

Welcome!

**We will be starting shortly**

**Reminders**

- Please hold feedback/comments until the end.
- Enter feedback via the Chat box or raise your hand and we will call on you to ask your question.
- Keep microphones muted unless you are speaking.

# Electronic Visit Verification

Samantha Hicks and Sarah Schultz

# What can you expect to learn today?

- What Electronic Visit Verification (EVV) is and why it's required
- The State's EVV model and implementation timeline
- Exceptions to EVV data requirements
- On-boarding and training expectations
- Data privacy/security
- Appeal rights

# What is Electronic Visit Verification (EVV)?

- EVV is an electronic system used to record data about the delivery of in-home or community based services where people receive support with Activities of Daily Living (ADLs) and/or Instrumental Activities of Daily Livings (IADLs).
- The EVV system must collect the following data points:
  1. Type of service performed
  2. Who received the service
  3. Date of service
  4. Location of service delivery
  5. Who provided the service
  6. When the service begins and ends

# Personal Care Services in Minnesota

Based on CMS guidelines, the services that are in-scope as personal care services include:

- Personal care assistance (PCA)
- Community First Services and Supports (CFSS)
- Consumer Directed Community Supports (CDCS) – personal assistance
- Consumer Support Grant (CSG) – personal assistance
- Crisis Respite
- Homemaker – assistance with personal cares
- Individual Community Living Support
- Individualized Home Supports
- Night Supervision
- Respite Care (in-home)

# Why Is the State requiring EVV?

- Minnesota is federally required to implement EVV for all Medicaid personal care services and home health services that require an in-home visit by a direct support worker.
  - If the State does not implement EVV we will continue to receive federal penalties which depletes resources that could otherwise be used to help support people in Minnesota.
- DHS's role in the implementation of the EVV requirement is that of a facilitator.
  - DHS wants to make it as easy as possible for providers to successfully implement EVV in accordance with federal requirements.

# How was EVV planned in Minnesota?



# Stakeholder Feedback

People who use services, providers of services and workers recommended a successful EVV system:

- be as mobile as the people using it and support individuals wherever the person lives.
- avoid rigid scheduling rules, allowing for ease of schedule changes based on the person's needs
- have flexibility and adaptability related to internet access or mobile devices, able to accommodate limited or no internet access where personal care service are delivered
- prioritize ease of use, regardless of language or ability
- minimize privacy intrusion, including those created by collecting the location of service delivery



# Key Legislative Principles

Minnesota Statute [256B.073](#) indicates DHS must ensure that the EVV system:

- is minimally administratively and financially burdensome to a provider;
- is minimally burdensome to the service recipient and the least disruptive to the service recipient in receiving and maintaining allowed services;
- considers existing best practices and use of electronic visit verification;
- is conducted according to all state and federal laws;

# Hybrid EVV Model

- Providers have an option between
  - State-selected EVV system, or
  - An alternative EVV system that meets minimum requirements
- Providers select an EVV system that works best for their business, while maintaining accountability to the state by submitting data to an aggregator
- Providers may choose to use the state-selected EVV system at no cost to them

# State- Selected EVV System

- DHS has partnered with HHAeXchange (HHAX) to provide the state-selected EVV system for providers use at no charge.
- HHAX was chosen through a request for proposal (RFP) process that included system demonstrations and stakeholder feedback about the EVV systems.
- Providers can choose to use HHAX or an alternative EVV system that meets minimum requirements
- Data from the Providers' chosen EVV systems will be sent to the state's HHAX data aggregator.

# FMS Vendor Selection

<u>FMS provider</u>	<u>EVV system</u>
Accra Consumer Choice	Cashe Software
Acumen Fiscal Agent LLC	Direct Care Innovations (DCI)
Alliance Health Services	Cashe Software
Aspen FMS Inc.	Cashe Software
Best Care	HHaEXchange: Annkissam
Consumer Direct Care Network	HHaEXchange
CDI (Consumer Directions Inc.)	Cashe Software
GT Independence	Caregiver by GT Independence
Lifeworks Services Inc.	Cashe Software
Mains' I Financial Management Services	Sandata
MRCI WorkSource	Cashe Software
Orion ISO Inc.	Cashe Software
Palco Inc. FMS	N/A
Partners in Community Supports Inc. (PICS)	HHaEXchange

# EVV Project Implementation Timeline

Phase One: FMS fee for service (FFS) go-live **before the end of June 2022** \*MCO

Phase Two: Remaining PCS (FFS) aiming for before the end of **2022**.

Phase Three: MCO PCS go-live beginning **early 2023**

Phase Four: Home Health Services (FFS + MCO) go-live prior to **end of 2023**

# Services in each Phase

## **Phase One: FMS fee for service (FFS) go-live before the end of June 2022**

Consumer Directed Community Supports (CDCS)

Consumer Support Grant (CSG)

## **Phase Two: Remaining PCS aiming for before the end of 2022**

Personal care assistance (PCA)

Community First Services and Supports (CFSS)

Crisis Respite

Homemaker – assistance with personal cares

Individual Community Living Support

Individualized Home Supports

Night Supervision

Respite Care (in-home)

# Soft Launch

- The expectation at go-live is that provider agencies will be connected to the EVV data aggregator and using their provider's selected EVV system for in-scope services.
- This launch will take time, and there will be bumps in the road. Therefore, we have allowed time for people to learn the system and adapt to using it before we expect full compliance.
- DHS planned the soft launch to delay compliance requirements to give providers time to on-board workers and people using services.
- EVV implementation has been planned not to interfere with the payment of wages to workers or the billing of DHS by provider agencies. Those requirements and processes are still the same.

# On-boarding/Training

- Provider agencies are responsible to train and onboard people receiving services they support and their direct support workers to use their EVV system.
- Training plans include a “training-the-trainer” approach for provider agencies.
- Because of the hybrid model the tools that providers use to assist direct support workers and people using services to use the EVV system will vary.
  - HHAX provides a variety of tools to provider agencies to assist them in training direct support workers and people using services to use the EVV system.



# Technical Assistance

- Given the flexibility of the hybrid model, there will be differences between providers' EVV systems. Each provider agency chooses which EVV system to use.
- The person you provide services to and their FMS provider are the best place to go for questions about the EVV technology, or questions about any specific impacts on a person's services.
- FMS providers have staff that will assist people to begin to use EVV and with any issues they have using their EVV system.

# Exemptions: Live-in caregivers

- Minnesota will not be requiring live-in caregivers to meet Electronic Visit Verification (EVV) requirements based on the CMS published guidance in an [August 8, 2019 information bulletin](#) stating states do not need to apply EVV requirements when the caregiver providing the service and the person using the service live together.
- Provider agencies and Financial Management Service (FMS) providers must use their chosen EVV system to have the live-in caregiver enter the time they work each day manually rather than needing to interact with the EVV system throughout each day.

# Exemption: Safe at Home Program

- Safe at Home is a statewide address confidentiality program administered by the Office of the Minnesota Secretary of State. It is governed by [Minnesota Statutes, Chapter 5B](#) and [Minnesota Rules Chapter 8290](#).
- Safe at Home is designed to help people who fear for their safety maintain a confidential address. Many times program participants are survivors of domestic violence, sexual assault, or stalking.
- People in the Safe at Home program will be exempt from GPS tracking/location verification.

# Accessing the State-provided EVV System

- DHS is using a mobile application first approach with HHAX.
  - At go-live available in English, Spanish, Hmong, Russian, Somali and Vietnamese
- In the exception case where the “Device Option” is unworkable, DHS is developing process and policy on other options (including Interactive Voice Response/IVR) to make available to Providers.
  - At go-live IVR is available in English, Spanish, Hmong, Russian, Somali and Vietnamese
- Providers who are using a different EVV system maybe using other methods for data collection.

- DHS has been asked questions about appeal processes related to EVV.
- Because EVV has no bearing on which services someone is authorized to receive or how much of that service they are authorized to receive, it doesn't alter appeal process for people using services.
- Just like time and activity documentation today, workers and provider agencies are required to provide accurate information to the EVV system. There aren't new penalty, termination, or appeal processes related to EVV for workers or provider agencies.

# Data Privacy/Security

- EVV systems must meet HIPAA standards for data privacy and security like any electronic record containing private health information.
- The information entered into the EVV system by the worker and approved by the person using services or their representative is available **only to staff with a business need to access the data at the:**
  - Provider agency supporting the person and paying the worker
  - DHS
  - Centers for Medicare and Medicaid Services
- DHS has a data retention schedule of seven years for the data in the state's data aggregator. The state-provided EVV system itself does not archive data.

# Communications

- You should expect the next communications regarding starting to use EVV to come from the person you provide service to and from the FMS agency.
- Because FMS providers will be on-boarding at different rates it's expected that workers will start to be communicated with at different times and have different instructions.
- DHS will be communicating process and updates throughout each phase of EVV implementation.
  - DHS will continue to meet with stakeholders to learn what is working and what is not working to improve EVV implementation in Minnesota.

## Reminders

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- Or raise your hand and we will call on you to ask your question.
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# Thank You!

**Samantha Hicks & Sarah Schultz**

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