

Electronic Visit Verification Information for Providers

WHAT IS EVV?

Electronic Visit Verification (EVV) is a technology solution that validates services billed for home and community-based personal care or home health services for actual visits made, providing accountability and safeguarding that beneficiaries who are authorized to receive services get the expected care.

In addition to combatting fraud, waste, and abuse in home healthcare, EVV is used to:

- Verify visits on a real-time basis, including date, location, type of service, individual(s) providing and receiving services, and duration of service(s).
- Validate hours of work for home health employees.
- Eliminate billing data entry mistakes.
- Reduce costs related to paper billing and payroll.

WHO IS IMPACTED?

Phase I – January 1, 2020

- Personal Care services described in Sections 1905(a)(24), 1915(i), 1915(j), and 1915(k) of the Social Security Act, as well as any waiver of the State Plan (including 1915(c) waivers and 1115 demonstration projects).

Phase II – January 1, 2023

- Home health care services described in Section 1905(a)(7) of the Social Security Act and provided through the Medicaid State Plan, as well as any waiver of the state plan.

WHY DO PROVIDERS HAVE TO IMPLEMENT EVV?

Patented EVV technology has existed for over 20 years, but it is now required for Medicaid programs through Congressional enactment of the 21st Century CURES Act. Failure to implement or demonstrate “good faith effort to comply with the requirements” by the January 1, 2019 compliance date for personal care services will result in a gradually reduced Federal Medical Assistance Percentage (FMAP) (0.25% to 1.0%).

MODELS OF EVV:

There are multiple model options for implementing EVV. Wyoming is currently considering four of those models, which are summarized below, including the model type, a brief overview, pros and cons, and a list of states that have adopted each model.

Model	Overview	States Using or Plan to Use
Provider Choice	Providers adopt and self-fund EVV technology. Must meet the requirements for state reporting. A data aggregator* is deployed to gather information from all vendors.	Washington, Missouri, New York, Alaska, Utah, Washington, West Virginia
State Mandated-External Vendor	State contracts with vendor(s) and mandates provider participation. State pays for the EVV system and receives FMAP. Inputs data directly into a database, no aggregator needed.	Arizona, Connecticut, Florida, Illinois, Kansas, Mississippi, Montana, Ohio, South Carolina, Washington DC, West Virginia,
State Mandated In-House System	State creates, runs, and manages own EVV system either in house or with contractor support.	Maryland, Georgia, Massachusetts
Open Vendor	State selects a vendor but also allows providers that already have EVV in place to continue using their own systems. A data aggregator is deployed to gather data from all EVV systems.	Louisiana, Texas

Visit Verification Options:

If Wyoming elects to implement one of the models above that would require the State to purchase a vendor EVV solution, any, or multiple, of the following technologies might be a component of that solution. These technologies are deployed to perform the actual visit verification and would interface with the Wyoming Medicaid IT Enterprise to provide that information back to the State.

* A data aggregator is a system that takes data from all EVV systems, applies standardized business rules to ensure proper and consistent visits, and generates alerts when standards are not met.

Technology	Overview
Web-based application on a GPS-enabled device	Providers check into and out of the client location using a location-services enabled application that runs in the browser on a mobile device such as a smart phone or tablet.
Mobile application on a GPS-enabled device	Providers check into and out of client location using a location-services enabled application downloaded to a mobile device such as a smartphone or tablet
In-Home One-Time Password Device	Provider validates location by accessing a password provided by a device installed in the client’s location.
Interactive Voice Response (IVR)	Provider uses the client’s land line to call a toll-free number and provider verification information.
Beacon Devices	Usually used in conjunction with Mobile application, this small device is installed in the recipient’s home and provides geo-location when mobile application is offline

Wyoming EVV Deployment Proposed Timeline

Wyoming Department of Health is working to meet the requirements of the 21st Century Cures Act by implementing a compliant EVV solution using the following high-level timeline.

Milestone	Target Date
Release EVV Request for Proposals	September 2019
Award EVV Contract	November 2019
Contract Negotiations	December 2019 – March 2020
System Design, Development, and Implementation	March 2020 – February 2021
Provider Onboarding and Training	September 2020 - February 2021
Personal Care Services Mandatory Use Deadline	March 1, 2021
Home Health Services Mandatory Use Deadline	February 1, 2023