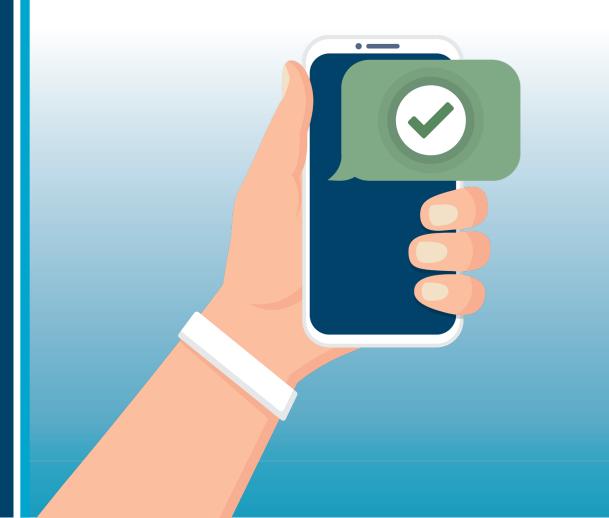
WHITE PAPER

Implementing Electronic Visit Verification (EVV) with MediSked

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What is EVV?

The 21st Century Cures Act

Electronic Visit Verification (EVV) refers to technology utilized by a caregiver to electronically verify the delivery dates, times, and locations of services. In December 2016, the 21st Century Cures Act was passed, and Electronic Visit Verification was mandated. The 21st Century Cures Act requires that all states must implement Electronic Visit Verification for all Medicaid Personal Care Services and Home Health Services that require an in-home visit by a provider.





The goal of this act is to reduce fraud and abuse by complying with federal and state requirements, improving quality, increasing accuracy, promoting financial accountability, reducing risk for abuse and neglect, identifying, and preventing bad actors, and promoting opportunities for Individuals to live in the community. The benefits of EVV include improving quality of care, accountability, and reduce the likelihood of errors or fraud. States that do not comply with the 21st Century Cures Act will have their Federal Medical Assistance Percentage (FMAP) reduced.

The Federal Requirements for EVV are:

- 1. Individual receiving the Service
- 2. Service being performed
- 3. Date of Service
- 4. Location of the Service
- 5. Employee providing the Service
- 6. Start and End times of the Service



Is MediSked EVV Compliant?

Yes! MediSked Connect has been compliant with the EVV standards and requirements of the 21st Century Cures Act since 2010. MediSked assisted over 25 provider agencies in implementing Electronic Visit Verification to meet the regulatory start date of 1/1/2021.



MediSked has been supporting EVV since 2010!

MediSked has evolved in capturing and customizing additional requirements by state of EVV data as needed. This has been beneficial for our existing clients who didn't have to start from scratch, but rather had a template of required information already built into the MediSked Connect platform. Our existing clients were already tracking, reporting and billing the required EVV information based on the configuration options available on our agencies' sites.

The benefits for new clients are that they are partnering with a company that has years of experience and have already built-in standard functionality in their software to capture data based on EVV requirements. In addition, MediSked brings with it an organization of staff members well versed in Electronic Visit Verification.



The Mobile Lite Site

MediSked has multiple solutions to capture EVV data. The primary method is the Mobile Lite Site; which can be accessed on cellular devices, tablets or on a desktop computer. The Mobile Lite Site can capture exact check in and check out times as well as GPS coordinates, and can allow for users to check into prescheduled service blocks or create them on demand. The Mobile Lite Site also allows users to capture Service Note documentation.



Telephony

The alternate solution is Telephony, which is utilized in areas where internet and cellular data may not be available. Users can call to check-in and out of prescheduled shifts or create a service block on demand. MediSked's Telephony solution can be configured to require the call-in/call-out be completed via a recognized phone number affiliated with the Individual.



Both solutions assist in the prevention of fraud abuse and comply with EVV requirements by ensuring the employee is with the Individual at the beginning and end of the shift.

Supervisors with staff utilizing the Mobile Site are able to see the staff's GPS coordinates in relation to the service provided; Supervisors with staff utilizing Telephony are able to see that the check in was done on the Individual's personal phone.

Once EVV data is captured, the data is shared with the appropriate payer/data warehouse. MediSked integrates directly with payers and third-party data warehouses to send provider agency's EVV data.

The MediSked Connect platform continues to evolve and incorporate new tools and enhancements to easily identify, flag and correct exceptions that potentially could deny payment due to lack of required EVV information.



MediSked Features that Ensure EVV Compliance

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EVV Dashboard

Allows MediSked users with the appropriate access to edit erroneous check-in and check-out data, and view additional EVV exceptions.

The following exceptions are identified on the EVV Dashboard:

- Early Check-In
- Late Check-In
- Early Check-Out
- Late Check-Out
- Check-In Distance
- Check-Out Distance
- No Check-In Location
- No Check-Out Location
- No Check-In
- No Check-Out
- Service Overlap
- No Exception



Resolution Center

Allows users to view the response received from the payer/data warehouse once the EVV data from MediSked has been received. This allows provider agencies to identify any failed records and quickly resolve them so the correct EVV data is sent and accepted by the payer/ data warehouse.



Update GPS coordinates based on Individual and Community addresses

Several states and payers require GPS coordinates. Storing GPS coordinates within Connect allows provider agencies to identify when users are checking-in/checking-out too far away from a scheduled service location. MediSked Connect will compare the GPS coordinates of where the check-in/out actually occurred to the GPS coordinates entered in Connect for the scheduled service location. GPS coordinates stored in Connect can be automatically updated anytime the address is updated by quickly clicking a button. MediSked pulls the latitude and longitude based on the address, and users can click a green globe on the Check-In/Check-Out Log to prompt a separate Google Maps window to display the location.

CONCLUSION: Is EVV Working to Prevent Fraud?

Yes! Each State and Payer are handling things differently, but some have already begun to compare claim data against EVV data, resulting in denied claims when billed data does not match EVV data. MediSked investigated claim denials due to EVV discrepancies to ensure Connect's EVV solution is working exactly as it should to prevent fraudulent claims from being paid out.

Below is an example of Connect performing as designed to ensure partnering agencies are compliant with the 21st Century Cures Act:

An EVV compliant service was scheduled for 11:00 AM – 5:00 PM, which typically results in 6 hours, or 24 units. However, the employee checked in at 11:08 AM and checked out at 5:07 PM. Due to this, there were only 23 units verified in the EVV aggregator. After the check-out occurred, an employee updated the end time of the block to 5:08 PM, increasing the billable units to 24 units. As the EVV data/time duration (23 units) did not match up with the units on the submitted Claim (24 units), the claim was denied for the overbilling of units compared to the verified visit data.

About the Author



Katie Covert is an Implementation Consultant at MediSked. She has five years of software implementation experience as well as seven years of technical support experience.



MediSked is the leading brand in holistic solutions that improves lives, drives efficiencies, and generates innovations for health and human service organizations that support our community. MediSked solutions combine to provide innovative, person-centered technology that improves outcomes and quality, while reducing costs for individuals receiving home and based community services and long-term services and supports through government & oversight, care coordination/payer and provider agencies. MediSked has supported clients across the United States for 18 years and is number 1068 on the 2020 list of Inc. 5000 Fastest Growing Companies.

Want to learn more? Check out medisked.com!

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