

Electronic Visit Verification

General Stakeholder Meeting

March 16, 2021

Our Mission

Improving health care equity, access and outcomes for the people we serve while saving Coloradans money on health care and driving value for Colorado.

WELCOME Stakeholders

- HCPF Introductions
- Housekeeping

Meeting Purpose

The purpose of this meeting is to engage providers, members, other stakeholders, and the Department as we all work to implement EVV for EVV-required services.

And specifically to:

- Clarify EVV in Colorado
- Discuss EVV Program Updates
- Provide a platform to gather stakeholder feedback

Meeting Guidelines

We ask that you:

- Mind E-manners
- Identify yourself when speaking
- Share the air
- Listen for understanding
- Stay solution and scope focused

Agenda

Overview of EVV

Implementation Timeline

Live-in Caregiver Review

Billing Education

Communications

Call Center Report

Open Forum

EVV Brief Overview

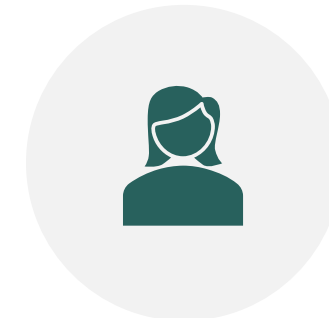
What is EVV?

- Electronic Visit Verification (EVV) is a technology solution that verifies service provision through mobile application, telephony, or web-based portal.
- EVV is used to ensure that home or community-based services are delivered to people needing those services by documenting the precise time service begins and ends.
- Also ensures caregivers are paid for time and efforts
- Colorado EVV has been developed with engaged stakeholders, industry experts, and Department staff to create a custom Colorado EVV program.

What must EVV Capture?



TYPE OF SERVICE PERFORMED



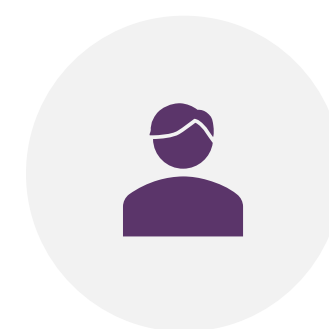
INDIVIDUAL RECEIVING THE SERVICE



DATE OF THE SERVICE



LOCATION OF SERVICE DELIVERY



INDIVIDUAL PROVIDING THE SERVICE



TIME THE SERVICE BEGINS AND ENDS

Service Location

- EVV services happen in the home and in the community.
- Capture location where the service occurs, including telehealth.
- EVV does not disrupt this flexibility of service location.

State EVV Model: Open/Hybrid

Colorado provides an EVV Solution ([State EVV Solution](#)) free of charge.

Providers also have the option to use an alternate EVV system ([Provider Choice EVV System](#)) if it correctly interfaces with program rules and requirements.

Providers are responsible for the correct use and transmission of EVV data.

EVV Implementation Timeline

Memo OM 21-020

[Electronic Visit Verification
\(EVV\) Compliance Timeline
Update](#)

[OM 21-0020](#)

Effective February 19, 2021

- Operational Memo provided update on implementation timeline
- Delayed pre-payment review
- Department has seen significant increases in utilization; however, rate is still concerning, primarily due to claim denial rates
- Additional time meant to address obstacles and further familiarize with EVV.

Pre-payment Claim Review

- All claims submitted to the Department that require EVV records must be matched to a valid EVV record to pay.
- Claims that require EVV and subject to pre-payment claim review, shown in RA as EOB Code 3054 “EVV Record Required and Not Found.”
- Claims without corresponding EVV will deny in the future

EVV Support Pathways

Pathway	Method	Purpose	Prepare Before Contacting	Expected Initial Response Time
EVV Help Desk	1-855-871-8780 COCustomerCare@sandata.com	Using State EVV Solution, interfacing Provider Choice Systems, Sandata trainings, EVV accounts	Nothing needed	Phone: As soon as connected Email: within two business days
Gainwell (Billing) Help Desk	1-844-235-2387	Provider billing or claims processing questions	Nothing needed	As soon as connected
HCPF EVV Inbox	EVV@state.co.us	Dept. approval of Live-in Caregiver exemption, Policy and Program answers, Escalations from other support methods	Live-in Caregiver Documentation for review, Help Desk documentation (Call number, who you talked to, etc.)	Within a week

Live-in Caregiver Review

Live-in Caregiver

- A caregiver who permanently or for an extended period of time resides in the same residence as the Medicaid member receiving services.
- Live-in caregiver status is determined by meeting requirements established by the U.S. Department of Labor, Internal Revenue Service, or Department approved extenuating circumstances.

Live-in Caregiver

- The Department recognizes the unique challenges of collecting EVV for certain types of care and allows providers to be exempt from EVV if provided by a documented live-in caregiver.
- Services provided by live-in caregivers are often delivered incrementally and without clearly defined start and end times.

Memo OM 20-051

Electronic Visit Verification
(EVV) Live in Caregiver
Exemption

OM 20-051

Effective May 5, 2020

- Operational Memo details:
 - Eligibility
 - Requirements
 - Responsibilities/Liability
 - Billing methodology

Live-in Caregiver Eligibility

EVV Type of Service	Live-in Caregiver
Behavioral Therapies	Eligible
Consumer Directed Attendant Support Services (CDASS) (and CDASS SLS Health Maintenance)	Eligible
Home Health (including CNA, Nursing, OT, PT, and ST)	Eligible
Homemaker	Eligible
Hospice (including In-Home and Inpatient)	Eligible
Independent Living Skills Training (ILST) and Life Skills Training (LST)	Eligible
In-Home Support Services (IHSS)	Eligible
Occupational Therapy	Ineligible
Pediatric Behavioral Therapies	Ineligible
Pediatric Personal Care	Eligible
Personal Care	Eligible
Physical Therapy	Ineligible
Private Duty Nursing	Eligible
Respite and Youth Day	Eligible
Speech Therapy	Ineligible

Provider Responsibilities

- Billing providers or for CDASS Employers of Record (EOR) are responsible for compiling, maintaining, and validating all records justifying the status of each live-in caregiver for Department verification and auditing.
- All supporting documentation must be collected and validated prior to utilizing the live-in caregiver exemption, and be valid during time of service and billing dates if EVV not collected
- Claims reviewed as provided by a live-in caregiver without required live-in caregiver documentation or EVV records are subject to recoupment.

Live-in Caregiver Exemption Form

- Submit [Live-in Caregiver Exemption Form](#), when necessary, with permissible supporting documentation
- Instructions and requirements outlined in document
- May only attest to a single part - Part A, B, or C
- Requires information from the caregiver/member and provider agency/FMS vendor

Live-in Caregiver Exemption Form Part A

- Part A: IRS determination - individual care provider receiving payments under a qualifying state Medicaid program as defined in IRS notice 2014-7 for care provided to an individual (whether or not related) living in the individual care provider's home.

Live-in Caregiver Exemption Form Part B

- Part B: DOL determination - “Permanently” - reside on same premises to individual providing services to by living, working, and sleeping on premises 7 days per week and have no home of their own.
- Part B: DOL determination - "Extended periods of time" - Reside on the same premises as the individual providing services to, for an extended period of time by living, working, and sleeping on premises for 5 days a week (120hrs or more) OR spend less than 120 hours per week working and sleeping on premises, but spends 5 consecutive days or nights residing on premises.

Live-in Caregiver Exemption Form Part C

- Part C: Extenuating Circumstances: Department, at its discretion, permits live-in caregiver establishment beyond definitions of Part A & B.
- For example, joint custody living arrangement.
- Pre-approval of the extenuating circumstances is required by emailing the completed form first to EVV Inbox (EVV@state.co.us).

Live-in Caregiver Exemption Form

- Part A & B: Don't require formal department approval, however agency or FMS vendor must keep form and supportive documents on file in case of Department review
- Send completed form to provider agency or FMS vendor
- Part C: Extenuating Circumstances - must be submitted to EVV inbox for Department review.

Live-in Caregiver Billing

- Billing providers responsible for using correct billing methodology that designates Live-in Caregiver services by claim line
- For claims billed using the CMS 1500 billing methodology, POS 99 must be designated for all lines where a Live-in Caregiver has delivered the service.
- For claims billed using the UB-04 billing methodology, Condition Code 23 must be designated for all lines where a Live-in Caregiver has delivered the service.

Live-in Caregiver Billing

- Units billed for live-in caregiver and non-live-in caregiver should be billed on separate claim lines and indicated correctly.
- Lines representing services not delivered by a live-in caregiver must use the appropriate POS or Condition Code as outlined in Department billing manuals
- Providers previously used POS 99 to indicate information other than live-in caregiver designation advised this POS has been repurposed to identify services provided by live-in caregivers.



Questions

Billing Error Education

EOB 3054 Billing Errors

- Some billing practices may produce the EOB 3054 error = future denial of claims
- Department has gathered data to provide additional guidance to help providers avoid these errors
- Share some scenarios and pause after each for questions

Billing Tips

COMMON TERMS USED WHEN REFERENCING MEDICAID ID

All of these terms refer to the unique Medicaid ID, NOT NPI.

- Provider ID
- Medicaid ID
- Billing Location
- Medicaid Enrollment ID
- Line of Service
- MPI

Selecting Do not Bill Checkbox

- “Do Not Bill” box used to indicate a claim will not be billed against, putting it in a “deleted” status
- Claims can only match to verified visits and these visits won’t match
- Summary: Claims will not match, post an error, and deny in future

Where Do I Look?

Visit Review Page

Adjusted Hours	Bill Hours	Visit Status	Do Not Bill	Actions
	01:00	Verified	<input type="checkbox"/>	



Visit Details Box

PAYER COHCPF	PROGRAM HCPF	SERVICE In-Home Support Services (IHSS)	GROUP VISIT CODE None
CLIENT VERIFIED TIME No	CLIENT VERIFIED SERVICE No	CLIENT SIGNATURE No	
VISIT SOURCE [REDACTED]	SCHEDULE ID None	EXTERNAL ID [REDACTED]	<input type="checkbox"/> DO NOT BILL



In Data Aggregator (Provider Choice) and Sandata Portal (State EVV Solution)

Guidance

- State Solution - Unmark the box
- Don't use if you want to bill for claim. No penalties for not checking the box
- Provider Choice - Talk to your vendor
- Vendors possibly sending this status and may not know.
- See [Requirement Specification for Receipt of AltEVV](#)



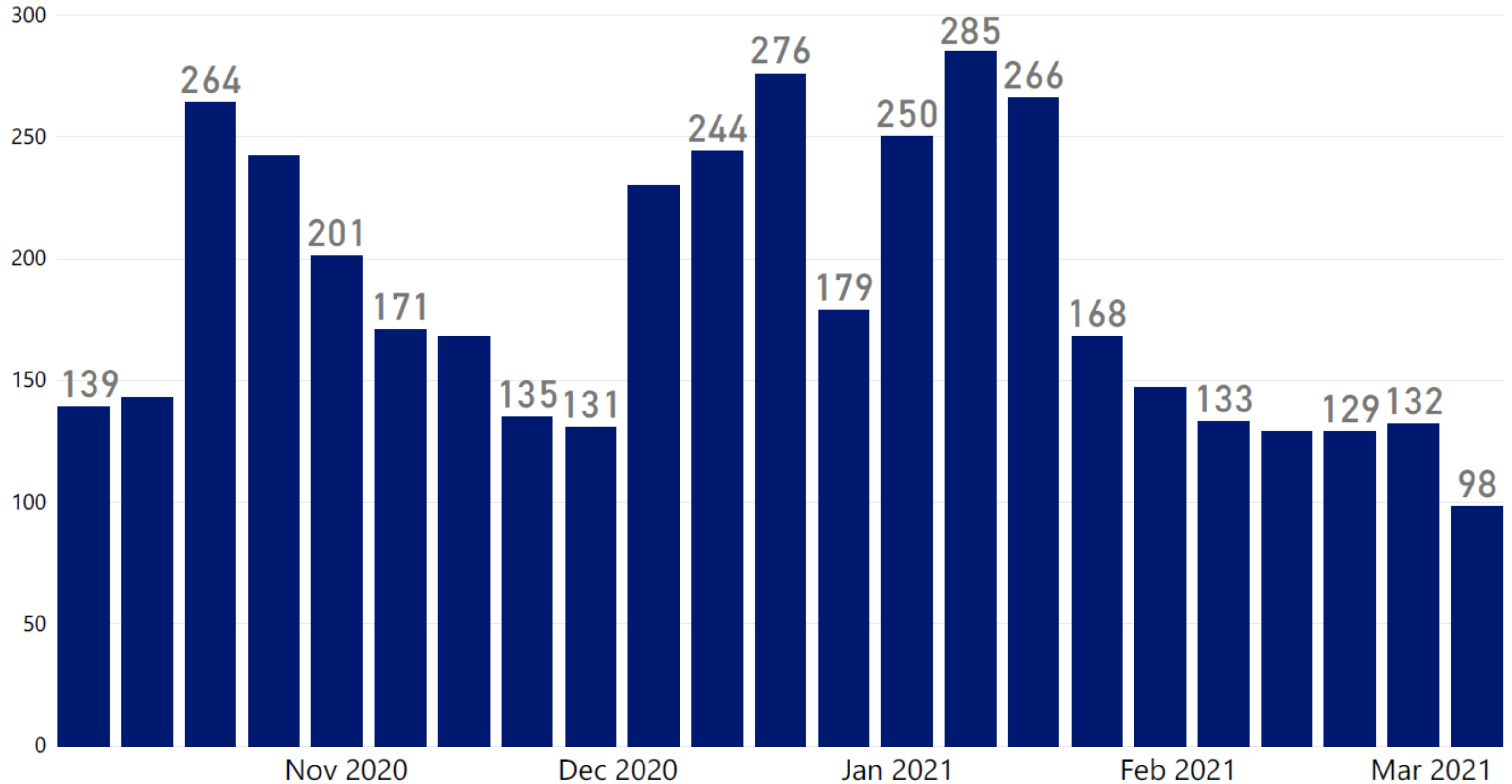
Questions

EVV Communications

EVV Office Hours

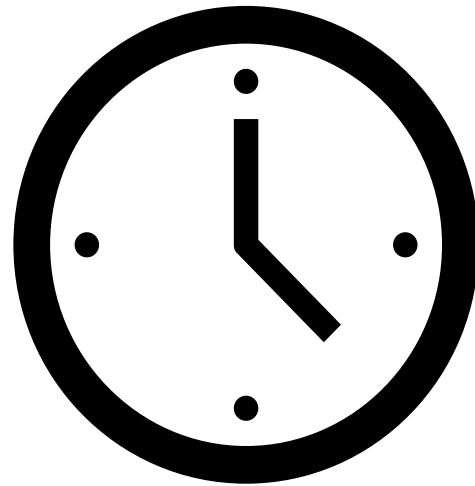
- Month of March offering short virtual meetings
- Meant to help improve EVV Performance, access to EVV staff, and offer educational materials to stakeholders
- Also seeking feedback to enhance guidance for other channels
- Invitations and details sent via email to those with billing errors or not submitting EVV data

EVV Program Updates: Sandata Call Center Report



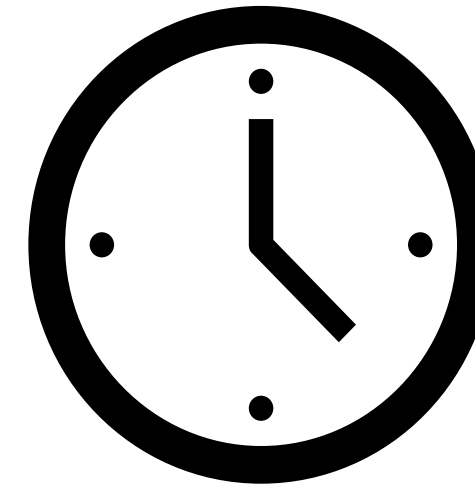
Call Times What to Expect

Wait Time for Call Representative

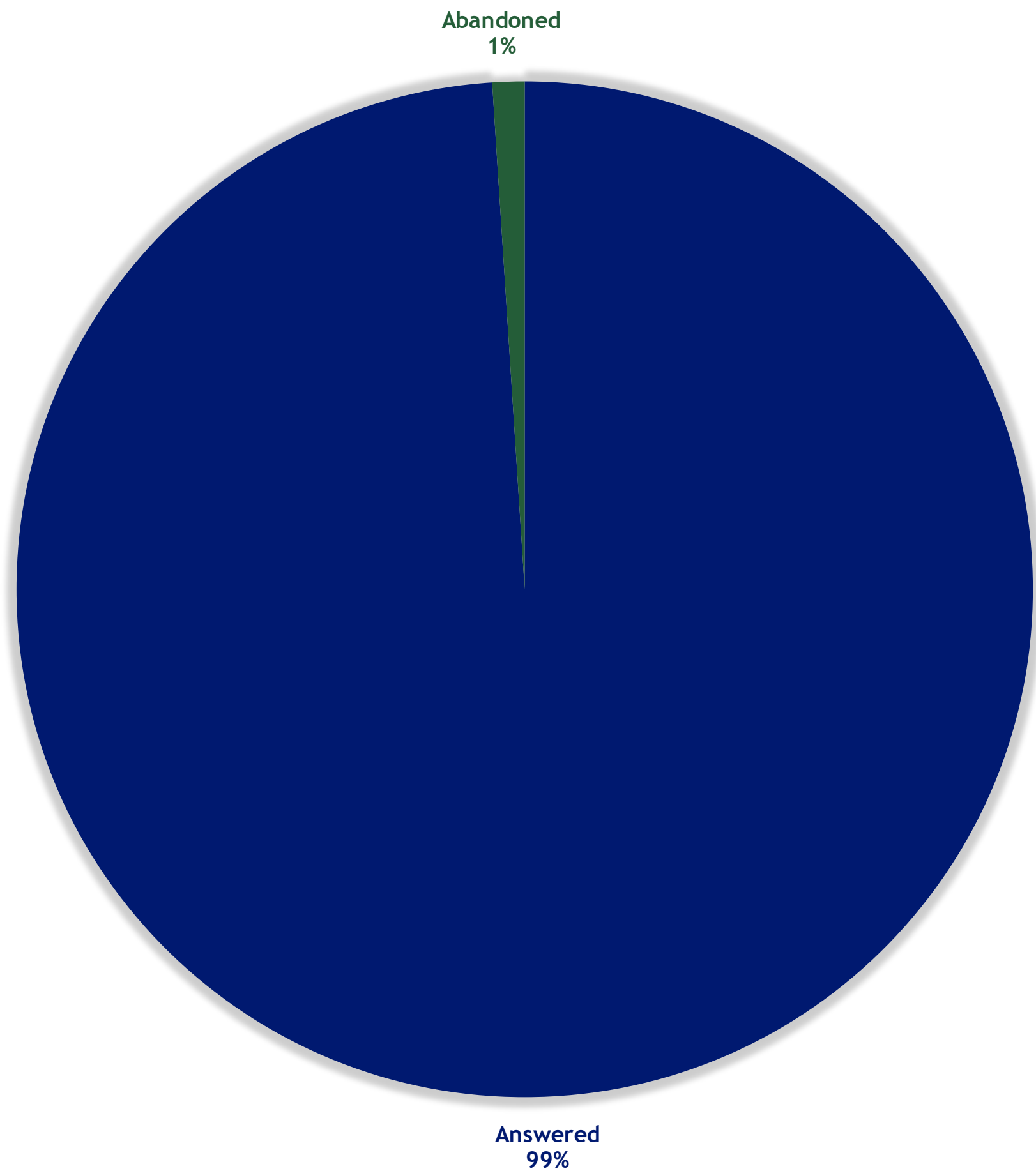


30.5 seconds

Time with a Call Representative



12.20 Minutes



EVV Resources

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Open Forum

General Stakeholder Open Forum

Questions on the phone

- Unmute with *6
- Share the air!

Questions in the Q&A

- Type questions directly into the chat box

Email

- Encrypt PHI and PII
- evv@state.co.us

EVV Recurring Meetings

General Stakeholder

- Third Tuesday of the month
- *Next Meeting: April 20, 2021*
- 10:30 am - 12:00 pm

Member and Caregiver

- Last Tuesday of the month
- *Next Meeting: March 30, 2021*
- 10:30 am - 11:30 am
- Now offered through Zoom

Listening Sessions

- First Thursday of the month -AND- the Thursdays following the EVV General Stakeholder Meeting
- *Next Meeting: March 18 & April 1, 2021*
- 10:00 - 11:00 am

Email evv@state.co.us for a calendar invite

EVV Listening Sessions

- Informal setting for questions about EVV implementation
- Open for all to listen to questions and responses
- No new policy or processes
- First and Third Thursday of each month
- Next session on Thursday, March 18, 2021
 - Available on the Department's EVV website under [Stakeholder Information](#)

Contact Information

EVV@state.co.us

www.colorado.gov/hcpf/evv

Thank you!