Section 12006 of the 21st Century Cures Act Electronic Visit Verification Systems Requirements, Potential Benefits, and Utah’s Proposed Approach

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Overview of the 21st Century CURES Act

What is it?
• Section 12006 of the Act requires states to implement an EVV system for Personal Care services (including HCBS services) and Home Health services

How does the Act apply to HCBS programs?
• HCBS Services that provide ADL assistance in a similar way to personal care services must also implement EVV

How does this Impact States?
• All state Medicaid programs must be compliant for Personal Care and applicable HCBS services (PCS) by January 1, 2019 and Home Health services (HHS) by January 1, 2023
• States who are not compliant by those dates are subject to reductions in Federal funds
EVV Requirements per Section 12006 of the Act

EVV Systems Must Verify:

- **Type** of service performed;
- **Individual receiving** the service;
- **Date** of the service;
- **Location** of service delivery;
- **Individual providing** the service;
- **Time** the service begins and ends.

Department of Health Role:

- Facilitate implementation of EVV systems and monitor initial and ongoing compliance.
Flexibility for States

• Allows states to select their EVV design and implement quality control measures of their choosing.

Stakeholder Input Required

• Requires states consult other state agencies that provide PCS or HHS
• Requires states seek stakeholder input from:
  • Family caregivers
  • Individuals receiving and furnishing PCS/HHS; and
  • Other stakeholders
Other Requirements for EVV systems:
- “Minimally burdensome”
- HIPAA-compliant

In Addition:
- States must consider best practices.

Implementing an EVV system does not:
- Limit “the services provided or provider selection” or “constrain individuals’ choice of caregiver, or impede the way care is delivered.”
- Establish employer-employee contracts with the entity that provides PCS or HHS.
What DSPD services are included?

These services appear to require EVV:
- Chore (CH1, CHA)
- Companion (COM, CO1)
- Consumer Preparation (CPS)
- Extended Living Supports (ELS)
- Homemaker (HS1, HSQ)
- Personal Assistance (PAC, PA1)
- Respite (Excludes RP4, RP5, RPS)
- Supported Living (SLN, SLH, SL1)
- Family Training and Preparation (TFA, TFB, TF1)

Some services are being reviewed and may require EVV:
- Personal Budget Assistance (PBA)
- Professional Medication Monitoring (PM1, PM2)
- Supported Employment (SEE, SEC)
- Massage Therapy (SSM)
- Day Supports (DSI Only)
- Behavioral Consultation (BC1, BC2, BC3)

Services paid on a daily rate will not be subject to EVV:
- Residential Supports (RHS, PPS, HHS)
- Day Supports (DSG)
Overview

• Allow providers to select EVV vendor of their choice.
• Selected EVV system must be compliant with CURES Act requirements.
• State can provide information about potential vendors that meet the requirements and standards set by the State Medicaid Agency (SMA) or Managed Care Organizations (MCOs).

Compliance Monitoring

• Through administrative rule, the state will conduct post-payment reviews of a representative sample of claims that require EVV.
  • Providers will be required to provide evidence of EVV for sample claims.
  • State will initiate recovery of funds for non-compliant claims and will consider using extrapolation as part of the recovery process.
State allows providers to choose a system that suits them best.

• The state sets a series of requirements for acceptable EVV systems such as:
  
  Requiring that EVV system billing reports document:
  
  • Types of services provided;
  • Date and time services were provided;
  • Manual modifications or adjustments, such as modifying the times of the visit.

EVV systems are required to include the following:

• Identity of the individual receiving care, caregiver, and type of service;
• Exact date and time services were given;
• Allowance for changes in the care plan approved by the Medicaid Agency;
• Production of reports from data entered; and
• Capability to backup and archive data.
Discussion and Feedback

Are there questions, concerns, or suggestions related to EVV implementation in Utah?

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