Personal Supports and Electronic Visit Verification (EVV) Implementation Webcast

Developmental Disabilities Administration

8/17/2020

Agenda

- Introduction to Electronic Visit Verification

- DDA's Implementation Approach

- Person-Centered Planning Strategy

- Personal Supports vs Personal Supports – Enhanced

- Communications

- Additional Information, Resources, and Reminders

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Introduction to Electronic Visit Verification

EVV: The Why

21st Century CURES Act

Federal law requires that Maryland uses Electronic Visit Verification (EVV) to verify six factors for Personal Supports services:

- Type of service performed
- Person receiving the service
- Date of the service
- Location of the service
- Individual providing the service
- Time the service begins and ends

Reference: CMS - Electronic Visit Verification (EVV)

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What is EVV?

EVV
• **Electronic Visit Verification** (**EVV)** refers to technology that electronically verifies that services are delivered at the right time, to the right place and to the right person
• Required for both traditional (agency) and self-directed services
• **In-Home Supports Assurance System (ISAS)** is how Maryland is implementing EVV; it is a phone based, electronic billing system
• **Direct Support Professionals (DSPs)** will check in at the start of the service and check out at the end of the service using the person's telephone or the **one-time password (OTP)** token

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EVV: Benefits

The Person

- Helps ensure people are receiving authorized services
- Can improve the **quality of services**, because it makes DSPs' activities transparent and measurable

The DDA

- Records when DSPs start and stop working, reducing likelihood of billing errors and fraud
- Holds providers **accountable**
- Allows the DDA to comply with the 21st Century CURES Act

The Provider

- Enables providers to view their **service information online**
- Makes reporting more efficient, because it is automated
- Records when DSPs start and stop working, reducing likelihood of billing errors and fraud

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EVV: Maryland's System (ISAS)

ISAS

- **In-Home Supports Assurance System (ISAS) is the system Maryland is using to implement EVV**

- It is a phone based, electronic billing system

- All traditional service providers who render personal support services will use ISAS to clock in and out of shifts

Process

- DSP calls the ISAS toll free number

- ISAS verifies the provider:
  - Provider Medicaid Number
  - DSP Social Security #

- ISAS verifies the person:
  - Person's Telephone Number
    - Cell Phone
    - Landline
  - OTP serial number

- ISAS verifies the service
  - Person-Centered Plan (PCP) authorizes the service
  - PCP authorizes the # of units

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EVV: Verifying the Person

Methods of Participant Verification

- **Direct Support Professional (DSP) uses participant's personal landline or cell phone**
  - DSP calls from an approved phone # listed in the LTSSMaryland Participant Profile
    - LTSS*Maryland* Phone numbers are managed by the participant's Coordinator of Community Services
  - Phone must belong to participant
- **DSP uses any phone and a small key fob called a One Time Password (OTP) device**
  - DSP calls from a phone # that is not in the LTSSMaryland Client Profile.
  - DSP **requires** either: a) the client's **11 digit MA #** or b) the **9 digit OTP serial code**

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EVV: One-Time Password (OTP)

OTP Device

OTP Defined

- OTP: One-Time Password token
- Small keychain-sized **device that generates a six digit timestamp**
- **DSPs** use this device when they call to **clock in and clock out**
- **DSPs** can use the 9-digit OTP Serial Number (on back of device) if participant has no MA#

When is OTP Assigned?

- OTPs are issued as needed if:
    - The person does not have a reliable phone that the DSP can use
    - More than one person in the same household receives supports and they share a phone
    - The person often receives personal support services in the community
    - Participant does not have a Medicaid Number (i.e., State funded participants)

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EVV: OTP

Assignment Process

1. Medicaid Provider Services (MPS) registers OTP tokens

2. OTP tokens are distributed, in batches, to Coordinator of Community Services (CCS) Agencies

3. CCS Agencies maintain batches of OTP and assign individual tokens to persons

4. CCS Agencies distribute assigned tokens to persons directly

5. Lost/Broken/No Longer needed tokens can be returned to the CCS Agency for unassignment
   a. CCS Agency can assign new tokens as needed

- **IMPORTANT NOTES:**
  - **Tokens should stay with the participants at all times**
  - **Return and delivery of devices should be coordinated between the CCS and client directly**

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DDA's Regional Approach

EVV: Regional Implementation Approach

- The DDA will be implementing EVV by Region, starting with the Eastern and Western Regions on October 1, 2020

EVV Implementation by DDA Regions	Date
Eastern and Western Regions	October 1, 2020
Southern Maryland Region	November 1, 2020
Central Maryland Region	December 1, 2020
DDA Achieves Full Compliance by the CURES Act Deadline	January 1, 2021

- Providers who support people in Personal Supports services in multiple regions, will transition to EVV at the latest date for the regions in which they operate

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EVV: Regional Implementation Approach

Current Distribution ⟶ **Strategy Distribution**

PROVIDERS

Region	Count of Providers
Eastern	20
Western	31
Southern	65
Central	83
Total	**199**

*Includes duplicate providers

Date	Region	Count of Prov.	%
10/1/20	E + W	23	**15.4%**
11/1/20	Southern	43	**28.9%**
12/1/20	Central	83	**55.7%**
	Total	**149**	

*Does not include duplicate providers

INDIVIDUALS

Region	Count of People	%
Eastern	367	8.6%
Western	779	18.42%
Southern	1296	30.64%
Central	1788	42.27%
Total	**4230**	

Date	Region	People	%
10/1/20	E + W	555	**13.1%**
11/1/20	Southern	1169	**27.6%**
12/1/20	Central	2506	**59.2%**
	Total	**4230**	

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DDA's Person Centered Planning Strategy

EVV: PCP Strategy

- To ensure Person-Centered Plans (PCP) correctly reflect the chosen service provider and needed service units, all PCPs for participants receiving Personal Supports will be reviewed

- The DDA Regional Office will prioritize and share list with CCS and Providers to coordinator efforts

- Implement a *new PCP Detailed Service Authorization tool*

- DDA Regional Office teams will review plans within 20 days and authorizes service

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Detailed Service Authorization Tool

- The new *Detailed Service Authorization Tool* is meant to assist teams with identifying the estimating monthly service units needed for the PCP detailed service authorization section

- Similar tools have been used by some CCS agencies and providers

- The new tool will include the Provider's Medicaid number to assist the CCS with the identification and selection of the Provider in the detailed service authorization section and minimize errors

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Detailed Service Authorization Process

| Provider completes new DSA Tool | CCS confirms units with Person | CCS enters unit into PCP DSA section | CCS sends service referral to Provider | Provider accepts or calls CCS | CCS Submits PCP to RO |

Critical coordination between CCS and providers:

- Providers completes new *Detailed Service Authorization (DSA) Tool with* Personal Supports service units and sends to the CCS
- CCS confirms the service units match the person's needs and preferences
- CCS enters the service units in the LTSS*Maryland* PCP detailed service authorization section
- CCS sends service referral to provider through LTSS*Maryland*
- Provider reviews *and* within 5 days
  - Accepts the service or
  - Calls the CCS to share concerns
- If needed CCS revises and resends service referral
- CCS submits plan and uploads new DSA tool in the PCP documentation section

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Detailed Service Authorization Process

- The **RO Provider Relations Director** should be contacted if the Personal Supports provider's Medicaid number is not visible in LTSSMaryland

- If the provider does not accept the service referral in 5 days, the option is removed.   The CCS will need to send a new service referral

- **LTSS*Maryland* Helpdesk** tickets should be submitted for system issue via the Feedback tab in LTSS*Maryland*

- The **Regional Office CCS Squad** should be contacted for assistance with team disagreements and conflicts

- The **Regional Office** will conduct weekly calls to address concerns and challenges

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Personal Supports vs Personal Supports – Enhanced Service Option

- LTSS*Maryland* PCP includes two Personal Supports service options
  - Personal Supports
  - Personal Supports – Enhanced

- An enhanced rate for Personal Supports is available when:
  - Person has an approved Behavioral Plan; or
  - Person has a Health Risk Screening Tool (HRST) score of 4 or higher

- To access the enhanced rate, Personal Supports - Enhance service must be selected in the detailed service authorization section instead of the standard Personal Support service

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Personal Supports vs Personal Supports – Enhanced Service Option

- It is important to ensure the Health Risk Screening Tool (HRST) and approved Behavioral Plan are current and included in the PCP prior to submission to assist with RO service authorization

- If Transportation support services were previously requested to support Personal Supports, it will need to be ended as it is included in the LTSS*Maryland* PS service and rate

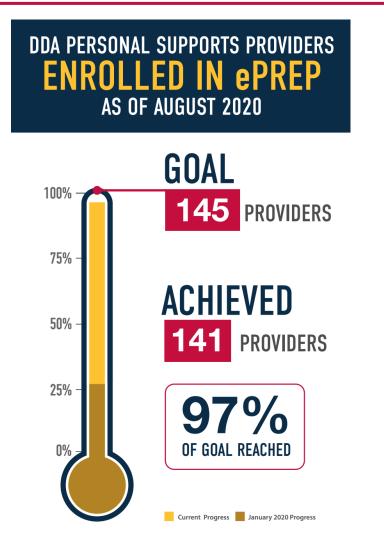Maryland
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PCP - Prioritize and Tracking

- The DDA has implemented a tracker that allows regional staff to focus efforts on people receiving Personal Supports based on current status of a PCP

- The goal of the tracker is to minimize or eliminate disruptions in service delivery and billing prior to an agency's defined Go-Live date

- This tool supports the actions that Regional Offices have put into place to streamline the PCP review process

- This will allow DDA to have up-to-date data on where all Personal Supports PCPs are in the process at any given time

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ePREP - Personal Supports

DDA PERSONAL SUPPORTS PROVIDERS
ENROLLED IN ePREP
AS OF AUGUST 2020

GOAL
145 PROVIDERS

ACHIEVED
141 PROVIDERS

97%
OF GOAL REACHED

100%
75%
50%
25%
0%

Current Progress   January 2020 Progress

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Communications

EVV: Communications

- Coordinated with Medicaid Provider Services (MPS)

- Multiple Stakeholders
    - People in services and families
    - Providers
    - CCS

- Various Approaches
    - Dedicated EVV Webpage
    - At A Glance
    - Guidance
    - Policies
    - LTSS Bulletins
    - Webinars
    - Interactive remote sessions for people in services and families
    - Toolkit for DSP training

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EVV: Provider Training

- Provider Portal Billing Training
  - Sept. through Dec. 2020- Providers will begin being trained remotely on LTSS*Maryland* EVV Billing Functionality
  - The current target is to split the training of EVV functionality away from Non-EVV for a more targeted and focused approach
- DSP Training on the ISAS System
  - Webinars
  - Printed materials
- Practice EVV Line
  - Allow Provider Direct Support Professionals to get used to clock-in/clock-out process
  - Sept. 2020 – Jan. 2021- Practice EVV Line open for Provider DSPs

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Policies

- PolicyStat

- Publish in August 2020
    - ISAS Policy
    - Personal Supports Policy
    - Billing Policy
    - Transportation Policy

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Additional Information, Resources and Reminders

EVV: LTSS*Maryland* Provider Billing Activation

- **To turn on system functionality for providers to bill:**

  - DDA will activate Providers in LTSS*Maryland*

  - Based on Regional Implementation Date

  - By Service type - e.g., Personal Supports only

  - Occur on the first of the month in order for billing to properly process for the rest of the month

Example: If ABC Agency is activated for Personal Supports on November 1st 2020, the ABC Agency can bill for all people receiving Personal Supports starting November 1st

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EVV: OTP Distribution

- MPS will assign and sort OTPs by CCS agencies

- Distribution will begin in late August

- CCS Agencies will distribute to participants based on their business model and policies

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CCS Reminders

- Coordination with providers is essential!

- In order for a PCP to be authorized by the DDA, it must meet requirements noted in the PCP Checklist

- CCS Supervisors are to review and sign off on PCP prior to submission to ensure quality of PCP

- Submission of PCP with all service providers' acceptance will decrease need to submit future Revised PCP

- RO CCS Squad is available to answer questions and provide assistance

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Provider Reminders

- Coordination with CCS is essential!

- In order to provide and bill for services, your agency must be listed on the approved PCP with the appropriate Medicaid number

- In order to receive and accept Personal Supports service referrals, it is important to make sure you have set up appropriate Provider Portal *User Roles* for your staff

- RO Providers Relations staff are available to answer questions and provide assistance

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LTSS*Maryland* Provider Portal

Types of User Roles

- *Admin Provider* – Creates and manages staff roles in **LTSS*Maryland***, accepts Service Referral Requests, bills for services rendered and can complete <u>all</u> Provider Agency functions
- *Program Director* – Can accept Service Referral Requests on behalf of the Agency and view participants' information
- *Program Staff* - Can review Service Referral Requests and view participants' information
- *Billing Provider* - Can enter billing for services rendered and view participants' information
- *Staff Provider-* Direct Support Professional- can complete clock-in/clock-out process with EVV for Personal Supports

Reference: *LTSSMaryland and* Training video

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EVV Roles: Personal Supports Provider Agency

Agency Administrators

Responsibilities include:

1. Manage all DSP staff in the LTSS/Provider Portal system
2. Ensure DSPs are trained to provide services and use ISAS
3. Review and ensure accuracy of services
4. Assist with exception resolution and manual entries

Direct Support Professionals

Responsibilities include:

1. Provide direct supports to participant
2. Use ISAS to clock-in and out
3. Report any issues with clocking in, including missed/forgot times, to Agency Administrators

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EVV Roles: ISAS Team

The ISAS Team is your point of contact for helping with:

1. Policy Questions
2. Billing or payment issues
3. General system process questions

Please contact us at:

Email: mdh.isashelp@maryland.gov
Phone: 410-767-1719

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Provider Payments

Direct Deposit/Electronic Fund Transfer (EFT)

- To get paid via direct deposit/EFT, providers will need to complete the necessary steps with the Comptroller's Office as was stated in the DDA bulletin that went out

- Providers that do not complete this process will still get paid from MMIS when services goes live, but paper checks will be mailed to their provider location if they are not setup for EFT

- Please see instructions to set up EFT under the Fiscal Forms section on DDA's website:
  https://dda.health.maryland.gov/Pages/DDA%20Forms.aspx

Reference: DDA Electronic Fund Transfer Payment Instructions – bulletin July 29, 2020

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Provider Payments - Transition

Cash Flow
- FY'21 Q1 payment/advance - July 2020
- FY'21 interim payment - 4% provider rate increase - September 2020
- FY'21 Q2 payment - October 5, 2020
- FY'21 Q3 payment - January 6, 2021

Reconciliation will be done

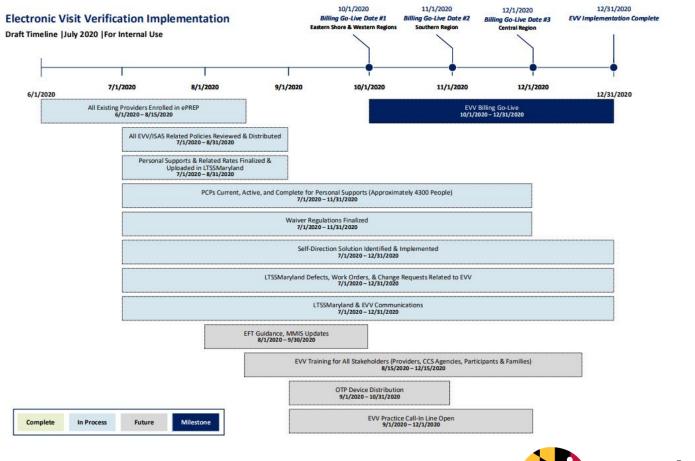Maryland
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System Functionality and Feedback

- The Developer is tracking usage and speed in various parts of the system and is currently working on identified heavy traffic areas

- LTSS*Maryland* Helpdesk tickets should be submitted for system issue via the Feedback tab in LTSS*Maryland*

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EVV: Timeline

Summary – Action Needed

- Proactive communicate, coordinate, and take action needed in order to support service needs of participants and families and provider payments

- Start looking at your Personal Supports data now to understand how many PCPs, HRSTs, and BPs (as applicable) your agency needs to review prior to your go-live date

- DDA will be sharing the new *PCP Detailed Service Authorization tool, policies,* and *additional guidance* this week

- Reach out to each other (i.e., CCS Agencies/Providers) to coordinate the Detailed Services Authorization Process
  - E.g., share designate contact staff

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Summary

- Immediately seek help with challenges
    - **RO Provider Relations Directors** – Medicaid Provider numbers
    - **LTSS*Maryland* Helpdesk** - System challenges
    - **Regional Office CCS Squad -** Team challenges
    - **Regional Office** will conduct weekly calls to address concerns and challenges

- CCS agencies formalized strategy to distribute the OTPs to participants

- Providers review and update Provider Portal User Roles

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"Unity is strength... when there is teamwork and collaboration, wonderful things can be achieved."
- Mattie J.T. Stepanek

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Questions