



Electronic Visit Verification (EVV) Public Meeting

September 25, 2020

EVV Public Meeting

- All phone lines are muted 
- Questions should be submitted through the chat feature
- We will not be answering submitted questions during today's presentation
- Questions will be addressed after the presentation through a Listserv communication
- Please reference the slide number, if applicable, when you submit your question

Agenda

- **Office of Medical Assistance Programs (OMAP) Updates**
- **Office of Developmental Programs (ODP) and Office of Long-Term Living (OLTL) Policy Bulletin Overview**
- **Frequent Issues and Resolution Steps**
- **DHS System Implementation Updates**
- **Frequently Asked Questions**

Office of Medical Assistance Programs (OMAP) Updates

OMAP FFS Training

- All OMAP Fee-For-Service (FFS) Providers intending to use the DHS Sandata EVV system must receive training for the DHS Sandata EVV System.
- Training will be done using a “train the trainer” model.

▶ OMAP FFS Training

- The webinar was conducted on August 28, 2020.
- Providers may still do self-paced training if they were unable to attend the webinar. The training may be accessed at <https://www.dhs.pa.gov/providers/Billing-Info/Pages/EVV.aspx>.
- DHS will issue log-in credentials to access the DHS EVV system or the EVV Aggregator once a provider completes the mandatory training.

OMAP MA Bulletin Timelines

- MA Bulletins have been prepared for OMAP providers
- MA Bulletin 05-20-02 for FFS providers was issued on August 26, 2020.
- A MA Bulletin for PH-MCO providers is currently under review and is anticipated to be issued in late September or early October.

OMAP FFS Timeline

- FFS providers are expected to be using either the DHS EVV system or the Alternate EVV system of their choosing at this time.
- FFS EVV administrators are required to complete and return the “EVV System Account Verification” document and return it to DHS, per MA Bulletin 05-20-03. Completed forms will continue to be accepted after September 1, 2020.

OMAP PH-MCO Timeline

- PCS claims for PH-MCOs with a date of service on and after November 1, 2020, will be matched to information in PROMISe™ and compared to information in the EVV Aggregator.
 - If the information does not match, error status code 927 or 928 will post and have a Pay & List disposition
 - Encounters will still pay at this time
- Beginning with dates of service on or after January 1, 2021, the above referenced PH-MCO encounters posting error status code 927 or 928 will post and have a deny disposition.

Office of Developmental Programs (ODP) Updates

ODP Updates

- All ODP providers who render personal care services (PCS) are subject to EVV.
- For claims that contain PCS with dates of service January 1, 2021 and forward, there **MUST** be a matching EVV record in the DHS Aggregator in order for the claim to pay.
 - PCS claims without a matching EVV record will post either error status code 927 or 928 and have a deny disposition.

- ***Vendor Fiscal (PALCO)***

- Effective August 16, 2020, PALCO is requiring **All** participant-directed services are captured electronically by the SSP.
- EVV training materials and registration forms are available on the PALCO website:
<https://www.palcofirst.com/programs/pennsylvania/office-of-developmental-programs/>

ODP/OLTL Policy Bulletin Overview

ODP/OLTL Policy Bulletin Overview

Bulletin Title: Electronic Visit Verification (EVV) for Personal Care Services (PCS)

Effective Date: September 10, 2020

Scope: This bulletin applies to providers enrolled in the MA Program, including:

- Agency with Choice (AWC) providers
- Vendor Fiscal/Employer Agent (VF/EA),
- Providers who provide PCS to MA participants who are enrolled in an Office of Developmental Program (ODP) or Office of Long-Term Living (OLTL) waiver, the Act 150 Program, or a Community HealthChoices (CHC) managed care organization.

ODP/OLTL Policy Bulletin Overview

Overview

- This bulletin includes the minimum requirements for providers of ODP and OLTL waiver services and Act 150 Program services (fee-for-service (FFS programs) and providers of CHC managed care services.
- Managed Care Organizations (MCOs) may have other requirements for network providers, which are imposed by the MCO agreements with the Department of Human Services (Department) and contracts with individual network providers. Providers should contact their applicable CHC-MCOs with any questions regarding EVV billing and procedures.

ODP/OLTL Policy Bulletin Overview

Overview (continued)

- As of January 1, 2021, the Department will deny all PCS visit claims and CHC-MCO PCS encounters that do not have corresponding visit verifications recorded in the Department's EVV Aggregator.
- Providers are to review Service Authorization Notices and/or the Provider Service Detail Reports prior to service delivery and billing to ensure the provider, the PCS, the date span for PCS, and sufficient units for PCS are authorized on the Individual Support Plan or Person-Centered Service Plan. This practice will minimize claim denials.

ODP/OLTL Policy Bulletin Overview

Training

- If a provider elects to use the Department's EVV system, the provider must complete mandatory training for the system.
- If a provider or vendor elects to use their own third party or alternate EVV system, the provider must complete system certification and EVV Aggregator training.
- A provider must ensure that its staff (including direct care staff and attendants) who provide services for which EVV is required, receive training and comply with all processes required to verify service delivery through the use of EVV.
- Providers must train office and administrative staff members on the use of the EVV System to enter all of the required data elements, enter schedules (as applicable), and verify service delivery through visit maintenance and the use of reason codes.

ODP/OLTL Policy Bulletin Overview

Fee-For-Service Billing Requirements

- For dates of service on or after January 1, 2021, when PROMISe/MMIS identifies a claim that contains a service subject to EVV, MMIS will perform validation against the EVV Aggregator to determine if the information submitted on the claim matches the EVV PCS visit data stored in the EVV Aggregator.
- EVV ESCs will set and potentially impact claim payment. See Appendix A, “EVV Error Status Codes,” for a list of EVV ESCs, the conditions in which the ESCs will set, and whether or not the ESC will cause the claim to pay, deny, or suspend.
- Provider agencies must ensure service claims are supported by service delivery records that have been verified and confirmed in an EVV System. The provider must complete any necessary visit corrections prior to submitting a claim associated with the EVV transaction.

ODP/OLTL Policy Bulletin Overview

Manual Edits and Compliance Rates

- If an EVV visit is missing information or the EVV visit information was entered incorrectly and requires any type of edit or correction, this is deemed a manual edit. If a provider has to manipulate data or add missing data or change data in any way after the service is delivered, this is deemed a manual edit.
- Manual edits in EVV are accepted but should never be the primary source of visit capture information. Manual edits should be done on an exception basis only and should be kept to a minimum.
- Acceptable reasons for a manual edit include, but are not limited to, the following:
 - Providers are missing one or more data elements of required visit information, or
 - Providers need to make a correction or change to one or more data elements because it was incorrect.

ODP/OLTL Policy Bulletin Overview

Manual Edits and Compliance Rates (continued)

- Examples of acceptable manual edits may include, but are not limited to, the following:
 - A caregiver misses a clock-in or clock-out and the visit needs to be edited to add the appropriate time of service.
 - The visit is unable to be electronically captured at the point of care because the mobile application and/or telephony are not available. (The EVV system is down.)
 - The visit is unable to be electronically captured because a device cannot be used at the point of care.
 - A visit is captured electronically but causes an exception to be generated; the record would be classified as a manual edit.

ODP/OLTL Policy Bulletin Overview

Manual Edits and Compliance Rates (continued)

- In order to meet compliance with The Centers for Medicare and Medicaid Services (CMS), the Department expects providers to achieve 50% of EVV records for verified visits without manual edits from January 1, 2021 and moving forward.
- The Department will review manual edit data on the federal fiscal year quarterly basis for providers providing services through a FFS program.
- For providers enrolled in the CHC managed care delivery system, the CHC-MCO will conduct the review of manual edit data on a federal fiscal year quarterly basis and contact the provider regarding any needed quality improvement plan.
- For those providers not achieving the 50% threshold for manual edits on a quarterly basis, the Department will work with providers to develop corrective action plans as part of the standard monitoring process when necessary.

ODP/OLTL Policy Bulletin Overview

Visit Corrections and Documentation for Manual Corrections

- If EVV visits require manual corrections or edits due to missing or incorrect data elements, providers must maintain hard copy documentation of the manual corrections for auditing purposes. Hard copy documentation is a paper copy.
- Providers are to establish policy on documentation required to meet auditing requirements and standards, as well as organizational needs.

Frequent Issues & Resolution Steps

Claims Verification Steps

- Error Status Codes (ESCs) are actively setting for all claims with services subject to EVV that are submitted through PROMISe for fee-for-service programs.
- Providers should be actively reviewing these ESCs to determine if their claims and EVV data are matching appropriately.
- The ESC guide published on the DHS EVV website outlines when claims would deny beginning January 1, 2021.

EVV ESC METRICS FOR ODP & OLTL

Error Description By Program Office	Aug 2020	Percentage for the month of August	Status After January 1st
OLTL			
925 - EVV VISIT VERIFIED	566	2.64%	Pay & List
927 - UNITS BILLED EXCEED UNITS VERIFIED IN EVV	88	0.41%	Deny
928 - EVV VISIT NOT FOUND	20768	96.95%	Deny
ODP			
925 - EVV VISIT VERIFIED	36949	17.86%	Pay & List
927 - UNITS BILLED EXCEED UNITS VERIFIED IN EVV	5318	2.57%	Deny
928 - EVV VISIT NOT FOUND	164610	79.57%	Deny
CHC			
925 - EVV VISIT VERIFIED	914484	59.07%	Pay & List
927 - UNITS BILLED EXCEED UNITS VERIFIED IN EVV	22988	1.48%	Deny
928 - EVV VISIT NOT FOUND	610599	39.44%	Deny

Claims Verification Steps

- If ESC 928, “Visit Not Found”, is setting, providers should complete the following steps to determine the cause of the error:

—STEP 1

- Determine if claims are being submitted to PROMISe™ before the supporting EVV data is sent to the DHS Aggregator.
- EVV data must be present in the DHS Aggregator before claim submission or the claim will be unable to identify the appropriate EVV data.
- To resolve this issue, confirm the visit being billed is present in the DHS Aggregator, then resubmit the claim.

Claims Verification Steps

— STEP 2

- Confirm your EVV data is being loaded properly to the DHS Aggregator
- If so, and you completed STEP 1, providers should confirm whether or not their EVV records are in “Incomplete” status.
- If an EVV record is in an “Incomplete” status, correct the EVV record, resubmit it to the DHS Aggregator then resubmit your claim.

— STEP 3

- If STEP 1 & 2 are completed, and data is still not reflecting properly in the DHS Aggregator, contact Sandata immediately to begin resolving the issue.
- When reaching out to Sandata, please be as specific as possible with the issue you are encountering.

Claims Verification Steps

To validate if your visits are “verified” or need corrections:

- All DHS Aggregator users should be checking the DHS Aggregator to ensure completed visits are in a verified status.
- Claims will fail EVV validation if the visit is not in a verified status.
- DHS Sandata EVV users check their DHS Sandata EVV system.
- HHAeXchange users should validate visits in HHAeXchange

If your agency is using a combination of these, then you will need to check all of them regularly.

**Reminder- DHS Aggregator is read-only.

Claims Verification Steps

- “Verified” status will show under the “Visit Status” in the DHS Aggregator portal.
- If the “Visit Status” shows “Incomplete” you will need to make corrections/updates to the visit.

Visit Review Results

Account: mgreen@mailinator.com • LOG OUT

AGENCY: Agency Provider Tra • CLIENT: Enter Client • MEDICAD ID #: Enter Medicaid ID # • EMPLOYEE: Enter Employee • EMPLOYEE SSN: Enter Employee SSN

DATE RANGE MM/DD/YYYY: 09/24/2017 to 09/30/2017 • VISIT STATUS: All • FILTER VISITS BY: All Exceptions

SEARCH CLEAR EXPORT

Show Advanced Filter Options

Show: 50 per page Show Display Options

Showing 1 to 50 of 58 entries

Client Name	Employee Name	Service	Visit Date	Scheduled Time In	Scheduled Time Out	Scheduled Hrs	Call In	Call Out	Call Hours	Adjusted Hours	Bill Hours	Visit Status	Do Not Bill	Actions
(860)727-8976	000-00-0267		09/30/2017				01:33 PM	01:59 PM	00:26		00:26	Incomplete	<input type="checkbox"/>	
(860)216-1575	000-00-0198		09/30/2017				10:42 AM	06:32 PM	08:10		08:10	Incomplete	<input type="checkbox"/>	

DHS System Implementation Updates

DHS Sandata EVV System

- The DHS Sandata EVV system is only available for fee-for-service providers.
- Self-paced, online training is available for new providers or provider administrators wanting to use the DHS Sandata EVV system.
 - Registration Link:
 - » <https://sandatalearn.com?KeyName=PAEVVAgency>
 - » **Select-** “Pennsylvania DHS – Electronic Visit Verification (EVV) Self-Paced Training for Agency Providers”
- 588 unique provider agencies have completed training and received Welcome Kits to date

DHS Sandata EVV System

- It is expected that fee-for-service providers planning to use the DHS Sandata EVV system are actively using the system now or will begin using the system as soon as possible.
- If you are a fee-for-service provider who completed training, but have yet to receive a Welcome Kit for your agency within **5 business days** of completing your training, please contact PAC at 800-248-2152 or papac1@dxc.com
- Please check spam/junk folders for Welcome Kit and/or login credential emails.

Alternate EVV Certification Process

- Providers using Alternate EVV systems currently testing: 46
- Providers using Alternate EVV systems in receipt of production credentials: 192
- Providers using Alternate EVV systems with confirmed data in the DHS Aggregator: 71
- Providers using Alternate EVV systems still needing to contact Sandata to confirm data: 121

Alternate EVV Certification Process

- The following Alternate EVV vendors have completed the PA Alternate EVV certification process with Sandata to date:

1. ALORAHEALTH
2. AXISCARE
3. BAYADA
4. BRIGHTTREE
5. BRIGHTSTAR
6. CAREFICIENT
7. CARESMARTZ360
8. CAREWHEN
9. CELLTRAK
10. CLEARCARE
11. DELTA HEALTH TECH INC
12. DIRECT CARE
INNOVATIONS
13. E SYSTEM
14. ERSP
15. E-SYSTEM
16. GENERATIONS
HOMECARE SYSTEMS
17. HORIZON INFORMATION
18. JULISOFT

19. KALEIDA SYSTEMS INC
20. KALEIDOSCOPE
21. KANTIME
22. KDG
23. KICHI CODE
24. MATRIXCARE
25. MAXIMCARE MOBILE
26. MITC
27. POST-EVV
28. PUBLIC PARTNERSHIPS LLC
29. ROSMARK
30. SALO SOLUTIONS
31. SETWORKS
32. TANGRA
33. THERAP
34. UNICENTRIC
35. UNISON WORKFORCE

▶ Alternate EVV Certification Process

Do you have Alternate EVV Production Credentials?

Did you complete ALL the steps?

- As noted previously, less than half of the 192 agencies with production credentials have completed all 8 steps. You are required to confirm your data is flowing correctly in the DHS Aggregator with the Sandata Alternate EVV Support team.
- If you have not sent PAALTEVV@Sandata.com an email confirming your live data is in the DHS Sandata Aggregator, please do so as soon as possible.
- As we get closer to Jan 1, 2021, DHS expects support call volumes to increase.

Alternate EVV Certification Process

- When contacting the Sandata Alternate EVV support team, detailed setup information is required, including what systems are used to collect EVV data.
- Missing information may lead to additional delays for PA EVV program compliance.
- Sandata Alternate EVV Support Team may be contacted by phone at 855-705-2407 or by email at PAAltEVV@sandata.com

Frequently Asked Questions

Frequently Asked Questions

Question: How do providers fix the problems associated with ESC 927 and ESC 928?

Answer: Please refer to the EVV ESC guidance for more information related to these and other EVV ESCs. The EVV ESC guidance document may be found on the DHS EVV website here:

<https://www.dhs.pa.gov/providers/Documents/Billing%20Information/EVV%20Error%20Service%20Codes.pdf>

Frequently Asked Questions

Question: When using telephony visit verification, can staff use their personal cell phones? As an example, some staff do not have a smart phone and the client does not have a cell or land line.

Answer: Yes, personal cell phones can be used for telephony visit verification if there is a way to capture location, such as a fixed visit verification device. Fixed verification devices typically generate a code or token to be included at the time of the service to verify the location.

It is the provider's responsibility to ensure caregivers have the necessary equipment for EVV.

Frequently Asked Questions

Question: We have clients that live in limited to no cell service areas. What is the solution for providers in this situation as there are many dead cell coverage areas in PA?

Answer: If a caregiver is unable to check-in or check-out during a visit, the provider/provider agency will need to enter a manual visit into the EVV solution being used. In addition, many EVV systems allow visits to be captured even if the phone does not have service. The EVV visit collected while the phone was in offline mode would then upload to the EVV system once internet service is regained. Please discuss these options with your selected EVV vendor as all EVV systems offer different features.

Frequently Asked Questions

Question: Is it okay for a caregiver to clock in when the participant is at the grocery store or a doctor's visit?

Answer: The provision of services must still follow program office policies outlining service definitions and service plan requirements. EVV does not change the delivery of services.

Frequently Asked Questions

Question: Who should be contacted if participants are missing or being rejected?

Answer: If participants are missing or being rejected, please contact the Provider Assistance Center (PAC): papac1@dxc.com

EVV Contacts

Who Do I Contact ?

- COVID-19 Information
 - <https://www.dhs.pa.gov/providers/Providers/Pages/Coronavirus-2020.aspx>
- Program Related Questions
 - DHS RA-PWEVVNOTICE@pa.gov
- DHS Sandata EVV system questions
 - PAC Support papac1@dx.com
- Alternate EVV users not using HHAeXchange
 - Sandata Alternate EVV Support PAAltEVV@sandata.com
- HHAeXchange ALT EVV System questions
 - HHAx support@hhaexchange.com
PAintegration@hhaexchange.com

Thank you!