Electronic Visit Verification Training

What is EVV?

EVV is a system that may include multiple point-of-care verification technologies, such as telephonic, mobile, and web-based verification inputs. The system electronically verifies the occurrence of home- or community-based service visits, identifying the time that service provision begins and ends to ensure accurate claims disbursement and helping to ensure that beneficiaries who are authorized to receive services get the expected care. EVV is used to:

- Verify visits on a real-time basis, including date, location, type of service, individual(s) providing and receiving services, and duration of service(s)
- Validate hours of work for home health employees
- Eliminate billing data entry mistakes
- Reduce costs related to paper billing and payroll
- Help combat fraud, waste, and abuse

What data fields are required to submit complete EVV data?

EVV submitters will initiate a service request in an on-demand manner as part of their normal course of operations. The EVV service is designed to support the collection of electronic visit verification data for Medicaid personal care services (PCS) and home health care services (HHCS) that require an in-home visit by a provider.

The eMedNY EVV Interface is an internet facing Representational State Transfer (REST) Application Programming Interface (API). The primary end user of this interface will be the EVV Submitters. EVV Submitters may include EVV Vendors, Providers, and Managed Care Organizations. The service will allow the EVV Submitters to submit specific electronic visit verification data for Medicaid personal care services (PCS) and home health care services (HHCS) that require an in-home visit by a provider. The EVV interface is built leveraging REST design patterns, utilizing JSON as the information exchange structures

21st Century Cures Act Requirements and Start Date for EVV for PCS Services

The 21st Century Cures Act, is a federal law, passed by Congress in December 2016, that in part requires all state Medicaid programs to implement an EVV system for personal care services (PCS) and home health care services (HHCS). All states must implement an EVV system to avoid a reduction in federal Medicaid funding. The Cures Act includes a provision that allows for the delay of implementation for up to one year if a state has encountered unavoidable delays, as demonstrated in a good faith effort (GFE). On December 5, 2019, the New York State Department of Health's EVV GFE exemption request was approved by the Centers for Medicare and Medicaid Services (CMS).

As such, the New York State Department of Health (NYSDOH) required providers of Medicaid-funded PCS to select and implement EVV systems that meet the requirements of the 21st Century Cures Act by **January 1, 2021**. Providers of Medicaid-funded HHCS will be required to select and implement compliant EVV systems by January 1, 2023. For more information on the federal law and requirements for EVV, visit:

Medicaid.gov

Services that require EVV data collection:

The following list provides the programs affected by the implementation of EVV for PCS and HHCS.

- 1905(a)(24) State Plan Personal Care Benefit
 - Consumer Directed Personal Assistance (CDPA)
 - Personal Care Assistance (PCAI & II)

- 1915(c) Home and Community Based Services waivers
 - o Childrens' Waiver
 - Nursing Home Transition and Diversion (NHTD)
 - o Traumatic Brain Injury (TBI)
 - o Office for People with Developmental Disabilities (OPWDD) comprehensive
- 1115 Demonstration
 - o CDPA
 - o PCAI & II

Training for Caregivers

• Provider's System Overview and Workflows (non-technical)

HDA CDPAS has chosen *HHAeXchange* as the Database used to collect EVV information. In the next few pages, you can learn how to properly use HHA exchange when recording your time and attendance via their EVV system

HHAeXchange is the premiere Homecare Management Software company. They are the leaders in connecting payers and homecare agency providers to enable more collaboration, communication, and workflow efficiencies.

How to electronically collect EVV data using the Providers system and device(s)

New York State, along with guidance from the Centers for Medicare and Medicaid Services (CMS), the following technologies are compliant methods for collecting Electronic Visit Verification (EVV) data:

- Telephony: Telephone calls can be used to capture service period and verify location. Typically captured with a landline telephone.
- Mobile App: Apps can be downloaded and used to capture service period and verify location. This option allows the worker to record visits using a smart phone or tablet, even when no cellular, satellite, or other data services are available at the service location.
- Fixed Object (FOB): In-home Fixed Object devices with a unique ID verify location.

How to and when to collect EVV data manually and what to document

All EVV services are required to have complete EVV data in order to be considered a verified visit. In the circumstance that a visit was not electronically captured at the time of the visit, the provider agency or Fiscal Intermediary (FI) may manually enter the visit information. Manually entered visits should only be used when absolutely necessary. The provider agency or FI must retain and maintain documentation of the reason for the manual entry. The Office of the Medicaid Inspector General (OMIG) or the NYSDOH will audit and monitor the use of manual or paper timesheets. It is the responsibility of the provider agency and/or Fiscal Intermediary (FI) to ensure that an earnest effort is made to capture EVV through a compliant method. Religious holidays or observances that impact the use of technology use in capturing EVV in a compliant manner count as a manual entry. NYSDOH recommends that providers select vendor systems that offer an offline mode option. Offline mode ensures that the EVV system captures EVV data in the event of power outages or limited to no service. When the system comes back online, data is automatically sent/uploaded that was captured. If a provider selects a system without this capability, they may not be able to capture EVV data in a compliant manner at the time of service, making the visit invalid. If a provider agency or FI has a high rate of manual or paper time sheets and has not shown an improvement of compliance over time, the Department reserves the right to conduct a compliance review which may lead to the review and discovery of overpayments. Providers are required to maintain all documentation associated with manual or paper timesheet entries for review in the event of audit (see: Data Retention). The EVV solution must distinguish electronically captured data from manually entered, modified, or adjusted data and require documented justification for all manual data entries, modifications, adjustments, or exceptions made to electronically captured data after the electronic data is captured.

How to document Live-in caregiver information

NYSDOH will not require the submission of EVV data for caregivers that meet the definition of an EVV exempt live-in caregiver. However, MCOs and provider agencies may independently decide, based on business needs, if collection of EVV data for EVV exempt live-in caregivers are required. Definition of an EVV exempt Live-in Caregiver For the purposes of New York EVV, an EVV exempt live-in caregiver is defined as a caregiver providing services to a Medicaid member where the member's and caregiver's permanent place of residence are the same. Caregivers who do not meet this definition are not considered EVV exempt live-in caregivers under the requirements of EVV. Residence status must be verified for both the member(s) and caregiver(s). When an EVV exempt live-in caregiver provides services to more than one member with whom they permanently reside, EVV exempt live-in caregiver status must be able to be validated for each member. Examples of caregivers who are NOT EVV exempt Live-in Caregivers are:

- 1. Caregivers who live with the Medicaid member receiving services for only a short period of time, such as two weeks
- 2. Caregivers who work 24-hour shifts but whose permanent residence is not the same as the Medicaid member (i.e., "live-in 24-hour" personal care or CDPAP cases). Verification of Live-in Caregiver Status The Office of the Medicaid Inspector General (OMIG) or the NYSDOH may audit the residence status of EVV exempt live-in caregivers. In the event of an audit, acceptable documents from the member and caregiver, showing the same address, that will verify EVV exempt live-in caregiver status are:
 - New York State ID:
 - Tax return;
 - Automobile registration;
 - Voter registration card;
 - Utility or other household bill;

- •Bank account statement; or
- Medicaid records.

Providers are responsible for compiling, maintaining, and validating all records justifying the status of each EVV exempt live-in caregiver for NYSDOH verification and auditing. In the event of an address change for either the member or live-in caregiver, providers are responsible for maintaining and validating address change documentation to ensure live-in caregiver exemption status is valid. If the member and live-in caregiver no longer share a permanent address, then the services are subject to EVV. All address verification documentation between the member and live-in caregiver must be current at the time the services were provided to the member. Other documentation may be deemed acceptable at the discretion of the OMIG or NYSDOH.

How to electronically collect EVV data when there are multiple caregivers

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 $\frac{https://hhaxsupport.s3.amazonaws.com/SupportDocs/PROE+Docs/Job+Aids/Proider+Job+Aid+-+EVV+Phone+Instructions.pdf}{}$

https://hhaxsupport.s3.amazonaws.com/SupportDocs/Enterprise/Job+Aids/Enterprise+Job+Aid+-+Mobile+App+Clock+In+and+Out+-+Linked+and+Mutual+Patients.pdf

How to electronically collect EVV data when there are multiple beneficiaries

New York State, along with guidance from the Centers for Medicare and Medicaid Services (CMS), the following technologies are compliant methods for collecting Electronic Visit Verification (EVV) data:

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 $\underline{https://hhaxsupport.s3.amazonaws.com/SupportDocs/PROE+Docs/Job+Aids/Proi}\\ \underline{der+Job+Aid+-+EVV+Phone+Instructions.pdf}$

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• How to send data to Provider's System

New York State, along with guidance from the Centers for Medicare and Medicaid Services (CMS), the following technologies are compliant methods for collecting Electronic Visit Verification (EVV) data:

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- Fixed Object (FOB): In-home Fixed Object devices with a unique ID verify location.

https://hhaxsupport.s3.amazonaws.com/SupportDocs/PROE+Docs/Job+Aids/Provider+Job+Aid+-+EVV+Phone+Instructions.pdf

What information to share with Medicaid beneficiaries and their families about EVV

- o Fact Sheet: What You Should Know About: EVV and You (ny.gov)
- NYS eMedNY Helpdesk Phone Number for Technical questions: 1-800-343-9000

If you have any further questions regarding EVV, you may visit their website at <u>Electronic Visit Verification (EVV) Resource Library (ny.gov)</u> or email them with any questions to: <u>EVVHelp@Health.NY.Gov</u>

If you would like any additional information on the information, please visit the websites below:

https://www.health.ny.gov/health_care/medicaid/redesign/evv/index.htm

https://www.medicaid.gov/medicaid/home-community-based-services/guidance/electronic-visit-verification-evv/index.html

https://www.congress.gov/bill/114th-congress/house-bill/34/text

https://www.health.ny.gov/health_care/medicaid/redesign/evv/faqs.htm

MMIS Interface Control Document EVV Data API (ny.gov)

https://hhaexchange.com/who-we-help-caregivers/

https://hhaexchange.com/electronic-visit-verification-software-solution/

EVV_Technical_User_Guide.pdf (emedny.org)