California Electronic Visit Verification (CalEVV) Home Health Care Services (HHCS)

Webinar

October 20, 2022

Why are we here today?

- Introduce CalEVV to HHCS providers and individual nurse providers (INP).
- Focus on known issues with the provider registration process.
- Demonstrate best practices and how to accurately register and review the top issues that the Department of Health Care Services (DHCS) has encountered with registration information.
- Demonstrate how to submit complete EVV data.

Agenda

- CalEVV Terminology
- EVV Overview
- Programs Impacted
- Roles and Responsibilities
- Compliance
- CalEVV System Overview & Tools
- Sandata Technologies, LLC
- Steps for Getting Started with CalEVV
- Best Practice Self-Registration
- Alternate EVV Provider Registration
- CalEVV Provider Agency Training
- Best Practice Provider ID Maintenance
- Best Practice Client-Payer Association
- Best Practice Visit Maintenance
- Next Steps
- CalEVV Helpful Resources
- Q&A

CalEVV Terminology

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CalEVV Terminology

- Jurisdictional Entities (JE)
  - Organizations that authorize and pay providers for services and provide oversight of service delivery and EVV compliance. They include:
    - **DHCS – Home and Community-Based Alternatives (HCBA) Waiver Agencies**
    - **DHCS – Managed Care Plans (MCPs)**
    - **DHCS – California Children's Services (CCS) Counties**
    - **DHCS – Department of Health Care Services**
    - Department of Developmental Services (DDS) - Regional Centers (RC)
    - California Department of Aging (CDA) - Multipurpose Senior Services Program (MSSP) Sites
    - California Department of Public Health (CDPH) - Medi-Cal Waiver Program (MCWP) Agencies
    - California Department of Social Services (CDSS) – County In Home Supportive Services (IHSS)
- Provider Agency - (Direct Care Service Providers/Vendors)
  - Entity that manages and coordinates the delivery of services and care to individual clients, recipients, and beneficiaries.

CalEVV Terminology

- Provider Agency Administrator
  - Administrators are the individuals who enter their email address during self-registration or have been added as an administrative user in the CalEVV system.
- Individual Provider
  - A non-agency individual who provides a service to a recipient and works for themselves.
- Payer
  - An entity that generates authorization for care and accepts claims or encounter information to adjudicate and pay for services and activities performed.
- Employee
  - The individual who provides services to the recipient/client/beneficiary. Also known as a caregiver, in-home provider, or staff.
  - Caregivers can work for themselves as individual providers or work for or contract with a Direct Care Service Provider or provider agency.

CalEVV Terminology

- Client/Recipient/Beneficiary
  - An individual who receives services subject to EVV requirements.
- Visit Exception
  - An indicator of missing or incorrect information on the visit record that must be addressed.
- CalEVV Portal
  - The web-based portal used by CalEVV users/providers to manage EVV visits and records.
- Sandata Mobile Connect (SMC)
  - Sandata's mobile visit verification option: an application that has to be downloaded onto a smart phone or tablet.
- Telephonic Visit Verification
  - Sandata's telephone visit recording option: providers dial an automated line and answer questions to record a visit.
- Alternate EVV Vendor
  - Known as EVV vendor.

EVV Overview

EVV Overview - Federal Mandate Requirements

- The 21st Century Cures Act, enacted in 2016, directs states to require the use of an EVV system for Medicaid-provided personal care services (PCS) and HHCS.

- The Cures Act requires that EVV systems must electronically capture and verify six data elements for every in-home visit:

1. Type of service performed
2. Individual receiving the service
3. Date of the service
4. Location of service delivery
5. Individual providing the services
6. Times the service begins and ends

About EVV and Project Implementation Dates

- EVV is a telephone and computer-based system that electronically verifies when in-home visits occur.
- EVV applies to PCS and HHCS, including Home Health Agencies (HHA), regardless of payer.
- Visits can be captured via mobile application, telephone, or manually after the visit, when necessary.
- EVV is used to ensure that home and community-based HHCS and INP are delivered to people needing those services, in accordance with the Cures Act.
- The CalEVV system will be implemented for:
  - ✓ PCS – Community Supports (CS), Waiver Personal Care Services (WPCS).
  - ✓ HHCS **implementation by January 1, 2023**. HHCS went live on **September 8, 2022, for self-registration and training.**

Programs Impacted

EVV Phase II Programs/Authorities

Department	Program/Authority	PCS	HHCS
DDS	1915 (c) Home and Community Based Waivers, including the Self-Determination Program	✓	✓
DDS	1915 (i) State Plan Home and Community Based Services	✓	✓
DHCS	1915 (c) Home and Community-Based Alternatives Waiver, including WPCS	✓	✓
DHCS	HHCS (Fee-for-Service (FFS) and Managed Care (MC))	✓	✓
CDA/DHCS	Multipurpose Senior Services Program (MSSP) 1915 (c) Waiver and Community Based Adult Services (CBAS) Emergency Remote Services (ERS) 1115 Waiver	✓	✓
CDPH/DHCS	1915 (c) AIDS Medi-Cal Waiver	✓	✓
CDSS	In-Home Supportive Services (Agency Model)	✓	

HHCS – Impacted by EVV

- California home health programs delivered through MC or FFS that defines the set of services managed at the state level and administered locally.
- All services provided in the home that are EVV-impacted must be captured in the CalEVV system at the time of visit.
- For a complete list of impacted services, please reference our Provider Types and Codes document posted on our website. Please note that DHCS may amend this document at any time due to federal requirements.
- This is a non-exhaustive list of HHCS services subject to EVV:
  - HCBA Waiver
  - CCS, including INP
  - MC and FFS, including Whole Child Model (WCM)

Roles and Responsibilities

Roles and Responsibilities for Provider Agencies

Provider agencies and INPs are responsible for the following:

- Using an EVV system to log their EVV visit data consistently and completely and to review for accuracy.
- Ensuring they are linked to their JEs via their provider identification (ID) in the CalEVV system. Applies to both CalEVV and alternate EVV providers. For INP, your JE would be either your county, if under the CCS program, or DHCS, if outside of the CCS program.
- Ensuring they are linked to your JEs via CalEVV client-payer-service relationship for each client, service, and payer combination.
  - This is to ensure your JEs can view your client and visit data for compliance monitoring.
  - Alternate EVV providers must ensure this relationship exists and is correctly reported in their alternate EVV system.
- Modifying an existing EVV record to make necessary corrections.
- Entering a manual visit when necessary.

Roles and Responsibilities for JEs

JEs are responsible for the following:

- Case management.
- Verifying and monitoring providers and caregivers to ensure they are using an EVV system for logging their EVV visit data consistently and completely.
- Assisting providers in achieving EVV compliance.
- Ensuring your providers are linked to the correct JE via their provider ID and client-payer-services associations.
- If not, you will be unable to see your provider's visit data, their claims won't match, and you will reflect a low compliance percentage.
- The goal is for 100 percent of providers to be registered, trained, and using EVV for every in-home visit for a covered service, and all paid claims to have matching EVV data.

Compliance

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Compliance Information for HHCS Providers and INPs

- HHCS and INPs MUST register for and use the CalEVV system or an alternate EVV system by January 1, 2023. Providers not registered and using the system by this date will not be in compliance with EVV requirements.
  - CCS INPs to register using CCS via counties in the EVV Self-Registration portal.
  - HCBA INPs to register using DHCS via HCBA Waiver Agency and then click DHCS as your JE.
  - Other INPs to register using DHCS via MCP and then click DHCS as your JE.
  - FFS providers to register using DHCS via MCP and then click DHCS as your JE.
- CalEVV had a soft launch on September 8, 2022, allowing HHCS providers three months for technical assistance, training, and outreach to come into compliance.
- Compliance means that providers are registered and submitting EVV visit data for each in home visit.
- DHCS is taking, or will take, enforcement action against providers who have failed to comply with EVV requirements, as stated in All Plan Letter (APL) 22-014 and in California's Welfare & Institutions (W&I) Code section 14043.51.

CalEVV System Overview and Tools

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CalEVV System Overview

- The California EVV system is available for provider agencies of HHCS and INPs.
- The CalEVV system is free to state providers and users.
- California is an open EVV vendor model, which allows providers to choose between the state's EVV system or an alternate EVV system that must meet state requirements.

CalEVV Aggregator

- A tool to help JEs with oversight responsibilities.
- A web-based (read-only) portal that enables HHCS and INPs to view and report on EVV visit data.
- A repository that contains the electronic visit data submitted by providers and caregivers.
- Includes visit data submitted via CalEVV or an alternate EVV system.
- Includes providers, employees, client, visits and matched claims.
- User access to provider visit information is determined based on the payer, program, and service.
- To gain access, please email EVV@dhcs.ca.gov with the following information:
  - Name, email address, which JE you fall under, and the user's role.

CalEVV Business Intelligence (BI) Tool

- A tool to help JEs with oversight responsibilities.
- Pre-made reports (cards) for common program needs, as well as the ability to create new reports based on standard data sets.
- Interactive options for sorting, filters, drill down, etc.
- Configurable output column layout.
- JEs can access only the data explicitly linked with their recipients and providers.
- Limited to one license per JE.
- For instructional videos on Aggregator and Business Intelligence (BI) tool, please click the following link: https://sandata.zendesk.com/hc/en-us/articles/5125132454931--California-BI-JE-Users-Video-Library
  - To gain access to the videos, please submit a ticket to Sandata.

Sandata

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Sandata Overview

- Provides CalEVV and the Aggregator as a service in the “cloud”.
- CalEVV is a commercial product, configured, but not “custom-built”, for California.
- Sandata works with state departments and agencies to implement and support CalEVV.
- Sandata provides a service desk to support system users, including California departments, JEs, and provider agencies.

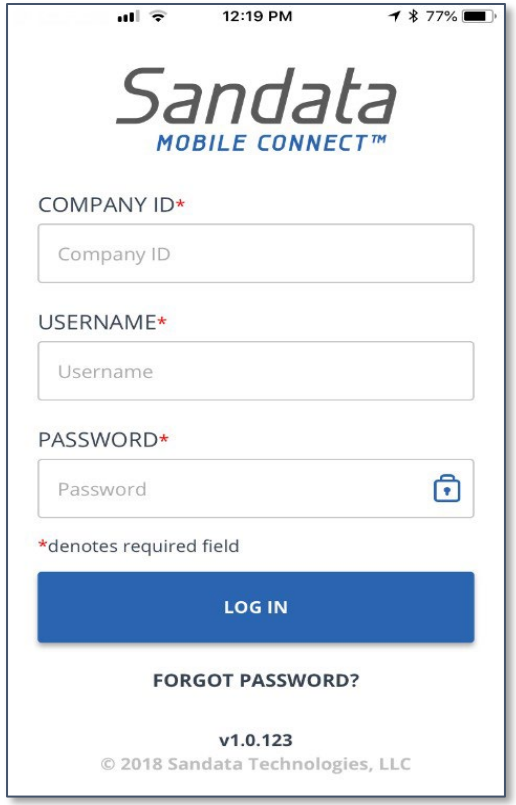
CalEVV Sandata Mobile Connect

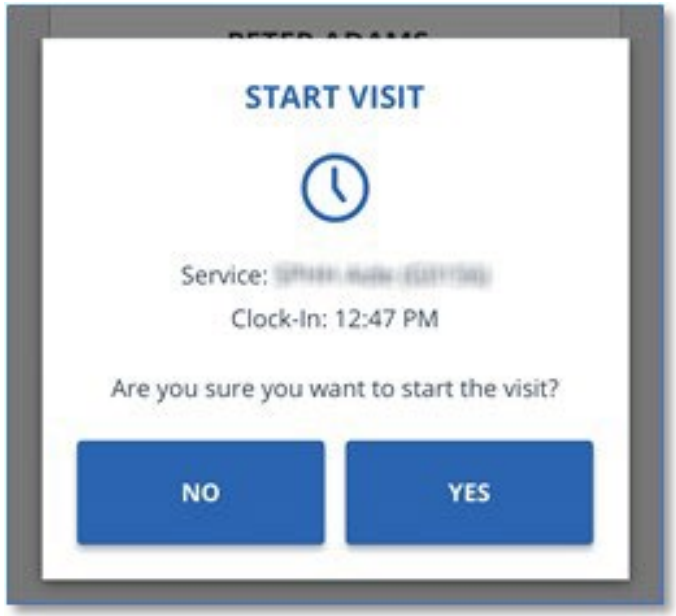
Primary EVV Method – for Caregivers

- The CalEVV SMC application can be downloaded on an Android or Apple device.
- Downloaded on caregiver devices; works with data and Wi-Fi.
- Works in both connected and disconnected mode.
- Collects the six EVV data elements.
- Start time and end time are verified by the device clock.
- Global Positioning System (GPS) location verified with GPS at the client, member, or recipient address at check-in and checkout only.
- Americans with Disabilities Act (ADA) 508 and Health Insurance Portability and Accountability Act (HIPAA) compliant.

CalEVV SMC

- SMC is the primary and preferred method for checking in and out for client visits. The CalEVV SMC application allows a caregiver to start and end a visit without requiring the use of the client's personal phone.





Steps for Getting Started with CalEVV

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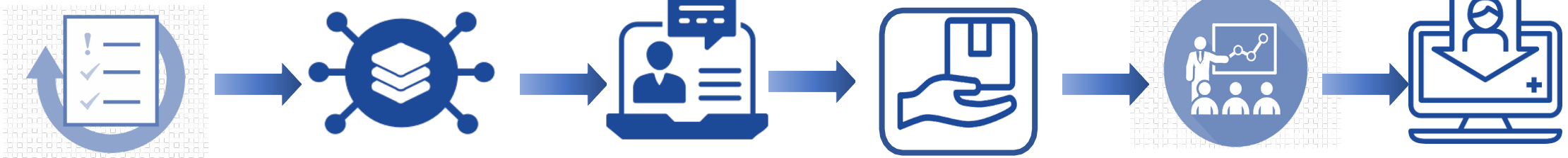
Steps for Getting Started with CalEVV

Steps 1-3 Admins Only Do This Once



1. Self-Registration

- Enter provider agency name, IDs & contact information
- Select JE, program, and services
- Select CalEVV or alternate EVV system

2. Account Creation

- After registration, account and CalEVV IDs created
- Email with CalEVV ID (need for training) with next steps for mandatory training registration

3. Register & Complete Training, Download Kit

- Register and complete initial courses in Learning Management. System (LMS) to unlock account credentials
- Receive completion email
- Download Welcome Kit

4. Set Up Staff, Caregivers and Clients in CalEVV

- Upon training completion, EVV credentials are emailed to registered administrator or individual to access their EVV accounts and set up staff and caregivers in the system

5. Get Staff Trained

- Registered administrator individual can now share training link with staff and caregivers
- Training available anytime via videos

6. Use EVV System, Submit, Monitor, & Fix Data

- Per state and federal requirements, all HHCS providers must use an EVV system to capture and submit EVV data

Best Practice Self-Registration

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Best Practice - Self-Registration

- HHCS provider agency administrators and INPs enter basic information, such as the provider agency name, which will be the same agency name as provided when billing.
- All HHCS providers (agency and independent providers) must self-register whether using CalEVV or an alternate EVV system.

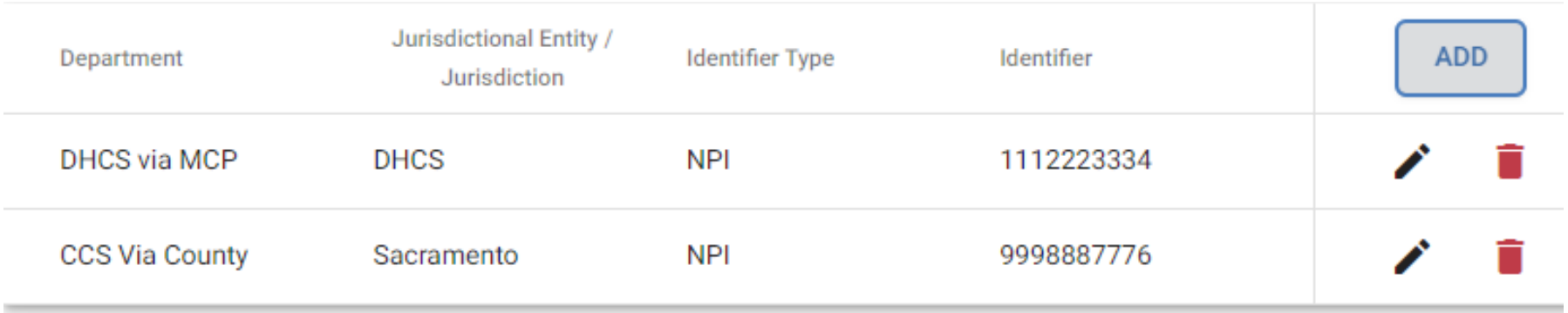
Best Practice - Self-Registration

Provider agency administrators must enter a Provider Identifier for each department and JE for which they actually provide covered services. Providers should enter the same identifier used for billing.

For each Provider Identifier added, the Identifier Type should be selected based on the department. Please note the following rules for each state program:

- DHCS requires a National Provider Identifier (NPI).
- CDPH and CDA also require a NPI. However, if you do not have a NPI, enter the Employer Identification Number (EIN).

- If you are supporting multiple programs or multiple JEs within a program, more than one entry is required. Add enough entries to cover all department, jurisdiction, and identifier relationships used in billing.

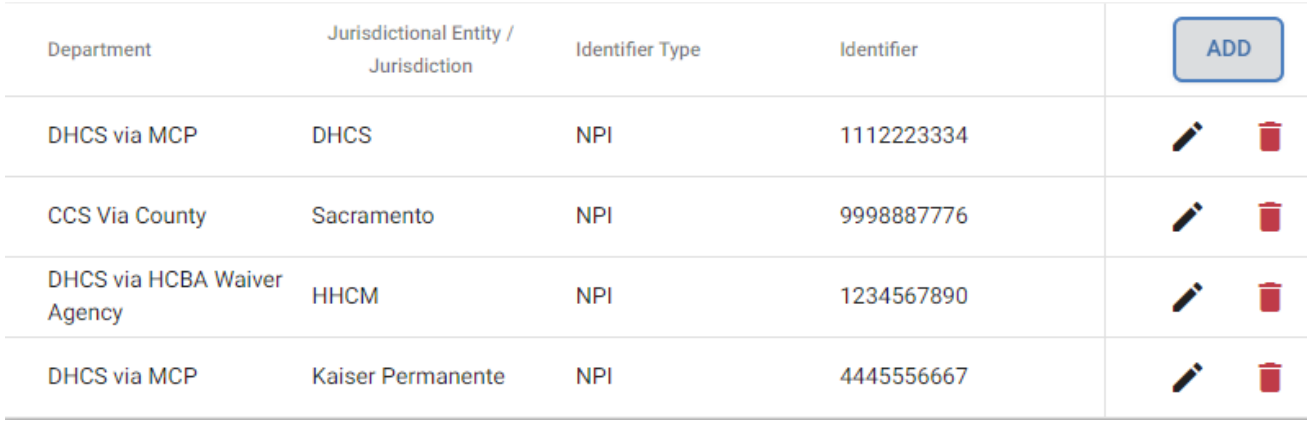


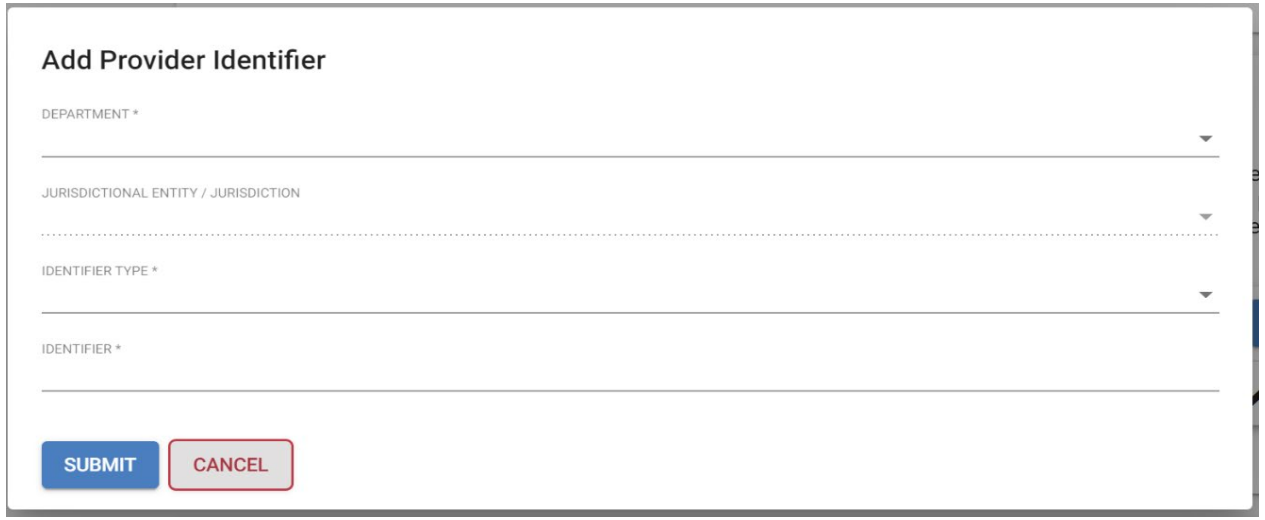
Department	Jurisdictional Entity / Jurisdiction	Identifier Type	Identifier	ADD
DHCS via MCP	DHCS	NPI	1112223334	
CCS Via County	Sacramento	NPI	9998887776	

Best Practice - Self-Registration Instructions

This is what it will look like in the Self-Registration Portal

- On the Provider Identifier segment, select **ADD** to add a new Provider Identifier.
- For the **Add Provider Identifier** dialog, **select** the Department, JE, and Identifier Type.
- Enter the Identifier and click **SUBMIT.**
- Repeat the process until you have added **ALL** required Identifiers.





Best Practice – Self-Registration Information & Data

- Providers using CalEVV systems must input accurate data while using the CalEVV portal.
- Check your provider IDs on the portal used for provider ID maintenance to ensure all your IDs are correct and associated with all applicable departments and JEs.
- Check your visit data to ensure the client-payer-services associations are being correctly sent to CalEVV.
- Check your visit data for completeness in the CalEVV portal (no unverified visits).
- Check your older visits (1-2 months or more) to ensure claims are matching.

Alternate EVV System Provider Registration

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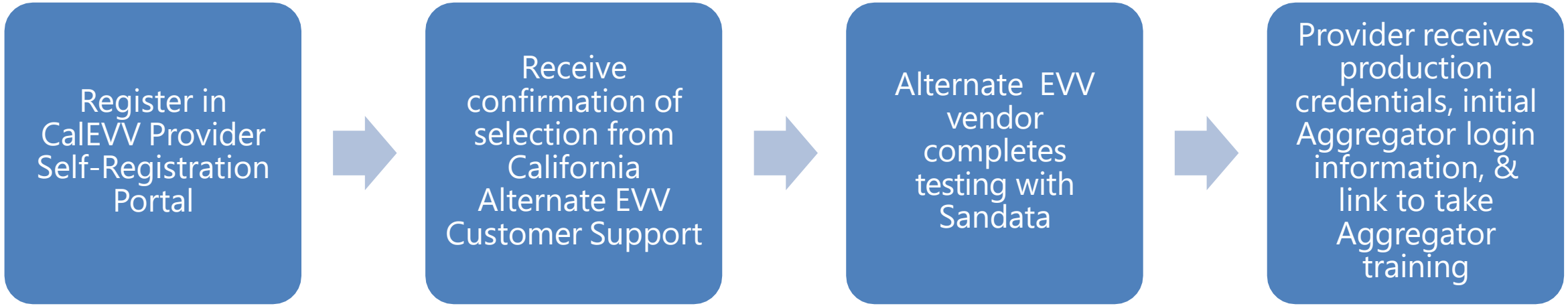
Alternate EVV System Provider Registration Process

Many provider agencies will use the CalEVV System. However, some provider agencies may choose to use an alternate EVV system.



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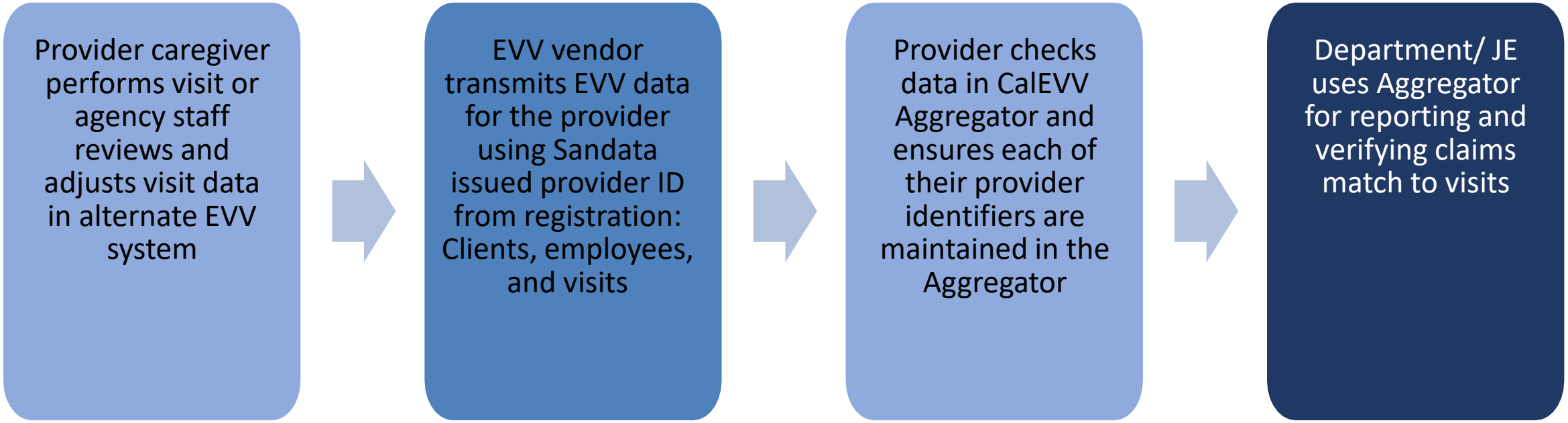
Alternate EVV System Provider Registration

- Once registered with CalEVV and you have selected the alternate EVV solution, you will receive an email providing instructions for your alternate EVV vendor and next steps.
- California Alternate EVV Customer Support and your selected alternate EVV vendor will work together to complete testing to ensure you can successfully send data to the CalEVV Aggregator.
- You will receive another email from the California Alternate EVV Customer Support team when testing has been successfully completed.
- The email will include a link to a self-paced training on the CalEVV Aggregator.
- Providers using alternate EVV systems should confirm their data accuracy using the CalEVV Aggregator Portal and complete the same tasks outlined on slide 33.

Alternate EVV System Workflow



CalEVV Provider Agency Training

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CalEVV Provider Agency Training

- EVV coordinators (office staff) should view the training videos after completing LMS training.
- The training videos are geared for administrative or office staff assigned to EVV coordination and oversight responsibility.
- The foundational EVV knowledge courses consist of the five following videos:
  - Introduction - 8 minutes
  - System Overview and Navigation - 17 minutes
  - Data Entry: Clients – 17 minutes
  - Visit Capture: Creating visits with the mobile app – 17 minutes
  - Visit Maintenance: Introduction – 21 minutes
  - Training link is: https://sandata.zendesk.com/hc/en-us/articles/4418031200787--CalEVV-Standard-English-Video-Training-Recordings

Best Practice Provider ID Maintenance

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Best Practice – Provider ID Maintenance

Maintaining provider IDs is essential for accurate reporting and claim matching.

- This feature allows users to add, edit/correct, or delete the provider identifiers associated with their accounts.
- This is the primary method to correct provider identifiers and eliminates the need to complete a support ticket for provider identifiers to be edited.
- This feature is available to both CalEVV and alternate EVV users. (Alternate EVV solution users can log into the Aggregator to add/edit/delete provider identifiers).
- Users with an “administrator” role will have privileges to add, edit/correct, delete, and grant privileges to others within their agency.
- To use this feature, log in to CalEVV, go to Security on the left-hand side menu, and then to Manage Provider Identifiers.

Best Practice Client-Payer Association

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Best Practice - Client-Payer Association

The client record must be created before the individual can be associated with a visit.

- For the provider agency
  - Defines which services are available for the clients/recipients in their care.
- For the caregiver
  - Limits the initial list of services for the recipient within the SMC application to make selecting the appropriate service easier for the caregiver.
- For the jurisdiction
  - Allows the association of the client/recipients and visits to the appropriate JE.
  - Makes them visible to the JE via the Aggregator.
  - Creates a basic EVV-system “authorization” record that is limited to the payer, program, service, jurisdiction, start date, and end date.

Best Practice - Client-Payer Association

- The client record must be completed before the individual can be associated with a visit.
- Ensure the following fields are correct in EVV: Client first name, Client last-name, Client Identification Number (CIN) or Unique Client Identifier (UCI) in the Medicaid ID field, payer, program and service, and service start date. Incorrect client records will result in unmatched visits.
- Client payer information is required for the correct JE association.
- Alternate EVV vendors provide this via the Application Programming Interface (API).
- CalEVV users can enter this manually or as part of a manual bulk upload.
- Manual bulk upload allows users to upload a provided Excel file into the Sandata system to quickly add large amounts of client/employee records.

Best Practice Visit Maintenance

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Best Practice - Visit Maintenance

- EVV data in an Incomplete status will be unable to be used for matching EVV data to the claim.
- All six key data elements are required when entering a visit.
  - Any missing data will trigger an exception.
- Exceptions appear in the form of a red dot ( ) when any required element(s) is/are missing.
- Corrections to exceptions can be made on the Visit Maintenance tab by clicking on the red dot.
- Once all exceptions from a visit are cleared, visit status will be updated to "verified" status.
- Agency administrators are responsible for working with their caregivers to clear exceptions.

Client Name	Employee Name	Service	Visit Date	Call In	Call Out	Call Hours	Visit Status	Group Visit Code	Units	Actions
Quinn, Edward	Adams, April	5.1 Respite In-Home Hourly	02/08/2022		02:47 PM		Incomplete			

Best Practice - Visit Maintenance

Review and clear exceptions to your visits in the CalEVV portal to ensure the following:

- The visit is captured and has all of the required pieces of information.
- The visit has both a call-in and callout time.
- Edit visits to match what occurred at the point of care.
- Use manual visit entry to record any visits that were not documented at the time a service was provided.
- Include the reason for modification if a change is made.
- Review visits for trends and/or reoccurring exceptions.

Best Practice – Visit Maintenance Trends

In Visit Maintenance, you may use these questions to look for trends:

- Are there reoccurring exceptions? If so, what are they?
- Are my visits for a particular payer remaining in an incomplete status?
- Are exceptions occurring most often for the same clients?

Next Steps

Next Steps: CalEVV System Provider Agencies

Providers must be registered in the Self-Registration portal and submitting all six EVV data elements for each in home visit by January 1, 2023.

Training

- After completing the self-registration, register for and complete the LMS training.
- Go to Sandata on-demand for core EVV foundational training.

Set up

- Administrators add users (coordinator and other administrators)
- Coordinators add clients and employees
- Coordinators add the client payer associations in the system

Train staff

- Prepare office staff and caregivers by providing EVV training
- Training available via Sandata on-demand as well as on the DHCS website - https://www.dhcs.ca.gov/provgovpart/Pages/EVV.aspx

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Next Steps: JEs

- Communication with provider agencies is critical for successful EVV compliance.
  - Ensure your provider agencies complete the provider self-registration and are registered as either using the CalEVV system or an alternate EVV system.
  - Ensure your provider agencies complete training through the LMS training portal.
  - Ensure your provider agencies are submitting all six required EVV data elements for each in-home visit.
  - The Aggregator and BI tool will assist in identifying which providers are in compliance.

CalEVV Helpful Resources

CalEVV Helpful Resources

- For questions or to be added to the DHCS EVV notification list, email EVV@dhcs.ca.gov
- DHCS EVV webpage: https://www.dhcs.ca.gov/provgovpart/Pages/EVV.aspx
- Training access: https://sandata.zendesk.com/hc/en-us (Must be registered and logged in)
  - Note: Your provider agency must be registered to access these videos.
- For CalEVV Technical Support:
  - Email CACustomerCare@sandata.com
  - Call 1(855) 943-6070
- For Alternate EVV Customer Support:
  - Email CAAltEVV@sandata.com
  - Call 1(855) 943-6069

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CalEVV Helpful Resources

- Self-Registration Portal Link: https://vendorregistration.calevv.com/.

- A Quick Reference Guide for provider agency administrators. If your provider agency has not completed self-registration, please do so before accessing the training videos. https://www.dhcs.ca.gov/provgovpart/Documents/CalEVV-Provider-Self-Registration-QRG.pdf

- Step by step instructional video on how to register in CalEVV

Q&A