



**Electronic Visit Verification  
Learning Collaborative:**

# **EVV TECHNOLOGIES**

**Division of Long-Term Services and Supports  
Disabled and Elderly Health Programs Group  
Center for Medicaid and CHIP Services**

# Requirements for Compliance

- For compliance with the Cures Act, each EVV solution must capture six required data elements:
  - the **type of service** performed,
  - the **individual receiving** the service,
  - the **date** of the service,
  - the **location** of service delivery,
  - the **individual providing** the service, and
  - the time the service **begins and ends**.
- States have flexibility in designing and contracting EVV technology, as long as the solution meets Cures Act requirements.

# Common Options for Verification

- **Telephonic:** Service providers check-in and check-out by calling into the EVV solution from the member's landline or other phone and participating in interactive voice response (IVR).
- **In-Home Device:** A one-time password (OTP), fixed-object (FOB), or similar device in the member's home generates a random code at check-in and check-out, which service providers can then enter into the EVV solution through IVR from another telephone or an online portal at another time. Some systems might offer a portable in-home device, such as a tablet, for verification, which might connect to GPS.
- **Mobile Application:** Service providers check-in and check-out through a mobile application, usually on the provider's personal or agency-provided smartphone. This application connects to the Internet and location services with GPS.

States may find that a combination of, or alternative to, the above verification methods works best for their constituents.

# Supplemental Capabilities

- **Edits and Exceptions:** Systems may allow service providers to manually enter or edit data into the EVV solution, subject to certain thresholds and allowances per state policy, when electronic verification is faulty, forgotten, or unavailable.
- **Integration with Other State Systems:** Systems may interface with states' billing, claims and MMIS, case management, online portals, prior authorizations, scheduling, and other state systems to facilitate and integrate processes.
- **Offline Modes:** Systems may allow for “offline” or “store-and-forward” entries through mobile applications whereby the solution can log and store check-ins and check-outs without cellular or Internet connectivity.
- **Secondary Verification:** Systems may allow individuals to “sign off” on DSWs' entries as a means for additional validation or when electronic verification is faulty, forgotten, or unavailable.

Systems may be augmented to go beyond the requirements for an EVV solution's minimum compliance with the Cures Act.

# Considerations for Location Services

- The Cures Act does **not** require EVV systems to capture location throughout the service delivery.
  - Of eight (8) vendors with whom CMS conducted interviews regarding location tracking and privacy, **not a single vendor** reported active, continuous GPS tracking.
  - Location is typically only recorded at the beginning and end of a service.
- Each of the three main options for verification can capture location in a method compliant with the Cures Act: telephonic, in-home devices, and mobile applications.
- To help ensure the system is flexible and reliable when verifying location, systems may pre-populate with anticipated or preferred location(s) or allow service delivery within a specified radius of the intended location.

# Panelists

CO=Colin/Lana; FL=Beth  
KS=Amy/Eva; WI=Curtis

- From **Colorado**:  
**Colin Laughlin**, Director  
**Lana Eggers**, Federal Compliance Supervisor  
Benefits and Services Management Division  
Colorado Dept. of Health Care Policy and Financing
- From **Florida**:  
**Beth Henry**, Program Administrator  
Quality Improvement and Evaluation Contracts Unit  
Florida Agency for Health Care Administration
- From **Kansas**:  
**Amy Penrod**, Commissioner  
**Eva Diehls**, HCBS Policy & Program Oversight Manager  
Aging & Disability Community Services & Programs  
Kansas Dept. for Aging and Disability Services
- From **Wisconsin**:  
**Curtis Cunningham**, Assistant Administrator  
Division of Medicaid Services  
Wisconsin Department of Health Services

# Technology Solution and Design

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KS=Amy/Eva; WI=Curtis

- Describe your State's EVV solution. What technologies or capabilities does your EVV solution use to capture the six required data elements?
  - **Colorado:** mobile application or telephonic.
  - **Florida:** mobile application.
  - **Kansas:** mobile application or telephonic.
  - **Wisconsin:** mobile application, telephonic, or in-home device.
  - **Louisiana:** mobile application.
  - **Maryland:** telephonic or in-home device.
  - **Pennsylvania:** mobile application, telephonic, or in-home device.
  - **Tennessee:** telephonic or in-home device.

- A. Use varies across states.
- B. Of the 8 states discussed, all but 2 use mobile devices with an additional device. Telephonic or in-home device were the additional devices

# Technology Solution and Design

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KS=Amy/Eva; WI=Curtis

- What technologies or capabilities does your EVV solution use to capture information that is supplemental to the requirements of the Cures Act? *Note that this is not an exhaustive list.*
  - **Edits and Exceptions:** Systems may allow service providers to manually enter or edit data into the EVV solution, subject to certain thresholds and allowances per state policy.
  - **Offline Modes:** Systems may allow for “offline” or “store-and-forward” entries through mobile applications whereby the solution can log and store check-ins and check-outs without cellular or Internet connectivity.
  - **Provider Portals:** Systems may allow providers to view pertinent service information on a web-based system.
  - **Scheduling:** Systems may allow provider agencies and providers to organize service delivery schedules in the EVV solution.
  - **Service Notes:** Systems may allow individuals or providers to enter notes related to service delivery into the EVV solution.

- A. Important to be able to edit manually
- B. Important to be able to store real-time check in/out then upload in range
- C. Portals accessible by appropriately designated individuals/agency members
- D. Scheduling component very important and must be responsive and fluid – allowing immediate modifications as needed
- E. The ability to document services delivered and notes on site will enhance the quality and accuracy of the documentation.

# Technology Solution and Design

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KS=Amy/Eva; WI=Curtis

- How does your EVV solution integrate with other state systems or interface with other state processes?
  - **Claims and MMIS:** Systems may interface with MMIS to streamline submission of claims to the appropriate payer and verification and fulfillment of claims by that payer.
  - **Fraud, Waste, and Abuse:** Systems may interface with the processes combating FWA in providing real-time electronic data that confirms delivery of services as billed. States may subject manually-entered data to additional review.
  - **Prior Authorizations:** Systems may interface with authorizations and service plans so that providers can only bill for services at the planned time and in the specified type, scope, amount, duration, and frequency.

- A. **Coordinating billing and payments must be**
- B. **Reduction of FWA should be realized with the adopted solution**
- C. **Solution should interface with priorauths to ensure all approved services given**
- D. **Integration of all systems will guarantee accuracy of claim resolution**

States may find that integrating electronic visit verification into other technical systems and processes will enhance the state's effectiveness in oversight and payment of accurate and appropriate claims.

# Technology Solution and Design

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KS=Amy/Eva; WI=Curtis

- A. **The ability to capture and retain real time check-in check-out must be included in the solution**
- B. **Still undecided about live-in family service delivery check-in check-out requirements**

- How does your EVV solution verify visits for complex or special populations?
  - **Individuals who live in rural areas with limited or no connectivity:** Verification of service delivery may incorporate edits and exceptions or offline modes for mobile devices when connectivity issues preclude service providers from entering information electronically in real-time. States must have a clearly defined policy for acceptable error ratios if they allow edits and exceptions.
  - **Individuals who self-direct their services:** Verification of service delivery may incorporate allowances for flexible scheduling and special guidance for vendors of financial management services (FMS) in order to respect the independence which accompanies self-direction of services.

# Technology Solution and Design

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- How did your State evaluate available technology options?
  - **Comparative Analysis:** States may evaluate their investments in an EVV solution based upon consideration of cost, provider capacity, population needs, or other factors.
  - **Experience with Other State Processes:** States may leverage experience with capacity, communication, design, and operations from implementation of other systems.
  - **Requests for Information (RFIs):** States may gain valuable information on the solutions available to them by issuing RFIs.
  - **Requests for Proposals (RFPs):** States may select the most competitive bid which best meets constituent needs by issuing RFPs.
  - **Testing, Pilots, and Phase-in:** States may determine potential bugs in or enhancements to their solutions through testing and piloting systems before full implementation, time permitting.
- A. Existing solutions can be judged/evaluated based on cost, pop. Needs, provider ability to implement, components
- B. States can learn from others who have implemented similar or same solutions
- C. RFI may provide enough info to move to adoption
- D. RFPs = competitive bids
- E. Testing/Pilots/Phase-In will not delay required implementation date or penalties w/o a good faith exemption

# Privacy and Security

- How does your EVV solution protect individuals' and providers' private information, especially potentially sensitive information?
  - **Capturing sensitive information:** Location is typically only recorded at the beginning (check-in) and end (check-out) of a service – in general, systems do not actively and continuously track location. Image, video, and voice recording are not common features of verification solutions.
  - **Ensuring technical safeguards:** State systems and processes must comply with privacy and security regulations including HIPAA. Verification devices should not allow access to information by non-necessary parties and should not store data for longer than required for transmission to the payer.

Communicating the technical specifications and safeguards to stakeholders is important in gaining trust, especially when a device is in an individual's home or an application is on a provider's device.

# Privacy and Security

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- A. **Publicize STAKEHOLDER's work**
- B. **Keep them informed and included**
- C. **Frequent and meaningful inclusion**
- D. **Consistent communication**
- E. **Train, train and train**

- How has your State **solicited** and **incorporated** feedback from stakeholders regarding privacy and security when designing, contracting, and now operating your EVV solution?
  - **Fact sheets and FAQs:** Publication of pertinent information and answers to routine stakeholder questions will help allay concerns with an efficient use of state staff capacity.
  - **Public meetings and workgroups:** Meetings with stakeholders across the state will help ensure the state hears and responds to affected parties. Internal workgroups or subcommittees, which may include stakeholders, will allow state staff to focus on specific issues.
  - **Regular communication:** Memoranda and FAQs posted regularly on an easily accessible webpage will allow interested parties to stay apprised of updates which may affect their care or work. States may also consider tailored outreach to key groups.
  - **Training:** Ongoing, frequent training – at times which accommodate the schedules of service providers and other parties – will educate stakeholders on the functions of the EVV solution.

# Takeaways for Success

- Describe any **promising practices** from your State's experience with designing and implementing EVV.
  - Are there areas in which your State has excelled?
  - How can other states replicate your State's experience?
- Describe any **lessons learned** from your State's experience with designing and implementing EVV.
  - Were there barriers or challenges which your State has faced?
  - How has your State overcome those barriers or challenges?

# Additional Resources

*Refer to CMS and other guidance for additional information regarding electronic visit verification:*

- [CMS Update on EVV](#) from August 2018
- [NASUAD Pre-Conference Intensive](#) from August 2018
- [NASUAD Conference Workshop](#) from August 2018
- [CMCS Informational Bulletin](#) from May 2018
- [Frequently Asked Questions](#) from May 2018
- [Promising Practices for States Using EVV](#) from January 2018
- [Requirements and Considerations](#) from December 2017