The Department of Community Health's EVV Project Team is pleased to announce our latest project communication initiative: The Electronic Visit Verification (EVV) NEWSLETTER!

The EVV Newsletter is a new communication tool that we have developed to share the latest information about EVV and our state-wide implementation activities. The DCH EVV Project Team will use this tool to:

- Share important project-related announcements from Federal or State level entities
- Provide details about our EVV System Vendor and state-wide solution
- Inform you of new or revised EVV-related policies and procedures
- Provide guidance on common implementation concerns
- Provide helpful tips for navigating the EVV System
- Share answers to frequently asked questions
- Announce upcoming events…and more!

We hope you find the new Georgia EVV Newsletter informative and helpful.

Enjoy our First Edition!

Electronic Visit Verification is Coming to Georgia

In December 2016, the 114th US Congress enacted the 21st Century CURES Act. Section 12006 of the Act requires States to implement Electronic Visit Verification (EVV) for Medicaid-financed Personal Care Services and Home Health Care Services by January 1, 2019 and January 1, 2023, respectively. Under the Act and with CMS approval, EVV systems operated by the State or a contractor on behalf of the State qualifies for enhanced Federal Medical Assistance Percentage (FMAP) matching funds (90% for implementation, 75% for ongoing costs). The Act requires States to implement EVV to avoid an escalating reduction in their federal funding match.

In July 2018, President Donald J. Trump signed a bill that delays the Medicaid federal matching rate reduction by one year (to January 1, 2020) for Personal Care Services. The delay will provide DCH an additional year to perform thorough testing, conduct an EVV pilot and soft launch, and increase stakeholder engagement across Georgia.

Georgia is committed to adhering to the federal 21st Century CURES Act mandate.

The mandate contributes to Georgia Medicaid’s mission of providing access to affordable, quality health care services for Medicaid Members. EVV will help to reduce billing errors and improve claims payment accuracy as well as reduce Medicaid fraud, waste and abuse by verifying services were rendered.
**What is Electronic Visit Verification?**

EVV is a technology that automates the gathering of service information by capturing time, attendance, and care plan information entered by a home care worker at the Medicaid Member's point of care. EVV gives Providers, care coordinators, and DCH access to service delivery information in real time to ensure there are no gaps in care throughout the entire course of the service plan. At a minimum, EVV verifies the:

- Type of service performed
- Individual receiving the service
- Individual providing the service
- Date the service was provided
- Place the service was provided
- Time the service begins and ends

EVV technology has been available for more than two decades. It was optional for states, Providers, and Care Management Organizations (CMOs) prior to the passage of the Cures Act. Driving factors behind the EVV mandate include a projected increase in Personal Care Service Providers between 2014–2024, the demographic growth in the population needing these services, and our Medicaid Members’ growing preference to receive services in their own homes.

Originally patented in 1996, EVV technology continues to evolve. There are now multiple EVV vendors available to states, CMOs, and Providers with several technologies used for EVV, including:

- **Telephone Timekeeping with Telephony:** Requires the use of the individual's telephone at the time of the visit. It can utilize a landline available in their home, or a smartphone/cell phone used by the personal care Provider or the individual when a landline is not available.

- **Web or Phone-based Applications Using Global Positioning Service (GPS) Verification:** Relies on a mobile application, which is a GPS-enabled “clock” that indicates when service begins and ends. The worker “clocks in” and “clocks out” using their smartphone or tablet.

- **One-Time Password Generator Using a Key Fixed Object (FOB):** Uses a “fixed object,” known as a key FOB, which is placed in the home of the individual and is attached to something in the home, like the inside of a drawer or cabinet. The FOB generates a one-time password or code when the service Provider arrives and when they leave.

**Who does EVV impact?**

The EVV System will impact the following Home and Community Based Services Waiver Programs:

- Elderly and Disabled waivers, including
  - Community Care Services Program (CCSP) and
  - Service Options Using Resources in a Community Environment (SOURCE)
- New Options Waiver (NOW)
- Comprehensive Supports Waiver Program (COMP)
- Independent Care Waiver Program (ICWP) and
- Georgia Pediatric Program (GAPP)

EVV will be required for Medicaid-financed Personal Support Services (PSS), Community Living Supports (CLS), and Consumer-Directed PSS and CLS only.

See the next page to review the list of Non-Impacted Services by Waiver Program.
Non-Impacted Services by Waiver Program

The following services are NOT impacted by DCH’s EVV implementation in 2019:

Elderly and Disabled
(Service Options Using Resources in a Community Environment (SOURCE) and Community Care Services Program (CCSP)

- Emergency Response Services
- Home-Delivered Meals
- Home-Delivered Services
- Out-of-Home Respite Care
- Adult Day Health
- Alternative Living Services

New Options Waiver (NOW) and Comprehensive Supports Waiver Program (COMP)

- Adult Nutrition Services
- Adult Occupational Therapy
- Adult Physical Therapy
- Adult Speech and Language Therapy
- Behavioral Supports Consultation
- Behavioral Supports
- Community Access Services (Individual/Group)
- Community Guide Services
- Environmental Accessibility Adaptation
- Financial Support
- Individual Directed Goods and Services
- Natural Support Training
- Prevocational Services
- Respite Care
- Specialized Medical Equipment
- Specialized Medical Supplies
- Supported Employment
- Transportation
- Vehicle Adaptation

Independent Care Waiver Program (ICWP)

- Adult Day Services
- Behavior Management
- Respite Care
- Counseling Services
- Environmental Modification
- Personal Emergency Response System
- Specialized Medical Equipment and Supplies

* EVV for Home Health Care Services is mandated by January 1, 2023 and will include skilled nursing services for all Home and Community Based Services waivers.
The timeline below provides a high-level overview of Georgia’s EVV implementation and outreach activities. We are currently in the process of selecting an EVV vendor. Once awarded, we will prepare to onboard the awarded EVV vendor and their EVV Solution.

Benefits of EVV

In addition to the primary objective of reducing fraud, waste and abuse, current alternative EVV system stakeholders have reported several benefits after implementing, including:

- Better Medicaid Member outcomes through improved consistency of care delivery
- Improved service accountability and alignment across the care coordination team
- Reduced paperwork and manual processes associated with administrative processes
- More flexibility in performing tasks such as approving timesheets “on the go”
- Streamlined communications between Provider office and care givers.
- Alerts in the event of care deviations, such as late or missed visits
- Service dashboard with reporting capabilities

EVV offers advantages to Medicaid Members and their family caregivers, service Providers, and case managers.

See the next section to review the EVV Benefits by Stakeholder Group.

EVV Benefits by Stakeholder Group

EVV offers several benefits for waiver members, service providers, and case managers.

Potential benefits for Waiver Members include:

- Ensuring in-home aides deliver the services for which they are paid.
- Improving member outcomes by enhancing consistency of care delivery.
- Increasing communication and alignment across the care coordination team.

Potential benefits for Self-Directed Members include:
• Reducing paperwork associated with administrative processes.
• Increasing flexibility to review and approve timesheets “on the go”.
• Gaining access to the EVV solution’s reporting features.

Potential benefits for Service Providers include:
• Improving service accountability.
• Reducing billing errors and claim denial rates.
• Reducing manual processes and use of paper due to streamlined automation.
• Potentially routing claims data to GAMMIS.
• Streamlining communications between provider office and care givers.
• Accessing a service dashboard with reporting capabilities.

Potential benefits for Case Managers include:
• Confirming clients receive the services they are authorized to receive.
• Providing the ability to view/submit changes to schedules if there are changes in the client’s condition.
• Triggering alerts in the event of care deviations, such as late or missed visits.
• Improving alignment across the care coordination team.

**EVV Outreach and Communication Initiatives**

**Member Advocacy and Provider Network Workgroups**
DCH will be hosting Member Advocacy and Provider Network Workgroup meetings; with Kick-Offs in October! These workgroup meetings are hosted in an effort to further inform and assist with the EVV implementation across the EVV stakeholder communities in Georgia. As we work towards meeting the federal EVV Implementation deadline of January 1st, 2020, DCH would like to use these workgroup meetings as a forum for the following:

• Engage with our Providers - Hear/Obtain the needs of our Providers as it relates to the EVV Implementation;
• Work together to capture ideas that will ensure a smooth EVV Implementation;
• Introduce the EVV Vendor (once selected) and ensure communication and positive/productive collaboration between the EVV Vendor and our Providers; and
• Facilitate “Break-Out Sessions” to hone in on and streamline implementation activities (i.e. defining the requirements and tasks associated with system integrations, Pilot and Soft-Launch Operations, and Organizational Readiness).

We are excited to hear from our stakeholders as we prepare for EVV Implementation and have presented several EVV presentations and facilitated open-floor style discussions across Georgia. DCH will continue to engage stakeholders by hosting more public forums, facilitating stakeholder workgroups, and publishing dedicated EVV newsletters, other direct and informative communications, and shareable material. Below are only some of the events and activities DCH will be facilitating in the coming months.

*There is much more to come!*

Georgia DCH: Electronic Visit Verification (EVV) Newsletter - First Edition – October 2018
### Upcoming Events and Activities

<table>
<thead>
<tr>
<th>Event Type</th>
<th>Location</th>
<th>Date / Time</th>
<th>Registration</th>
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<tbody>
<tr>
<td>AAA Provider Network Meeting</td>
<td>Macon, GA</td>
<td>October 16, 2018 10 am</td>
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</tr>
<tr>
<td>AAA Provider Network Meeting</td>
<td>Waycross, GA</td>
<td>October 17, 2018 10 am</td>
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<td>GA Association for Community Care Providers (GACCP) Fall Meeting</td>
<td>Macon, GA</td>
<td>October 18, 2018</td>
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<td>Adult Day Services/Healthcare Symposium</td>
<td>Atlanta, GA</td>
<td>October 19, 2018</td>
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<td>Public Forum</td>
<td>Tifton, GA</td>
<td>October 26, 2018 10 am – 12 pm</td>
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<td>Member Advocacy Workgroup</td>
<td>Atlanta, GA and virtual</td>
<td>October 30, 2018 10 am – 11:30 am</td>
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<tr>
<td>Provider Workgroup</td>
<td>Atlanta, GA and virtual</td>
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<td>Developmental Disabilities (DD) Provider Meeting</td>
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<td>Medicaid Fair</td>
<td>Atlanta, GA</td>
<td>November 7, 2018 7 am – 1:30 pm</td>
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<td>DD Provider Meeting</td>
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<td>AAA Provider Network Meeting</td>
<td>Newnan, GA</td>
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<td>AAA Provider Network Meeting</td>
<td>Athens, GA</td>
<td>November 15, 2018 10 am</td>
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</table>

### Top Five Frequently Asked Questions (FAQs)

1. **Which services are not impacted by Electronic Visit Verification?**
   The following services are not impacted by DCH’s EVV implementation in 2020:

   ""
Elderly and Disabled (Service Options Using Resources in a Community Environment) and Community Care Services Program

- Emergency Response Services
- Home-Delivered Meals
- Home-Delivered Services
- Out-of-Home Respite Care
- Adult Day Health
- Alternative Living Services

New Options Waiver and Comprehensive Supports Waiver Program

- Adult Nutrition Services
- Adult Occupational Therapy
- Adult Physical Therapy
- Adult Speech and Language Therapy
- Behavioral Supports Consultation
- Behavioral Supports
- Community Access Services (Individual/Group)
- Community Guide Services
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- Respite Care
- Specialized Medical Equipment
- Specialized Medical Supplies
- Supported Employment
- Transportation
- Vehicle Adaptation

Independent Care Waiver Program

- Adult Day Services
- Behavior Management
- Respite Care
- Counseling Services
- Environmental Modification
- Personal Emergency Response System
- Specialized Medical Equipment and Supplies

EVV for Home Health Care Services will be implemented by January 1, 2023 and will include skilled nursing services for all Home and Community Based Services waivers.

2. Do Medicaid Members have to be at home during check-in and check-out?
No. Members can continue to participate in activities in their communities. The EVV system will be able to collect multiple addresses for each Member, so caregivers may verify services are rendered within the home, as well as in the community.

3. Can I choose not to participate in the EVV Program?
You must participate in the EVV Program if you receive or provide Personal Support Services / Community Living Supports through SOURCE, CCSP, ICWP, NOW, COMP or GAPP. If you are a Member and you choose not to participate in the EVV Program, your services may be discontinued. If you are a Provider and you choose not to participate in the EVV Program, your claims for these services will be denied.

CMS is tracking state progress and implementation timeframes, and will be making adjustments to the FMAP paid to states that do not meet compliance deadlines, in accordance with the reductions outlined in the table below:
Schedule of FMAP Reductions for Non-Compliance

<table>
<thead>
<tr>
<th>Year</th>
<th>Personal Care Services</th>
<th>Home Health Care Services</th>
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<tbody>
<tr>
<td>2020</td>
<td>.25%</td>
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<tr>
<td>2021</td>
<td>.50%</td>
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<tr>
<td>2022</td>
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<td>2023</td>
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<td>.25%</td>
</tr>
<tr>
<td>2024</td>
<td>1%</td>
<td>.25%</td>
</tr>
<tr>
<td>2025</td>
<td>1%</td>
<td>.50%</td>
</tr>
<tr>
<td>2026</td>
<td>1%</td>
<td>.75%</td>
</tr>
<tr>
<td>2027 &amp; after</td>
<td>1%</td>
<td>1%</td>
</tr>
</tbody>
</table>

4. What if I am already using an EVV technology? Do I have to give that up for the state's system?
You can continue to use your current EVV system if your system meets state requirements and integrates with the state's EVV system. Once the EVV vendor is selected and onboarded, additional information will be communicated to stakeholders on the process of integrating third-party EVV systems.

5. Is there a cost associated with EVV?
There will be no charge to Medicaid Members or Provider agencies for use of the DCH EVV system. There will be indirect costs to Providers such as the costs to train staff; however, it is DCH's hope that the benefits of implementing and using the system will outweigh the cost to Providers.

Contact the DCH EVV Project Team

We hope you found the First Edition of the new GA EVV Newsletter informative!

For more information on Georgia’s EVV Program, please visit our dedicated EVV webpage.
Please contact us at evv.medicaid@dch.ga.gov if you have any questions.

Look out for our next edition!