Waiver Personal Care Services Providers Mandatory Meeting

June 30, 2022

Why are we here today?

- DHCS has invited you, a personal care services (PCS) provider, because we have been unable to locate your registration and billing information, or we've found issues with your registration information.

- In order to resolve any issues, 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 demo submitting a complete Electronic Visit Verification (EVV) data record.

Agenda

- EVV Overview

- Compliance

- CalEVV & Programs Impacted

- Terminology

- Roles and Responsibilities

- Getting Started with CalEVV

- Best Practice Self-Registration

- Best Practice Client-Payer Association

- Best Practice Provider ID Maintenance

- Best Practice Visit Maintenance

- Common Questions

- CalEVV Helpful Resources

- Next Steps

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.

Compliance

Compliance Information for PCS Providers

- California's state system to capture EVV data is referred to as CalEVV.

- CalEVV went live for PCS on January 1, 2022.

- All PCS providers who have not registered with CalEVV as of March 1, 2022, are not 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 the CalEVV Information Notice: 22-01 and in California's Welfare & Institutions (W&I) code section §14043.51.

  - Provide technical assistance on compliance.

  - Require an approved corrective action plan.

  - Recover associated overpayments.

  - Impose enrollment or monetary sanctions.

  - Take any other remedial action, as deemed appropriate.

CalEVV & Programs Impacted

About CalEVV

- EVV applies to PCS and HHCS, regardless of payer.

- Visits can be captured by using a mobile application, by telephone, or manually after the visit, when necessary.

- Individuals and their providers have options for how to capture EVV visits to best meet their needs.

PCS Programs Impacted by EVV

Dept.	Program	Type	Jurisdictional Entity
Dept of Healthcare Services (DHCS)	WPCS	PCS	HCBA Waiver Agencies
California Dept of Aging (CDA)	Multipurpose Senior Services Program (MSSP)	PCS	MSSP Sites
California Dept of Health (CDPH)	Medi-Cal AIDS Waiver Program (MCWP)	PCS	MCWP Agencies
Dept of Developmental Services (DDS)	DDS	PCS	Regional Centers
California Dept. of Social Services (CDSS)	CDSS	PCS	Counties

CalEVV Terminology

CalEVV Terminology

- Jurisdictional Entities (JE)
  - State Sponsor Departments (See State Sponsor Departments definition)
  - **Home and Community-Based Alternatives (HCBA) Waiver Agencies**
  - Managed Care Plans (MCP)
  - Regional Centers (RC)
  - MSSP Sites
  - MCWP Agencies
  - Counties

- Provider Agency
  - Entity that manages and coordinates the delivery of services and care to individual clients/recipients/beneficiaries.
  - Providers, vendors, or service providers.

CalEVV Terminology

- Individual Provider
  - An individual, not employed by an agency, that provides the service to a recipient and works for themselves. These individuals are usually paid directly by the State.

- Payer
  - An entity that generates authorization for care and accepts claims or encounter information to adjudicate and pay for services and activities performed.

- Caregiver
  - The individual who is providing the service to the recipient/client/beneficiary.
  - Also known as an in-home provider, staff, or employee.

- Aggregator
  - Web-based (read only) portal that enables a JE to view EVV visit data.
  - A repository which contains the 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 on the visit that need to be addressed.

- CalEVV Portal
  - The online portal used by agency and non-agency 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.

Roles & Responsibilities

Roles and Responsibilities for Provider Agencies

Provider Agencies are responsible for the following:

- Ensuring they are linked to their JE's.

  - Without the associated link, the JE cannot view their provider's visit data.

- Reporting correct EVV data and billing appropriately.

- Using an EVV system for logging their EVV visit data consistently and completely.

- Reviewing and ensuring the accuracy of EVV data submitted.

- Modifying an existing EVV record to make necessary corrections.

- Entering a manual visit when necessary.

Roles and Responsibilities for Jurisdictional Entities

JEs - HCBA waiver agencies are responsible for the following:

- Case management, and 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 full EVV compliance.

- Providers must be linked to their JE.
  - If not, your JE will be unable to view EVV visit data.
  - In CalEVV, there must be a linkage from the providers to the JE.

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, & Services
- Select CalEVV or Alternate EVV system

2. Account Creation

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

3. Register & Complete Training, Download Kit

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

4. Set Up Staff, Caregivers & Clients in CalEVV

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

5. Get Staff Trained

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

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

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

Open Vendor Model

- California's EVV program is known as CalEVV and is free for providers.

- Providers may choose between the state solution (CalEVV) or an alternate solution (AltEVV) that must meet state requirements.

Best Practice Self Registration

Best Practice - Self-Registration Instructions

- PCS provider agency administrators enter the basic information, such as provider agency name, which will be the same agency name as provided when billing.

Select **ALL** the services you provide

Once you select, you will see the entire list for all department/programs

Basic Information

PROVIDER AGENCY NAME *
Same Agency Name on the Claim

SERVICE TYPES *
PCS Only

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

APPROXIMATE # OF PROGRAM RECIPIENTS *
100

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 Instructions

Provider agency administrators, when selecting the **Provider Identifier – Identifier Type**, please note the following **rules** for each state program:

- **DHCS, CDPH,** and **CDA** require a National Provider Identifier (NPI). Providers are required to enter the ID they use for billing. If you do not have an NPI, enter the Employer Identification Number (EIN).

- Enter all IDs for the JEs you support.

Department	Jurisdictional Entity / Jurisdiction	Identifier Type	Identifier	ADD	
DHCS via HCBA Waiver Agency	Access TLC	NPI	1111111111	✏️	🗑️
DHCS via HCBA Waiver Agency	Access TLC	EIN	11-1111111	✏️	🗑️

Best Practice - Self-Registration Instructions

- When selecting the Provider Identifier, if supporting **multiple programs**, **more than one** Identifier Type and Identifier are ~~is~~ required.

- Enter the Department, JE, Identifier Type, and Identifier Number, and click **ADD**.

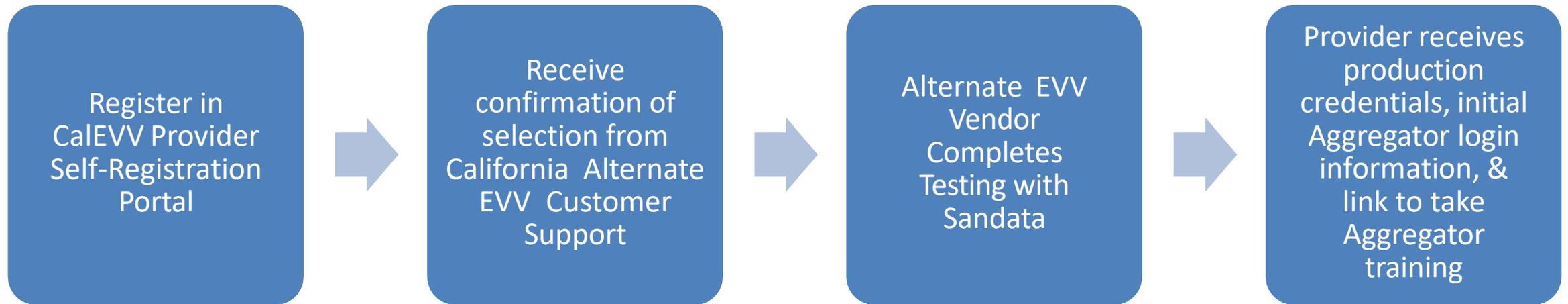- Repeat the process until you have added **ALL** required Identifier Types.

Provider Identifiers

The Provider Identifiers section of this form will collect all your unique identifiers per California Department. These identifiers are used by your jurisdictions in billing. You are required to enter at least one identifier. Please provide account information for each contracted service you provide to the State of California. You will be able to manage these identifiers in the CalEVV system or CalEVV Aggregator system after program launch.

Department	Jurisdictional Entity / Jurisdiction	Identifier Type	Identifier	ADD	
DHCS via HCBA Waiver Agency	Access TLC	NPI	1629534045	✏️	🗑️
DHCS via HCBA Waiver Agency	Libertana Home Health	NPI	1013967314	✏️	🗑️
DHCS via HCBA Waiver Agency	Partners in Care	NPI	1225433154	✏️	🗑️

NOTE: A minimum of one Provider Identifier must be added.

Alternate EVV System User Registration Process

Register in CalEVV Provider Self-Registration Portal

→

Receive confirmation of selection from California Alternate EVV Customer Support

→

Alternate EVV Vendor Completes Testing with Sandata

→

Provider receives production credentials, initial Aggregator login information, & link to take Aggregator training

Best Practice – Self Registration Information & Data

- Provider identifiers & associations.

- Providers must be identified with the correct JE.

- Providers must be associated and identified by Client ID.

- Incorrect identifier chosen (WPCS uses NPI).

- Correct misspellings.

- Continued maintenance of identifiers in CalEVV and CalEVV Aggregator are required.

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 an alternative method to correcting 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 the "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 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: This 'authorization' is limited to 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, CIN or 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 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 **Incomplete** status will not be able 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 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 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 reason for modification <u>if</u> 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/Tasks: Unregistered Providers

- Providers who have not yet registered must register immediately.

- Ensure all provider billing identifiers for all waiver agencies or other JEs for other departments are correct and maintained in the CalEVV system.

- Perform visit maintenance in CalEVV or Alternate EVV system to clear all exceptions regularly before billing for visits.

- DHCS will enforce provider compliance to register for a CalEVV account, using the following link: Home Page - California Provider (Vendor) Self-Registration Portal (calevv.com).

Next Steps/Tasks: Correction(s) Required

- Providers who have registered, but need to make corrections to their provider IDs, associations, or business name, etc., must make the corrections immediately.

- Ensure all provider billing identifiers for all waiver agencies or other JEs for other departments are correct and maintained in the CalEVV solution.

- Perform visit maintenance in CalEVV or Alternate EVV solution to clear all exceptions regularly before billing for visits.

- DHCS will enforce provider compliance to correct CalEVV data.

Common Customer Support Questions & Answers

Common Customer Support Questions and Answers

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

A: Timing between administrator training and credentials email delivery is approximately 24 hours after training completion. 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 get the Welcome Kit, but a co-worker in my office did. Why?

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

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.

CalEVV Helpful Resources

- For program questions or to be added to the DHCS EVV notification list, email EVV@dhcs.ca.gov.

- For information about EVV, visit the EVV webpage:

  https://www.dhcs.ca.gov/provgovpart/Pages/EVV.aspx.

- For DDS program questions, email EVV@dds.ca.gov, or visit the DDS website for more information: https://www.dds.ca.gov/services/evv/.

- For CalEVV Technical Support, email CACustomerCare@sandata.com or call 1(855) 943-6070.

- For Alternate EVV Customer Support, email CAAltEVV@sandata.com or call 1(855) 943-6069.

- For training questions, email https://sandata.zendesk.com/hc/en-us.

CalEVV Helpful Resources

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

- Self-Registration Quick Reference Guide:

https://www.dhcs.ca.gov/provgovpart/Documents/CalEVV-Provider-Self-Registration-QRG.pdf

Q&A