

Frequently Asked Questions (FAQs)

General Questions

What is EVV?

Electronic Visit Verification system (EVV) is a system that electronically captures details of home visits and services provided by caregivers while ensuring that beneficiaries are receiving the support they require, and the rendered services are billed accurately.

Why is DC Medicaid/DHCF implementing an EVV system?

In December 2016, Congress passed a federal law called the 21st Century Cures Act (PL 114-255) requiring State Medicaid programs to mar an EVV system for home and community-based services. Under Section 12006 of the 21st Century Cures Act, all state Medicaid programs must implement an EVV system to verify personal care services by January 1, 2020 and an EVV system for home health services by January 1, 2023. CMS is allowing states flexibility to implement EVV systems after the deadline if the state is showing a good faith effort at compliance.

Do I have to use the EVV system once it is operationalized?

If you are receiving in-home assistance through a personal care assistant or skilled/certified care, you will be required to use EVV to track the time the provider(s) is in your home.

OR

If you provide a service subject to EVV and your claims are sent to Medicaid for payment (known as fee-for-service), you must use EVV beginning on October 2020.

OR

Yes, in order to continue to provide these services and be reimbursed by DC Medicaid/DHCF you will be required to use this EVV system. If you do not use this system, claims submitted outside of this system will be denied.

What are the benefits of an EVV system?

It captures individual caregiver's activity (i.e., check-in, check-out and service performed), which reduces the likelihood for error or fraud. It increases efficiency because reporting is automated and claims submission is cleaner. It improves quality of care by making workers' activities transparent and measurable. It can also be used as a tool to provide more visibility on an individual's current health status in a systemic way, to thereby improve tracking and supports to improve health outcomes for the beneficiary.

Who is DC Medicaid's contractor for the EVV system?

DC Medicaid/DHCF has contracted with Sandata Technologies LLC for the EVV system.

PROVIDER QUESTIONS

Who is paying for the EVV system?

Providers required to use EVV have the option to use the District's EVV system or implement their own system that conforms to District requirements. There is no cost to any individual for using an EVV system or to any provider for using the District's EVV system. DC Medicaid/DHCF will pay for the EVV system, including EVV system implementation, provider agency EVV training, and ongoing recurring EVV fees. Providers who choose to use an alternate EVV system may have some additional costs associated with purchase, implementation and ongoing support of the EVV system.

Will agencies need additional staff to manage EVV?

Agencies will need to identify a staff member to serve as the EVV administrator/point of contact – this can be an existing staff member as long as the individual complies with requirements for the EVV administrator role. Additionally, it is very important that you make sure that both your caregiver staff and office staff are fully trained and compliant with EVV, which will ensure a smooth and successful EVV implementation for your agency.

Do I have to buy my caregivers smartphones?

No, you will not be required to buy your caregivers smartphones for EVV. The ability to use the District's Mobile Visit Verification app is PREFERRED, however the ability to use alternative methods for inputting EVV visits will be available.

Does every employee have to have an email address? What if they do not have a work email or a personal email? Yes. Every employee who has access to the Sandata EVV system will need a unique email address. Free email accounts can be easily obtained online.

What browsers does the EVV system support?

Sandata EVV system supports the following browsers: Microsoft Internet Explorer v9 or higher, Mozilla Firefox v44.0 or higher. Other browsers have not been certified to provide full functionality of the EVV system and are not recommended.

Will EVV be used to document skilled nursing services?

No, only PCA services will be subject to EVV effective October 2020. Skilled nursing services are not included in EVV at this time but will be required in the next phase of implementation.

What IDD waiver services are subject to EVV?

In-Home Supports, Personal Care Services, Respite and Supported Living (Periodic Only).

Does EVV apply to services provided to individuals living in a nursing home or assisted living facility?

No. EVV is not required for nursing or assisted living facilities.

Who is responsible for installing the Sandata EVV system?

The system does not require installation as a unit. Providers will access the Sandata EVV system via the web. Personal care aides will access it via a phone-based app – in that respect, the PCAs will need to install the app on their mobile phones to be compliant.

Will Sandata help agencies upload data into the EVV system?

For the initial implementation DHCF will populate the employee data from MMIS. After implementation each agency will be required to maintain their employee information. Sandata will offer a spreadsheet option for agencies serving 80 or more individuals. Those agencies will be able to populate the spreadsheet with their direct care workers and individuals using Medicaid-covered services. When the agency returns the completed spreadsheet, Sandata will do a one-time upload of the data into the EVV system. After the initial upload, the agency will be responsible for maintaining EVV data.

What does the caregiver do if there is no phone to call in or call out?

The EVV system requires the direct care worker to use their mobile phone to record their visit using Sandata's app they have installed for the EVV system. Visit capture information is dependent on access to Wi-Fi. If Wi-Fi is not available at the beneficiary's home the app will still capture the start and end times and will upload the visit information once Wi-Fi is available. However, if no phone is available (mobile or land line), we recommend the caregiver write down their visit start and end times and provide it to their agency for entry upon their return. The provider agency will need to use the EVV

system, specifically the visit maintenance module, to manually input the visit information. The provider will also need to document the reason for the manual visit edit. There will be a clear reportable audit trail in the EVV system of all the manual activity.

I am a caregiver, how long is it between when visit information is entered and when I can see it in the Sandata EVV portal?

Visit information is generally available in the Sandata EVV Portal in near real time.

How does this process work when the patient is assigned to an MCO?

Caregivers will follow the same process of capturing visits in EVV for individuals assigned to MCOs, using SMC or TVV.

SMC = Sandata Mobile Connect

TVV = Telephony Visit Verification

Do I still need to contact the MCO to whom my patient is assigned in order to obtain the Prior Authorization or does Sandata do that now?

Each MCO will send Prior Authorizations (PA) via a data feed directly to the Sandata EVV system. If the Prior Authorization in EVV has expired or there is not one on file, the MCO can update the Authorization or issue a new PA via the data feed to Sandata.

CONSUMER DIRECT QUESTIONS

Why is DC Medicaid/DHCF implementing an EVV system?

Congress passed a federal law in December 2016 requiring State Medicaid programs to implement an EVV system for some home and community-based services. The law is commonly referred to as the 21st Century Cures Act. The provisions of the Cures Act that address EVV can be found at section 12006 of the H.R. 34 (114th Congress) (2015-2016).

Do I have to use EVV?

Yes, beneficiaries must use EVV in order to continue to receive Participant-Directed Community Support (PDCS) services so that their Participant directed Worker (PDW) will be paid. Workers must also use the EVV system to ensure payment. If beneficiaries and workers do not use this system, Consumer Direct DC cannot process time sheets for payment.

What are the benefits of an EVV system?

It captures PDW's activity (i.e., check-in, check-out and service performed), which reduces the likelihood for error or fraud. It increases efficiency because reporting is automated and timesheet submission is cleaner. It improves quality of care by making PDW's activities transparent and measurable.

Who is DC Medicaid's contractor for the EVV system?

DC Medicaid/DHCF has contracted with Sandata Technologies LLC for the EVV system.

Who is paying for the EVV system?

There is no cost to an individual for the EVV system. DC Medicaid/DHCF will pay for the EVV system, including EVV system implementation, EVV training and ongoing recurring EVV fees.

Do I have to buy my PDW smartphones?

No, you will not be required to buy your PDW smartphones for EVV. The ability to use Mobile Visit Verification is PREFERRED, and up to you and your PDW.

DC MEDICAID INDIVIDUAL/BENEFICIARY QUESTIONS

Is there a cost for using EVV?

There is no cost to any beneficiary for using the EVV System.

Do I need training for EVV?

You do not need training for EVV, but you can talk to your caregiver about EVV.

What happens if my caregiver runs errands for me before he/she comes to my house?

EVV does not affect access to care or provision of services. If the service your caregiver is providing allows errands, EVV permits the caregiver to complete errands for you prior to arriving at your home.

Does an EVV system require the Medicaid beneficiary to have an Internet connection, a cell phone, or a land line?

No.

MOBILE VISIT VERIFICATION AND TELEPHONY VISIT VERIFICATION

What happens if Sandata Mobile Connect app cannot connect to the system?

If GPS or cellular coverage are not a viable option for a specific visit, you can use telephony or manual visit verification to capture visit information.

What is telephony visit verification?

Telephony visit verification is the use of a landline for clocking-in/clocking out from the location of a caregiver's scheduled shift.

Are the phone numbers used to call in visit verification toll free?

Yes, and access is available 24/7.

Does the caregiver have to use a phone in the individual's home for telephony?

No, the caregiver can use any phone to record a visit using telephony.

MISCELLANEOUS QUESTIONS

How will the EVV system interface with the Medicaid Management Information System (MMIS)?

Beneficiary eligibility and prior authorization information will be transmitted from MMIS to the EVV system on a daily basis. The EVV system will transmit claims to the MMIS after visits are verified. MMIS will receive ongoing client and authorization data from the portal and claims will be submitted directly into the portal. Providers will continue to use the portal to see if claims were accepted.

How do I know if my claims were accepted or rejected?

You will continue to use the same process you use today to see if your claims were accepted or rejected. There should be few rejected claims since the EVV system makes sure you have all the required claims data prior to submission. You will also receive training on how you can resubmit claims through the EVV system if necessary.

Can schedules created in advanced be edited?

Yes, there are multiple ways to edit schedules, which will be covered in training.

Can I get information from the EVV System that I can use in my own billing system?

Reports from the EVV System can be exported in PDF, Excel and .csv formats.

Does EVV integrate with an EHR system?

Yes, EVV does integrate with other EHR systems.

EVV STAKEHOLDER'S MEETING 2020 0323 Q&As

(Below are the questions which were asked on the EVV Stakeholder's Meeting on March 23rd, 2020)

Q. Does this replace the current claim submitting?

A. This system is in conjunction with current claim submitting, in order to be paid for the services there must be a verified visit on file via the EVV system.

Q. Will this just be MMIS Claims or will it create claims for the MCOs as well?

A. The billing option allows the agency to create an 837p file to be submitted to the appropriate payer (DHC FFS or appropriate MCO).

Q. Are there any services that will be exempt from EVV?

A. Currently the only services subject to EVV effective 10/2020 are PCA services only. All other applicable Home Health Services are mandated 1/2023.

Q. How would this work for Supported Living?

A. Information forthcoming, at present we are focusing on PCA services only, unless otherwise indicated.

Q. Does this mean each PCA need to have device?

A. Each PCA will need access to a cellphone, the visit verification system by Sandata is an app that is downloaded directly to the PCA's cellphone.

Q. In this EVV process what is the part of MCO?

A. Please attend the MCO outreach and technical sessions.

Q. Does companion services will require this?

A. PCA services are presently within scope.

Q. Is it expected that the COVID-19 situation will impact the implementation timeline?

A. At present business as usual until further notice.

Q. When exactly will the providers be trained?

A. June/July 2020 training plan forthcoming.

Q. Will this just create MMIS Claims or will it create claims for the MCOs as well?

A. An 837p file will be created for the agency to submit to the appropriate payer.

Q. When will this be implemented? When will training start?

A. October 2020 anticipated implementation, Training to begin September 2020.

Q. Will this be tied into future PCRs?

A. Yes.

Q. Are individual providers expected to provide training to their respective Direct Support Professional who provide the services?

A. Sandata will provide training to the Agency who is then responsible for training staff and beneficiaries, more to come with training outreach.

Q. Who will be responsible for claim matching? MCO or Sandata?

A. The claim matching occurs by the MCO to the Sandata provided file.

Q. Will the providers be allowed to submit paper claim?

A. Yes, however the majority of our business is done via electronic claims, even if a paper claim is submitted there will still need to be a verified visit on file.

Q. When claims are adjudicated will it bump against the Sandata database and approve/reject?

A. Yes, in order for the claim to be paid, there must be an electronic verified visit to match the claim submission.

Q. Will they round up the units or round them down? Say the aide works for 7:55 mins. Will they pay for 8 hours?

A. Round up

Q. If the care receiver refuses to sign, is there an exception?

A. Yes, there will be exceptions made, those exceptions will be pointed out during training.

EVV STAKEHOLDER'S MEETING 2020 0420 Q&As

(Below are the questions which were asked on the EVV Stakeholder's Meeting on April 20th, 2020)

Q. Does Sandata verify the elements of the CURES Act are present prior to submitting the claim to the MCO?

A. Yes

Q. What services does this system apply to regarding HCBS Waiver providers?

A. DHCF has 2 waivers: 1) EPD and 2) IDD. Under the EPD waiver, PCA services are subject to EVV.

Under the IDD waiver the following services are subject to EVV:

- * Supported Living (Periodic Only),
- * In Home Supports,
- * Personal Care Services,
- * Respite

Q. Will there be any cost to providers or MCOs for the usage of the EVV application/system?

A. No there will not be any direct costs to providers for using Sandata EVV.

Q. Will the provider have to make sure that each person we serve have a computer for the DSP to sign on or will they have to download and app?

A. Direct care workers will need to download the app into their device. DHCF will not be providing cell phones to any direct care workers.

EVV STAKEHOLDER'S MEETING 2020 0518 Q&As

(Below are the questions which were asked on the EVV Stakeholder's Meeting on May 18th, 2020)

Q. Who should those providers who will be using their own EVV system contact at DHCF?

A. Those providers interested in using an ALT EVV system should reach out to DHCF at EVVInfo@dc.gov

Q. What is the status for EVV for DDS providers?

A. The EVV mandate under the, 21st Century Cures Act is designed to ensure that people get the care they are promised and to cut down on fraudulent care claims. Electronic visit verification is a process that uses electronic means to verify care provider visits for personal or home health care services.

Under the IDD waiver the following services are subject to EVV:

- * Supported Living (Periodic Only),
- * In Home Supports,
- * Personal Care Services,
- * Respite

EVV STAKEHOLDER'S MEETING 2020 0720 Q&As

(Below are the questions which were asked on the EVV Stakeholder's Meeting on July 20th, 2020)

Q. What services does this system apply to?

A. DHCF has 2 waivers: 1) EPD and 2) IDD. Under the EPD waiver, PCA services are subject to EVV.

Under the IDD waiver the following services are subject to EVV:

- * Supported Living (Periodic Only),
- * In Home Supports,
- * Personal Care Services,
- * Respite

This is based on CMS's definition of "Personal Care Services" which is not uniform across all the authorities under which it can be covered as a Medicaid benefit (state plan & waiver). CMS interprets "Personal Care Services" being services that are provided during an "in-home visit" that support Activities of Daily Living (ADL).

Q. Can you show the six required data elements again before this is over please?

A. The Cures Act requires EVV capture data 6 elements:

- Member receiving the services
- Caregiver providing the service
- Type of Service
- Location of the service delivery
- Date of the service
- Time the service begins and ends

Q. Who should those providers who will be using their own EVV system contact at DHCF?

A. Those providers interested in using an ALT EVV system should reach out to DHCF at EVVInfo@dc.gov