications will come from communications@info.medicaid.ohio.gov**
 - » If you're not seeing our communications, check your junk, spam, or clutter folders and move the email to your inbox
- Types of communications will **remain the same**
- This email will be used to push information and is not intended for responses
- EVV has four lists:
 - » EVV Agency Providers
 - » EVV Non-agency Providers
 - » EVV Alt Vendors
 - » EVV Stakeholders
- You are welcome to sign up for all four if they are of interest to you
 - » If the same email goes out to all four, you will only receive one copy
- You can change your subscription preferences at any time

Have Greater Control Over What You Want to See

Go to bottom of ohio.medicaid.gov page



Subscribe page will have topic lists at bottom

Select the topics you are interested in receiving messages from:

- Comprehensive Primary Care
- Episodes of Care
- EVV Stakeholders
- EVV Alt Vendors
- EVV Agency Providers
- EVV Non-agency Providers
- Hospital Handbook Transmittal Letters
- Medicaid Advisory Letters (MAL)
- Medicaid Handbook Transmittal Letters
- Medicaid Transmittal Letters
- Medicaid Eligibility Manual Transmittal Letters
- Medicaid Eligibility Procedure Letters (MEPL)
- Maternal Infant Support Program

By checking this box, you consent to our [data privacy policy](#). *

Next

Have Greater Control Over What You Want to See

- You can update your subscriptions and preferences by clicking the Subscriber Preferences Page link at the bottom of ODM emails

Update your subscriptions, modify your password or email address, or stop subscriptions at any time on your [Subscriber Preferences Page](#). You will need to use your email address to log in. If you have questions or problems with the subscription service, please visit subscriberhelp.govdelivery.com.

This service is provided to you by [Ohio Department of Medicaid](#).

Ohio Department of Medicaid [Privacy Policy](#).

EVV Policy Mailbox

Closing the EVV Policy Mailbox

- The EVV Policy Mailbox (EVVPolicy@medicaid.ohio.gov) will be closed on November 1, 2021.
- All EVV related emails should go to the ODM Zendesk box
 - » ODMEVV@Sandata.com
 - » Inquiries will be sent to ODM Policy Contact for response as appropriate
- Reasons for the Change
 - » Stakeholders have one point of contact for all EVV inquiries sent to ODM
 - » All inquiries will be assigned a ticket number
 - » Ensure tracking and timely responses to all inquiries

Program Updates

EVV and Claims Adjudication

- In January, ODM announced that EVV visit data would not impact claims payment before January 2022.
- **ODM will not begin to use EVV data to impact claims payment in January 2022.**
- No date for impacting payment has been established at this time.
 - » Additional information will be shared when it is available.
 - » ODM will ensure providers receive adequate notice before EVV data is used to impact claims payment.
 - » It is important that providers continue to use EVV and submit accurate visits to prepare for a time when claims are impacted by EVV visit matching.

Home Health Therapies

- The Home Health Therapy small group recommendations included:
 - » ODM should verify that the actual therapist and not the contracted therapy company has to be captured on the visit.
 - » A solution that better accommodates the business needs related to the role of home health therapy companies should be implemented before EVV is mandatory for home health therapy visits.
 - » Stakeholders should have an opportunity to participate in the development of a solution for home health therapies.
- CMS has confirmed that the therapist (and not a contracted therapy company) must be identified on the EVV visit for home health therapy visits.
- ODM will not make EVV mandatory for home health therapy visits until a solution that better accommodates contracted therapists and therapy companies is implemented.
 - » There will be an opportunity for stakeholder involvement in development and implementation of a new solution for home health therapy services.

Verification Requirements

- Currently caregivers are required to capture an electronic signature/voice verification at the time service is provided for all ODM, MCO, MyCare Ohio and PASSPORT services. There is no verification requirement for DODD waiver services.
 - » The electronic signature and voice verification requirements are currently suspended as a COVID flexibility.
- Small stakeholder group feedback included:
 - » The verification requirement is duplicative of signature requirements in other program rules.
 - » It is confusing for caregivers when a verification is required for some services and not others.
 - » Some individuals receiving services cannot provide a signature or voice verification.
 - » ODM needs to simplify the EVV program and reduce the administrative burden on providers.
- ODM is permanently removing the EVV electronic signature voice verification requirements for all services; programs will continue to have the ability to establish documentation requirements to meet their needs.

Changes to the EVV Solution

Alternate EVV System Certification

- The Alternate System Certification process was changed effective September 15, 2021 in response to feedback and recommendations from the Alternate EVV System Small Group.
- A vendor only has to complete the Sandata testing process and the ODM demo once.
 - » An agency provider who chooses a vendor who is already certified can request production credentials after completing aggregator training.
- An agency provider who chooses a vendor who is new to the Ohio Medicaid EVV program, will go through the certification process with their vendor.
 - » The provider must complete aggregator training.
 - » The vendor must successfully complete the testing checklist with Sandata.
 - » The vendor must successfully complete the demo process with ODM.
- A provider who chooses a vendor who is already certified can choose to complete the testing checklist and/or a demo before requesting production credentials.

Unmatched Client Phone/ID Exception

- The Unmatched Client Phone/ID Exception attached to visits where a telephony call was made from a phone number that was not matched to the individual in the Sandata system.
 - » Providers had to acknowledge the exception before the visit would be used to support a claim.
- This exception occurred more often than any other exception.
- The exception was turned off for visits that occurred on or after October 6, 2021 in response to feedback and recommendations in the Technical Issues Small Group.
 - » There is a known issue for HPC visits in the DODD waivers. Sandata is working to resolve the issue as quickly as possible. Payment for services is not impacted in any way.

OAC Rule 5160-1-40

Proposed Changes to OAC Rule 5160-1-40

- The proposed changes to OAC Rule 5160-1-40 align the rule with the implementation of Phase 3 of the Ohio Medicaid EVV Initiative.
- The proposed changes consider stakeholder feedback, including but not limited to:
 - » The Stakeholder testimony received during the rule process in December 2020 when changes implementing COVID related flexibilities were implemented.
 - » Feedback received in the small stakeholder groups that met earlier this year
 - » Responses to the Request for Information
- Updated rule references and website references throughout the rule
- The proposed changes remove “regulatory restrictions” throughout the rule.
 - » Shall, shall not, must, require, may not, prohibit

OAC Rule 5160-1-40(A) - Definitions

- Clarified the definition of agency provider by recognizing differences in provider requirements between programs
- Added definitions related to Phase 3 services (SELF waiver, Choices home care attendant service, participant directed HPC)
- Expanded the definition of data collection component to include telephony and manual visit entry
- Modified the definition of direct care work to recognize the role of independent contractors in agency provider staffing
- Defined manual visit entry and telephony

OAC Rule 5160-1-40(B) – Services Subject to EVV Requirements

- Added Phase 3 mandatory services
- Home health therapies are not required at this time
- Removed exception for participant directed services

OAC Rule 5160-1-40(C) – EVV System Provided by ODM

- Added language to make it clear that the system provided by ODM includes telephony and manual visit entry
- Removed language saying manual visit entry is “the last alternative”
- Added language giving ODM the ability to reduce or deny payment for claims for services if they are not supported by visit data. **This language does not require action by the department.**
- Changed requirements for alternate EVV systems so that **only completed visits** must be submitted to the aggregator within 24 hours of the data collection.

OAC Rule 5160-1-40(D) – Alternate EVV Systems

- Language changes throughout this paragraph are intended to remove regulatory restrictions and do not reflect changes in policy or provider requirements

OAC Rule 5160-1-40(E) - Training

- Reinstates requirement that new providers complete required training prior to getting a provider agreement.
- Removed language about bridge training that is no longer relevant since all phases are implemented.

OAC 5160-1-40(F) – Provider Responsibilities

- Most changes in this section updated cross references and removed regulatory restrictions.
- Added language making it clear that providers are required to report tampering of devices provided by the state to ODM.

Next Steps

- Submit comments in writing to EVVPolicy@medicaid.ohio.gov by the end of the day on October 27, 2021.
- ODM will review all comments and may make any additional changes to the proposed rule.
- The rule will be filed with the Common Sense Initiative Office (CSIO) for review. There is an additional opportunity for stakeholder comments at that point in the process.

EVV Small Groups

Continuing Opportunities for Small Stakeholder Groups

- All EVV Small Groups identified the need for ongoing opportunities for stakeholder participation in small groups.
- ODM is developing an approach that will allow interested stakeholders to participate in small groups focused on specific areas of interest.
- More information coming early in 2022.

Training and Outreach Updates

Provider Outreach Efforts – Device Recovery

- Sandata will start sending out automatic reminder emails to providers at 30, 45 and 60 days for devices that have been requested and sent out, but have not ‘checked in’ to be recognized as being used.
- At 60 days, a letter and return envelope is planned to be sent to the individuals home requesting them to send device back to Sandata.

Outreach for Providers Who Need to Complete Training

- ODM is in the process of identifying providers who are new to Ohio Medicaid and have not completed the required EVV training.
- ODM will be starting outreach to these providers and assisting providers to obtain EVV training.
- Training registration is available online at:
 - » <https://medicaid.ohio.gov/wps/portal/gov/medicaid/resources-for-providers/special-programs-and-initiatives/electronic-visit-verification/agency-training>
 - » <https://medicaid.ohio.gov/wps/portal/gov/medicaid/resources-for-providers/special-programs-and-initiatives/electronic-visit-verification/non-agency-training>

1:1 Provider Training Opportunity

- The Ohio Department of Medicaid (ODM) continues to offer providers the opportunity for personalized Electronic Visit Verification™ (EVV) system help and an EVV account review.
- If you would like to work with an EVV Sandata representative in a one-on-one call, please visit the calendar of available dates and times to sign up, here:
<https://go.oncehub.com/ODMEVVHelp>
- We are continuously opening up more sessions. Google Chrome is the preferred browser when accessing the calendar.

Wrap Up
