Electronic Visit Verification Implications for Agencies

Home health agencies are under pressure to continue providing high quality care, while also facing challenges to reduce costs and keep pace with changing regulations.

Executive Summary

Healthcare organizations providing Personal Care Services (PCS) or Home Health Care Services (HHCS) to the Medicaid population will soon be required, by law, to implement Electronic Visit Verification (EVV). While the need to comply with the new legislation is well known within the industry, the details may not be as clear. This paper strives to clarify the requirements and the best practices for meeting them.

This paper also looks beyond the compliance requirements and explores the tremendous value created by EVV for everyone within the system - patients, caregivers and providers.

EVV regulatory compliance is often viewed as a cost, however, forward-looking agencies are focusing on the value EVV provides. Patients receive better quality of care and are ensured that the full scope of services they are entitled to are delivered. Caregivers benefit from increased security and reduced administrative burden. Agencies realize increased efficiency and productivity, risk reduction, and cost savings. In fact, as agencies manage an increasingly complex web of government entities, patients, employees, and managed care organizations (MCO), the right technology solutions become less a compliance cost and more an investment in the future.

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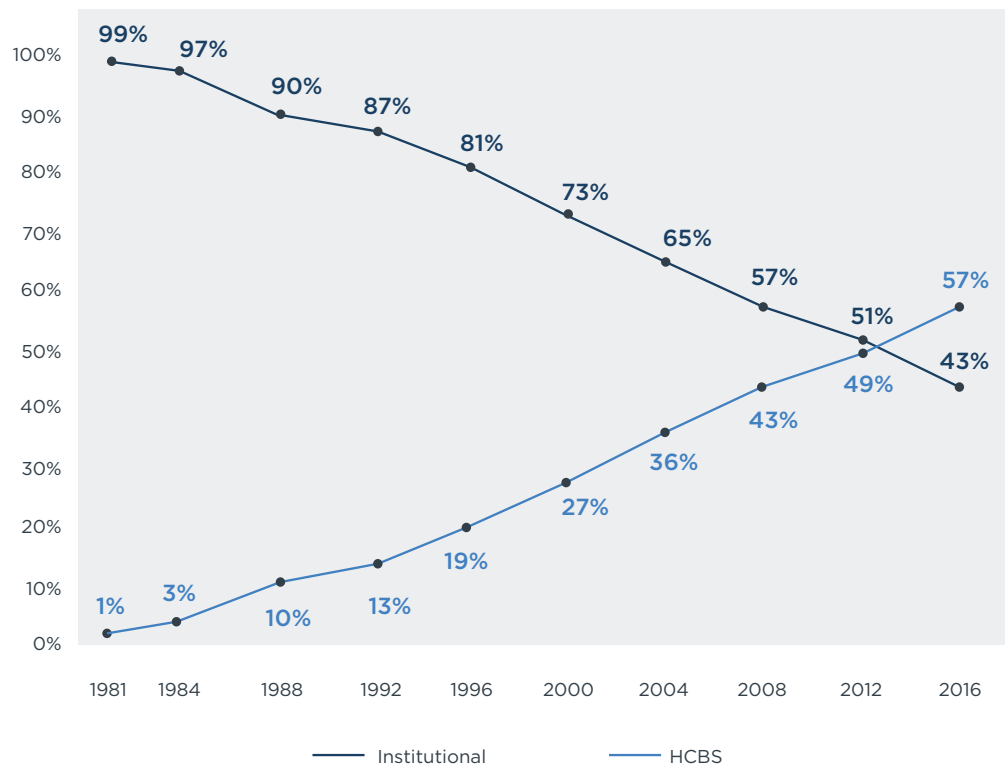## Care is Transitioning to the Home and Community

Many studies support, for reasons of patient satisfaction and cost, the continued transition of health care from institutional settings to home and community settings. In addition, the aging population is driving the demand for in-home personal services. Yet, today agencies operate on very tight margins, and the timely receipt of reimbursement for services rendered requires strict compliance with complex requirements for data. And, looking ahead, the transition to outcome-based reimbursement will require agencies to optimize delivery, increase client satisfaction, and meet additional data requirements in order to receive referrals, renew contracts, and win new business.

There is a strong continuing trend that Medicaid long term care delivery is increasingly home and community-based. Spending on HCBS increased 10% in FY2016, whereas institutional service spending (nursing homes and the like) decreased 2% in FY 2016. Home and Community Based Services (HCBS) are now a higher percentage of spend than Institutional spend, and as of FY 2016 HCBS represented 57% to Institutional 43%. Below is a chart that shows this trend.

Medicaid HCBS and Institutional LTSS Expenditures as a Percentage of Total Medicaid LTSS, Expenditures, FY 1981–2016

Trend Towards Home and Community Based Care

Medicaid HCBS spending has eclipsed spending on Institutional Care.

Source IAP - Medicaid Innovation Accelerator Program.
https://www.medicaid.gov/medicaid/ltss/downloads/reports-and-evaluations/ltssexpenditures2016.pdf

Most importantly, EVV supports delivery of home and community-based care for patients dependent on caregivers – so they can receive the high quality of care they deserve, while remaining in their home where they are most comfortable.

Overview of EVV Regulations

The signing of the 21st Century Cures Act signaled a recognition of the need for incremental oversight in Medicaid by requiring Electronic Visit Verification (EVV) for certain types of services delivered in a patient's home. For states, agencies and self-directed patients, this has a number of implications – both for meeting these requirements, and, most importantly, for implementing a compliant solution that advocates for beneficiaries, protects caregivers, and enables agencies to operate more efficiently.

21st Century Cures Act Section 12006

Signed into law in December 2016, the 21st Century Cures Act mandates the use of Electronic Visit Verification (EVV) for Personal Care Services (PCS) and Home Health Care Services (HHCS) delivered to Medicaid beneficiaries. States who fail to comply with the federal requirement will be penalized with a reduction in their Federal Medical Assistance Percentage (FMAP) funding.

H.R. 6042 Signed July 30, 2018

H.R. 6042 provides an additional year for states to comply with the Cures Act, moving the EVV implementation deadline for Personal Care Services out by one year.

Federal Deadline (H.R. 6042):

Personal Care Services:
January 1, 2020

Home Health Services:
January 1, 2023

- January 1, 2020 is the new deadline for Personal Care Services
- Federal Medical Assistance Percentage (FMAP) penalty for states is also delayed by one year
- Required the Centers for Medicare and Medicaid Services (CMS) to convene at least one public meeting in 2018 to solicit ongoing feedback from Medicaid stakeholders regarding EVV

What Does the Legislation Require?

The 21st Century Cures Act requires that the system must be able to electronically verify the following for PCS or HHCS delivered to the Medicaid population:
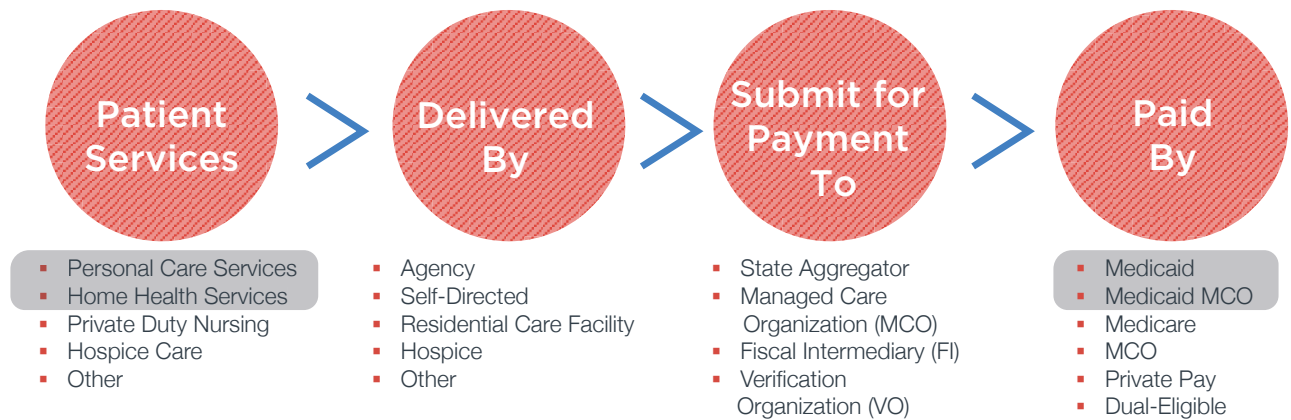
1. the type of service performed;
2. the individual receiving the service;
3. the date of the service;
4. the location of service delivery;
5. the individual providing the service; and
6. the time the service begins and ends

Do the regulations apply to me?

Centers for Medicare and Medicaid Services (CMS) has mandated that Personal Care Services and Home Health Services are affected by EVV regulations, and are included under the mandate when they are paid for by Medicaid. The federal requirement can be expanded by states as they issue guidance around EVV implementation, and some states have included Private Duty Nursing as well.

21st Century Cures in Practice: Does it apply to me?

Patient Services > **Delivered By** > **Submit for Payment To** > **Paid By**

Patient Services	Delivered By	Submit for Payment To	Paid By
▪ Personal Care Services ▪ Home Health Services ▪ Private Duty Nursing ▪ Hospice Care ▪ Other	▪ Agency ▪ Self-Directed ▪ Residential Care Facility ▪ Hospice ▪ Other	▪ State Aggregator ▪ Managed Care Organization (MCO) ▪ Fiscal Intermediary (FI) ▪ Verification Organization (VO)	▪ Medicaid ▪ Medicaid MCO ▪ Medicare ▪ MCO ▪ Private Pay ▪ Dual-Eligible

States Issue Guidance for EVV Implementation

State EVV deadlines may be accelerated, and can cover more services than the federal mandate requires.

As mandated by the 21st Century Cures Act, implementation deadlines are:
- January 1, 2020 (as amended by H.R. 6042) for Personal Care Services (PCS)
- January 1, 2023 for Home Health Care Services (HHCS)

However, EVV implementation is led by the states, who are making their own decisions with respect to data required, technology solutions, and timing. Many states are already moving forward aggressively and will continue to do so – despite the additional time given by the new EVV bill.

What is Happening in My State?

Trend Towards Open EVV Model

States are trending towards open EVV, with over 70 percent of states indicating a preference for an open model.
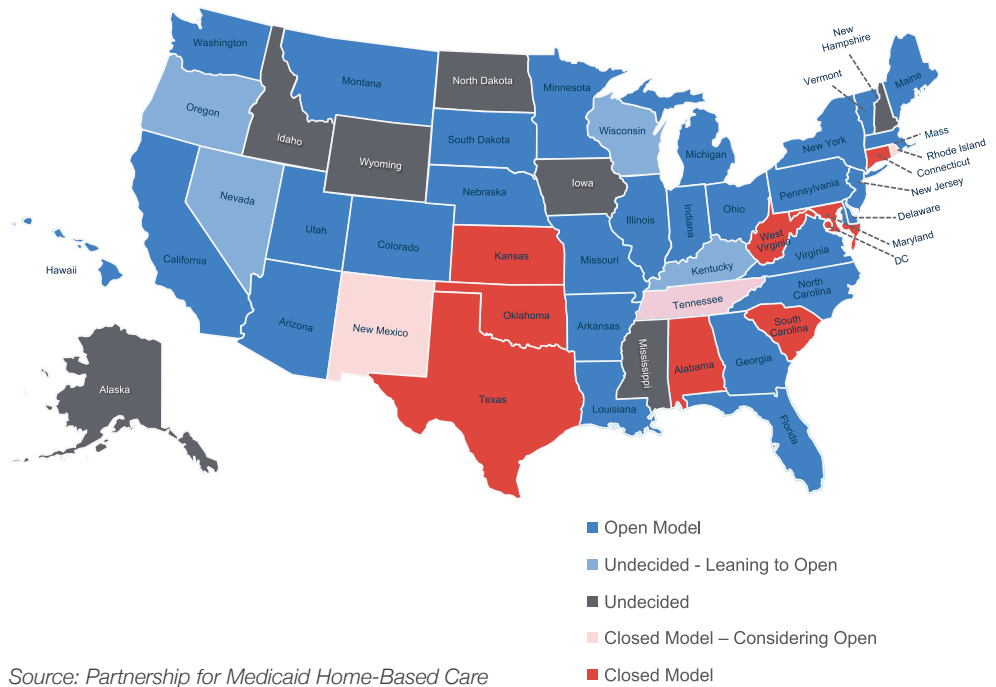
Source: Partnership for Medicaid Home-Based Care
For more information go to: medicaidpartners.org

What Do the New EVV Requirements Mean for Your Agency?

Agencies cannot afford to delay EVV decision making and implementation. While the federal EVV implementation deadline has been pushed back until January 2020, many states are moving forward with 2019 deadlines.

Our guidance to agencies - start now to take advantage of immediate ROI. We recommend that agencies in open states get started, in order to design an optimal workflow and allow time for implementation and testing. There are two parts to EVV compliance:
1. Collect the right EVV data, in the right format. Use EVV to benefit your agency, its caregivers, and the patients you serve.
2. Transmit EVV data to states and MCOs who mandate it, in real-time. Be compliant so your agency gets claims paid quickly, with lower audit risk.

Beyond Compliance – EVV Creates Value for Patients,Caregivers and Agencies

While Medicaid PCS and HHCS fraud reduction was one of the early and significant drivers of the EVV legislation, the initiative goes well beyond that. With an aging population and rising healthcare costs, the right technologies must become enabling tools to improve homecare delivery. In fact, EVV implementation will leave agencies much better positioned as healthcare demands rise and the industry continues to evolve toward pay-for-performance models.

In this challenging environment, agencies will need to find new ways to be competitive. EVV done right will provide benefits beyond simple compliance – supporting beneficiaries, caregivers, and agencies.
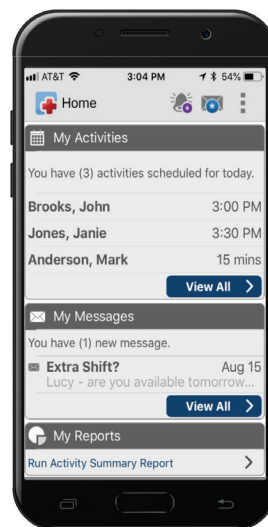
Patient Value

Patients depend on the services they receive, relying on effective care and compassionate caregivers to get them through each day. EVV systems can provide visibility to activities in the field and give administrators the ability to adjust staffing to best support their patients. For example, if a caregiver is running late from another appointment, EVV alerts can flag the situation, so that the administrator can dispatch a replacement for care situations that are time-sensitive.

By using EVV, administrators can be sure that caregivers have arrived at the location and performed each service according to the care plan. Caregivers can easily access the history of services delivered, including specific care instructions, for each patient. If the patient's condition changes, the caregiver can alert supervisors and document any concerns so that the full team is best able to support the patient. Overall, EVV systems support the beneficiary by ensuring that all authorized services are delivered, the schedule is being adhered to, and that the patient is receiving the most effective care possible.

Support Caregivers and Patients

Provide critical information on the mobile so caregivers can best serve their patients.

Client Information

Up-to-date Schedules

Care and/or Activity Plans

Forms and Assessments

Care Team Information

On-screen Notifications

Secure Messages

GPS-based Visit Verification

GPS-based Time and Mileage

Full Documentation

Secure Messages

Secure Photos

Client Signatures

Real-time Clinical /Operational Alerts

Caregiver Value

Caregivers are passionate about serving their patients, spending their days out in the field making lives more comfortable. Using EVV enables them to be more closely connected to the home office who supports them in their important work. The GPS tracking provided by mobile device-based EVV solutions means that the agency knows exactly where the caregiver is at any point in time in case problems arise.

Monitoring through EVV increases security for caregivers, ensuring that the home office knows where they are at any given time and can immediately message in an emergency situation. Automating directions to a new location and having oversight during the visit helps caregivers who are deployed to a new field situation feel more secure. Additionally, automated solutions for documenting care minimize administrative work for the caregiver, allowing them to spend more time with beneficiaries and less time on paperwork.

Agency Value

Agencies face pressure to provide excellent care at low costs, but most struggle with high staff turnover and the need to comply with an increasing number of federal and state regulatory mandates. Paper systems are commonplace, but very difficult to scale and risky in the event of an audit. The right EVV system can provide relief from administrative burdens, improve productivity of caregivers, and increase employee engagement - overall, helping the agency to reduce costs and improve the quality of care delivery.

Agencies optimize care delivery and reduce costs by allowing caregivers to spend as much time as possible delivering care to patients, rather than allowing precious hours to be consumed by administrative activities such as scheduling, tracking, timesheets, or documentation. Mobile EVV automates time and

EVV Compliance Implications

Agencies can easily see where their team members are located, deploy staff based on current location, monitor safety, and redeploy caregivers as needed to prevent missed visits.
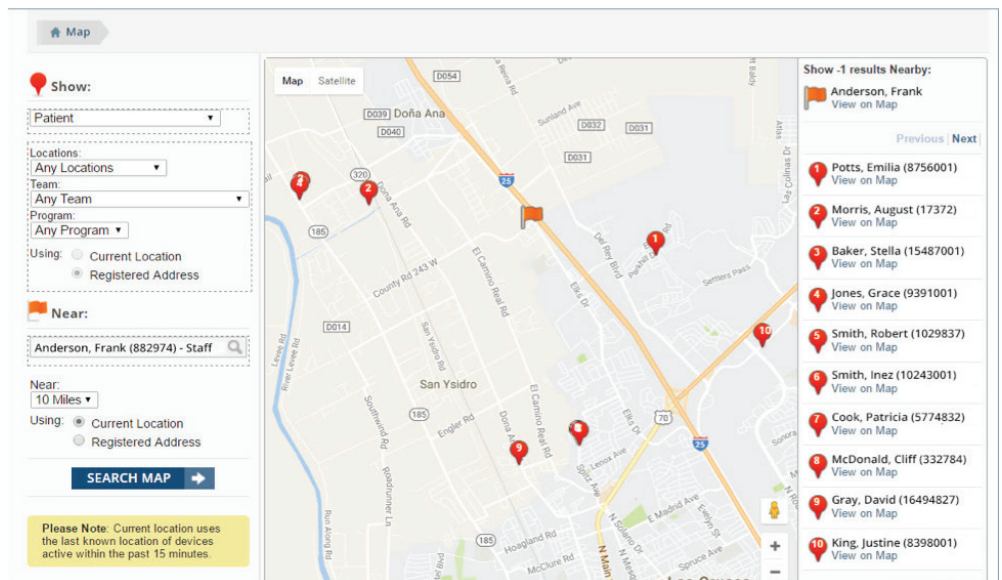
mileage capture, reducing the administrative burden on caregivers and ensuring prompt and accurate reimbursement and payroll. EVV can eliminate time wasted on paper-based processes and reduce associated errors and rework by automating workflow in and between the field and the office. Additionally, agencies leverage EVV to improve care plan compliance by providing up-to-the-moment care plans, documentation at the point of care, and real-time alerts.

Mobile EVV can be a tool for the agency to support their staff of caregivers, improving loyalty and retention. EVV increases the safety of caregivers when they are in the field. GPS tracking gives an agency the ability to locate a caregiver immediately and to message critical information or dispatch help in the case of emergency.

Finally, EVV implementation supports compliance and reduces audit risk. Automating point-of-care documentation enforces processes and facilitates capture of consistent information. Automating EVV capture and submission to states and MCOs helps agencies to get paid promptly and comply with federal and state requirements.

EVV Technology Selection Considerations

There are two EVV technologies that can fulfill compliance requirements – telephony and mobile visit verification (MVV). States typically require a primary EVV method and a backup method. Although telephony-based systems have been commonly used in home health and community care settings, IVR is not accepted in all states as the primary method of EVV for compliance purposes in all states. Mobile GPS has become the new standard.

The Historical Method: IVR

With telephony-based systems, also known as Interactive Voice Response (IVR), caregivers simply use a client's landline phone while on site. The caregiver dials a toll-free number to verify his or her arrival. Upon completion of the delivery of services, the caregiver calls again and either simply confirms the end of the visit or completes an automated set of questions, often requiring the recollection and entry of a lengthy set of numerical codes, to indicate the services delivered.

Telephony enables agencies to use technologies that caregivers are familiar with to verify visits to homes, and the cost per visit to the agency is minimal. While telephony is used frequently as a primary or backup system, there are drawbacks. First, an increasing percentage of homes no longer have landlines. In fact, according to the National Center for Health Statistics, over 50 percent of homes had only cell phone service, and the percentage of landline-free homes is expected to steadily increase. In addition, there are simple ways to "beat the system." For example, a client who adores a caregiver may make the initial call as a favor because the caregiver is running late. Or, the caregiver may make the

Fewer Homes are Using Land Lines

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initial call, leave the premises, and return to make the end-of-visit call. There are also practical complications with telephony related to many things that occur frequently in the industry; for example, the ability to report on unscheduled visits (including emergency visits), the accuracy of reporting on services delivered when the caregiver is responding to a series of automated prompts, and the ease of reporting on services that were delivered that were not planned at the start of the visit.

But, most importantly, a telephony solution will not deliver many of the productivity and quality of care improvements for patients, caregivers and agencies.

Today's Standard: Mobile GPS

The most value-creating EVV option is the use of mobile technology, specifically smartphones and tablets. A GPS-enabled cell phone is used for some or all the following: EVV, patient and care team information, schedules and schedule updates, driving directions to home and facilities, managing patient care plans, point-of-care documentation, tracking mileage and other travel costs, timekeeping, secure, real-time communication, and even photo capture.

Go Beyond Simple Visit Verification

Mobile solutions provide value for the patient, caregiver, and agency.

The leading mobile solutions, however, are much more than just a mobile application. Mobile Visit Verification (MVV) solutions combine mobile apps with back-office portals, some of which provide a significant number of additional advantages to both in-field and office staff, especially the operations team. For example, leading mobile solutions designed for home health include the ability for the office staff to see alerts and quickly respond to events in the field; enable visibility into caregiver's locations for response to events and for safety; automate workflow; provide storage for, and access to, historical care and services data; and offer reporting and analysis capabilities that range from high-level objectives, such as KPIs for the agency, to the ability to review performance by discipline or even caregiver.

Leading MVV solutions go beyond mere visit verification by:
- **Improving compliance** by providing real-time proof of visits, care and service plan delivery, and all associated point-of-care documentation
- **Reducing costs** by tracking and reducing travel costs; automating workflow in the field, in the office and between the field and the office; and eliminating paperwork
- **Improving the quality of care** by increasing care and visit compliance, using real-time alerts to enable quick operational and clinical responses, and monitoring and analyzing performance over time
- **Making complete information available at the point-of-care** and to all care team members, using real-time alerts and notifications, and enabling secure real-time communication among care team members.

The leading mobile solutions are true "native" apps versus just being web pages that are accessed via a mobile device. Even in areas with no Internet or spotty cellular coverage, they can provide important information on the device, such as client information, schedules, care and service plans, forms, and the ability to do documentation at the point-of-care, including to document the start and end times of a visit. Some native apps can also automatically upload that data to your back office systems and EMR once a connection is restored.

The initial barriers to adopting mobile solutions are a thing of the past. First, the cost associated with owning and operating mobile devices has greatly decreased. High-functioning devices are now available for very reasonable prices, and data allowances sufficient for use of devices by home health workers are now routinely included in affordable plans. In addition, some mobile suppliers now support Bring Your Own Device (BYOD) policies, reducing, and possibly even eliminating, the cost of device acquisition, which can be an important factor for organizations with many part-time or volunteer caregivers.

Interoperability is Key

In today's connected world, interoperability is the only option. No single company can meet all of the needs of your organization, and to deliver outstanding care, you must be well connected with other providers. We strongly believe that an "open system" approach to interoperability benefits all parties, especially the people who receive care. Together with our partners, we enable relevant systems and devices to exchange data with the right timing and level of detail, to interpret that shared data, and to present that data so it can be easily understood and used by people and systems.

The network of payers and aggregators within the healthcare industry will likely continue to increase in complexity. Within this complex environment, agencies that don't automate effectively will be burdened by multiple workflows for disparate systems and potentially saddled with manual data entry tasks – a painful, inefficient, and error-prone way to comply with new regulations.

An effective EVV solution must keep agencies connected behind the scenes – moving client information and schedules from your back-office systems to devices, and point-of-care documentation from devices to your back-office systems. CellTrak works closely with industry leaders – including providers of EMR and back-office system software, providers of point-of-care data collection software, payer management systems, carriers, state aggregators, and others. Typically, the integration between CellTrak's solution and a partner's is bi-directional and near real-time. CellTrak EVVLink seamlessly transmits EVV data and other required information to entities such as state aggregators and MCOs who use it for EVV monitoring, claims processing, and regulatory compliance.
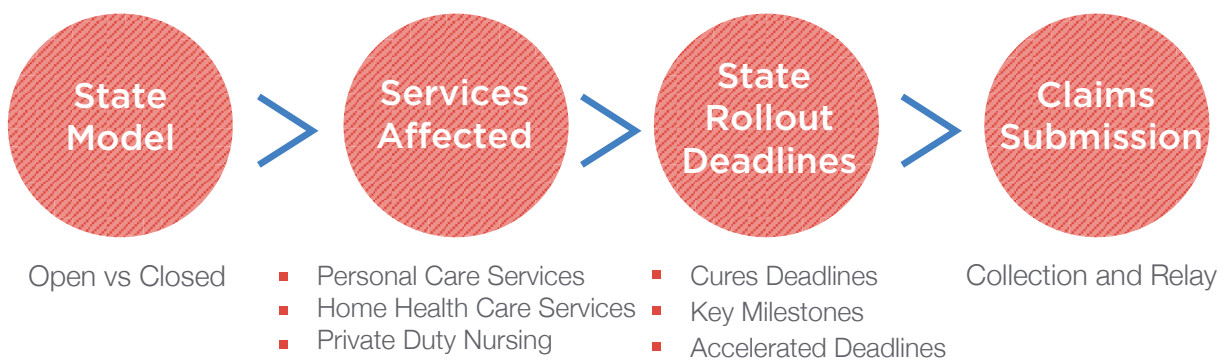
CellTrak Works with Your Existing Systems
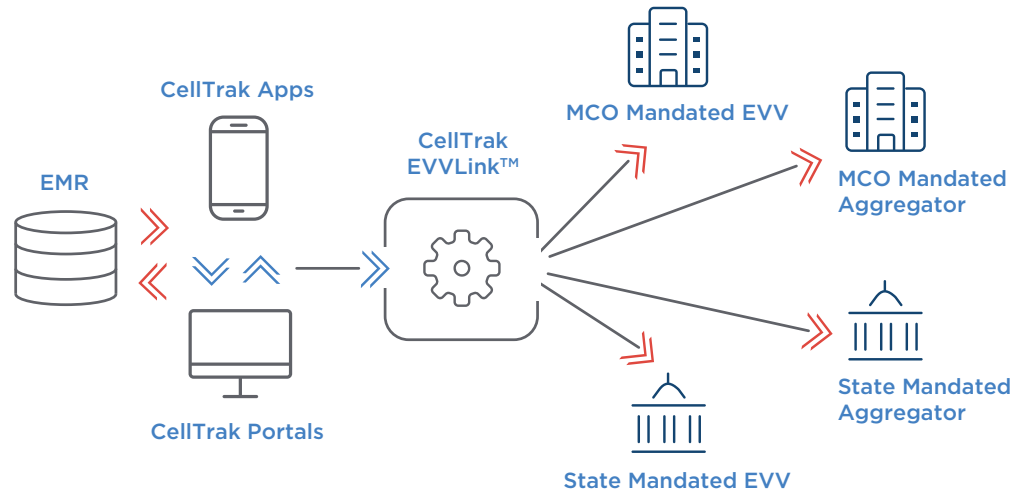
Getting Started

The roadmap for agencies preparing for EVV compliance in 2019: Plan to your state requirements, and build an implementation plan that complements your state's roll-out schedule. Agencies can get started collecting compliant EVV data, so they are prepared to transmit that data when the state details their reporting requirements. By using EVV now, agencies can begin to improve productivity, reduce costs, and improve the effectiveness of care. The latest GPS technology provides automated visibility into the services delivered, as well as added safety for caregivers in the field.

EVV Planning Roadmap

Open vs Closed

- Personal Care Services
- Home Health Care Services
- Private Duty Nursing

- Cures Deadlines
- Key Milestones
- Accelerated Deadlines

Collection and Relay

The role of EVV is expanding to deliver additional value to caregiver-beneficiary interactions – from identifying health-status changes at the point of care to electronically collecting consumer signatures to confirm the delivery of services. By embracing EVV technology over the next 18 months, agencies will be well prepared to meet the challenges and opportunities ahead.

About CellTrak Technologies

People receive exceptional health care in their home or community when their care providers use CellTrak's Mobile Health solution. Home care, hospice, and community care agencies in the US, Canada, and the UK deliver higher quality care, communicate more effectively, improve compliance, reduce costs, and increase productivity with CellTrak. Today, CellTrak's complete, integrated software-as-a-service solution supports one million visits per week, facilitating care delivery and real-time field force management, automating data collection, and providing information for business and care optimization. It includes apps for all types of caregivers that run on the leading mobile devices; portals for efficient, coordinated care delivery by a distributed workforce; interfaces to EHRs and other systems; and services to support adoption and optimization. For more information visit www.celltrak.com.

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