

ELECTRONIC VISIT VERIFICATION

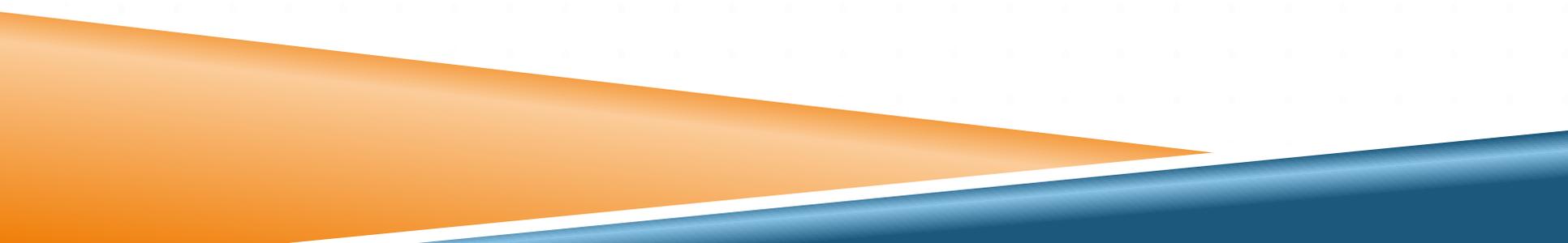
**MO Department of Social Services
MO HealthNet Division
December 2019**

21ST CENTURY CURES ACT PROVISIONS UNDER SECTION 12006

- ❖ Requires states to implement EVV systems by January 1, 2020 for personal care services and by January 1, 2023 for home health care services
 - Advanced Personal Care
 - Chore Services
 - Consumer Directed Personal Care
 - Homemaker Services
 - In-Home Respite if authorized by DSDS
 - Personal Care
 - Any of the services above reimbursed by a managed care organization

- ❖ States that fail to comply are subject to FMAP reductions.

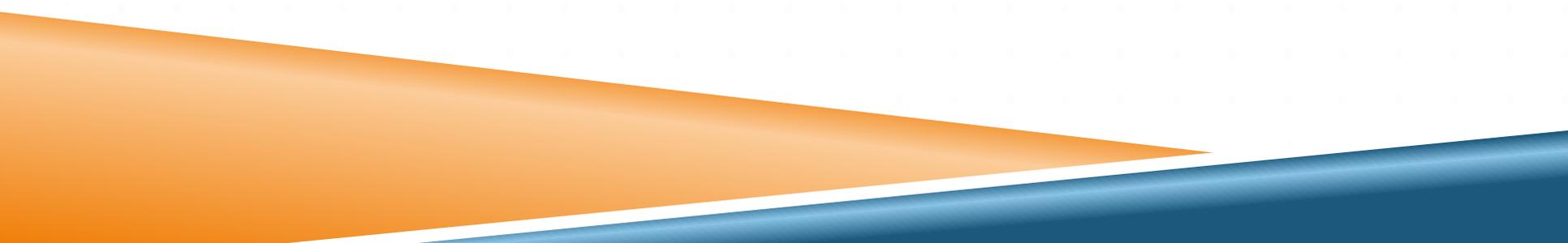
CURRENT STATUS OF EVV IN MISSOURI

- ❖ Provider Choice Model – providers select and fund the EVV system of their choice
 - ❖ Majority of providers have EVV systems, but not all are using consistently
 - ❖ State will acquire an aggregator solution to collect and consolidate data from all EVV systems
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GOOD FAITH EFFORT EXEMPTION

- ❖ Missouri was approved on 09/18/2019
- ❖ **Goal for EVV implementation - 01/01/2020**
- ❖ Goal for aggregator solution - 06/30/2020
 - The aggregator will only work if everyone is using EVV

THE AGGREGATOR SOLUTION

- ❖ An aggregator acts as a repository for EVV data. It accepts information from multiple EVV vendors and normalizes it for standard reporting.
 - ❖ Aggregator vendor will work individually with each EVV vendor to ensure successful interface, and that all required data elements are being collected.
 - ❖ The vendor will provide ongoing training and support to EVV vendors and personal care service providers regarding access to and use of their solution.
 - ❖ The aggregator will have dashboards for state staff, EVV vendors, and providers. Available information will be based on the role of the user.
 - ❖ Request for proposal is in the review process at CMS.
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WHAT WILL EVV SYSTEMS NEED TO DO?

- ❖ Collect all required data elements
 - Type of service performed & any tasks related to service if required by the authorizing agency
 - Individual receiving the service
 - Individual providing the service
 - Date the service was provided
 - Location where service delivery begins & ends
 - Time the service begins & ends

WHAT WILL EVV SYSTEMS NEED TO DO?

- ❖ Must establish a primary method for collecting visit data through use of one or more of the following:
 - Location technologies, including but not limited to Global Positioning System (GPS);
 - Telephony (if utilized, the telephone number from which the call is placed is used in lieu of GPS coordinates and must be a number from an established landline);
 - Fixed devices at the service recipient's location to be used in conjunction with Near Field Communications or Bluetooth Low Energy;
 - Biometric recognition; or
 - Alternative technology that meets the above requirements.

- ❖ **What does this mean?**
 - **The EVV vendor must be able to document the location of the direct care worker at the time services begin and end.**
 - **If using telephony, the telephone number serves as verification of location and must be associated with a landline.**
 - **All other types of systems require the use of location technologies such as GPS or fixed devices in the home.**

WHAT WILL EVV SYSTEMS NEED TO DO?

- ❖ Must offer an alternative form for recording data in the event of system failure or natural disaster. This may include manual entry, although manual entry is only to be used as a last option for the recording of visit data.

- ❖ **What does this mean?**
 - **Information must be entered electronically in real time.**
 - **The only time paper timesheets are acceptable is when there is a system failure. This could occur due to an outage stemming from the EVV vendor, or as a result of storms or other unavoidable incidents. Verification of system failure may be requested by the state at any time, including documentation from the EVV vendor, power company, landlord, etc.**
 - **The reason for the paper documentation must be justified, including the reason for the entry, who made it, and when.**

WHAT WILL EVV SYSTEMS NEED TO DO?

- ❖ Must have the ability to enter visit information in an offline mode when there is inadequate network capacity. This information will upload when connectivity is accessed.

- ❖ **What does this mean?**
 - **There are many areas of the state with poor internet capability.**
 - **If any form of EVV aside from telephony is used in these areas, the system must be capable of accepting the information without internet access.**
 - **When the direct care worker gets to an area with internet, the visit information will be uploaded.**

WHAT WILL EVV SYSTEMS NEED TO DO?

- ❖ Must be able to document the direct care worker by the assignment of a personal identification number unique to the direct care worker.
- ❖ **What does this mean?**
 - **To meet the requirement of verifying the direct care worker, a distinct number must be assigned to each caregiver.**
 - **At this time, there is not a specific format for the identifier, but there is potential for a format to be defined following selection of the aggregator solution.**

WHAT WILL EVV SYSTEMS NEED TO DO?

- ❖ All EVV vendors will require registration with the Missouri Medicaid Audit and Compliance Unit after verification of successful interface with the aggregator solution.

- ❖ **What does this mean?**
 - **The aggregator solution will be able to accept information in multiple formats and will work with EVV vendors to find solutions if there are issues regarding the transfer of information.**
 - **As long as an EVV system is gathering all of the data elements as required, it should be able to interface with the aggregator solution.**
 - **After the successful transfer of information, the EVV vendor will be added to the list of approved EVV vendors in Missouri.**

WHAT HAPPENS ON 01/01/2020?

- ❖ More intensive identification of service recipients and providers who are not using EVV.
 - MMAC, DHSS, MHD, and DMH
 - Provide education and follow up
- ❖ This is not new to many providers, but efforts will be more aggressive.

NEW REGULATIONS ARE COMING

- ❖ Once in place, EVV will look different.
 - No opting out for participants
 - More provider accountability
 - Paper as last resort and only with documented justification
 - Notification to state agency when EVV vendor changes occur

EVV IS A GOOD THING

- ❖ Good for participants
- ❖ Good for providers
- ❖ Good for the state

- ❖ All of the above must work together– we have the same goal of quality services delivered with efficiency and accuracy.

ADDITIONAL INFORMATION

<https://dss.mo.gov/mhd/providers/electronic-visit-verification.htm>

CONTACT INFORMATION

Ask.EVV@dss.mo.gov