State of New Jersey - Department of Human Services

Electronic Visit Verification

Overview

December 10, 2020



Objectives

- Vision & North Star Principles
- The Federal EVV Mandate
- NJ EVV Implementation
 - What Does EVV Mean for me?
 - New Jersey Provider Options
 - The Road Ahead
- EVV Implementation Roles

NJ EVV Implementation: Vision & North Star Principles

Vision: To implement an EVV system that meets state and federal requirements with broad public support and a strong/enthusiastic stakeholder process.

We will serve people the best way possible.	We will create an electronic visit verification system that ensures New Jersey FamilyCare members receive the home care services authorized in their care plans.
We will keep communication clear and simple.	We will communicate to build understanding as we respond to the federal mandate and roll out this new technology.
We will support accurate and efficient data exchange.	The new system will support data exchange between providers and MCOs to promote strong collaboration, timely claims processing, and accurate payment.
We will use data to solve real- life problems	We will work with health plans and providers to use EVV data to reduce missed visits, address trends, and improve our program in measurable ways.
We will support our community through this change.	Empathy, positive energy, and collaborative focus will be our hallmark, internally and externally.

The Federal EVV Mandate

Section 12006 of the Twenty First Century Cures Act (Cures Act) and The Centers for Medicare & Medicaid Services (CMS) has mandated that Electronic Visit Verification (EVV) will be required for all Personal Care Services by January 1, 2020 and all Home Health Care Services by January 1, 2023.

NJ DMAHS received approval from CMS for a good faith effort exemption to the January 2020 implementation mandate. The new implementation deadline is **January 1, 2021**.

Mandate Requirements:

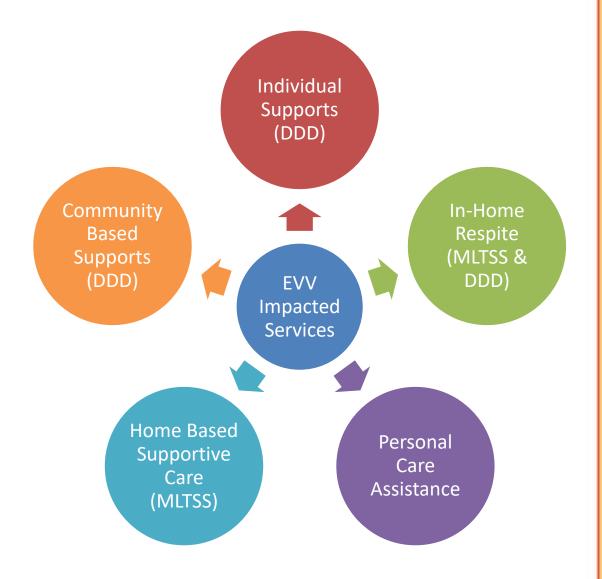
- 1. Type of service performed;
- 2. Individual receiving the service;
- 3. Date of the service;
- 4. Location of service delivery;
- 5. Individual providing the service;
- 6. Time the service begins and ends.



EVV Scope

Which providers will this impact?

All Personal Care Services requiring an in-home visit will need to use EVV, including self-directed services (except for live-in caregivers).



No Change to Services and Privacy

EVV does not change the services a member receives.
 Caregivers will continue to provide the authorized
 Medicaid-funded services a member needs.

 EVV systems are designed to protect privacy and to only collect information needed to verify that the service visit occurred.

 EVV systems do not record location information during the visit. Location information is only collected at the beginning and end of the visit.

How EVV Collects Visit Information

- When a caregiver begins a service visit, a mobile application on a smartphone is used to enter required service details at the start and end of the visit. A caregiver can also use a tablet as long as GPS services are available.
- A mobile application can be used even when there is no data or Wi-Fi connection. The information will automatically transfer from the device later when there is a data or Wi-Fi connection.
- All mobile applications are free.
- Caregivers who do not have a smartphone or GPS-enabled tablet will call a designated phone number from the participant's landline.
- The caregiver can request manual data entry through their provider in the event smartphone or landline communication is not possible.

Does EVV Apply if my caregiver lives with me?

- No, New Jersey is not requiring EVV where the person providing care is living with the person receiving care. CMS allowed states this flexibility for live-in, self-directed caregivers in their June 2019 Frequently Asked Questions document where they state:
 - EVV requirements do not apply when the caregiver providing the service and the beneficiary live together. PCS or HHCS rendered by an individual living in the residence does not constitute an "in-home visit".

 Does EVV apply if the caregiver is a family member who does not live with me?

 Yes. EVV makes no distinction between a family member versus a non-family member. Live in caregivers are exempt, regardless of relation.

- Will EVV be required for congregate residential services such as group homes?
 - No, CMS interprets the reference in the statute to an "in-home visit" to exclude PCA provided in congregate residential settings where 24-hour service is available. CMS finds that services provided in a congregate residential setting are distinct from an "in-home visit" subject to EVV requirements under the statute.

EVV Exemptions



- ☐ CMS allows the exclusion of EVV where the person providing care is living with the person receiving care. In this case, there is no "visit" to record as is required by the 21st Century Cures Act because the provider is living in the home.
- ☐ CMS interprets the reference in the statute to an "in-home visit" to exclude PCA provided in congregate residential settings where 24 hour service is available.

- What happens if a caregiver forgets to clock in or their phone dies?
 - The caregiver will provide the authorized service and need to coordinate with their employer to resolve clock-in and clock-out issues.
 - The EVV system will allow for manual entry of clock in and/or clock out.

 What vendor will New Jersey be working with to implement EVV?

 HHAeXchange is the State of New Jersey's EVV vendor. HHAeXchange will aggregate incoming EVV data from providers, Medicaid Fee for Service and Managed Care Organizations.

- How will EVV work for provider agencies?
 - The State has adopted a "No Wrong Door" approach: HHAeXchange will be consolidating all visit data, regardless of the EVV system being used.
 - Option 1: Use existing EVV system or a system you intend to implement by January 1, 2021, to collect and report EVV data.
 - Option 2: Use the Free EVV tools provided by (HHAeXchange) to collect and report visit data for all members enrolled in managed care <u>or</u> for all beneficiaries eligible to receive services under the NJFC Medicaid FFS program.
 - Option 3: Use Free Tools Provided by Each MCO.

- Will employers still be responsible for approving an employee's time?
 - It remains the responsibility of the employer to ensure accuracy and approval of employee timesheets.
- How will I be trained on EVV?
 - The MCO and/or HHAeXchange are conducting trainings tailored to provider agencies.
 - Specific direction is coming for members using selfdirected services.

EVV Timeline



The EVV Steering Committee meets monthly to review progress, obtain feedback, and make decisions, as needed.

Various Workgroups highlighted in the coming slides meet bi-weekly or as requested by the Steering Committee.

Communication opportunities Ongoing communication will occur for members through DMAHS and DDD webinars. For providers, trainings will occur through the EVV vendor.

The EVV mailbox is always available: mahs.evv@dhs.state.nj.us



The EVV Steering Committee

The EVV Steering Committee, comprised of various stakeholders, meets monthly to review progress, obtain feedback, and make decisions, as needed.

Role of the EVV Steering Committee

- Offer time and expertise in support of a January 1, 2021 EVV system implementation that meets state and federal requirements.
- Collaboratively and enthusiastically represent key perspectives of those who will use the EVV system, to ensure it serves people in the best way possible.
- Partner with the State, HHAeXchange, and MCOs on communication and training strategy that builds understanding of EVV requirements.



EVV Workgroups Member & Family Workgroup MCO Provider Implementation Workgroup Workgroup **EVV** Information Workgroups **Self-Direction** feed into EVV Technology (IT) Workgroup Workgroup Steering Committee

EVV Roles

DMAHS & DDD

HHA Exchange

MCO's

Self-Direction Fiscal Management Services (FMS)

- Oversee EVV implementation
- Collaborate with stakeholders on planning and troubleshooting
- Build understanding of EVV across the Medicaid/DDD community, including broad communications and training opportunities
- Develop DMAHS/DDD policy and procedure and update systems to meet the mandate
- Support operational connections and coordination between:
 - MCOs and FFS (DMAHS)
 - Gainwell and FFS providers (DDD)
- Provide compliant documentation to CMS
- **Provide visibility** into MCO, DMAHS FFS, provider and member visit information by aggregating through HHAeXchange services software
- Ensure EVV Cures Act Visit Compliance for NJ DMAHS and its providers by January 1, 2021
- Meet key milestones necessary for CMS System Certification
- Mitigate risks and ensure quality management concerns are brought to the attention of the EVV Project Team and the EVV Steering Committee
- Collaborate with HHAeXchange for training of providers and members
- Ensure payments are compliant with federal and state requirements
- Participate fully in EVV implementation
- Ensure Medicaid Members and staff are trained in the requirements and use of EVV
- Collaborate with FMS, DDD providers, MCO and HHAeXchange on training
- Ensure EVV data is successfully submitted to the MCO or State, as appropriate
- Participate fully in EVV implementation



Provider Role

- Ensure Medicaid Members and staff are trained in the requirements and use of EVV
 - Collaborate with DDD providers, MCO and HHAeXchange on providing training
- Ensure EVV data is successfully submitted to the MCO or State, as appropriate
- Providers needing training or more information can contact HHAeXchange, their contracted MCO, DDD, or DMAHS via the EVV mail box at mahs.evv@dhs.state.nj.us

To Learn More About EVV

- Division of Medical Assistance and Health Services Website
 - https://www.state.nj.us/humanservices/dmahs/info/ev v.html
 - The above website contains an FAQ, Newsletter,
 Presentations and other helpful materials
- New Jersey's EVV Mailbox at: mahs.evv@dhs.state.nj.us
- HHAeXchange: <u>support@hhaexchange.com</u>