UPDATE ON ELECTRONIC VISIT VERIFICATION IMPLEMENTATION IN CONNECTICUT

Medical Assistance Program Oversight Council

Friday, October 11, 2019

- Electronic Visit Verification (EVV) basics

- Benefits of EVV

- Background

- Implementation update

- What's next?

EVV Basics

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Electronic Visit Verification (EVV) is a telephonic, mobile, and computer-based system that documents precise time spent, and actions taken, by caregivers in the home.

Electronic Visit Verification –*Tracks Time and Tasks*

- Mobile app, telephony, Fixed Visit Verification Device

- Caregiver checks in at start of visit

- Caregiver checks out and documents tasks at end of visit

Mobile Visit Verification: triangulates location using GPS

Client's line verification: uses automatic number identification (ANI) to match caller's phone number to provider account and caregiver location

Patented Fixed Visit Verification Device

Electronic random number match device

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Making a Difference

DSS has provided the following guidance around compliance with EVV requirements:

- DSS considers a **provider** to be compliant if **90% of the visits performed are validated by both a check-in and a check-out, documented by the caregiver** via telephony, Mobile Visit Verification (MVV) or a Fixed Visit Verification (FVV) device.

- A **compliant visit** is a visit where the check-in and check-out is performed by the caregiver via telephony, MVV or FVV, regardless if the visit times are early or late according to the schedule. If the visit data is manually entered into Sandata Technologies' Santrax system, the visit is not compliant.

- Compliance is being monitored on a rolling basis, as EVV is rolled out to successive provider types.

■ These are links to the provider bulletins in which compliance standards were detailed:

https://www.ctdssmap.com/CTPortal/Information/Get%20Download%20File/tabid/44/Default.aspx?Filename=PB17_66.pdf&URI=Bulletins/PB17_66.pdf

https://www.ctdssmap.com/CTPortal/Information/Get%20Download%20File/tabid/44/Default.aspx?Filename=PB19_17.pdf&URI=Bulletins/PB19_17.pdf

■ This "At Your Fingertip" tip sheet provides instruction to agencies in verifying their compliance rates:

https://www.ctdssmap.com/CTPortal/Portals/0/StaticContent/Publications/At_Your_Fingertip_Tip_4_EVV_Compliance.pdf

Extensive information on the Connecticut EVV is available online in a dedicated web page:

https://www.ctdssmap.com/CTPortal/Electronic%20Visit%20Verification/tabId/152/Default.aspx

This includes:

- general program information

- an extensive FAQ document, which includes over 200 questions about the EVV program and Santrax functionality

- information for new providers

- At Your Fingertips tip sheets

- important documentation including EVV-related provider bulletins, Important Messages and Santrax App messages

- Training publications and videos

Benefits of
EVV

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of Social Services**

Making a Difference

- **Improved service for clients**

  - Ensures that individuals receive the full extent of services ordered under care plans – alerts and measurement of time reduces late, incomplete and missed visits

  - Enables real-time alerts concerning changes in a member's condition or needs (e.g., ED visits/hospitalization, falls, change in informal supports, deterioration of skin condition, refusal of services, and/or changes in mental status or Activities of Daily Living)

- **Effective support for self-direction of services using Personal Care Assistants**

  - Eliminates paper timesheets and need to fax

  - Minimizes errors on timesheets by electronically recording employee time

  - Provides electronic record of timesheets within a portal

- **Reduced administrative burden for providers**

    - Electronic time capture reduces reliance on paper timesheets.
    - EVV system drives claims process
    - Providers are alerted when changes are made to care plans

- **Improved State oversight**

    - Statewide jurisdictional view permits real-time monitoring
    - Alerts support reporting and response to critical incidents
    - Claims cannot be paid unless a verified visit exists
    - EVV supports required CMS reporting and quality assurance processes

Background

Department of Social Services

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- Fulfilling requirements of the federal 21st Century Cures Act, the Centers for Medicare and Medicaid Services (CMS) issued guidance to states regarding EVV in 2016:

  – Personal Care Services are required to use EVV by January 1, 2020

  » Please note that CMS has recognized states' need for more time in implementing this aspect of EVV. Note later reference to Good Faith Exemption that has extended this deadline.

  – Home Health Care Services are required to use EVV by January 1, 2023

  – Failure to meet these deadlines results in reduction of Federal Financial Participation (FFP) for those services

- Connecticut was ahead of the curve of the required deadline for implementation for waiver-based home health services

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As the single state Medicaid agency for Connecticut, DSS has the administrative authority to implement EVV, and has done so in a way that leverages existing contractual relationships, maximizes use of existing expertise, and ensures standardization and consistency statewide.

- DSS is responsible under federal law to ensure accountability in the use of Medicaid funds – what is claimed for payment *must* correspond with the services that are received by Medicaid members.

- DSS leveraged its existing contract with DXC, vendor for the Medicaid Management Information System (MMIS) to use Sandata, a nationally recognized, proven EVV vendor.

- DSS chose a single, statewide solution to ensure standardization, prevent costs and difficulty involved in patching together existing systems, and for the real time jurisdictional view that is provided by Sandata's system.

Implementation Update

DSS successfully implemented EVV effective January 1, 2017 for **waiver agency providers** and April 3, 2017 for **home health providers**. The system includes the following features:

Electronic Visit Verification - multiple technology options to capture caregiver time and tasks at the point of care

Agency Management – a scheduling engine

Claims Validation – confirm of claims data against authorizations and EVV-captured data before claims are submitted and adjudicated

Jurisdictional View Reporting – real-time view of EVV data, EVV system reports, and data extracts*.*

- **342** provider agencies are currently using EVV system for an average of **344,800** verified visits per month

- Reports for April, May and June, 2019, demonstrate an overall provider compliance rate of **82%**

Based on feedback from members and providers, DSS, DXC and Sandata made **many refinements and enhancements to EVV** over the course of the initial roll-out:

- Deferral of original implementation timeline
- Financial support for scheduling interfaces
- Use of truncated Social Security numbers for caregiver identification
- Accommodation of providers' specific usual and customary rates
- Implementation of care plan change alerts
- Permission to use EVV for clients pending waiver eligibility
- Reduction of visit exceptions
- Expansion in the the number of permissible client service locations
- Implementation of consecutive services solution
- Option for alternate claims submission option

Effective in November 2018, DSS piloted a **consumer-direct EVV solution**, including:

- **An employer/employee portal**
  - Allows employers to view and correct visit data
  - Allows employers to approve visits
- A **fiscal management portal**
  - Allows the fiscal intermediary (FI) to view and correct visit data for use in payroll processing
- A **business intelligence reporting tool**
  - Enables robust analytics
- A **caregiver speaker verification feature**
  - Biometric voice recognition technology ~~to~~ ensures ~~that~~ the correct employee is providing services
- Capacity for employer to **verify visit at point of care**

Roll-out of this function will continue throughout 2020.

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Based on feedback from member employers and personal care assistants regarding the initial pilot, DSS, DXC and Sandata have made the following enhancements **to the consumer-direct EVV solution**:

- Provided direct access to EVV Support Center
- Enhanced credentialing process
- Developed quick reference guides
- Enabled an unlimited number of employer locations where care can be provided

- Connecticut submitted a request for, and received, a Good Faith Effort (GFE) Exemption from CMS that will allow Connecticut to have up to another year to fully implement consumer directed EVV (new deadline of December 31, 2020)

- Consumer direct EVV is being rolled out slowly, with the following initial steps:
  - In September 2019, it was rolled out for 145 consumers with last names beginning with A
  - In October 2019, it is being rolled out for 300 consumers with last name beginning with B

- DSS will assess the success of these 445 consumers and will both resolve any identified issues prior to rolling out the next group and ensure that consumers have the additional supports needed to be successful

Upcoming is implementation of **EVV for both providers of service to people with intellectual disabilities.**

- Per DDS' request, the EVV system will not include scheduling or billing modules, limiting the use of Sandata EVV to check in and check out

- In August, 2019 Connecticut received CMS funding approval to integrate Sandata EVV visit data into the DDS time and attendance system (Web Res Day). DDS recently hired an Application Developer (consultant) to begin this work and is in process of hiring a second consultant.

- A targeted DDS EVV workgroup has been established to mutually resolve concerns and ensure successful launch. This group is meeting monthly.

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- In September, 2019 an intensive, two-day business rules kickoff meeting was held with representation from DDS, DSS DXC, Sandata, Sunset Shores and Allied

- Through October, 2019 all involved entities will continue to meet for detailed business rules development sessions.

- DDS will continue to engage with its provider community for feedback on EVV system requirements, including, but not limited to, tasks and visit edit reason codes.

- Training for DDS providers is anticipated to occur in February, 2020, and implementation to begin in March, 2020. DDS will determine the date by which EVV use will become mandatory.

What's next?

- DXC and Sandata will continue to provide supports to current providers through an established call center help desk function, webinars and other training curricula.

- DSS, DDS, DXC and Sandata will support members with intellectual disabilities and their providers in preparing for use of EVV.

- Providers of mental health waiver services will begin using EVV in 2020.

- Providers of non-waiver home health services will begin using EVV by 2023.