Alternate Electronic Visit Verification (EVV) Implementation in Massachusetts

Wednesday, February 13, 2019
Today’s Agenda

1. 21st Century Cures Act
2. Massachusetts’ Plan for EVV Implementation
3. Alternate EVV Estimated Timeline
4. Alternate EVV Experience Questions
Electronic Visit Verification (EVV) refers to the technology a worker uses during a home visit to capture information about the services provided.

Federal law requires EVV for the following Medicaid services:
  - Personal care by 1/1/2020
  - Home health by 1/1/2023

EVV required for Medicaid services but EOHHS will be requiring it for EOE A Non-Medicaid services as well.

States face a reduction in federal matching funds if they do not implement EVV on time, although states can apply for a 1 year exemption.

Schedule for EVV implementation

<table>
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<tr>
<th>Original Cures Act</th>
<th>Initial personal care deadline</th>
<th>Deadline with exemption</th>
<th>Deadline for home health</th>
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<tr>
<th>New law HR 6042</th>
<th>Initial personal care deadline</th>
<th>Deadline with exemption</th>
<th>Deadline for home health</th>
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Massachusetts’ Goals for EVV Implementation

**Quality:** promote quality outcomes for consumers by ensuring appropriate service delivery

**Efficiency:** reduce administrative burden of paper timesheets

**Program Integrity:** reduce billing errors and unauthorized spending
# Hybrid EVV Model to be Deployed for EOEA Programs (Frail Elder Waiver and Home Care)

## EVV Options for ASAP-contracted providers

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<th><strong>MyTimesheet</strong></th>
<th><strong>Alternate EVV systems</strong></th>
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<tbody>
<tr>
<td><strong>Providers served</strong></td>
<td>Any ASAP-contracted provider</td>
<td>Providers with existing EVV systems in place or those who choose to adopt one</td>
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<td><strong>Software platform cost</strong></td>
<td>Free use of platform (devices not included)</td>
<td>Depends on vendor charge</td>
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<td><strong>Vendor</strong></td>
<td>Optum (contracted by MassHealth)</td>
<td>Numerous EVV products already in use</td>
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<td><strong>Functionality</strong></td>
<td>• GPS check-in &amp; check-out on mobile devices</td>
<td>Must provide data elements meeting Cures Act and EOHHS requirements, but can include additional features</td>
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<td>• Web-based portal for provider organizations and ASAPs</td>
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**State EVV Database**

- Automated data flow
- Regular uploads

- **State-sponsored system developed by Optum**
- **Any system purchased by providers that meets Cures Act and EOHHS requirements**
Alt-EVV: Process & Estimated Timeline

- Provider organizations using Alternate EVV systems will:
  - Attest to meeting Cures Act and EOHHS requirements
  - Complete a data transfer testing and attestation process with Optum

- Alt-EVV will be piloted before going live

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- Define requirements
- Stakeholder engagement
- APD Process
- Development
- Pilot & enhancement

**9/1/2019 System Go-Live**

Testing & Training
Choosing an Alternate EVV System

1. What prompted your organization to adopt an EVV system? How has the use of EVV affected your operations, logistics, and program integrity? Has it made it easier or more difficult?
How does your system accommodate for situations such as a service authorization that is for one hour of one service and one hour of another service consecutively on the same day? Does the worker check in and check out only once each day, or per service, or in some other manner?
Actual versus Authorized Time

How is the recorded service data matched with, or compared against, the authorization for the respective services? For example, do you compare the hours that a worker checks in and out to provide the service to the authorization in the care plan or similar authority?
Visits Outside of EVV

4. If a worker is unable to use EVV to capture a visit, how do you capture/verify that visit?
Visits Outside of EVV

5. What is the proportion of visits not captured/verified electronically?
If your agency provides Companion services, do you include them as part of your EVV software?

a. Has including those service(s) in your EVV made operations / logistics easier?

b. What is your reasoning for including companion services? e.g. the same direct care aides are performing companion services plus other services that do require EVV, so it is easier to require it for all services.
What have been some of the notable challenges during the implementation process?
Implementation Benefits

What are some positive insights/outcomes you experienced during the implementation process?
Are you able to parse/filter your EVV data by specific programs and/or services?
What type of user access management plan do you have for your EVV system?
What types of training/re-training do you provide to workers on the use of EVV?
What is the volume of customer service calls or troubleshooting requests you receive from users?
Information about EOHHS’ EVV Implementation can be found at:

https://www.mass.gov/info-details/electronic-visit-verification

Feedback/questions related to EVV can be submitted to EOHHS by emailing:

EVVfeedback@State.MA.US