# Electronic Visit Verification (EVV) Public Meeting

March 24, 2023



### EVV Public Meeting Reminders

- All phone lines are muted
- Questions should be submitted through the chat feature
- We will not be answering questions submitted live during today's presentation as we will be reading and answering questions submitted through the Resource Account ahead of today's meeting as shared through listserv emails
- New questions will be addressed after the presentation through updates to the FAQs on the DHS EVV website
- Please reference the slide number, if applicable, when you submit your question





- Overview of EVV
- Home Health Care Services (HHCS) EVV Implementation
- Introduction of new Error Status Codes (ESC)
- Reminders and Updates
- Program Office Updates
- Question and Answer session
- EVV Contacts



The 21st Century Cures Act is a federal requirement that requires the EVV system verify:

- 1. Type of service provided
- 2. Individual receiving the service
- 3. Individual providing the service
- 4. Date of the service
- 5. Location of the service delivery
- 6. Time the service begins and ends



### Mobile Application

Federal law required data	Sandata Mobile Connect	Telephonic Visit Verification
Date of Service	Captured Automatically	Captured Automatically
Start/End Time of Service	Captured Automatically	Captured Automatically
Type of Service	Entered or selected by caregiver in app	Service ID entered by caregiver
Location of Service	Captures GPS coordinates at clock in and clock out	Captured Automatically
Individual Receiving Service	Caregiver enters client identifier into app	Captured Automatically
Individual Providing Service	Caregiver's login for the app	ID entered by caregiver
		pennsylvania

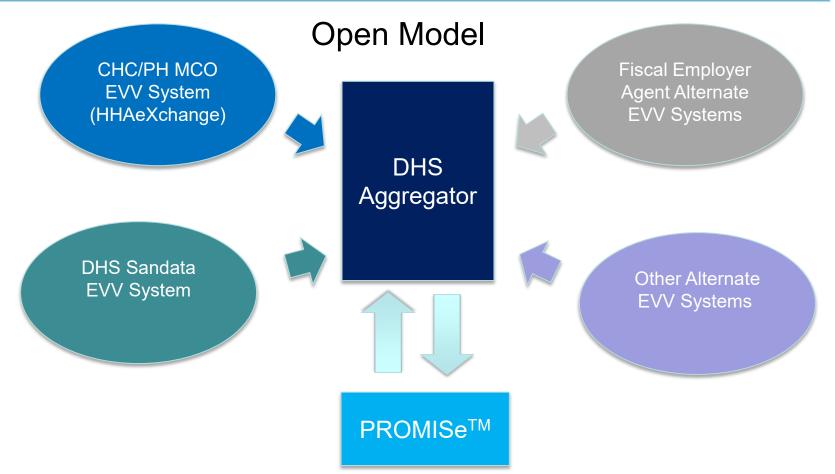
DEPARTMENT OF HUMAN SERVICES

### DHS EVV Process Example

1.Caregiver Arrives in Home or Community	2.Caregiver uses mobile application or telephony to check in	3.Caregiver provides service
4.Caregiver uses mobile application or telephony to check out	5.If corrections are needed Provider Agency makes any corrections through the web portal to EVV Data	6.Data is submitted
	7.Standard claim or encounter billing	



## DHS Aggregator



When an EVV service is on the claim(s) transaction, the claim is validated against EVV visit data in the DHS Aggregator



## Participant Cell Phone Use

- QUESTION: Are caregivers permitted to use participant cell phones for mobile clock in/clock out?
- **ANSWER:** DHS does not prohibit the use of participant cell phones for EVV. A participant's home phone, cell phone, or smart device may be used for clock in/clock out if the participant has agreed to its use. CHC MCOs are able to implement additional criteria to meet the minimum requirements of EVV. Providers are to consult with each individual MCO on EVV requirements.





#### Home Health Care Services (HHCS) EVV Implementation



#### Home Health Care Services (HHCS) EVV Implementation

- The 21<sup>st</sup> Century Cures Act mandated that states implement EVV for Home Health Care Services (HHCS) by January 1, 2023.
  Pennsylvania has applied, and been approved for a Good Faith Effort Exemption, which will expire December 31, 2023 for HHCS.
- The soft launch period began August 10, 2022. This means that HHCS EVV Error Status Codes are setting but are in a Pay & List disposition prior to January 1, 2023.
  - For claims that contain HHCS services during this time, 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. However, EVV Error Status Codes (ESCs) will set without impacting claim payment. During this period, the claim will continue to successfully pass DHS EVV validation and process through the normal claim's adjudication process.
- As of January 1, 2024, claims will be impacted



#### Home Health Care Services (HHCS) EVV Implementation

- The Department published the list of Medicaid State Plan and Waiver services identified as HHCS that are subject to EVV. This list is available on the DHS EVV website at: <u>https://www.dhs.pa.gov/providers/Billing-</u> <u>Info/Pages/EVV.aspx</u>.
- Medical Assistance Bulletin number 05-22-09, 07-22-03, 54-22-01, 59-22-01, 00-22-06,"Electronic Visit Verification Requirements for Home Health Care Services in the Feefor-Service Delivery and Managed Care Delivery Systems", was issued on August 10, 2022. This bulletin applies to OMAP, ODP and OLTL and is available at: https://www.dhs.pa.gov/docs/Publications/Documents/FOR

MS%20AND%20PUBS%20OMAP/MAB2022081001.pdf.





# Error Status Codes Used in Home Health Care Services for EVV



## HHCS EVV Error Status Codes

- ESC 935: EVV HHCS Visit Verified
- ESC 936: Duplicate Matching EVV HHCS Visits Found
- ESC 937: HHCS Units Billed Exceed Units Verified in EVV
- ESC 938: No Matching HHCS EVV Visit Found





# Reminders and Updates



## EVV Compliance Reminders/ Tips

#### 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.



### Sandata Releases

- Sandata communicates via email to provider agencies when staff need to log out during systems outages.
- Providers should review notifications prior to releases and inform staff when they will need to be logged out of the system.
- The Sandata Customer Care portal is accessible to find the release notes and can be found via this link: <u>https://sandata.zendesk.com/hc/en-us</u>



## EVV PCS – DHS EVV System Reminders

- Providers using the DHS EVV System should remind their direct care workers to update the Sandata Mobile Connect (SMC) application following a Sandata Mobile Application Release.
- Staff are to communicate with their Administrators on issues with SMC and/or Telephonic Visit Verification (TVV). Administrators should reach out to the Provider Assistance Center (PAC) only when they cannot find resolution to SMC password resets.
- It is highly suggested all agencies using the DHS EVV System have at least two (2) EVV administrators in the potential event of the primary administrator's unavailability.



### Manual Edits and Compliance Rates

- The Department continues to perform targeted outreach to provide technical assistance to providers that have either not submitted EVV data or have a high percentage of manual visits.
- The EVV Compliance report is currently available in the EVV Aggregator. This report allows providers to efficiently determine their quarterly compliance percentage.
- Providers should self-monitor their EVV compliance using the reports available and work to improve areas of non-compliance.
- DHS *will be* reducing the manual edit compliance rate threshold in the future. DHS is developing an updated MA Bulletin to reflect the new manual edit compliance rates.



### Manual Entry Compliance Reminder

- Caregivers, including direct care workers for participants who self-direct their care, should only be manually entering their visits on an emergency basis.
- EVV visits should be entered in real-time to accurately collect the information needed for the visit, including real-time clock in and clock out as well as location capture, in order to be compliant with EVV requirements.
- Any entity who is found to consistently not comply with EVV requirements could have adverse actions in the future.



### Manual Edit Compliance Contact Reminder

 To ensure DHS can appropriately contact providers, please make sure legal entity information, including contact information, is up-todate and correct in all DHS systems.



**QUESTION:** What is the specific requirement to capture location?

**ANSWER:** The EVV requirement is that the location be captured electronically. CMS requires verification of location at the start/end of a service. GPS coordinates (latitude and longitude) are required for both mobile and fixed visit verification (FVV) devices. Location is not tracked throughout services provided in the community. The location should be captured when a caregiver arrives at a participant's house to assist with grocery shopping (for example) and again after they return from the store.

#### \* Please note: (0.0, 0.0) is NOT a valid latitude and longitude value.

The GPS coordinates will be captured in the DHS Sandata mobile application at check-in and check-out. The perimeter for locations is set at 1/4 mile in the DHS Sandata EVV system. However, even if the recorded location is outside the 1/4 mile perimeter, this will not cause an exception in the DHS Sandata EVV system. The provider will be able to enter multiple addresses where services are provided and these addresses can be updated as needed. If an error occurs, any system errors may be corrected through the web portal by the administrator.

3/23/2023



**QUESTION:** What is the specific requirement to capture location for telephony?

**ANSWER:** Telephony requires the originating phone number and telephony PIN. As such, telephony may only be used with a landline.





## **Program Office Updates**





# Office of Developmental Programs Updates



## ODP Updates

 ODP has incorporated EVV Manual Threshold compliance into their Claims Documentation review process, which is a component of ODP's Quality Assessment and Improvement (QA&I) process. For more information on claim documentation requirements see https://www.paproviders.org/wpcontent/uploads/2022/08/Bulletin-00-22-03-Technical-Guidance-for-Claim-and-Service-**Documentation-1.pdf**, Technical Guidance for Claim and Service Documentation.





# Office of Long Term Living Updates



## OLTL Updates: Manual Edit Threshold

- OLTL is still seeing a high percentage of providers who are not meeting the compliance threshold for manual edits.
- As a reminder, a provider's manual edit threshold percentage is based upon that agency's Fee-for-Service (OBRA waiver and Act 150) clients ONLY. Agencies who provide services to both CHC and FFS clients should closely monitor FFS visits because FFS clients are typically fewer, which can impact a provider's manual edit percentage.
- The "EVV Compliance" report on the PA-DHS Aggregator will show all visits – CHC and FFS. Visits within this report cannot be filtered by payer.



# Office of Medical Assistance Programs

# Bureau of Fee-for-Service Programs Updates



### OMAP BFFSP Updates

- BFFSP is Encouraging all HHCS Provides to start requesting their Direct Care Worker get familiar with calling into EVV for HHCS. FFS is seeing a high volume of claims that are hitting against edit 938-No Match Found in EVV- Effective 1/1/2024 HHCS claims will result in a denial if there is no matching HHCS visit found in EVV.
- If any FFS Providers have any questions regarding EVV/Claims, please submit question to FFS Resource Account below:
- <u>ra-pwffs\_evv@pa.gov</u>



# Office of Medical Assistance Programs

# Bureau of Policy, Analysis and Planning Updates



### OMAP PCS Background

- Federal regulations prohibit Medicaid payment for PCS provided by a parent or legally responsible relative (LRR). Even though the Department pays Home Health Agencies, CMS considers parents working for Agencies to be "paying parents."
- The Department received CMS approval through an 1135 waiver to pay parents and LRRs to provide PCS to their children for the duration of the public health emergency (PHE).
- This authority ends on May 11, 2023. The Department began looking at ways to continue to allow paying parents and LRRs as caregivers beyond the end of the PHE.



### OMAP Solution and Provider Notification

- On December 13, 2022, the Department met with CMS regarding solutions, and on February 3, 2023, CMS provided guidance that paying parents and LRRs can continue under the home health benefit as long as aides meet federal and state requirements.
- In the near future, the Department will announce that all new requests for pediatric shift care services rendered to MA beneficiaries by Home Health Aides will be classified as HHCS. A new procedure code will be established for these services previously provided as PCS using procedure codes S9122 and T1019 that will be considered HHCS for both the FFS and managed care delivery systems.



## OMAP Next Steps

- The Department will issue a bulletin and publish a notice announcing the new procedure code and effective date that Home Health Agencies will use to bill for newly designated HHCS after the PHE ends.
- The Department will issue a bulletin announcing the effective date that providers must adhere to the HHCS electronic visit verification requirements bulletin for new pediatric shift care service requests.
- The Department will provide guidance to MA MCOs regarding their role and responsibilities regarding pediatric shift care services at the end of the PHE.



### OMAP Next Steps (Continued)

- The Department will submit a State Plan Amendment to CMS to add pediatric-related language to the home health services section of Attachment 3.1A/3.1B.
- The Department's guidance and updated code lists will be posted to the EVV web page. Providers are encouraged to check the Department's website for updates at: <u>https://www.dhs.pa.gov/providers/Billing-</u> <u>Info/Pages/EVV.aspx</u>.
- The Department is looking to develop a new Home and Community Based Services or Demonstration waiver to, in part, memorialize this change in services.





### **EVV Contacts**



## EVV Contacts

- For technical issues such as DHS Sandata account assistance, Welcome Kit reissuance, account unlock issues for DHS Sandata EVV, please contact Provider Assistance Center (PAC) – papac1@gainwelltechnologies.com or 1-800-248-2152.
- For issues related to HHAeXchange and CHC billing, please contact HHAeXchange at <u>support@hhaexchange.com</u> and/or the appropriate CHC-MCO. Vendors needing to integrate with the CHC-MCO HHAeXchange should contact <u>PAintegration@hhaexchange.com</u>
- For issues related to PH-MCO claims and billing questions, please contact the appropriate PH-MCO.



### ALT EVV Vendor Contacts

- New HHCS/FFS providers who have completed and submitted the new provider enrollment form via the DHS Alternate EVV webpage and have questions specific to Alternate EVV can contact the Sandata Alternate EVV support team.
- For issues related to Alternate EVV such as account unlock issues for the DHS Aggregator Portal, integration status inquiries, or issues with the DHS Aggregator accepting file submissions.

Contact information is as follows: Phone: 855-705-2407 Email: <u>PAAltEVV@sandata.com</u>





• For general EVV program issues or requests to be added to the EVV Listserv, please contact EVV Resource Account at:

RA-PWEVVNOTICE@pa.gov

 Providers with technical issues reaching out to PAC or Sandata Alternate EVV team may copy DHS on those emails at the following email address:

RA-PWEVVISSUES@pa.gov

• **Providers with support ticket numbers they wish to escalate** with DHS should reach out to DHS at the following email address:

RA-PWEVVISSUES@pa.gov



#### Sandata EVV Customer Care Portal (Sandata On-Demand):

www.sandata.zendesk.com

Sandata EVV Training Video Library: https://fast.wistia.net/embed/channel/48v2w2h4by

#### Sandata Learning Management System (for Administrators):

https://sandatalearn.com

# DHS EVV Webpage: <a href="https://www.dhs.pa.gov/providers/Billing-Info/Pages/EVV.aspx">https://www.dhs.pa.gov/providers/Billing-Info/Pages/EVV.aspx</a>

- DHS EVV Sandata Training Manuals
- DHS EVV Medical Assistance Bulletins
- DHS EVV Frequently Asked Questions (FAQs)
- ODP EVV Technical Guide



### EVV Claims Resolution Contacts

**For billing issues** such as why EVV ESCs are setting, what the EVV ESCs mean, questions about what is in the Aggregator, please contact the following program office claims:

ODP Claims Resolution Section	1-866-386-8880, <u>RA-odpclaimsres@pa.gov</u> Hours of operation: Monday-Friday, 8:30 am - noon and 1 - 3:30 pm
OLTL Provider Call Center	1-800-932-0939, choose option 2 Hours of operation: Monday-Thursday, 9 am - noon and 1 - 4 pm
OMAP Provider Inquiry Line	1-800-537-8862, choose option 2, then option 6, then option 1 Hours of operation: Monday-Friday, 8:00 am - noon and 12:30 pm - 4:30 pm





### **Question and Answer Session**





# Thank you!

