

Delaware Electronic Visit Verification

Public Information Meeting

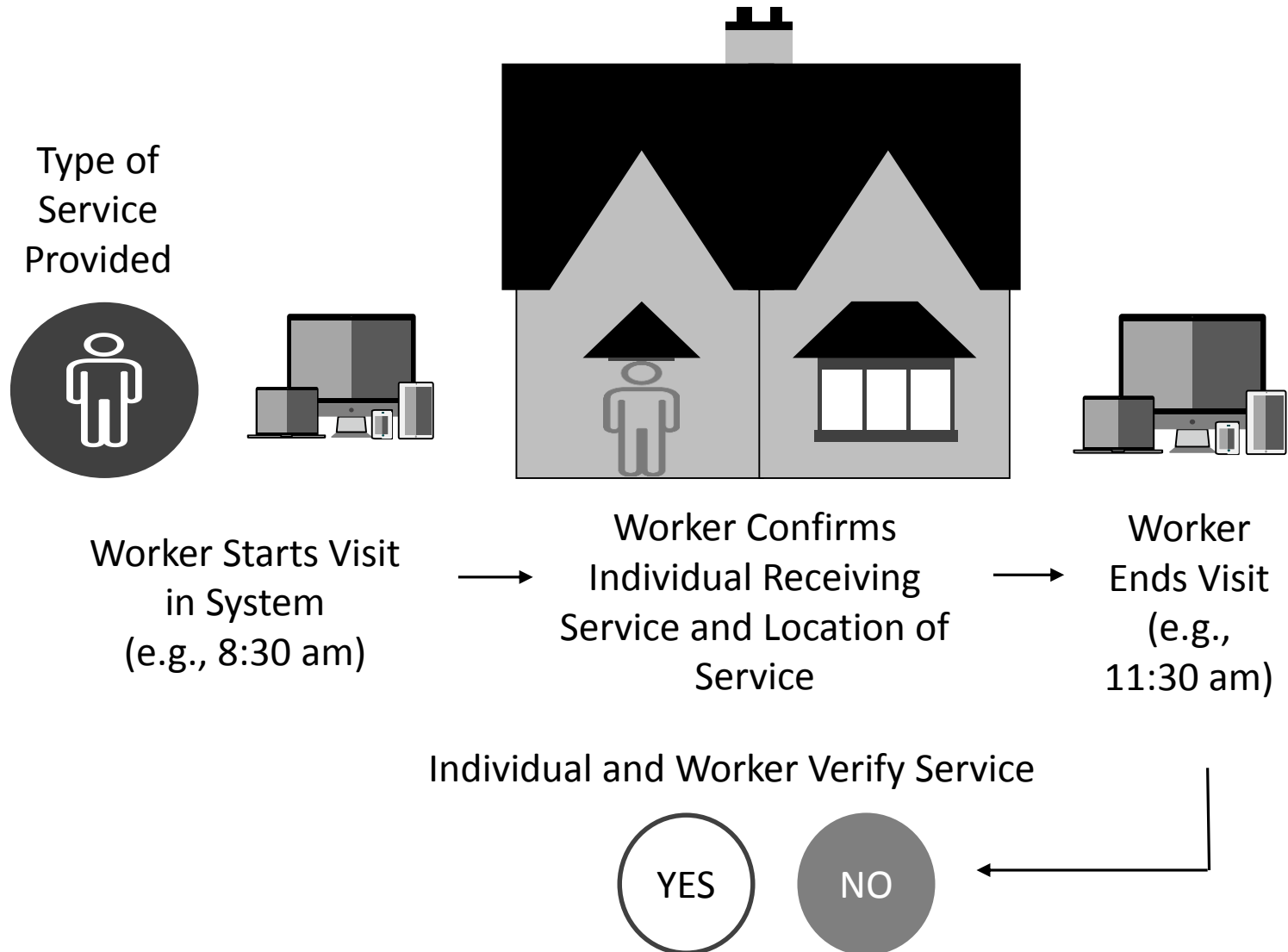


DELAWARE HEALTH AND SOCIAL SERVICES

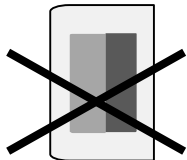
Presentation Overview

- Description of Electronic Visit Verification (EVV).
- 21st Century Cures Act.
- Division of Medicaid and Medical Assistance (DMMA) Goals for EVV.
- Services Subject to EVV.
- Proposed EVV Model Design.
- Next Steps.

EVV Basic Description



EVV Data Security



- Data will be secured to government specifications.
- Only certain individuals will be able to access the information.
- Data not typically stored on local devices.
- Ability to remotely disable devices.
- Ability to clear data from lost or stolen devices.

21st Century Cures Act

- **How does the CURES Act apply to Home- and Community-Based Services (HCBS) programs?**
 - Section 12006 of the CURES Act requires states to implement an electronic visit verification system for:
 - **Personal Care Services (PCS) by January 1, 2020.**
 - **Home Health Services (HHS) by January 1, 2023.**
 - DMMA is proposing to implement EVV requirements for PCS and HHS services at the same time in 2020.

21st Century Cures Act

- **There are some elements that must be present in order to be compliant with the law:**
 - System capability.
 - Privacy compliance.
 - Support for users of the system (members, families, provider, etc.).
- States are penalized if they do not comply within required timeframes.
- Allowances are made if the State is making good faith efforts to comply and delays are unavoidable.
- Congress recently passed a bill, which delays required EVV implementation by one year.

21st Century Cures Act Requirements for EVV

- **At a minimum, EVV systems must collect the following information:**
 - 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.

21st Century Cures Act

The Act does not:

- Limit the services provided.
- Limit provider selection.
- Constrain individuals' choice of caregiver.
- Impede the way care is delivered.
- In any way establish an employer-employee relationship.

DMMA's Goals for EVV

- To improve the health and well-being of Delaware Medicaid members by:
 - Confirming that services are being provided as agreed upon in the Plan of Care;
 - Maintaining the flexibility needed by members to direct their community-based services.
- To support service providers in implementing and maintaining a system that appropriately tracks Medicaid services.
- To reduce and avoid fraud, waste and abuse in the Delaware Medicaid program.

Why and What Services are Subject to EVV?

WHY	WHAT
Services that address activities of daily living (ADL) and/or instrumental activities of daily living (IADL)	<ul style="list-style-type: none">• Personal Care• Attendant Care• Habilitation• Respite• Chore
Home health benefit	<ul style="list-style-type: none">• Home Health Aide• Home Health Nursing• Physical/Occupational/Speech Therapies
Like service	<ul style="list-style-type: none">• Private Duty Nursing

Proposed EVV Model

Open Model EVV	<ul style="list-style-type: none">• One statewide EVV system for data collection and data aggregation.• Existing provider EVV systems may be maintained.• Enhanced federal matching funds.
Service Verification	<ul style="list-style-type: none">• Member and direct service worker (DSW) will verify services at the end of every shift/visit.• System will, at a minimum, include a list of tasks from which the DSW can choose those completed during each shift.• Exceptions process to correct mistakes.
Member/ Family Portal	<ul style="list-style-type: none">• The system will include a member/family portal which will enable members/families to access EVV data and information, e.g., look at services delivered, schedules and verification of visits.
Reporting and Dashboards	<ul style="list-style-type: none">• The system will include reporting and dashboard functionality at various user levels (State, MCO, provider).

Proposed EVV Model

Other Potential Functionality



- System may have capability to collect DSW qualifications and training.



- System may generate unique DSW identifier allowing DSWs to be tracked across providers.



- DMMA is interested in exploring functionality around member/family satisfaction and care experience surveys.

Next Steps

- Public input:
 - Review stakeholder input and make necessary adjustments.
- EVV provider survey:
 - Review provider survey responses and make necessary adjustments.
- Finalize the EVV system design.
- Issue a Request For Proposals (RFP) for an EVV Vendor and select an EVV Vendor.

Questions/Comments

Please use the comment forms provided to share your feedback or questions.



How to Provide Input After Today's Meeting

- Call, write or email the DMMA EVV Project Lead:

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