

**State of New Jersey - Department of Human Services  
Division of Medical Assistance and Services**

# **Electronic Visit Verification**

**Home Care and Hospice Association  
2020 Virtual Annual Conference**

Wednesday, October 7, 2020

# Today's Agenda



- Welcome and Introductions
- The Federal EVV Mandate
- NJ EVV Implementation
  - Vision & North Star Principles
  - New Jersey Provider Options
  - The Road Ahead
- EVV Implementation Roles
- Questions & Contact

# 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.

**Future focus to include program integrity, CM/missed visits, data completeness.**

# 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.

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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.

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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.

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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.

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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.

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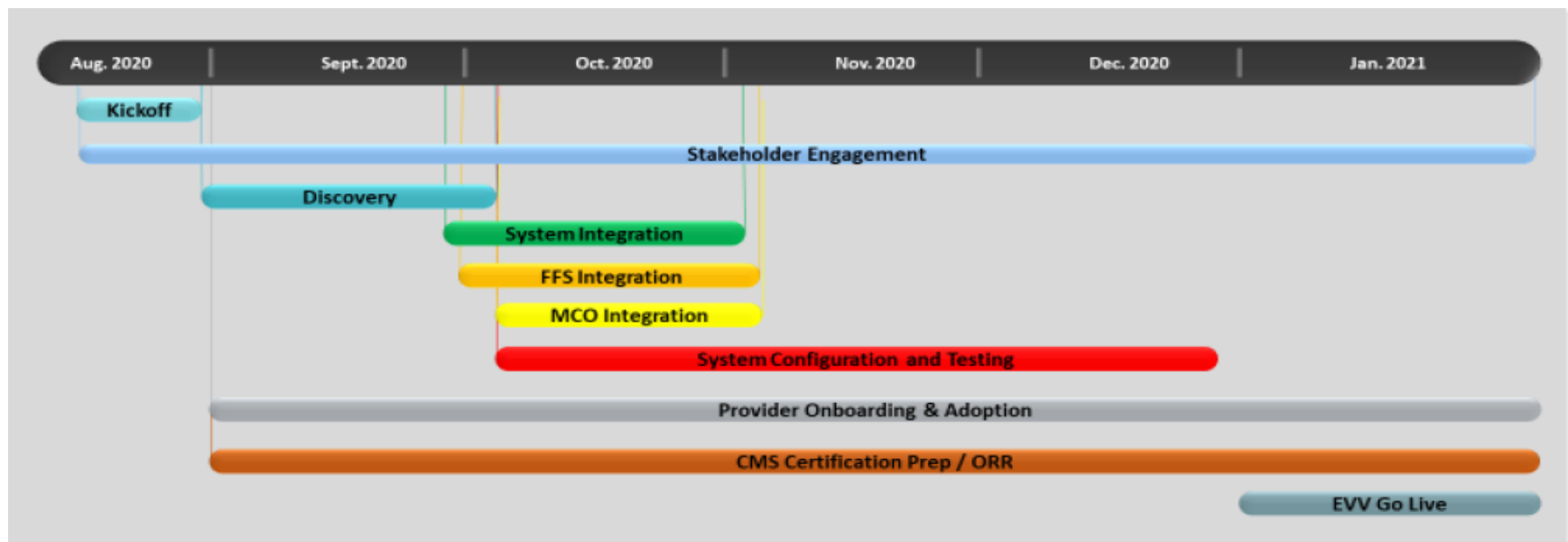
We will support our community through this change.

Empathy, positive energy, and collaborative focus will be our hallmark, internally and externally.

# New Jersey and EVV

- New Jersey providers must implement EVV by **January 1st, 2021**
- HHAeXchange has been selected as the State Aggregator
- The State has adopted a “No Wrong Door ” approach: HHAeXchange will be consolidating all visit data, regardless of the EVV system being used.
- Providers have 3 options for their solution:
  - **Option 1** – Use Free EVV tools provided by each Health Plan
  - **Option 2** – Use an existing EVV system to collect and report to each Health Plan
  - **Option 3** – Use the Free EVV tools from HHAeXchange

# The Road Ahead



**Communication** to members & providers will vary depending on need, but can include the following: Website Announcements, Newsletters, E-mail Blasts, Virtual Town Halls, and Training.

**The EVV Steering Committee** meets monthly to review progress, obtain feedback, and make decisions, as needed. The Committee has representation from HCHA.

# EVV Implementation Roles



- DMAHS
- EVV Steering Committee
- HHAeXchange (EVV vendor)
- MCO
- Provider

# DMAHS Role

- **Oversee EVV implementation**
- **Collaborate with stakeholders** on planning and troubleshooting
- **Build understanding** of EVV across the Medicaid community, including broad communications and training opportunities
- **Develop DMAHS policy and procedure** and update systems to meet the mandate
- **Support operational connections** and coordination between MCOs and FFS
- **Provide compliant documentation** to CMS



# EVV Steering Committee Role

*DMAHS has invited member representatives, provider representatives, self-direction partners, MCO leaders, and interagency staff to the EVV Steering Committee. Several volunteer workgroups are also being formed to provide technical support to the implementation and insight to the steering committee.*

- **Offer time and expertise** in support of an EVV system implementation that meets state and federal requirements
- Collaboratively **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

# HHAeXchange Role

- **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

# MCO Role

- **Offer tools that enable providers to successfully gather and submit EVV data**
- **Ensure EVV data is submitted to HHAeXchange**
- **Collaborate with HHAeXchange for training of providers and members**
- **Ensure payments are compliant with federal and state requirements**

# Provider Role

- **Ensure Medicaid Members and staff are trained** in the requirements and use of EVV
  - Collaborate with MCO and HHAeXchange on providing training
- **Ensure EVV data is successfully submitted** to the MCO or HHAeXchange, as appropriate
- **Participate fully and bring collaborative energy to EVV implementation**

# PCA CODE SET

| Service  | Unit of Service | Procedure Code |
|--|-----------------|----------------|
| Personal Care Assistance_15M                                 | 15 Minutes      | T1019          |
| Personal Care Assistance Group                               | 15 Minutes      | T1019_HQ       |
| Personal Care Assistance_PD                                  | Per Diem        | T1020          |
| Personal Care Assistance (Self Directed) Individual          | 15 Minutes      | T1019_SE       |
| Personal Care Assistance (Self Directed) Individual - Agency | 15 Minutes      | T1019_SE_UI    |
| Personal Care Assistance Group (Self Directed) Group         | 15 Minutes      | S5125_SE_HQ    |
| Personal Care Assistance (Self Directed) Group - Agency      | 15 Minutes      | S5125_SE_U3    |
| MLTSS Home Based Supportive Care                             | 15 Minutes      | S5130          |
| MLTSS Home Based Supportive Care - Self Directed             | 15 minutes      | S5130_HQ       |
| MLTSS In Home Respite  | 15 Minutes      | T1005          |
| DDD Individual Supports                                      | 15 minutes      | H2016HI        |
| DDD Individual Supports                                      | 15 minutes      | H2016HI22      |
| DDD Individual Supports                                      | 15 minutes      | H2016HIU8      |
| DDD In Home Respite  | 15 minutes      | T1005HI        |
| DDD In Home Respite  | 15 minutes      | T1005HIU8      |
| DDD Community Based Supports                                 | 15 minutes      | H2021HI        |
| DDD Community Based Supports                                 | 15 minutes      | H2021HI22      |
| DDD Community Based Supports                                 | 15 minutes      | H2021HI52      |

# Questions & Contact



- Questions?
- Contact Information:
  - EVV e-mailbox: [Mahs.Evv@dhs.state.nj.us](mailto:Mahs.Evv@dhs.state.nj.us)
  - HHAeXchange: [support@hhaexchange.com](mailto:support@hhaexchange.com)