



Electronic Visit Verification (EVV) Phase II: Self-Directed and Agency Provider Model for Personal Care Services (PCS) and Home Health Care Services (HHCS)

Stakeholder Meeting
October 2, 2018



Welcome, Introductions, Purpose of Meeting

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Department of Health Care Services



Purpose of the Meeting

- Introduction to EVV
- Overview of Phased Approach
 - EVV Phase I and Phase II
- Stakeholder Feedback



Agenda

- Welcome, Introductions, Purpose of Meeting
- Definitions and Overview of EVV
- Phase I: Self-Directed Model for IHSS and WPCS
- Phase II: Self-Directed and Agency Provider Model for PCS and HHCS
- Stakeholder Questions and Answers
- Final Comments and Next Steps



Definitions and Overview of EVV

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Definitions and Overview of Federal EVV Requirements

- Electronic Visit Verification (EVV)
- 21st Century CURES Act
- Personal Care Services (PCS)
- Home Health Care Services (HHCS)



EVV Overview

- EVV is a telephone and computer-based system that electronically verifies in-home visits occur.
- California is required to implement EVV for Medicaid-funded PCS and HHCS.



EVV Timelines per the CURES Act

- The federal 21st Century CURES Act was signed into law on December 13, 2016. It required states to use an electronic visit verification (EVV) system:
 - For personal care services (PCS) covered by Medicaid (Medi-Cal in California) by January 1, 2019.
 - For home health care services (HHCS) covered by Medicaid by January 1, 2023.
- On July 30, 2018 the President signed H.R. 6042, which delayed until January 1, 2020 the reduction of Federal Medicaid Assistance Percentage allotted for states failing to comply with EVV for PCS.



Good Faith Extension Letter

- In 2019 DHCS intends to submit a Good Faith Extension letter to the federal Centers for Medicare and Medicaid Services (CMS) to request more time for implementation.
- Pending CMS approval, this would allow California to delay implementation until January 1, 2021 for PCS and until January 1, 2024 for HHCS.



CURES Act Requirements for EVV Systems

- EVV systems must verify:
 - The type of service performed
 - The individual receiving the service
 - The individual providing the service
 - The date of the service
 - The location of service delivery
 - The time the service begins and ends



CURES Act Personal Care Services (PCS) Definitions

PCS are services furnished to an individual who is not an inpatient or resident of a hospital, nursing facility, intermediate care facility for individuals with intellectual disabilities, or institution for mental disease that are:

- a. Authorized for the individual by a physician in accordance with a plan of treatment or (at the option of the State) otherwise authorized in accordance with a service plan approved by the State;



PCS Definitions (continued)

- b. Provided by an individual who is qualified to provide such services and who is not a member of the individual's family (family member means a legally responsible relative); and
- c. Furnished in a home, and at the State's option, in another location.



Medicaid PCS Programs in California

Medicaid PCS are provided in California through programs managed by:

- California Department of Social Services (CDSS)
- Department of Developmental Services (DDS)
- Department of Health Care Services (DHCS)
- California Department of Public Health (CDPH)
- California Department Aging (CDA)



CURES Act Home Health Care Services (HHCS) Definitions

- Any home health services that the state has opted to cover under the Medicaid state plan or under a waiver of the plan, and that requires an in-home visit, would be subject to the EVV requirement.



HHCS Definitions (continued)

Home health services are described in the California State Plan to include nursing services that may be provided by a registered nurse when no home health agency exist in the area, home health aide services, medical supplies and equipment, and therapies. Services are ordered by a physician as part of a written plan of care that the physician reviews every 60 days.



HHCS Definitions (continued)

Home health services include the following services:

- Skilled nursing services
- Physical therapy services
- Occupational therapy services
- Speech therapy services
- Home health aide services provided by a Home Health Agency



Medicaid HHCS Programs in California

Medicaid HHCS are provided in California through programs managed by:

- Department of Health Care Services (DHCS)
- California Department of Public Health (CDPH)
- Department of Developmental Services (DDS)



General Description of EVV Phase I and Phase II

- Phase I: Self-Directed Model for IHSS & WPCS that use Case Management Payrolling & Information System (CMIPS) and the Electronic Timesheet (ETS) and Telephone Timesheet Systems (TTS).
- Phase II: Non-IHSS/WPCS individual providers or agencies that provide PCS and/or HHCS to eligible Medi-Cal beneficiaries.



Phase I: Self-Directed Model for IHSS and WPCS

Debbi Thomson
Deputy Director
California Department of Social Services



IHSS EVV Guiding Principles

1. California's approach to EVV will be consistent with federal law.
2. EVV will be developed through a collaborative stakeholder process.
3. EVV will be developed in a manner that respects recipients and providers, does not alter their Olmstead protections and is minimally burdensome.
4. EVV will not change the number of service hours, how services are provided or where services are delivered.



IHSS EVV Guiding Principles (continued)

5. Use of geo-tracking or global positioning system capabilities (GPS) will not be required.
6. Existing electronic and telephonic timesheet systems will be leveraged for EVV.
7. EVV will not be subject to any violations.
8. Providers, recipients and other stakeholders will be trained on the use of the EVV system.



Phase I: Self-Directed Model for IHSS and WPCS

- IHSS and WPCS are known as “consumer directed” services. Individual providers are hired, fired, scheduled, trained and directed by the recipient.
- Consumer direction is the predominant model of service delivery for personal care services under IHSS and WPCS Programs.



Phase I: Self-Directed Model for IHSS and WPCS Stakeholder Engagement 2018-19

- Four statewide EVV stakeholder meetings to-date, with over 200 participants in person and via phone.
- State participation in numerous stakeholder-organized forums, meetings and small group listening sessions.
- Centralized information about EVV on the CDSS EVV website, including direct EVV email and postal addresses to facilitate communications.



Proposed Solution for the Phase I: Self-Directed Model for IHSS & WPCS

- Leverage and enhance the existing Electronic Timesheet System (ETS) and Telephone Timesheet System (TTS).
 - Can be accomplished with current IHSS IT system vendors.
- Offer multiple options for EVV: Online web portal, telephone (landline or mobile), and mobile phone application.
- New Data Requirements
 - Service Type: No tracking of service type needed since IHSS and WPCS only provide personal care services
 - Location: Add drop-down menu to ETS with the option to select: Home, Community or Both
 - Start/End: Add fields to enter time work begins and ends; then provider would manually enter total time worked, e.g., 3 hours 15 minutes



Phase I: Self-Directed EVV Prototype Model Development Process and Timeline

Timeline	EVV Web Portal	Telephone Timesheet System
August–October 2018 Initial Development	Develop workable EVV web portal prototype.	
November 2018 Stakeholder Demonstrations Round 1 for EVV Web Portal	Conduct demonstrations of prototype for stakeholder input.	
December 2018 – February 2019 Prototype Revisions	Modify prototype based on feedback.	Initiate development of basic script.
March–April 2019 Stakeholder Demonstrations -Round 2 for EVV Web Portal -Round 1 for Telephone Timesheet System	Conduct demonstrations of prototype for stakeholder input.	Conduct stakeholder meetings to solicit feedback on scripts.
May–June 2019 Prototype Revisions	Make prototype revisions based on feedback.	Make script revisions based on feedback.



Phase I Additional Information

- For additional Information and future updates about the Phase I: Self-Directed Model for IHSS and WPCS, please visit the **CDSS EVV Webpage:**

<http://www.cdss.ca.gov/inforesources/IHSS/EVV>



Phase II: Self-Directed and Agency Provider Model for PCS and HHCS

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Department of Health Care Services



Phase II Overview

- The State will identify and implement either an existing system(s), or a new system, for EVV for non-IHSS/WPCS individual providers or agencies that provide PCS and/or HHCS to eligible Medi-Cal beneficiaries.
- The State will identify the EVV design that best fits the needs of California and reflects the EVV guiding principles.
- Phase II does not include PCS services processed through CMIPS II.



Phase II Program Examples

Phase II will include a number of programs, when PCS or HHCS services are delivered in the beneficiary's home. For example:

- Home health agencies
- Hospice agencies
- IHSS and WPCS Agency Model
- Home and Community Based Services (HCBS) waiver programs
 - Home and Community Based Alternatives Waiver
 - Developmentally Disabled Waiver programs
 - Multipurpose Senior Services Program
- **Several other programs being reviewed by the State**



Phase II Development Considerations

- Many HHCS or PCS agencies already use electronic systems for timekeeping and other purposes.
- Agencies differ in size, structure, and geographic considerations.
- Further information gathering needed for the State to develop options.



Phase II Stakeholder Engagement

- The State is committed to a thoughtful implementation process inclusive of stakeholders, in alignment with the EVV guiding principles.
- The State is committed to ensuring all communications, meetings and materials are accessible to all stakeholders.



Stakeholder Questions and Answers

Department of Health Care Services
California Department of Social Services
California Department of Developmental Services

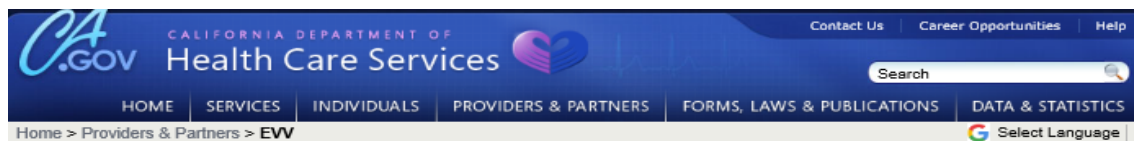


Final Comments and Next Steps

Jacey Cooper and Anastasia Dodson
Department of Health Care Services



DHCS EVV Phase II Website



▶ Electronic Visit Verification (EVV) Phase II Stakeholder Group

Electronic visit verification (EVV) is a telephone and computer-based system that electronically verifies service visits occur. EVV systems must verify: Type of service performed; Individual receiving the service; Date of the service; Location of service delivery; Individual providing the services; and Time the service begins and ends.

Pursuant to Subsection I of Section 1903 of the Social Security Act (42 U.S.C. 1396b), all states must implement EVV for Medicaid-funded personal care services (PCS) by January 2020 and home health care services (HHCS) by January 2023. EVV will impact all PCS and HHCS provided by under the Medi-Cal state plan and various Medicaid Home and Community-Based Service programs. These services are provided in California through programs managed by the Department of Health Care Services and several other state departments.

California is implementing EVV in two phases:

Phase I: This Phase is for the In-Home Supportive Services (IHSS) program and Waiver Personal Care Services program, focused on EVV implementation for programs that currently use the Case Management Payrolling & Information Systems (CMIPS II) and Electronic Time Sheet System (ETS). Further information about Phase I is available on the California Department of Social Services website.

Phase II: This Phase is focused on identifying either an existing system(s) or a new system to implement EVV for non-CMIPS and agency personal care services, and self-directed and agency home health services.

Information about EVV stakeholder meetings and implementation for Phase II will be posted on this DHCS webpage.

Note: There are two models for the provision of PCS and HHCS, the Self Directed/Individual Provider Model and the Agency Provider.

The Self Directed Model, also known as the Individual Provider Model, supports the provision of PCS by an individual provider. The Self-Directed Model supports the provision of PCS by an individual provider. This model gives the recipient, or their authorized representative, the autonomy to hire or fire a provider of their choosing as well as to instruct them on how to facilitate their PCS needs.

The Agency Provider Model supports the facilitation of PCS and/or HHCS by an authorized agency who is responsible for hiring, firing, and training personnel to facilitate services on behalf of an eligible Medi-Cal beneficiary. Agency Providers are employed by commercial agencies who manage their work, process payroll, and issue their paychecks. These agencies can either have contracts with counties or enroll through DHCS as a Medi-Cal provider.

Stakeholder Meetings

Tuesday, October 2, 2018 1 p.m. to 3 p.m.

East End Complex Auditorium
1500 Capitol Avenue
Sacramento, CA, 95814

The meeting agenda and materials will be posted in advance on this DHCS webpage.



EVV Phase II Information

- For EVV Phase II information, please visit:
 - <http://www.dhcs.ca.gov/provgovpart/Pages/EVV.aspx>
- If you would like to be added to the DHCS EVV Phase II Interested Parties email list or if you have questions, please send them to EVV@dhcs.ca.gov