



Department  
of Health

# **Electronic Visit Verification (EVV) Regional Listening Session: Rochester Session**

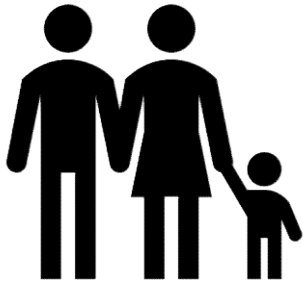
June 2019

## Housekeeping Items



- Restroom location
- Please silence your cell phones
- Optional ListServ Sign Up
- Presentation will be available on the EVV website

## Statewide EVV Listening Sessions



*The goal of the statewide series of Electronic Visit Verification (EVV) **Listening Sessions** is to collaborate and receive feedback from stakeholders (e.g., consumers, providers of services, managed care plans, local departments of social services) on the implementation of Electronic Visit Verification (EVV) requirements.*



## Review of Key Questions and Topics to Help Inform and Facilitate Today's Listening Session

- What is the 21st Century Cures Act?
- What are the Requirements for Electronic Visit Verification (EVV)?
- What Medicaid Services or Programs are Impacted by EVV Requirements?
- Guiding Principles for EVV Implementation
- How Can the Implementation of EVV Improve Services Delivered to Consumers?
- What are Some Examples of Options for How EVV Can Be Implemented?
- Where is EVV in Place Today?
- What are the Possible Approaches for Implementing EVV?
- Open Discussion

## What is the 21<sup>st</sup> Century Cures Act?

- Signed into Federal law in December 2016
- Designed to help accelerate medical product development and bring new innovations and advances to patients who need them faster and more efficiently
- Requires all states to use Electronic Visit Verification (EVV) for Medicaid Personal Care Services (PCS) by January 1, 2020, and for Home Health Care Services (HHCS) by January 1, 2023
- Apply for Good Faith Extension by November 30, 2019



## What are the Requirements for Electronic Visit Verification (EVV)?

The Cures Act requires that EVV use a selected solution to electronically collect service delivery information to verify:

- Service type
- Individual receiving the service
- Date of service
- Location of service delivery
- Individual providing the service
- Begin and end times of service



New York State has **NOT** selected any EVV solution or model

## What Medicaid Services or Programs are Impacted by EVV Requirements?

- Personal Care Services Program (PCSP)
- Consumer Directed Personal Assistance Program (CDPAP)
- Certified Home Health Aide (CHHA)
- Community Habilitation Program and Skills Acquisition Maintenance and Enhancement

## Guiding Principles for EVV Implementation

- Collaborate with stakeholders to identify and implement an EVV model
- Meet federal requirements, thus avoiding penalties and ensuring federal Medicaid funding is preserved for services
- Meet HIPAA compliance standards and establish safeguards to protect patient privacy
- Be deployed through a collaborative stakeholder engagement process
- Provide training for providers and consumers on the implementation and use of the EVV solution(s) as necessary
- Other?



## How Can the Implementation of EVV Improve the Services Delivered to Consumers?

- Ensure that Medicaid consumers are receiving the care and services included in their person-centered care plan
- Reduce administrative burden of paper service verification documents
- Increase payment accuracy and reduce errors in billing
- Ensure program integrity
- Other?

## What Are Some Examples of Options for How EVV Can be Implemented?

### Telephone

Telephone calls can be used to capture service period and verify location



### Mobile Application

Apps can be downloaded and used to capture service period and verify location



### Fixed Object (FOB)

In-home devices can be used to capture service period and verify location



## Where is EVV in Place Today?

- OMIG requires home health agencies and personal care providers exceeding \$15M in Medicaid fee-for-service and/or Medicaid Managed Care reimbursements contract with a verification organization
  - Verification organizations are required to perform pre-claim reviews of claims data collected in EVV systems
- Home care vendor agencies contracted with NYC Human Resources Administration (HRA) providing home attendant services, housekeeping services, and CDPAP services
- DOH has issued an EVV Survey to providers of personal care and home care services to assess their use and readiness for EVV implementation – responses are due May 31st
- The EVV Survey is available on the DOH EVV website  
[https://health.ny.gov/health\\_care/medicaid/redesign/evv/index.htm](https://health.ny.gov/health_care/medicaid/redesign/evv/index.htm)
- Summary of survey results will be publicly available on the DOH EVV website

# What are Possible Approaches for Implementing EVV?

## Provider Choice

Providers select EVV vendor of choice

## State Selected Vendor

State contracts with a single vendor that all providers are required to use

## State Selected In House System

State creates, runs, and manages its own EVV system

## Managed Care Plan (MCP) Choice

MCPs select their EVV vendor of choice

## Open Vendor/Hybrid

State contracts with a single vendor or builds a system but also allows providers to use own vendor

# Open Discussion

# Major Milestones for Implementing EVV

## Milestone 1:

- Planning
- Listening Sessions
- EVV Option Recommendations

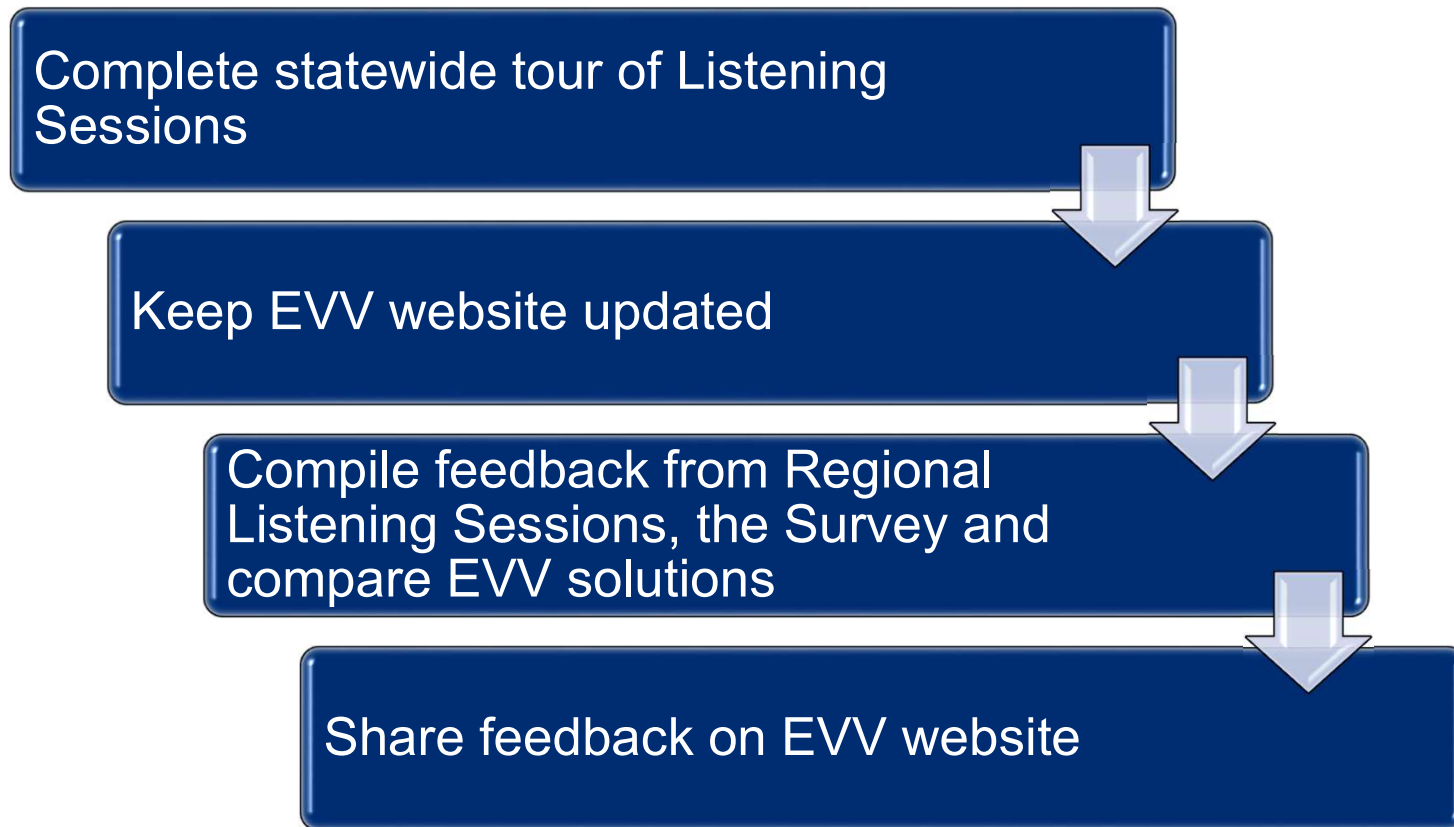
## Milestone 2:

- Develop Strategy
- Execute Strategy

## Milestone 3:

- Development & Implementation
- Training
- Work with EVV Vendor(s) (if necessary)

## Steps to Achieve the Milestones



## Steps to Achieve the Milestones





# How Can Stakeholders Remain Informed Throughout the Implementation of EVV?



## Website Resources

### NYS DOH EVV Website

- [https://health.ny.gov/health\\_care/medicaid/redesign/evv/index.htm](https://health.ny.gov/health_care/medicaid/redesign/evv/index.htm)



## Email

### EVV Help Mailbox

- [EVVHelp@health.ny.gov](mailto:EVVHelp@health.ny.gov)