



Electronic Visit Verification Fact Sheet

What is EVV?

Electronic Visit Verification, also known as EVV, is part of the 21st Century Cures Act. It is a federal requirement for all states to verify certain things about all waiver-funded personal care services and all home health services.

What things need to be verified?

States are required to have EVV systems that verify the following for each personal care or home health service

- type of service
- person receiving the service
- date of service
- location of service
- provider
- time service begins and ends

When is it required?

EVV is required for all waiver-funded personal care services by January 1, 2019, and for all home health services by January 1, 2023.

What happens if states don't do it?

States will see a reduction in their federal funding for personal care and home health services.

When will DODD be using it?

EVV is currently used in Ohio for state plan services, including

- Private Duty Nursing
- State Plan Home Health aide
- State Plan Home Health Nursing
- RN assessment
- RN consultation
- Ohio Home Care Waiver Personal Care aide
- Ohio Home Care Waiver Nursing
- Ohio Home Care Waiver Home Care attendant

EVV must be used for services in DD waivers by January 1, 2019. Implementation will likely occur in the fall of 2018.

If it's not required until 2019, why would DODD implement it any earlier?

Early implementation allows DODD a period of time for providers to get used to verifying visits before there is any potential impact on a provider's claims.

How could EVV impact a provider's claims?

By January 1, 2019, personal care and home health claims will be compared with the EVV records for each visit.

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For example, if a provider works from 8 to 10 AM, the EVV record will reflect those times in/out. That 2-hour span equates to eight units of Homemaker/Personal Care, also known as HPC. If a provider submits a claim for 10 units, those additional units will not be paid.

What types of DD waiver services will be required to use EVV?

We know that Homemaker/Personal Care services, including participant-directed Homemaker/Personal Care, will require EVV. There are still some remaining questions that will need to be addressed prior to implementation, including

- Will EVV be used in group settings?
- Will EVV be used for providers who bill using a daily rate (Shared Living, DRA settings, etc.)

Does this apply to independent providers?

Yes, employees of agencies and independent providers delivering the specified services will be required to use EVV.

How does it work?

There will be three methods available to providers to verify visits.

- EVV – A device is mailed to the person’s home and all providers log in at the start and end of every visit. This is the primary method expected to be used in Ohio.
- TVV – The provider may use a landline or cellphone to call in and report the required information

- MVV – The provider may log into a website and enter all required information for each visit.

What kind of device is used for EVV?

The Ohio Department of Medicaid has purchased mobile devices that will be mailed to the home of people receiving any of the impacted services. They include GPS as a way to verify when services are delivered in the person’s home.

The devices have no functional cameras and are not able to store any data. They are merely used to transmit EVV information to the state’s vendor, Sandata. The information sent to Sandata is only visible to the provider that submitted it and to state agencies (DODD/ODM).

Will people with developmental disabilities and their families need to pay anything for EVV?

No. The state of Ohio is paying for all initial and replacement device costs. In addition, the devices are internet-equipped and are not using the household’s internet connection.

If, for some reason, the internet connectivity is poor, the provider can use TVV or MVV to verify the visit.

Are separate devices required for each provider?

No. Every independent provider or agency employee can use the same device. This includes both waiver and state plan providers. Each provider will have a distinct log-in.

How will training be provided?

Resources are already available on ODM's website that provide information about

- the devices
- how devices are requested, replaced, returned
- how providers request log-ins
- how providers use the devices and the website

Additional information and training will be available regarding implementation of EVV with DD waiver services as we get closer to implementation.

Training is mandatory for impacted providers. People receiving supports and their families are also encouraged to participate.

What if someone doesn't want the device in the home?

A person has the right to refuse to have a device in the home. However, all providers will still be required to verify visits using TVV or MVV.

There is also a requirement for the person receiving services to verify visit was provided. What happens if someone is unable to do it (unable to sign, speak, etc.)?

A person may use a digital signature or voice verification. An authorized representative may also be named to verify visits on the person's behalf.

The method used to verify visits must be mentioned in the ISP, including

- if the person has declined the EVV device in his home
- what method the person will use to confirm the visit (signature, voice, etc.)
- name of any authorized representative who will confirm the visit on the person's behalf

What happens when a visit ends while the authorized representative is sleeping or not available to verify the visit?

It is possible for the provider to send information to Sandata without another person verifying the visit. However, this will result in an "exception" or error message in the Sandata system. The provider will be required to log in to the website to note why no verification by the person receiving services or representative was provided.

When does the person or representative need to verify the visit? Is that required right as the provider is leaving?

It is preferable to have each visit verified as it ends. As noted above, there are times this can't happen.

DODD will be working with stakeholders to develop the policy around how EVV will be implemented in our system. One of the areas that will need to be addressed is can there be a gap between service and verification and, if so, how it may work.

Can the device be taken out of the home for use when visits start/stop away from the person's home?

Yes. The devices are portable.

However, when visits start/stop away from the person's home, the provider could use TVV or MVV to verify the visit.

What happens if the provider makes a mistake or needs to adjust information about the visit?

The provider can log into the website to add or change information, when needed.

What happens when a person receives waiver services while traveling?

The waiver provider will still be able to verify visits using TVV or MVV.

Will EVV replace billing through the Medicaid Billing System, known as MBS?

No. Claims will continue to be submitted as they are today.

Will EVV replace other agency time-keeping systems?

No. EVV is not a substitute for time-keeping or payroll functions of agencies. However, some agencies already use EVV systems and may go through a process to see if their current system can be approved by ODM.

If a visit lasts longer than expected, will a provider need to sign out at the original end time and sign back in?

ISPs often reference "typical," not concrete schedules. The provider is required to enter time in/out, even if the visit is longer than expected. As long as the units are available for the provider for the extra time and the time in/out correspond to the number of units submitted, the claim will pay.

What happens if my providers need to switch shifts?

Each provider will continue to use EVV, as directed, and claims will be paid as long as there are units available for the provider and the time in/out correspond to the number of units submitted.

What happens if providers do not use EVV, TVV, or MVV?

Providers may lose their certification and Medicaid provider agreements.