

# Electronic Visit Verification

Congress passed the 21st Century CURES Act in December 2016, which includes requirements for Electronic Visit Verification (EVV). This is a requirement for any provider receiving Medicaid Funding to provide the following services: Personal Care Services (Personal Assistance, Respite), Home Health Services

The 21st Century Cures Act requires six data points be collected:

* Type of Service
* Person Served
* Dates of Service
* Location of Service
* Name of Caregiver
* Times of Service

The eligibility of all members is verified by the agency prior to services being provided. EVV, or Electronic Visit Verification, is an electronic based system that verifies when provider visits occur and documents the precise time services begin and end. It ensures that persons supported receive their authorized services. EVV allows providers to confirm that services were actually delivered through a possible variety of electronic methods for each service like a GPS verification, phone call, electronic signature, and so forth. Failure to comply with this Federal mandate will result in a reduction in Federal Medicaid funding.

Core Services, as a provider of Personal Assistance Services (PA), is required to comply with the Federal mandate. Direct Support Professionals providing PA will electronically verify that the service was provided by using the Therap EVV system.

Program Director (PD) or designee is responsible for ensuring PA schedules are entered into the Therap system in advance of services being provided or as soon as possible. The Program Director is the dedicated staff assigned to work with the EVV system during and after business hours. The Case Manager is backup staff to manage the EVV system as it relates to billing, exception handling, scheduled and late and missed visit reporting. The agency on-call system will monitor after hours EVV. PD is responsible for ensuring electronic records such as DSP records and Person Receiving services records within the Therap system are accurate and complete. Program Director is responsible for ensuring Core Services is in compliance with EVV requirement.

EVV schedules will be created at least two weeks in advance of service provision. This will be done by Program Director, backup, or designee. Program Director will oversee EVV to ensure all exceptions are documented within 24 hours of occurrence.

All staff performing PA services are trained on how to use the EVV system. Program Director or designee is responsible for ensuring staff are trained on EVV requirements/system including ongoing training to address changes in requirements as they may occur. Training will include the use of GPS as a primary means of visit verification and telephony as a backup. Program Director, backup, or designee will populate the EVV database with newly hired employees including Social Security number.

Program Supervisors are responsible for reporting any changes to the PA schedules, including staff changes, date/time changes, or cancellations in a reasonable time frame to allow for the pertinent amendments to be made within the system.

Provider Agency is responsible for submitting claims to the MCO within 120 days of the date service was provided.

Provider Agency is responsible for notifying MCO of any member status changes, i.e hospitalizations, vacations, or nursing facility stays.

Provider will communicate with the MCO throughout the transition and before the beginning of service provision to ensure member meets all eligibility requirements.

Core Services On-Call policy will ensure that service provision occurs in accordance with members plan of care even if the primary staff is unavailable due to illness, injury, personal conflict, etc.

I have been trained on and understand Electronic Visit Verification.

Name: \_

Signature: \_

Date: \_