LOUISIANA DEPARTMENT OF HEALTH

Bureau of Health Services Financing (BHSF)

Request for Information (RFI)

for

Electronic Visit Verification (EVV) Solution

RFI due date/time: December 17, 2025 5:00 CST

<u>NOTE:</u> This Request for Information (RFI) is solely for information and planning purposes and does not constitute a solicitation. This information will be reviewed and discussed by the state agency and may result in the advertisement of a formal and competitive Request for Proposal for any or all of the services included in the RFI.

Only information which is in the nature of legitimate trade secrets or non-published financial data may be deemed proprietary or confidential. Any material within a response to this RFI identified as such must be clearly marked and will be handled in accordance with the Louisiana Public Records Act. R.S. 44:1-44 and applicable rules and regulations. Any response marked as confidential or proprietary in its entirety may be rejected without further consideration or recourse.

October 27, 2025

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1 GENERAL INFORMATION

1.1 Background

Electronic visit verification (EVV) electronically verifies service delivery with respect to the:

- type of service performed,
- individual receiving the service,
- date of the service,
- location of service delivery,
- individual providing the service, and
- time the service begins and ends.

The purpose of an EVV system is to confirm that individuals are receiving the services authorized in their care plans, prevent improper billing or payments, protect against fraud, and enhance program oversight. Aside from the reasons mentioned above, EVV is also mandated by federal law. The 21st Century Cures Act ("Cures Act") is federal legislation that, in part, requires all states to use an EVV solution for Medicaid-funded Personal Care Services (PCS) and Home Health Care Services (HHCS).

The Programs Impacted in Louisiana

The Louisiana Department of Health (LDH) is comprised of the Bureau of Health Services Financing (BHSF), Office of Aging and Adult Services (OAAS), Office of Behavioral Health (OBH), and Office for Citizens with Developmental Disabilities (OCDD). BHSF is the entity within LDH that is responsible for administering the Medicaid program.

LDH requires the use of EVV for several programs overseen by BHSF, OAAS, OBH, and OCDD:

- BHSF oversees the following State Plan services:
    - Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) Personal Care Services (PCS)
    - Home Health Care Services (HHCS)

- OAAS operates the following waivers and State Plan services for the elderly and/or individuals with adult-onset disabilities:
    - Adult Day Health Care (ADHC) Waiver
    - Community Choices Waiver (CCW)
    - Long Term-Personal Care Services (LT-PCS)

- OBH oversees personal care services for Medicaid members with mental illness.

- OCDD oversees the following waivers for individuals with developmental and intellectual disabilities:
    - Children's Choice (CC) Waiver

- New Opportunities Waiver (NOW)
- Residential Options Waiver (ROW)
- Supports Waiver (SW)

1.2 Purpose of RFI

The purpose of this RFI is to solicit information from qualified and experienced vendors regarding available EVV and data aggregator solutions and their ability to comply with federal and state requirements for verifying home and community-based services. This RFI aims to collect details on system capabilities, integration options, security standards, and implementation timelines.

1.3 Project Overview

Attachment I (Scope of Service) provides an overview of the project requirements inclusive of deliverables and/or desired results that the State is considering.

2 ADMINISTRATIVE INFORMATION

2.1 RFI Coordinator

Requests for copies of the RFI must be directed to the RFI coordinator listed below:

Louisiana Department of Health
Name: Rozelyn Parker
Bureau of Health Services Financing
628 North 4th Street
Baton Rouge, Louisiana 70802
Email: Rozelyn.Parker@la.gov

Any and all written inquiries and responses will be posted by the date specified in the Schedule of Events to the following web links: https://ldh.la.gov/news/category/46.

2.2 Schedule of Events

Activity/Event	Date
Public notice of RFI	10/27/2025
Deadline for receipt of written inquiries	11/10/2025
Response to written inquiries	11/24/2025
Deadline for receipt of RFI responses	12/17/2025

LDH reserves the right to deviate from this Schedule of Events and may also request demonstrations.

2.3 Response Content

Prepare responses simply, providing straightforward and concise language and descriptions. All responses should be produced in 12 point font. Limit your response to no more than twenty-five (25) pages. Refrain from sending marketing materials to the Department.

2.3.1 Executive Summary

This section should serve to introduce the scope of the response. It should include administrative information including, at a minimum, responder's contact name and phone number, email address and any other pertinent contact information. This section should also include a summary of the responder's qualifications and ability and willingness to comply with the State's requirements.

2.3.2 Corporate Background and Experience

The Respondent should give a brief description of the company, including a brief history, corporate structure, organization and number of years in business. Responders should also describe their experience with projects of this type including experience with other states or governmental entities of comparable size and diversity.

2.3.3 Approach and Methodology

The responder should provide their approach and methodology to be used to accomplish the scope of services described in Attachment I. Responders should describe previous experience with delivering requirements specified in the scope of services and any alternative solutions for accomplishing the project objectives. Additionally, provide information on the following:

1. System Overview:
    a. Description of your EVV solution, including mobile, web, and telephony options.
    b. Description of your solution's reporting and analytics capabilities.
    c. Description of your solution's flexibility, including but not limited to the solution's configurability to accommodate business rules for various programs, capability to manually edit service records, contingency plans for system outages, and how EVV data is collected in areas where cellular or web connectivity may be limited or unavailable.

2. Interoperability:
    a. Does your solution have the ability to aggregate and standardize data from multiple EVV vendors? If so, please describe and include current/prior experience providing this functionality to other customers (if applicable).

b. Describe your experience with and approach to interfacing with external systems (e.g., state or other vendor systems) and integrating data from these systems into your solution.

3. Compliance:
    a. Describe how the system meets all EVV requirements found in the 21st Century Cures Act.
    b. Has the solution been certified by CMS? If yes, please indicate which state(s) and date of certification(s).

4. Data Security:
    a. Describe your solution's methods for transmitting protected health information.
    b. Do other entities have access to the data in your system? If yes, specify the safeguards employed to ensure compliance with data security requirements in the Technical Requirements Summary section.
    c. Describe how and where your solution's data is stored and your solution's data security protocols.

5. User Experience:
    a. Describe accessibility features for users, including multilingual support, and how the solution satisfies the requirements of the Americans with Disabilities Act of 1990, Section 504 of the Rehabilitation Act of 1973, 36 CFR Part 1194, 42 CFR 431.206, and 45 CFR Part 80. Specifically, all web content (not subject to exception from the DOJ final rule [28 CFR Part 35, Subpart H]) must comply with Web Content Accessibility Guidelines (WCAG) 2.1, Level AA.
    b. Describe any features or design elements of the solution that enhance usability.

6. Implementation: Provide a proposed implementation plan, timeline, and training approach for users.

2.3.4 Cost Estimate

Provide estimated costs, including: 1) pricing model (e.g., per user, per visit, subscription), 2) implementation costs (setup, integration, and training) 3) ongoing costs (licensing, support, and maintenance), 4) optional features/services with pricing, and 5) scalability (how costs change with program size/volume). Cost information is requested for planning purposes only and will not be considered a binding bid or proposal.

2.4 Response Instructions

2.4.1 Response Submittal

Responders interested in providing information requested by this RFI must submit responses containing the specified information no later than the deadline for response to the RFI specified in the Schedule of Events. Submissions are accepted via email only. It is the sole responsibility

of each respondent to ensure their response is received before the deadline. Late or misdirected submissions may not be considered.

This RFI will have two components: 1) formal written responses from respondents, and 2) scheduled demonstrations of the solutions described in the respondent's written response. Demonstrations will be scheduled in two-hour time slots. One hour will be dedicated to demonstration of technology and one hour will be dedicated to questions from the Department.

LDH reserves the right in our sole judgement to determine which, if any, qualified respondent vendor(s) will be scheduled for a demonstration of its EVV solution. The determination will be based on the quality of the written response, and an assessment of the viability and value of the EVV solution described in the response.

2.5 Additional Instructions and Notifications to Responders

2.5.1 RFI Addenda/Cancellation

The State reserves the right to revise any part of the RFI by issuing an addendum to the RFI at any time. Issuance of this RFI, or subsequent addenda (if any), does not constitute a commitment by the State to issue an RFP or any other process resulting in award of a contract of any type or form. In addition, the State may cancel this informal process at any time, without penalty.

2.5.2 Ownership of Response

The materials submitted in response to this request shall become the property of the State.

2.5.3 Cost of Preparation

The State shall not be liable for any costs incurred by responders associated with developing the response, preparing for discussions (if any) or any other costs, incurred by the responder associated with this RFI.

ATTACHMENT I - Scope of Services

A. Project Requirements

1. Electronic Visit Verification (EVV)

a) The Vendor will develop or configure, host, and maintain the EVV system. The EVV system must:
- Have the capability of supporting approximately 55,000 users and processing 12.5 million service records annually.
- Comply with the 21st Century Cures Act EVV requirements, using GPS for location verification.
- Provide an alternative method for collecting service location if internet or cellular access is unavailable, not relying on a landline.
- Integrate prior authorization data from the Home and Community-Based Services (HCBS) Data Management Contractor and Medicaid's Fiscal Intermediary Contractor.
- Meet CMS Streamlined Modular Certification criteria.
- Enable configuration to support business rules for various programs.
- Provide users with real-time access to service data.
- Allow records to be edited and voided for at least two years from the date of service while maintaining a log of all changes made to the original record.
- Include a service audit tool to detect potential fraud and out-of-state services.
- Map services collected through EVV with the ability to filter by participant, worker, and provider; each participant's home location must be identified on the map.
- Track provider compliance with LDH's EVV utilization requirements and provide compliance data to LDH and its designees.

b) Services recorded by EVV include:
- Personal care services (PCS)
- Vocational and day services, including transportation
- Support Coordination
- Supported Independent Living in-home visits
- Home health care services (HHCS)
- Participant visits by the Long-Term Care (LTC) Access Contractor

2. EVV Data Aggregator Requirements Summary

The Vendor will provide data aggregator services to incorporate EVV data from LDH providers using third-party EVV vendors that meet LDH standards. Approximately forty providers currently use a third-party EVV vendor. This will include:

a) Onboarding third-party EVV vendors by reviewing and approving test files. Test files shall be generated and submitted by the third-party EVV vendor in accordance with the LDH requirements. The Vendor will offer technical assistance to the third-party EVV vendor during the testing process.

b) Ensure daily collection and secure storage of service records containing all required data elements from third-party EVV vendors. Transmit standardized data to the HCBS Data Management Contractor, including any updates to service records as reported by the EVV vendors.

c) Monitoring data files submitted by third-party EVV vendors on an on-going basis to ensure compliance with LDH requirements and providing technical assistance as needed to providers and their third-party EVV vendors.

d) Providing service records and any edits to service records to the appropriate Managed Care Organization (MCO).

B. Technical Requirements Summary

1. Infrastructure Management: The Vendor will maintain technology infrastructure (hardware, software, cloud services, etc.) and ensure integration and scalability of interrelated data systems. Data collected under this contract shall be maintained by the Vendor for a minimum of ten (10) years.

2. Compliance: The system must comply with the State's Information Security Policy accessible here: https://www.doa.la.gov/doa/ots/policies-and-forms/, HIPAA regulations, and CMS certification security requirements.

3. Configurable Architecture: Provide a configurable system architecture to support various programs with changing policies and business rules.

4. Access Controls: Role-based access controls will regulate user access ensuring users only have access to data they are authorized to view, with the State having the authority to define user roles. User accounts should be provisioned using the state's existing Single Sign On system (SAML and OIDC compatible) for both internal and external users.

5. Customer Service: The Vendor will provide a customer service system that accepts inquiries both electronically (e.g. e-mail, web form) and by phone. They will also supply the necessary staff to respond to these questions.

6. Integration Requirements: The Vendor must utilize state-designated protocols for establishing file transfers with LDH systems and other contractors' systems. All

integrating connections must be made using standard SOAP/REST APIs. 256-bit, FIPS 140-2 validated AES encryption is used to protect any transmitted files from unauthorized use, theft, hacking and/or viewing while stored on or transmitted into or out of State resources. PGP/GPG file type encryption is also required with an exchange of public keys.