



The Provider Alliance – ODP Updates

June 28, 2019

Jeremy Yale, Bureau Director for Policy and Quality Management

Dr. Greg Cherpes, Medical Director

Topics

- Electronic Visit Verification (EVV)
- Health Risk Screening Tool (HRST)
- Resource and Referral Tool

Membership Discussion:

- Dual Diagnosis and Complex Needs
- Regulatory Issues and Rate Development
- Waivers and Amendments

What is Electronic Visit Verification?



The 21st Century Cures Act requires states to develop **Electronic Visit Verification (EVV) systems** in an effort to increase accountability in the delivery of **Medicaid funded services**.

States that do not comply with the Cures Act will have their Federal Medical Assistance Percentage (FMAP) reduced.

EVV Devices

Services may be verified by:

- The recipient's home landline telephone (Telephony)
- Smart phone,
- Biometric recognition systems,
- Or fixed visit verification device- an electronic random numbers device in the beneficiary's home.

Required Information to be Collected

1. Type of service provided
2. Individual receiving the service
3. Individual providing the service
4. Date of the service
5. Location of the service deliver
6. Time the service begins and ends

EVV in Pennsylvania

Pennsylvania selected to implement an OPEN EVV system, which means that:

- Providers with an existing EVV system may continue to use their system as long as that system can send information to the state system. The state run system will receive information from the non-state system.
- Providers without an existing EVV system can use the state-provided EVV system.

How does EVV work?



Impacted DHS Programs

EVV will be required for personal care and home health care services provided in the following **Medical Assistance** programs:

- **Adult Autism Waiver Program**
- Aging Waiver Program
- Attendant Care Waiver Program
- Community HealthChoices Program
- **Community Living Waiver Program**
- **Consolidated Waiver Program**
- Fee-For-Service
- HealthChoices Program - Physical and Behavioral Health
- Independence Waiver Program
- OBRA Waiver Program
- **Person/Family Directed Support Waiver Program**

Personal Care Services (PCS)

- Medicaid covers PCS for eligible individuals through Medicaid State Plan options and/or through Medicaid waiver and demonstration authorities approved by CMS
- Consists of services supporting Activities of Daily Living (ADL), such as movement, bathing, dressing, toileting, transferring, and personal hygiene
- Offers support for Instrumental Activities of Daily Living (IADL), such as meal preparation, money management, shopping, and telephone use

What services are considered PCS?

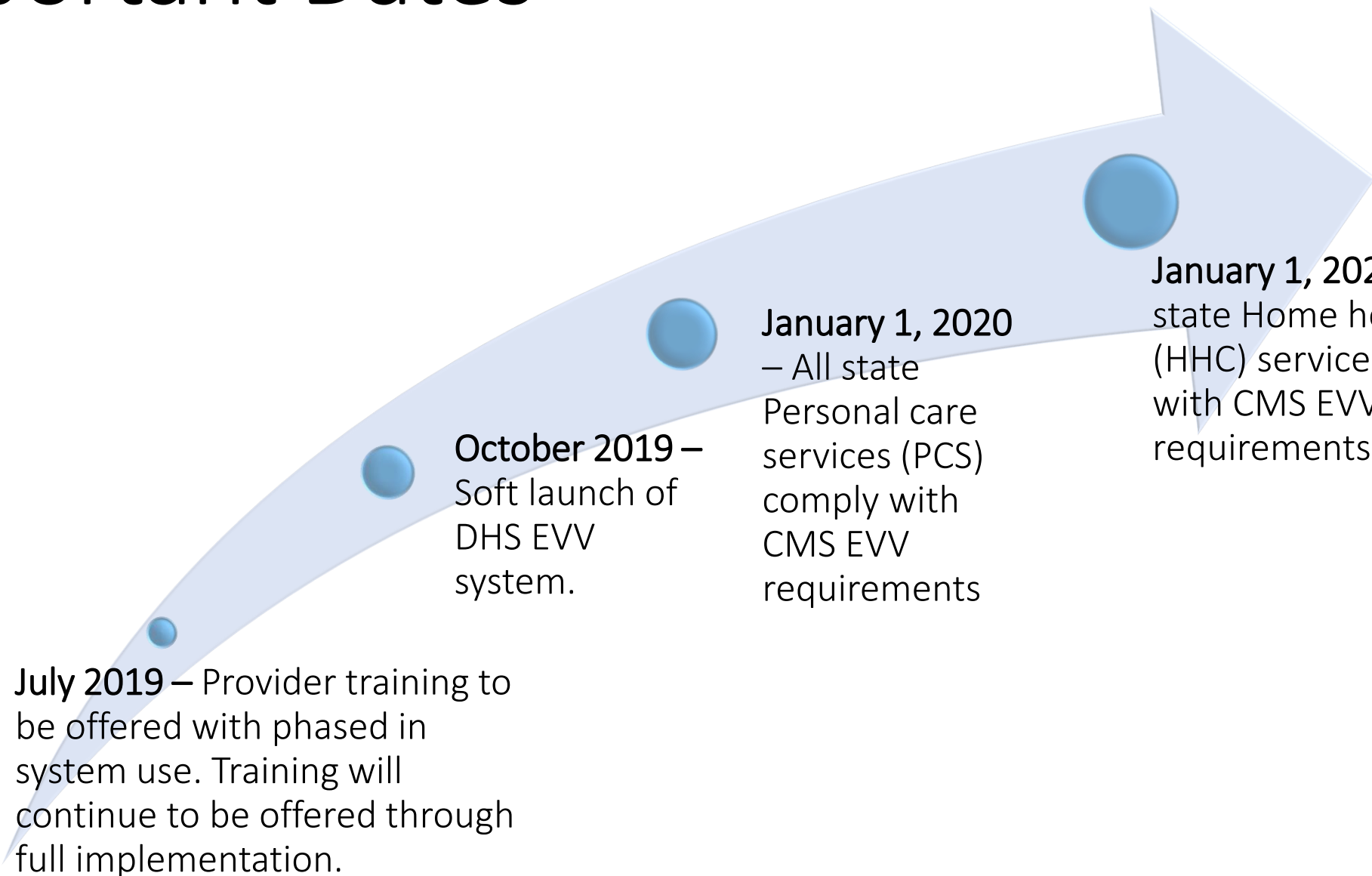
ID/A Waivers

- *(Includes Agency and Participant-Directed Services)*
- *Companion*
- *In-Home and Community Support*
- *Respite (unlicensed settings only, camp)*
- *Homemaker/Chore (chore portion not included)*

Adult Autism Waiver

- *Community Support*
- *Respite (unlicensed settings only)*

Important Dates



July 2019 – Provider training to be offered with phased in system use. Training will continue to be offered through full implementation.

October 2019 – Soft launch of DHS EVV system.

January 1, 2020 – All state Personal care services (PCS) comply with CMS EVV requirements

January 1, 2023 – All state Home health care (HHC) services comply with CMS EVV requirements

Data Aggregator

- EVV data will be collected in the EVV Aggregator and compared to claim data before a claim can be paid.
- The EVV Aggregator will collect EVV data from both the PA DHS EVV System as well as any third-party EVV systems.
- Effective January 1, 2020, DHS will deny PCS claims that do not have corresponding visit(s) recorded in the EVV Aggregator regardless of whether providers use the PA DHS EVV system or a third-party EVV system

EVV Public Meetings

DHS is hosting public EVV webinars to provide additional information and updates related to PA DHS implementation. These meetings are scheduled every 5 weeks leading up to January 1, 2020.

- Tuesday July 9, 2019 from 1:00 to 3:30PM
- Tuesday August 13, 2019 from 1:00 to 3:30PM
- Tuesday September 17, 2019 from 1:00 to 3:30PM
- Tuesday October 22, 2019 from 1:00 to 3:30PM
- Tuesday November 26, 2019 from 1:00 to 3:30PM
- Tuesday December 31, 2019 from 1:00 to 3:30PM

(dates subject to change)

EVV Public Meetings

To Join the EVV Public Meetings use the following:

Skype Meeting link -

<https://meet.lync.com/pagov/c-sshillad/CGSB4B2Q>

Join by phone (267) 332-8737 Conference ID:
42711756

EVV Discussion and Questions

Resource and Referral Tool



RESOURCE AND REFERRAL TOOL

In concert with the development of a uniform assessment tool to identify social barriers to health and well-being like food access, transportation, education, child care access, and housing, DHS is examining how we can better connect people to services that address their needs.

DHS recently Issued a Request for Information (RFI) to gather information on systems and organizations that have comprehensive models to connect people to services and supports that can help improve their health and well-being and address barriers in their lives.

Comprehensive, coordinated case management services are necessary to connect people and families to services that could help them, however, these services cannot exist in silos. Duplication of services can be counterproductive, delaying progress and causing frustration for the individual receiving services.

That's why we're interested in working with our community partners to explore development of a statewide online resource and referral tool that would allow for communication between service providers, allow providers to better collaborate, provide up-to-date and informed recommendations for services and programs, track whether someone received the service to which they were referred, and monitor progress.

Too often we hear that an individual was referred to a service, and that was it – no follow up occurred to check if the service was a good fit, see what progress is being made, or even guarantee that they obtained the service. Service providers in different fields may see many of the same clients, but they may not have the relationships or connections to build partnerships necessary for coordinated care. Through increased coordination across all entities serving an individual or family, the Department envisions a future in which:



individuals' and families' needs are clearly and consistently assessed



Needs are met through the delivery of the right service at the right time, regardless of whether the service is provided by a state agency, local government, or community organization



individuals and families, particularly those who are most vulnerable, have a strong relationship with a person who can help them navigate across systems and organizations

Moving forward, we are going to invest in long-term outcomes and help clients through every step as their needs evolve. This is what our clients need to help them stay on track for improved long-term health outcomes and success in education or the workforce. This is a multi-generational approach that will help state and county agencies and health and social service providers make sure we are doing what we need to do to help our clients succeed.



Resource and Referral Tool

- IN CONCERT WITH THE DEVELOPMENT OF A UNIFORM ASSESSMENT TOOL to identify social barriers to health and well-being like food access, transportation, education, child care access, and housing, The Department of Human Services (DHS) is examining how we can better connect people to services that address their needs
- DHS released a RFI on December 7, 2018

R&R Tool – RFI

RFI sought information about initiatives that may include:

- Coordinated needs assessment or coordinated social service entry systems involving multiple sectors: public, private, non-profits, community action agencies, or faith-based organizations;
- Regional or state-wide resource guides including services provider information websites, mobile phone applications, one-stop-shop model information centers, or information and referral services;
- Closed loop referral mechanisms, that is, mechanisms that enable the tracking of referrals and referral outcomes.