

## AGENDA

- Program Updates
  - Electronic visit verification (EVV)
  - Temporary provider reimbursement rate and self-directed budget increases due to COVID-19 end September 1st
  - Reinstatement of provider certification renewals
  - Electronic process for corrective action plans (CAPs)
  - Medication Assistance Training during COVID-19
  - Deadline extension for the Provider and Case Manager Cost and Wage Surveys
- Monthly Training Session - Provider Training Series Module #3 - Notification of Incident Process - [Slidedeck](#)

## TOPICS

### **Electronic Visit Verification**

Electronic Visit Verification (EVV) is a federal mandate that requires service verification for specific services. The Division of Healthcare Financing (Division) has until 2021 to come into compliance with this federal requirement. As a part of that effort, an EVV program is being piloted for self-directed services. Throughout July, ACES\$ offered training on the use of the program. The program is anticipated to be available for use during September and October, with full use required for billing for specified self-directed services by the end of the year.

Please be sure to address questions and concerns you have regarding the use of EVV with self-directed services to ACES\$. Please note that program rules and requirements remain in place. If you have suggestions on potential changes, please contact your Provider Support Specialist (PVS) as we will be gathering information about this process during the coming months.

### **Temporary provider reimbursement rate and self-directed budget increases due to COVID-19 end September 1st**

The Division would like to remind providers that the temporary increase of some Comprehensive and Supports Waiver (DD Waiver) service reimbursement rates and a portion of participant self-directed budgets due to the COVID-19 health emergency will end effective September 1, 2020. DD Waiver reimbursement rates will revert to the rates published in the Comprehensive and Supports Waiver Fee Schedule that was in effect as of November 18, 2019. Failure to use these rates when submitting claims for services delivered after August 31, 2020 may result in a denial of the claim.

Employers of Record (EORs) will be responsible for submitting new Pay Rate Revision Sheets to revert self-directed employee wages back to the wage that was in effect prior to the COVID-19 increase. If the EOR fails to submit the new Pay Rate Revision Sheets and overspends the self-directed budget, they will be subject to termination of self-directed services, as outlined in Chapter 46, Section 12 of the Department of Health's Medicaid Rules.

### **Reinstatement of provider certification renewals**

In March of 2020, the Division made the determination to pause provider certification renewals due to the public health emergency. All providers, including case managers, have had their certification expiration extended by seven (7) months. At this time, the Division has determined that certification renewals will resume with virtual site visits rather than in-person site visits. As in the past, providers will receive notice that their expiration is upcoming via the provider portal, and are required to upload the appropriate documentation and information. The area PVS will contact providers regarding virtual support throughout the certification renewal process.

### **Electronic process for corrective action plans (CAPs)**

The Division has implemented an electronic system for the issuance, submission, review, and tracking of provider corrective action plans (CAPs). When an issue arises that the Division determines merits corrective action, notice will be sent to the provider via an email from the provider portal. The provider is required to submit their CAP electronically via the provider portal. Please ensure that any submissions meet the specified deadlines, as these time frames and have been coded into the electronic CAP system. PVS are available to assist with questions, concerns, and technical difficulties, but submissions for new CAPs must be entered in the electronic CAP system through the provider portal.

### **Medication Assistance Training during COVID-19**

The Division has extended all current student and instructor Medication Assistance Training certificates until the end of the current public health emergency. When deemed safe and prudent to do so, Division-supplied training will resume and all current trainers and students will have the opportunity to recertify without expiration or penalty as long as they schedule their training within thirty (30) days. Please keep in mind that it is best practice to have medication assistance occur only by those individuals who have been previously trained.

### **Deadline extension for the Provider and Case Manager Cost and Wage Surveys**

In response to several requests for additional time to complete the provider and case manager cost and wage surveys, the Division is extending the submission deadline to Wednesday, September 2nd. If you have submitted your survey, the Division would like to extend a big thank you! If you have not submitted your survey, please do so no later than 5:00PM on Wednesday, September 2nd.

As a reminder, Chapter 45, Section 11(c) of the Department of Health's Medicaid Rules establishes that, upon request, providers shall submit cost data, claims data, and participant needs assessment data to the Division. If you have questions about the survey, please contact Guidehouse at [wyddccwsurvey@guidehouse.com](mailto:wyddccwsurvey@guidehouse.com). If you have questions about the DD Rate Rebasing project, please contact Shirley Pratt at [shirley.pratt@wyo.gov](mailto:shirley.pratt@wyo.gov). Thank you in advance for your participation in this important survey.

## **WRAP UP**

***Next call scheduled for September 28, 2020***