



California Electronic Visit Verification (CalEVV) Managed Care Informational Webinar

August 11, 2022



Why are we here today?

- We will introduce CalEVV to managed care (MC) personal care services (PCS) providers.
- We will demonstrate best practices and how to accurately register and review the top issues that DHCS has encountered with registration information.
- We will focus on known issues with the provider registration process and will demonstrate submitting complete EVV data.



Agenda

- CalEVR Terminology
- EVR Overview
- Programs Impacted
- Roles and Responsibilities
- Compliance
- CalEVR System Overview & Tools
- About Sandata
- Steps for Getting Started with CalEVR
- Best Practice Self-Registration
- Alternate EVR Provider Registration
- CalEVR Provider Agency Training
- Best Practice Provider ID Maintenance
- Best Practice Client-Payer Association
- Best Practice Visit Maintenance
- Next Steps
- Potential Issues Questions and Answers
- CalEVR Helpful Resources
- Q&A



CalEVR Terminology



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)**
 - DDS - Regional Centers (RC)
 - CDA – Multipurpose Senior Services Program (MSSP) Sites
 - CDPH – Medi-Cal Waiver Program (MCWP) Agencies
 - CDSS - Counties
- Provider Agency
 - Entity that manages and coordinates the delivery of services and care to individual clients, recipients, and beneficiaries.
 - Providers, vendors, or service providers.



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 authorizes services and reimburses providers for delivering those services.
- Caregiver
 - The individual who provides services to the recipient/client/beneficiary.
 - Also known as an in-home provider, staff, or employee.
- CalEVV Aggregator
 - Provides a web-based (read-only) portal that enables a JE to view EVV visit data.
 - Provides a repository that contains electronic visit data sent by providers.



CalEVV Terminology

- Client/Recipient/Beneficiary
 - An individual who receives services subject to EVV requirements.
- Visit Exception
 - An indicator of missing information or details about the visit that must be addressed.
- CalEVV Portal
 - The online 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 PCS and home health care services (HHCS).

- The Cures Act requires that EVV systems must electronically capture and verify six data elements for every in-home visit:
 1. Individual/member receiving the services.
 2. Individual/caregiver providing the service.
 3. Type of service performed.
 4. Location of the service delivery.
 5. Date of service.
 6. Time 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, 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 PCS are delivered to people needing those services, in accordance with the Cures Act.
- The CalEVV system will be implemented for:
 - PCS – Community Supports (CS).
 - Providers must come into compliance by October 19, 2022
 - HHCS use by January 1, 2023.



Programs Impacted



Managed Care – Community Supports (CS) Impacted by EVV

- All services provided in the home that are EVV-impacted must be documented in the CalEVV system at the time of visit. EVV applies to PCS, regardless of payer.
- California Home Health programs delivered through Fee for Service or Managed Care (CAHHA) - program that defines the set of services and is managed at the state level and administered locally.
 - The table below represents CS services impacted by EVV.
 - This is a non-exhaustive list of services subject to EVV.

Department	Waiver Program	HCPCS Code	Modifier	Service Description
DHCS	CAHHA	H2014	U6	MCP - CS Day Habilitation; per 15 min
DHCS	CAHHA	S5130	U6	MCP - CS Homemaker services; 15 min
DHCS	CAHHA	S9125	U6	MCP - CS Respite; home; per diem
DHCS	CAHHA	T1019	U6	MCP - CS Personal Care Service; 15 min
DHCS	CAHHA	T2020	U6	MCP - CS Day Habilitation; per diem



Other PCS Programs Impacted by EVV

Department	Program	Type	Jurisdictional Entity
Department of Health Care Services (DHCS)	WPCS Community Supports	PCS	HCBA Waiver Agencies MCPs
California Department of Aging (CDA)	Multipurpose Senior Services Program (MSSP)	PCS	MSSP Sites
California Department of Public Health (CDPH)	AIDS Medi-Cal Waiver Program (MCWP)	PCS	MCWP Agencies
Department of Developmental Services (DDS)	DDS	PCS	Regional Centers
California Department of Social Services (CDSS)	CDSS	PCS	Counties



Roles and Responsibilities



Roles and Responsibilities for Provider Agencies

Provider agencies 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 ID in the CalEVV system. Applies to both CalEVV and alternate EVV providers.
- Ensuring they are linked to their JEs via CalEVV client-payer-service relationship for each client, service, and payer combination.
 - This is to ensure their JEs can view their 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 (MCPs)

JEs – MCPs are responsible for the following:

- Case management; there is no change to this responsibility.
- 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 your 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% 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



Compliance Information for Managed Care Providers

- Managed care provider agencies and subcontractors MUST register for and use the CalEVV system or an alternate EVV system by October 19, 2022. Providers not registered and using the system by this date will not be in compliance with EVV requirements.
- 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](#).



CalEVR System Overview and Tools



CalEVV System Overview

- The California EVV system is available for provider agencies and MCPs.
- The CalEVV system is free to JEs or provider agencies.
- 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 MCPs 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 our EVV team at EVV@dhcs.ca.gov with the following information:
 - Name, email address, which JE you fall under, and the user's role.



CalEVV Aggregator User Roles

- For access to the CalEVV Aggregator, a user must define their role:
 - Jurisdictional oversight - Intended for global access to visit data for program oversight.
 - Administrator - Administrative capabilities for users and limited to:
 - Access to security module.
 - Create and edit additional Aggregator users and groups for the payer.
 - Lock/unlock additional users.
 - Visit review.
 - Analytics – reporting.
 - Auditor – It is expected that the auditor is looking for specific information for an agency, member, or direct care.



CalEVR Business Intelligence 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.



About Sandata



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

- CalEVV Sandata Mobile Connect (SMC) application can be downloaded on an Android or Apple device.
- Downloaded on caregiver devices; works with data and WiFi.
- 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.



CaEVV SMC

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

12:19 PM 77%

Sandata
MOBILE CONNECT™

COMPANY ID*
Company ID

USERNAME*
Username

PASSWORD*
Password

*denotes required field

LOG IN

[FORGOT PASSWORD?](#)

v1.0.123
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PETER ADAMS

START VISIT

Service: [blurred]

Clock-In: 12:47 PM

Are you sure you want to start the visit?

NO **YES**

Steps for Getting Started with CalEVV



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



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



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 PCS providers must use an EVV system to capture and submit EVV data

Best Practice Self-Registration



Best Practice - Self-Registration

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

Basic Information

PROVIDER AGENCY NAME *
Same Agency Name on the Claim

SERVICE TYPES *
PCS Only

APPROXIMATE # OF PROGRAM RECIPIENTS *
100

PROGRAMS (SELECT ONE OR MORE) *
DHCS - WPCS - Personal Care Services in Home

APPROXIMATE # OF CAREGIVERS/STAFF *
50

Basic Information

PROVIDER AGENCY NAME *
Same Agency Name on the Claim

SERVICE TYPES *
PCS Only

APPROXIMATE # OF PROGRAM RECIPIENTS *
100

CDA - MSSP - 5.1 Respite In-Home Hourly

DHCS - WPCS - Respite Care Services in Home

DHCS - WPCS - Personal Care Services in Home

DHCS - WPCS - Habilitation in Home

Not Sure

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

ips






Department	Jurisdictional Entity / Jurisdiction	Identifier Type	Identifier	ADD
CDA via MSSP Site	Community Care Mgmt Corp	NPI	1112223334	 
DHCS via HCBA Waiver Agency	Ventura County	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.

Department	Jurisdictional Entity / Jurisdiction	Identifier Type	Identifier	ADD
CDA via MSSP Site	Community Care Mgmt Corp	NPI	1112223334	 
DHCS via HCBA Waiver Agency	Ventura County	NPI	9998887776	 
CDPH via MCWP Agency	TTC	EIN	11-6666555	 
DHCS via MCP	Blue Shield of California Promise	NPI	5556662221	 

Add Provider Identifier

DEPARTMENT *

JURISDICTIONAL ENTITY / JURISDICTION
.....

IDENTIFIER TYPE *

IDENTIFIER *

SUBMIT **CANCEL**

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.

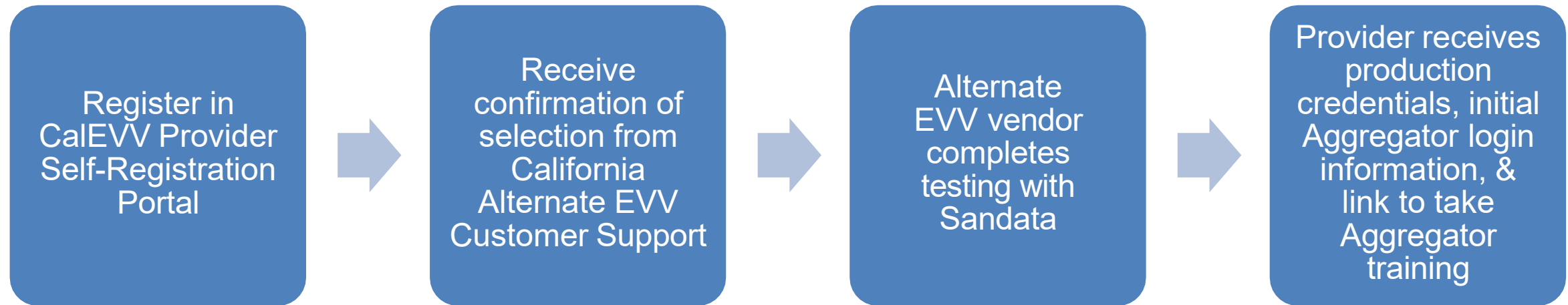


Alternate EVV System Provider Registration



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.

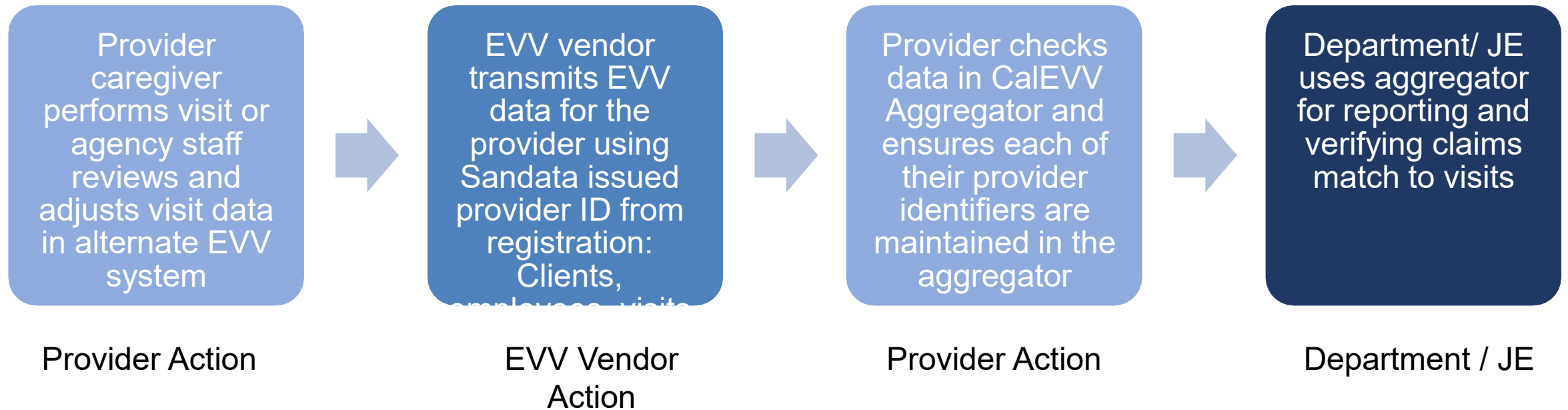


Alternate EVV System Provider Registration

- 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 34.



Alternate EVV System Workflow



CalEVS Provider Agency Training



CalEVV Provider Agency Training

- EVV coordinators (office staff) should view the training videos after completion of 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



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 into CalEVV, go to Security on the left-hand side menu, and then to Manage Provider Identifiers.



Best Practice Client-Payer Association



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



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

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

Register in the Self-Registration portal.

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



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.



Potential Issues: Questions and Answers



Potential Issues: Questions and Answers

Q: Why didn't I get my credentials after completing administrator training?

A: Credentials email delivery happens approximately 24 hours after completing administrator training. The email sender is eTrac. The individual who completed the self-registration will be the only person to receive a Welcome Kit.

Q: I did not receive the Welcome Kit, but a co-worker in my office did. Why?

A: The Welcome Kit cannot be sent/resent to multiple people. If the person who completed the self-registration did not receive the Welcome Kit email two business days after the administrator training was completed, contact Customer Support and provide the training certificate. Additional individuals should not call to request one.

Q: Do providers using EVV systems have to register for and take the LMS training?

A: No, EVV systems will not be required to take the LMS courses for the CalEVV system.



CalEVR 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



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>



Q&A

