

**November 19, 2019** 

## Electronic Visit Verification Requirement

Fourth Public Forum Wisconsin EVV

### Agenda

- Welcome and Introductions
- Background and Overview
- EVV Data Collected
- Sandata Electronic Visit Verification (EVV)
   Demonstration
- New: Wisconsin's Current EVV Timeline
- FAQs
- Next Steps and Your Questions



#### **Foreword**

- The information in this presentation is draft language and not yet final policy.
- Once final policy has been determined, the Wisconsin Department of Health Services (DHS) will issue formal communications to provide direction.





## **Background** and Overview

### **EVV Federal Requirements**

The federal 21st Century Cures Act requires states to implement EVV for Medicaid-covered:

- Personal care services no later than January 2021.
- Home health services by January 2023.



### EVV Federal Requirements (Cont.)

The following programs with personal care services will require EVV:

- Medicaid and BadgerCare Plus fee-for-service (ForwardHealth card)
- BadgerCare Plus and SSI HMOs
- Family Care and Family Care Partnership
- IRIS (Include, Respect, I Self-Direct)



## DHS' Guiding Principles

- Maintain services provided, including community integration.
- Support an individual's ability to choose their provider.
- Keep the individual's choice of a worker.
- Ensure delivery of needed care.



### Our Responsibilities

#### DHS is responsible for ensuring that:

- EVV is minimally burdensome.
- Best practices are applied.
- EVV systems are compliant with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and secure.
- Training opportunities are available to provider agencies and workers.



#### **Our Commitment**

#### DHS is committed to:

- All program requirements remaining in place as EVV is implemented in Wisconsin.
- Clearly communicating policy changes.
- Exploring efficiency or policy improvements once EVV is fully implemented.



#### Wisconsin's EVV Vendor

- Sandata Technologies is the EVV vendor.
- Provider and payer agencies do not need to purchase a system.
- DHS will also use Sandata's aggregator technology.
- The aggregator allows provider agencies who already have an EVV system to continue to use it if it meets DHS policy and technical requirements.



#### **EVV Data Collected**

## Federally Required EVV Data

## **6 KEY DATA POINTS**



Who receives service



Where service is provided





Who provides service



Date of service





What service is provided







## New Wisconsin Decision—Provider Agency Identification



- In order to help identify who is providing services, all provider agencies need a unique identifier.
- Provider agencies with a provider
   Medicaid ID will not need to request this.
- Provider agencies will be trained the process for requesting distinct DHS numeric identifiers.

## New Wisconsin Decision—Worker Identification



- The other parts of identifying who is providing services are:
  - Identifying workers.
  - Linking workers to provider agencies.
- DHS chose not to use employees' Social Security numbers.
- Provider agencies will be trained how to assign a unique worker ID.

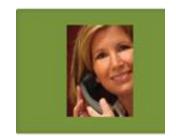
## Service Codes Requiring EVV

What service	Medicaid and BadgerCare Plus fee-for-service, BadgerCare Plus and SSI HMOs	Family Care, Family Care Partnerships	IRIS
Personal Care Services per 15 min. (T1019)	X	X	X
Personal Care Services per day (T1020)	n/a	X	n/a
Supportive Home Care per 15 min. (S5125)	n/a	X	Starts 1/2021 after waiver renewal
Supportive Home Care per day (S5126)	n/a	X	Starts 1/2021 after waiver renewal

### Technology to Collect EVV Data

Three technologies are available for workers to collect the required data:

- Sandata Mobile Connect App
- Landline phone system
- Fixed visit verification device (installed in member's home)







## **EVV Technology Summarized**

Technology type	Needs internet at point of care?	Needs cell service at point of care?	Does it collect all six data points?
Mobile app	No	No	Yes
Landline phone	No	No	Yes
Fixed device	No	No	Yes



### **Example Visit**

#### The worker:

- Arrives at the place of service.
- Checks in using any one of the following:
  - Mobile phone or tablet app
  - Landline phone
  - Small device installed in the home that creates time codes



## Example Visit (Cont.)

#### The worker:

- Provides services.
- Checks out using any one of the following:
  - Mobile phone or tablet app
  - Landline phone
  - Small device installed in the home that creates time codes



### Sandata Mobile Connect App

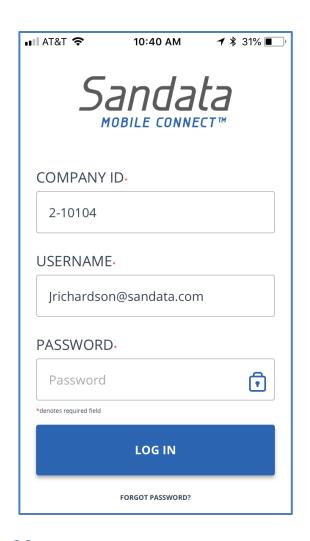
- App can be loaded on Android or iOS (Apple).
- Works in both connected and disconnected modes; no Wi-Fi or cell service required at time of care.
- GPS location captured at check in and out only.
- App is ADA 508 and HIPAA compliant.

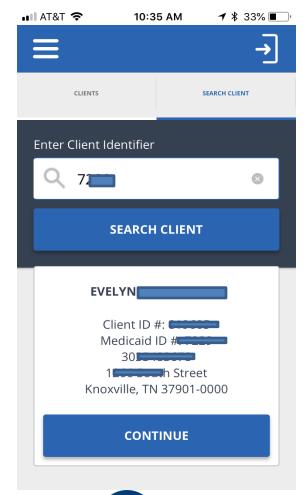




## Sandata EVV Demonstration

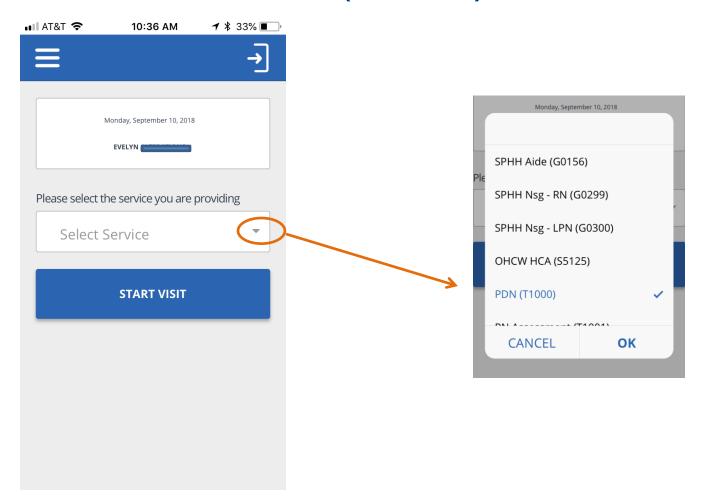
## Sandata Mobile Connect App Demonstration





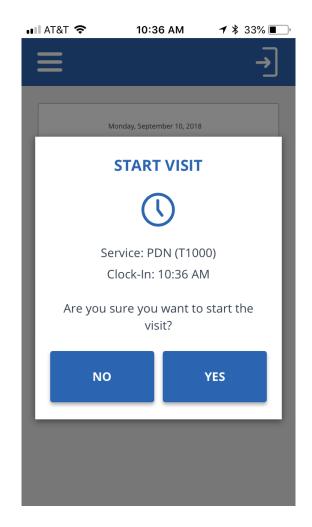


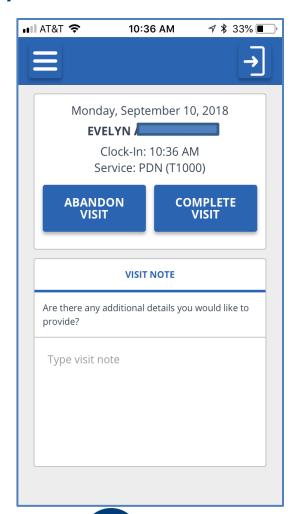
## Sandata Mobile Connect App Demonstration (Cont.)





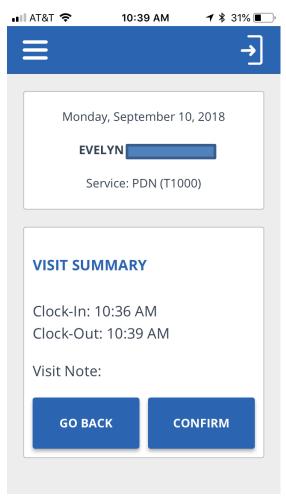
## Sandata Mobile Connect App Demonstration (Cont.)







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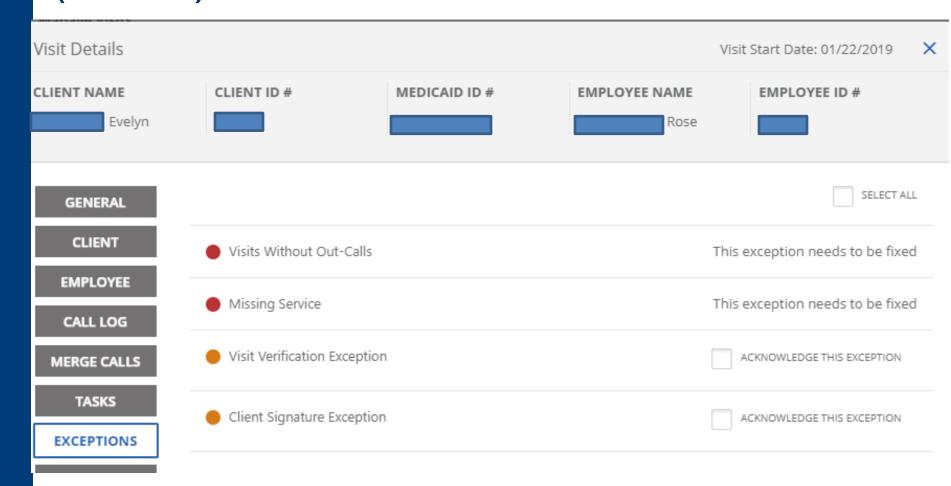


## **EVV Portal for Provider Agencies**

- Various user roles within provider agencies will have EVV Portal access on the web.
- Agency administrators can do the following in the EVV Portal:
  - View visit data in real-time.
  - Correct errors and supply missing data.
  - Obtain summary and detail reporting to track success.



## EVV Portal for Provider Agencies (Cont.)







# New Information: Wisconsin's Current EVV Timeline

### **Current EVV Timeline**









**2019 Onward** 

Your comments

**June 2020** 

Training starts

Sept. 2020

Soft launch EVV required

**Future** 

Hard launch EVV complete



## **EVV Training Plan**



- DHS will offer training sessions to representatives from provider agencies and payers across all delivery systems through:
  - Instructor-led classroom training.
  - Instructor-led (live) web-based training.
  - Independent (on-demand) web-based training.

## **EVV Training Plan (Cont.)**



 DHS will also provide resources, handouts, and on-demand training links for provider agencies to train their workers.

## Soft Launch—September 2020



- During the soft launch, all provider agencies and workers will be required to use EVV, but it will not impact claim processing.
- EVV information will be matched to claims at this time for informational purposes only.

## Soft Launch—September 2020 (Cont.)



The soft launch is a time to cooperatively overcome any initial hurdles, establish processes, and learn to effectively use the system.

#### **Hard Launch**



- The hard launch is when claims without EVV information may be denied.
- This transition date has yet to be determined.



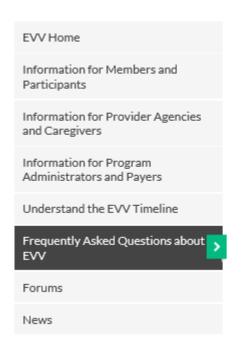


**FAQs** 

### **FAQs**

#### Additional FAQs on the EVV website:

https://www.dhs.wisconsin.gov/evv/faq.htm



## Electronic Visit Verification (EVV): Read the FAQ



#### Questions received

The following FAQ is a list of questions the Wisconsin Department of Health Services (DHS) has received from stakeholders through public forums, the <a href="mailto:dhsevv@dhs.wisconsin.gov">dhsevv@dhs.wisconsin.gov</a> email box, and the Wisconsin EVV Advisory Council.

This page includes frequently asked questions and answers about the EVV requirement and will be revised with new information as it becomes available. The questions at the bottom of the FAQ will be answered once decisions are finalized.



### Will EVV track workers or members/participants?

The technology only records point-in-time locations. It will not continuously track locations of workers or members/participants.

Can I receive care in places outside my home?

EVV does not change policy on where care is received.



Will workers have to log in and out for each personal or supportive home care task during a visit?

No. Workers will log in and choose a broad service code that will include all the tasks performed.



I'm worried about keeping workers during the transition to EVV.

We realize EVV is a change. We are trying to minimize the impact. The EVV soft launch is an opportunity to learn to effectively use the system and resolve problems.



# Will there be a charge for using the DHS-provided EVV solution?

No. Provider agencies can use the DHS-provided EVV solution, or aggregator, free of charge.



# What systems will be approved for alternative EVV and use of the aggregator?

Any system that meets the DHS policy and technical specifications can be used. Those specifications will be available in Spring 2020.



#### Will there be costs to provider agencies?

Agencies should expect some costs for training, setup, and ongoing compliance. For the purposes of EVV compliance, the associated hardware and services (for example, cell phone, cell service, tablet, internet, landline) are not an allowable Medicaid benefit.



# What does the Department of Labor say about EVV?

Although labor laws are beyond our focus, we have asked the Centers for Medicare & Medicaid Services (CMS) for guidance. For legal questions, please consult with an attorney of your choice for advice on specific employment and wage and hour laws.



#### What is DHS doing to make EVV successful?

DHS is researching other states' progress and lessons learned and soliciting feedback from the community through advisory groups, public forums, presentations, an EVV email box, and our website.



# Questions We Are Looking Into

- DHS is currently determining policy for:
  - A single visit across midnight.
  - Visits that mix personal care and supportive home care services.
  - Workers performing group visits.
- Your feedback and other examples are valued.



# Questions We Are Looking Into (Cont.)

- CMS gave additional guidance about live-in workers and personal care services provided in the community on August 8, 2019.
- CMS gave states the flexibility to choose if EVV will be required for personal care services:
  - Provided in the community.
  - Provided by an individual living in the residence.

# Questions We Are Looking Into (Cont.)

• DHS is in the process of reviewing the guidance and determining policy for these scenarios. We are committed to making processes as simple as possible.





# Next Steps and Your Questions

#### What's next?

- EVV Stakeholder Advisory Workgroup continues.
- Meetings with HMOs, managed care organizations, and IRIS groups are ongoing.
- We will add to our online EVV FAQs.
- We will hold more forums in the future.
- Please submit your feedback and questions to <u>dhsevv@dhs.wisconsin.gov</u>.
- Find updates on the EVV webpage.



### We value your feedback.

- Visit the EVV webpage at <u>https://www.dhs.wisconsin.gov/forwardhealth</u> /evv.htm.
- Sign up for an email subscription for webpage announcements.
- Submit feedback and questions to the EVV mailbox at <a href="mailto:dhsevv@dhs.wisconsin.gov">dhs.wisconsin.gov</a>.

# Thank you.