Agenda

- Welcome
- Presentation and Context
- Review and discussion of stakeholder input on key decisions
- Next steps
Welcome and Introductions
Project Overview

- Recommendations due to MN Legislature by January 15th, 2018

- September and October: Stakeholder engagement process
  - Stakeholder Working Group
  - Community Conversations

- November and December:
  - Report writing, review and approval
21st Century Cures Act

Electronic Visit Verification (EVV) for:

- personal care services by January 2019
- home health services by January 2023

- Personal care services include services authorized through the Medicaid State Plan and the Medicaid waivers.
21st Century Cures Act

Electronic Visit Verification must verify:

- Type of service performed
- Who received the service
- Date of service
- Location of service delivery
- Who provided the service
- When the service begins and ends
21st Century Cures Act

States must work with stakeholders involved with personal care and home health to ensure:

- EVV is “minimally burdensome”
- Consideration of best practices and existing use of EVV
- EVV system is HIPAA-compliant and secure
- Training opportunities are available to providers of personal care and home health services
21st Century Cures Act

- EVV must not
  - Limit services provided
  - Limit provider selection
  - Constrain an individual’s selection of a worker
  - Impede the manner in which care is delivered
- States are not required to use a particular or uniform system
- CMS is required to issue detailed guidance in 2017
What’s different or in addition to federal requirements?

- Minnesota Department of Human Services (DHS) must:
  - consider other electronic service delivery documentation methods in addition to EVV
  - consider existing best practices and use of electronic service delivery documentation
Minnesota Department of Human Services (DHS) must ensure that EVV is:

- minimally administratively and financially burdensome to providers
- minimally burdensome to people using services and least disruptive to services
- consistent with policies related to covered services, flexibility of service use, and quality assurance
DHS must:

- ensure that EVV is effective for preventing fraud when balanced with the requirements to minimally burden providers and people using services.

- establish baseline measurements related to fraud prevention and performance measurements for the improvement of program integrity.
2017 Minnesota Session Laws

DHS must submit a legislative report by January 15, 2018 with recommendations for:

- essential elements for a base-level system to be implemented by 2019
- enhancements to the system with cost projections and cost/benefit analysis
- elimination of regulations deemed inefficient, ineffective or unnecessary once the system is implemented
EVV and person-centered services

Tips on EVV implementation from Applied Self Direction

- People using personal care services live in cities, small towns, on farms and remote communities.
  - An EVV system needs to have flexibility and adaptability related to internet access or mobile devices. A successful EVV system will accommodate limited or no internet access where personal care service is delivered.
Like all of us, people using personal care services experience last-minute changes and unexpected challenges.

An EVV system should avoid rigid scheduling rules. A successful EVV system will allow for ease of schedule changes based on the person’s needs.
EVV and person-centered services

Tips on EVV implementation from Applied Self Direction

- People may not always be able to call in the moment work begins or end the shift as soon as work ends. Mistakes will also happen. Correcting our errors is an everyday experience and should not result in financial hardship.

- An EVV system should not make it difficult to retroactively adjust shift start or end times nor create lengthy payment delays when mistakes happen. A successful EVV system will facilitate efficient communication for problem-solving when mistakes occur.
People using personal care services are typically on the go – running errands, meeting friends, going to work, enjoying their hobbies & living full lives in the community.

An EVV system should be as mobile as the people using it. A successful EVV system will support individuals to get services wherever the person lives his/her life and not only in the home or nearby the home.
Tips on EVV implementation from Applied Self Direction

- People using personal care services have responsibilities for directing their services. Individuals approving their workers’ timesheets is a critical component of participant direction.
  - An EVV system should be designed to keep participants “in the driver’s seat.” A successful EVV system will provide a variety of accessible means for people to approve service hours, using both innovative and standard technologies.
Models for Implementation

- Provider choice
- State choice/state developed
- Hybrid
Provider Choice

- Providers select an EVV vendor and fund implementation
- States can set standards EVV vendors must meet or recommend a preferred list of vendors

Considerations:

- May support or accommodate existing use and investments in EVV by providers
- Allows providers to choose system that suits them best
- May be burdensome or infeasible for small providers
- People may have multiple systems to learn when changing providers
- Challenging for the state to provider oversight
State Choice

State contracts with single EVV vendor that all providers must use

Considerations:

- Providers have one system to integrate with and train on.
- People using services have one system to adapt to.
- Ease of oversight by the state.
- Greater cost-sharing by the state. May reduce burden on providers.
- Does not account for existing use of EVV by providers.
- Developing RFP and contract negotiations may create longer timeline
State Developed

- States create and manage a customized EVV system with the assistance of a contractor

Considerations:
- Providers have one system to integrate with and train on.
- Does not account for existing use of EVV by providers.
- People using services have one system to adapt to.
- Customized system may better meet needs.
- Greater cost-sharing by the state
- Longer timeline to implementation
- State has greater responsibilities for design, maintenance, and training.
Hybrid

- States contract with one EVV vendor or build a customized system but allow providers to use their own EVV systems that integrates with state system.
- States can set standards EVV vendors must meet or recommend a preferred list of vendors

Considerations:
- Providers have a choice of systems to integrate with and train on.
- People using services may have multiple systems to learn when changing.
- Easier oversight by the state.
- Greater cost-sharing by the state. May reduce burden on providers.
- Accounts for existing use of EVV by providers
- Developing RFP, contract negotiations, and integration with other systems may create longer timeline
Questions?
Electronic Visit Verification
Stakeholder Input on Key Decisions

Disability Services Division
December 11, 2017
EVV Key Recommendation Topics

1. Which model for EVV?
2. What is minimally burdensome for providers?
3. What is minimally burdensome for people using services?
4. What are some considerations related to flexibility and quality assurance?
5. What is important to you about verification?
6. How can an EVV add value for you?
7. What would EVV allow us to stop doing?
1. EVV Models

- Provider Choice – Providers use their own systems for EVV
- State Choice – State selects an EVV system and all use that system
- Hybrid – State selects an EVV system and providers may use that or their own system
1. EVV Models - What we’ve heard

- Providers who have EVV systems want to keep using them
- Providers who don’t have EVV systems would like the state to provide the system
- PCAs and persons receiving services are concerned about learning and using multiple systems
1. EVV Models - Table work question

Do you agree? What do you have to add?

- Providers who have EVV systems want to keep using them
- Providers who don’t have EVV systems would like the state to provide the system
- PCAs and persons receiving services are concerned about learning and using multiple systems
2. Burden on Providers - What we’ve heard

- Providers want help with the administrative burden of EVV such as useful reports, interfaces, validations
- Providers are concerned about costs
- Providers want easy correction of mistakes
2. Burden on Providers - Table work question

- Do you agree? What do you have to add?
  - Providers want help with the administrative burden of EVV such as useful reports, interfaces, validations
  - Providers are concerned about costs
  - Providers want easy correction of mistakes
3. Burden on People Using Services - What we’ve heard

- EVV needs to accommodate service location and schedule realities
- EVV needs to accommodate persons with disabilities
- EVV needs to accommodate multiple languages
- EVV needs to accommodate lack of phone and internet
3. Burden on People Using Services - Table work question

- Do you agree? What do you have to add?
  - EVV needs to accommodate service location and schedule realities
  - EVV needs to accommodate persons with disabilities
  - EVV needs to accommodate multiple languages
  - EVV needs to accommodate lack of phone and internet
4. Flexibility and Quality Assurance - What we’ve heard

- EVV cannot limit when and where services are received
- EVV must allow best practices in services – for example, providing urgent service instead of waiting to clock in first
- Providers and persons receiving services want to see the data that will be sent for verification
- The EVV system should not be so burdensome that it would discourage people from working as PCAs
4. Flexibility and Quality Assurance -
Table work question

Do you agree? What do you have to add?

- EVV cannot limit when and where services are received
- EVV must allow best practices in services – for example, providing urgent service instead of waiting to clock in first
- Providers and persons receiving services want to see the data that will be sent for verification
- The EVV system should not be so burdensome that it would discourage people from working as PCAs
5. What is Important about Verification? - What we’ve heard

- Some methods of verification are too intrusive and are unacceptable to some people
- Multiple methods of verification are needed
- Verification methods must accommodate disabilities and availability of phone and internet
5. What is Important about Verification? - Table work question

Do you agree? What do you have to add?

- Some methods of verification are too intrusive and are unacceptable to some people
- Multiple methods of verification are needed
- Verification methods must accommodate disabilities and availability of phone and internet
6. How Can EVV Add Value for You? - What we’ve heard

- Interface with other systems such as billing or payroll
6. How Can EVV Add Value for You? - Table work question

- Do you agree? What do you have to add?
  - Interface with other systems such as billing or payroll
7. What Would EVV Allow Us to Stop Doing? - What we’ve heard

- Eliminate 90 day phone service verifications
7. What Would EVV Allow Us to Stop Doing? - Table work question

- Do you agree? What do you have to add?
  - Eliminate 90 day phone service verifications