



Case Manager Update

Electronic Visit Verification and Service Plans

July 23, 2019

Services Subject to Electronic Visit Verification

Electronic Visit Verification (EVV) is required for the following services delivered through the Ohio Home Care Waiver (OHCW):

- Waiver Nursing;
- Personal Care; and
- Home Care Attendant.

In addition, EVV is required for the following state plan services:

- Home Health Nursing;
- Home Health Aide;
- Private Duty Nursing; and
- RN Assessment.

Electronic Visit Verification will also be required for selected services offered through PASSPORT, the Level 1 and Individual Options (IO) waivers, and Medicaid managed care (including MyCare Ohio) for dates of services on and after August 5, 2019.

The PASSPORT services subject to EVV requirements are:

- Waiver Nursing;
- Personal Care; and
- PASSPORT Home Care Attendant.

The Level 1 and IO Waiver services subject to EVV requirements are:

- IO Waiver Nursing and
- Homemaker Personal Care provided directly to individual or on behalf of the individual.

The Medicaid managed care (including MyCare Ohio) services subject to EVV Requirements are:

- State Plan Home Health Aide;
- State Plan Home Health Nursing;
- Private Duty Nursing;
- State Plan RN Assessment;
- HCBS 1915(c) Waiver Nursing;
- HCBS 1915(c) Waiver Personal Care Aide; and
- HCBS 1915(c) Waiver Home Care Attendant.

Information related to EVV must be documented in the Person Centered Service Plan in the following circumstances.

The GPS Enabled Solution Will Not Be Used As the Primary Data Collection System

If the provider is using the Sandata EVV system provided by the state, either the Sandata device or the Sandata Mobile Connect app on a device owned by the provider or caregiver satisfies the GPS requirement. The Sandata system includes telephony as the preferred alternate data collection method. In addition, manual visit entry is available in the event the device, the app and telephony are all unavailable to document services for an individual.

If an agency provider is using an alternate EVV system for data collection, that system must have a GPS enabled data collection method as the primary method used. An alternate system must also offer providers two alternative methods. One of those alternatives must be manual visit entry.

The GPS enabled solution should be used whenever possible to document visits. However, there may be circumstances that cause a provider to use another method to record visits with EVV for an individual. These can include, but are not limited to, connectivity issues, the specific care needs of an individual, and the individual's refusal to use a GPS enabled solution. **In those circumstances when the GPS enabled system will not be used as the primary method of recording visit information, the following information must be documented in the Person Centered Service Plan:**

- The primary method that will be used to record visit information in EVV;
- The reason the GPS enabled solution will not be used to record visit information.

*If the individual does not have a care manager, the provider should document the information in the service plan maintained in their records.

The Individual(s) Providing Verification of Visit Information

This section is not applicable to services provided through the IO and Level One Waivers operated by DODD.

However, note that individuals enrolled in the IO and Level One waivers often use state plan services also. This section does apply to state plan services and managed care services used by individuals enrolled in the IO and Level One Waivers.

When collecting visit information with EVV for services offered pursuant to the Ohio Home Care Waiver, the PASSPORT waiver, the Medicaid state plan, and Medicaid managed care (including MyCare Ohio), the provider is required to collect a verification of service delivery from the individual receiving services. The verification can be provided through a voice recording or an electronic signature.

If the individual receiving services is routinely unable to provide either a voice or signature verification, the following information must be documented in the person centered service plan.

- The reason the individual is unable to provide verification; and
- The name(s) of the person or persons who are able to provide verification on behalf of the individual.

If no one is able to provide verification on behalf of the individual, this should be noted in the person centered service plan. Note that this is important for purposes of EVV related documentation, but does not address program policy rules that require a signature at the time of service delivery. Providers should contact the appropriate payer for the services if they have questions about program policy.

*If an individual does not have a case manager, the provider should document the information in the service plan maintained in the provider's records.

Questions

Please send questions regarding this Case Manager Update to EVVPolicy@medicaid.ohio.gov.