



State of Louisiana
Louisiana Department of Health
Bureau of Health Services Financing
Office for Citizens with Developmental Disabilities
Office of Aging and Adult Services

MEMORANDUM

DATE: April 18, 2017

TO: Home and Community-Based Services Personal Care Providers

FROM: Tara LeBlanc, Assistant Secretary
Office of Aging and Adult Services

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Office for Citizens with Developmental Disabilities

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SUBJECT: Electronic Visit Verification (EVV) Implementation Requirements and Benefits

In preparation for full EVV implementation which is currently scheduled for completion by close of this year, the Louisiana Department of Health (LDH) is providing an important update of details, decisions, and benefits regarding this initiative.

As many of you know, LDH has already successfully piloted EVV using smart devices during calendar year 2016 for the center-based, vocational and transportation services. Earlier this year LDH initiated a voluntary pilot using the same EVV system (LaSRS) for PCA services in Medicaid waivers and LT-PCS. There are currently over 40 PCA providers who were trained in and are using the system. These providers have been instrumental in offering feedback and data to ensure that the EVV rollout will be successful in attaining all anticipated benefits for participants and providers. In addition, providers may volunteer to participate in subsequent pilot groups as time and resources allow by contacting SRI at 225-767-0501.

Please be assured that providers who do not participate in the pilot will still receive robust training and full access to a training database well in advance of the mandatory go-live date which is currently targeted to occur before January 1, 2018.

As mentioned in the most recent LDH EVV memo, the 21st Century Cures Act finalized in December of 2016 contains a new Medicaid requirement that personal care providers utilize an electronic visit verification system. The system requirements are defined in the Act as follows:

“(A) The term ‘electronic visit verification system’ means, with respect to personal care services or home health care services, a system under which visits conducted as part of such services are electronically verified with respect to—

- “(i) the type of service performed;
- “(ii) the individual receiving the service;
- “(iii) the date of the service;
- “(iv) the location of service delivery;
- “(v) the individual providing the service; and
- “(vi) the time the service begins and ends.

This federal mandate goes into effect on January 1, 2019 for personal care attendant services (PCA). The Federal requirement that “services are electronically verified with respect to the location of service delivery” requires the use of a smart device with GPS capability as opposed to landlines or cell phones which can be forwarded, do not provide location information, and therefore do not verify service location.

Following finalization of the Cures Act, LDH researched and performed a cost/benefit analysis regarding EVV implementation by the in-home personal care services providers using smart devices. **The conclusion was that implementation of the same EVV system already in place for center-based, vocational and transportation providers and utilizing smart devices with internet access is at least cost neutral and in many cases will represent a cost savings to providers.** Based on this conclusion, the decision was made for LDH to implement EVV in full compliance with the Cures Act and to require providers to utilize smart devices to document when and where service delivery occurs via an EVV system.

As illustrated in the attached chart, the cost to providers to purchase smart devices and data plans is completely offset by administrative savings from elimination of the data entry requirement for in-home services. Providers may also recognize additional savings by paying a small subsidy to Direct Support Workers to cover their average EVV data usage. EVV data-use only amounts to 1% of a gigabyte per month, which is 1% of the smallest data plan available.

All EVV costs associated with development, implementation, training and the ongoing transaction costs will be covered by the state. The only cost to providers is the cost of smart devices which is completely offset as described above. In addition to full automation of service delivery data-entry there are additional EVV benefits for the provider in numerous areas:

- Billing:
 - Allows electronically verified personal care service minutes for each participant and service-type to be totaled daily and any partial units to be paid utilizing the 7/8 rounding rule. Currently only whole units are paid.
 - There is a new feature that allows electronic access to recent Remittance Advices through LaSRS.

- EVV service data are electronically passed to the LAST system daily allowing billing providers to continue to bill without any changes.
- Managing Staff:
 - Real time access to direct service workers, recipients and their services.
 - Streamlines check in/out process for direct service workers – allows clock-ins to span midnight and day and night hours without requiring the DSW to re-clock in/out. The system will also automatically assign the correct service when a DSW clocks in/out with multiple participants.
 - Agency management will have the ability to assign DSWs to specific participants.
 - There will be additional data available online to providers including Support Coordination data and the participant's assigned Support Coordinator at that agency.
 - Still allows for manual data entry and edits when necessary.
 - Accessible from any location and any smart device with internet connection and web browser.
 - DSWs able to view prior services.
 - Access to all LDH memos and agency alerts through brand new Dashboard feature.
- Reporting:
 - Does not require agency to send information files in order for their services to be processed.
 - Does not require agency to maintain backups for LaSRS services and data.
 - EVV service data will be electronically uploaded into the LAST system daily allowing billing providers to continue to bill without any changes.
 - Data is exportable from LaSRS to common file formats including Excel and Notepad.
 - Prior authorization and participant data is uploaded throughout the work day as paper plans of care and revisions are processed at SRI.
 - Reduces lag time for reports.

- New Customizable reporting system.
- Compliance:
 - Reduces errors and overlaps, minimizing staff time for corrections
 - Notification within 24 hours if a DSW is exceeding the 16 hour rule in the NOW.
 - More accurate data than manual time sheets

Future updates will follow including the training information and schedule for the phase-in for the rest of the initiative. EVV memos and other information will be posted at the following webpage:

<http://new.dhh.louisiana.gov/index.cfm/page/2091>.

As referenced in the memorandum of February 13, 2017 (OCDD-P-17-002, OAAS-P-17-004) titled EVV System Implementation Guidance, providers may choose to utilize an EVV system other the one designated by LDH. Providers who chose an alternate system do so at their own cost and the system must successfully pass the data integration process prior to the mandatory implementation date. Additionally, the system must meet the Federal requirement that “services are electronically verified with respect to the location of service delivery.” The data integration process and elements may be found at the link listed directly above.

Additionally, questions or comments may be sent through the EVV mailbox at EVVHELP@la.gov.

Attachment: EVV Cost Savings for Personal Care Providers

Waiver Provider Cost/Savings Analysis for EVV Implementation with Smart Devices

	<u>Per Month Price</u>	<u>Per Month Price w/ 10% Sales Tax</u>	<u># of Months to Pay Off</u>	<u>Total Cost of Tablet</u>	<u>Data Plan</u>	<u>Data Plan w/ 10% Sales Tax</u>	<u>Cost to Agency to Use LASRS</u>	<u>Cost to Agency for Support and Storage of data</u>
1 Tablet	\$7.50	\$8.25	20	\$165.00	\$3.00	\$3.30	\$0.00	\$0.00
1 tablet w/data	<u>First Year Cost</u> \$ 138.60	<u>2nd Year Cost</u> \$ 105.60	<u>3rd Year Cost</u> \$ 39.60					
100 tablets w/data	\$13,860.00	\$10,560.00	\$3,960.00					
	<u>Salary *</u>	<u>Salary + Taxes</u>	<u>2/3's of data entry staff time spent on data entry</u>	<u>First Year Savings @ 100% Agency Provided Tablets</u>	<u>First Year Savings @ 90% Agency Provided Tablets **</u>	<u>First Year Savings @ 80% Agency Provided Tablets **</u>	<u>First Year Savings @ 70% Agency Provided Tablets **</u>	
Data Entry Staff (Low - \$9.50 per hour)	\$19,760.00	\$21,242.00	\$14,019.72	\$159.72	\$1,545.72	\$2,931.72	\$4,317.72	
Data Entry Staff (Mid - \$12.75 per hour)	\$26,520.00	\$28,509.00	\$18,815.94	\$4,955.94	\$6,341.94	\$7,727.94	\$9,113.94	
Data Entry Staff (High - \$16 per hour)	\$33,280.00	\$35,776.00	\$23,612.16	\$9,752.16	\$11,138.16	\$12,524.16	\$13,910.16	

*Information provided by providers indicates approximately 1 data entry staff to every 100 recipients