# Slide 1

Welcome to the General Updates and Details on Gradual EVV Implementation PCA Public Listening Session.

Thank you for joining! The session will begin shortly.

Please note that all participant lines are automatically muted upon joining the session.

# Slide 2

## Joining from a Mobile Device

* If you are joining this meeting from a mobile device, you have two options:
  + Join by calling in
  + Join via the WebEx mobile application
* Listening session details, including call in information and the meeting password, can be found online at mass.gov by searching “Gradual EVV Implementation” and opening the first search result.
* If you are having difficulty joining via the mobile application, please call in using the information provided in the communications sent for this listening session.
* If you call in, the deck we are reviewing will be posted on mass.gov and can be found by searching “Gradual EVV Implementation”.
* MassHealth asks that you please hold all comments until the end of the presentation.

# Slide 3

General Updates and Details on Gradual EVV Implementation

PCA Public Listening Session

Executive Office of Health and Human Services

Fall 2020

# Slide 4

## Agenda

* Intent of Public Listening Sessions
* PCA Program Updates
* Key Focus Areas
* Thank you

# Slide 5

## Intent of Public Listening Sessions

* The purpose of the public listening sessions is for MassHealth’s Office of Long-Term Services and Supports (OLTSS) to listen and gather input from a broad group of PCA Program stakeholders on key focus areas within the PCA Program, including Electronic Visit Verification (EVV).
* Public Listening Sessions are open to all stakeholders.
* Three virtual Public Listening Sessions will be hosted in the Fall of 2020
  + September 21 from 10:00am – 11:30am
  + September 23 from 12:00pm – 2:30pm
  + October 2 from 1:00pm – 3:30pm
  + The October 2 session will have Spanish captioning.
* This Public Listening Session deck will be available on the Massachusetts EVV Webpage and by searching “Gradual EVV Implementation” at mass.gov.
* Written responses will be accepted at any time at [PCAfeedback@massmail.state.ma.us](mailto:PCAfeedback@massmail.state.ma.us).
* MassHealth asks that you please hold all comments until the end of the presentation.

# Slide 6

## Public Listening Session Logistics

* This Public Listening Session will include a presentation by MassHealth followed by an opportunity for attendees to provide input. Please hold all comments until the end of MassHealth’s presentation.
* MassHealth requests that all attendees keep their phone muted if they are not talking to minimize background noise. MassHealth may mute your line if there is background noise.
* Attendees can provide input by either typing their comment into the comment section of WebEx or by unmuting and verbally giving their comments.
* MassHealth asks that individuals providing comments indicate their role as a stakeholder. For example, identifying if you are a consumer, a PCA, a PCM employee, etc.
* Feedback will be prioritized in the following order:
  + A MassHealth representative will read any comments submitted to the comments section.
  + A MassHealth representative will call on anyone using the “raise hand” feature.
  + Attendees will have the opportunity to unmute and provide feedback.
* MassHealth anticipates that many individuals will want to provide feedback. We ask that you be as concise as possible to ensure that all attendees who want to provide input have time to do so.
* During Public Listening Sessions, MassHealth does not respond to feedback. MassHealth asks that when the time for comments comes, participants frame their feedback in the form of a comment as questions cannot be answered.
* If we run out of time and you are unable to share your feedback, written responses will be accepted at any time at [PCAfeedback@massmail.state.ma.us](mailto:PCAfeedback@massmail.state.ma.us).

# Slide 7

## Public Listening Session Logistics

* As a reminder, MassHealth requests that all attendees keep their phone muted if they are not talking to minimize background noise. MassHealth may mute your line if there is background noise.
* If you need to unmute your line, you can do so by following these instructions:
  + If you are connected to audio on your computer: click the mute icon at the bottom of the screen
  + If you are connected to audit on your phone: press \*6 on your phone.
* You can also get MassHealth’s attention by “raising your hand” in the participant pane by clicking on the hand icon.
* If we run out of time and you are unable to share your feedback, written responses will be accepted at any time at [PCAfeedback@massmail.state.ma.us](mailto:PCAfeedback@massmail.state.ma.us).
* MassHealth asks that you please hold all comments until the end of the presentation.

# Slide 8

## Closed Captioning

* Closed captions are available during this session for those using their computer.
* To see the closed captions, you must open the “Closed Captions” panel in the bottom right-hand side of your screen (see the image below).
  + Step 1: Select the three vertical dots to the right of “Chat” to open additional panel options
  + Step 2: When Closed Caption is highlighted in blue, the panel should be visible on your screen

# Slide 9

## Agenda

* Intent of Public Listening Sessions
* PCA Program Updates
* Key Focus Areas
* Thank you

# Slide 10

As a reminder, please hold comments until after MassHealth’s presentation.

# Slide 11

## Definition of Terms Used in this Presentation

Request for Response (RFR)

* An RFR is how state agencies like MassHealth select outside companies to help with certain projects
* You will hear MassHealth refer to an RFR as a “procurement”
* The RFR is a fair and competitive process in which any company that meets the general project requirements can apply to provide the services

Electronic Visit Verification (EVV)

* EVV refers to an electronic way of collecting timesheet information
* EVV is different than electronic timesheets because it collects the location where the services begin and end
* When a worker users EVV, s/he “checks in” and “checks out” using the EVV system instead of writing the start and stop time of the service

# Slide 12

## General Program Updates

In 2017, MassHealth held a series of Public Listening Sessions to understand the challenges consumers face in the PCA Program and in implementing Electronic Visit Verification (EVV).

* In 2017, MassHealth initiated a series of Public Listening Sessions across the Commonwealth to discuss EVV, which MassHealth is required to implement by federal law.
* MassHealth proposed implementing EVV in 2017 and 2018.
* MassHealth heard concerns from stakeholders about the design of the PCA program and EVV.
* Based on this feedback, MassHealth elected to focus on exploring potential enhancements to the PCA program before moving forward with implementation of EVV.
* Since 2017, MassHealth has implemented a number of program changes, stemming from stakeholder feedback.

# Slide 13

## General Program Updates

MassHealth has implemented the following program changes, stemming from stakeholder feedback:

* Developed the PCA Enhancement Advisory Council (PEAC), a procured stakeholder group, to inform enhancement activities and policy decisions
* Negotiated the Collective Bargaining Agreement, which added several new benefits including:
  + Transitioned from sick time to PTO with increase to 50 hours of PTO and pay out at the end of employment
  + Increased PCA wage rate from $15.00 in FY19 to $15.40 in FY20 to $15.75 in FY21.
  + Made PCA pay advices available electronically (i.e., payroll portal), with opt-in for paper.
* Evaluated different models for the PCA Program including Agency with Choice and Cash and Counseling. After extensive discussion with PEAC and statewide public listening sessions, MassHealth determined to maintain current program structure and apply incremental enhancements to the program.
  + Found that Agency with Choice model, which includes co-employment between the consumer employer and a designated organization, required an assignment of responsibilities that would either limit employer self-direction or create liabilities for the co-employer organization.
  + Determined that Cash and Counseling would present challenges associated with the Collective Bargaining Agreement and many of the benefits of the model were already realized in the current program.

# Slide 14

## General Program Updates

MassHealth has implemented the following program changes, stemming from stakeholder feedback:

* Re-procured Personal Care Management Agencies (PCMs)
  + Increased standards of PCM functions with an emphasis on the consumer employer experience
  + Improved the quality and consistency of employer skills training
  + Added a surrogate assessment
  + Addition of a Consumer Advisory Board
  + Note: Since the new PCM contracts have been issued, MassHealth has not received any concerns from consumers about access to care
* Added an “Administrative Proxy” role to differentiate individuals who provide administrative support for consumers from those who serve in the full employer role as a “surrogate”
* Reconstructed the PCA Directory
* MassHealth asks that you please hold all comments until the end of the presentation

# Slide 15

## Coming Program Updates

MassHealth is continuously seeking program opportunities to enhance stakeholder experience with the PCA Program. Planned Program enhancement activities include:

* Exploring opportunities to provide Infection Control training for PCAs
* Re-procuring Fiscal Intermediary (FI) services with the goals of:
  + Maintaining consumer choice of PCMs
  + Establishing consistency in consumer and PCA experience
  + Enabling MassHealth to require improvements in customer service
  + Incorporating stakeholder feedback into FI operations
* Removing the PCA program from the Optum EVV contract and instead including EVV as part of the procurement for FI services
  + Ensures that EVV is provided in a manner consistent with consumer direction
  + Enables integration of EVV with existing electronic timekeeping solutions

# Slide 16

## Coming Program Updates

MassHealth is continuously seeking program opportunities to enhance stakeholder experience with the PCA Program. Planned Program enhancement activities include:

* Contracting with one FI in new procurement
  + Streamlines consumer and PCA experience
  + Increases consistency in customer service
  + Ensures implementation of one EVV system
* Implementing EVV in calendar year 2022
  + MassHealth is required by federal law to implement EVV for personal care programs
  + EVV will be rolled out across the program in phases, allowing for gradual adoption of the change
  + Provides opportunity for ongoing stakeholder input regarding policy development and implementation strategies

MassHealth asks that you please hold all comments until the end of the presentation.

# Slide 17

## MassHealth has released an RFR for FI Services

What is a request for Response or RFR?

* An RFR, or “Request for Response” is how MassHealth selects outside companies to perform certain functions
* You will hear MassHealth refer to an RFR as a “procurement”
* The RFR document is posted online and contains specific questions and other information that interested agencies must respond to
* The RFR also contains important information, such as a sample contract, key deadlines, instructions, eligibility criteria, etc.
* Interested agencies must submit a response describing why they are the best agency to meet MassHealth’s expectations.
* MassHealth along with other stakeholders, review all responses that are received and selects the company with the strongest response.
* MassHealth has released a new RFR for Fiscal Intermediary Services for the PCA Program. The new RFR will be used to select a single FI company to serve the entire state, as well as implement an EVV solution for consumer-directed programs in Massachusetts.

MassHealth asks that you please hold all comments until the end of the presentation.

# Slide 18

## FI Re-procurement

Re-procurement is an opportunity to enhance FI services for Consumers and PCAs

* MassHealth is procuring a group of Consumers who will assist MassHealth in reviewing RFR responses and providing recommendations
* The transition to a single FI will:
  + Unify onboarding and new hire processes
  + Simplify paperwork and payroll for PCAs who work for multiple consumers (i.e., work with one FI rather than coordinating across multiple FIs)
  + Consolidate paperwork and reporting for all Consumers and PCAs in the program
  + Result in a single payroll system across the state
  + Allow for the implementation of one EVV system
  + Streamline and enhance the Consumer and PCA customer service experience
  + Result in a single data collection system
* Additional procurement enhancements include:
  + Consumer’s ability to transfer between PCMs without having to wait until the end of the year
  + Mandated “brick and mortar” locations throughout the state
  + The development of a Consumer Advisory Board
  + Procurement timing allows for readiness planning and phased implementation
* The new FI contract will be effective January 1, 2022 with an emphasis on phased transitioning and implementation of EVV
* **Note: EVV will be rolled out throughout calendar year 2022**

# Slide 19

## Electronic Visit Verification (EVV) Background

What is EVV?

* EVV is required by federal law for in-home Medicaid services.
* MassHealth must implement EVV. Not implementing EVV will result in financial penalties for MassHealth from the federal government.
* Once it is implemented, EVV will replace your timesheet.
  + The PCA will “check in” and “check out” of an appointment using EVV technology.
  + The consumer will have the ability to review and approve the EVV recorded time.
* EVV will not impact how services are provided within the PCA program.
* MassHealth is going to implement EVV as part of the FI procurement just described. MassHealth anticipates implementing EVV **gradually over calendar year 2022.**
* Many questions about how EVV will be implemented are still under consideration by MassHealth. Examples include:
  + A reconciliation process for when PCAs forget to use EVV

MassHeatlh asks that you please hold all comments until the end of the presentation.

# Slide 20

## MassHealth Goals of EVV Implementation for the PCA Program

1. Enhance consumer control and self-direction
2. Assure service delivery and reduce possible gaps in care
3. Reduce consumer, surrogate and PCA administrative burden
4. Strengthen program integrity by ensuring PCAs are working and getting paid in a timely manner for hours worked
5. Comply with the 21st Century Cures Act, which requires Medicaid programs to use EVV for personal care services

# Slide 21

## MassHealth Decision to Delay EVV Implementation

MassHealth is gradually implementing EVV I the PCA Program throughout CY 2022.

Benefits include:

* Incorporation of stakeholder input into EVV solution
* Thoughtful implementation of EVV that recognizes the significant change this technology will have for many PCA stakeholders
* Continued prioritization of COVID-19 related activities

Challenges include:

* Federal law

MassHealth asks that you please hold all comments until the end of the presentation.

# Slide 22

## EVV Implementation for the PCA Program

MassHealth recognizes the unique challenges that come with implementing EVV within the PCA program. MassHealth’s response has included:

* Procured a stakeholder group (PEAC) to consider different models of the PCA Program
* Performed research and met with other states to understand their experience implementing EVV with the consumer-directed population and to consider creative approaches to EVV
* Gradual implementation of EVV in CY 2022
* Removed EVV for consumer-directed PCA from the TPA contract with Optum
* Included EVV as part of the procurement for FI Services to ensure implementation with an entity with a strong foundation in consumer-direction and an understanding of the opportunity for integration between EVV and electronic timesheets
* Resolved to re-convene consumer and advocacy groups, including a working group of PCMs and other various Program partners, to help inform the approach and design of EVV
* Decided to procure a group of stakeholders to provide input on the EVV and customer service portions of the FI procurement
* Committed to the ongoing facilitation of Public Listening Sessions to get broad stakeholder input on EVV-related policy items and implementation strategies over the next year

MassHealth asks that you please hold all comments until the end of the presentation.

# Slide 23

## MassHealth Decisions about EVV Technology

With the input of the PEAC, MassHealth made some initial recommendations on EVV technology to minimize the burden of EVV implementation on consumers and PCAs.

* Geo-location: MassHealth will only capture location at the start and end of a service
* Recording of tasks: MassHealth will not capture individual tasks as part of EVV
* System Flexibilities: The EVV system will be flexible to accommodate for the circumstances unique to the PCA program (e.g., live-in caregivers, night hours, etc.)
* Exemptions: MassHeatlh is evaluating criteria that would allow certain consumers and PCAs to be exempt from using EVV
* Cost: MassHealth evaluated EVV systems and found that the average cost to access EVV on a smartphone (personal device) is $0.16 per month in data use.

Future EVV policy decisions will include feedback from public meetings and stakeholder groups.

# Slide 24

## EVV Implementation for the PCA Program

* Procuring an EVV solution for the PCA program through the PCA Fiscal Intermediary (FI) offers many benefits:
  + Understands the nuances and tenets of consumer directed programs
  + Offers the ability to integrate electronic timesheets with EVV requirements
  + Recommended by states that have implemented EVV in consumer directed programs

A screenshot of a cell phone

Description automatically generated

A visual representation of the estimated EVV timeline for PCA programs.

Image summary:

* The FI RFR was released in September of 2020
* The RFR will close in November 2020
* The FI vendor will be selected in April 2021
* Between November 2020 and December 2021, MassHealth will hold EVV stakeholder engagement and public listening sessions
* In January 2022, the FI contract will go live
* Throughout 2022, EVV will be implemented in phases

# Slide 25

## Agenda

* Intent of Public Listening Sessions
* PCA Program Updates
* Key Focus Areas
* Thank you

# Slide 26

## Key Focus Areas

MassHealth wants to hear from you about future program enhancements discussed during today’s presentation and how MassHealth can ensure transparency and collaboration moving forward.

1. What suggestions do you have for MassHealth on the overall EVV implementation timeline for the PCA program?
2. What suggestions do you have for MassHealth’s approach for gathering ongoing feedback about EVV implementation?
3. What would be the most effective way for MassHealth to share updates with stakeholders as we move toward EVV implementation?

If we run out of time and you are unable to share your feedback, written responses will be accepted at any time at [PCAfeedback@massmail.state.ma.us](mailto:PCAfeedback@massmail.state.ma.us).

# Slide 27

## Agenda

* Intent of Public Listening Sessions
* PCA Program Updates
* Key Focus Areas
* Thank you

# Slide 28

## Thank you!

The next virtual EVV Public Listening Session will be on October 2nd from 1:00pm – 3:30pm. Visit mass.gov for login information.

Additional feedback can be submitted to MassHealth by emailing: [PCAfeedback@massmail.state.ma.us](mailto:PCAfeedback@massmail.state.ma.us).