

	KERN I	HEALTH S	SYSTE	MS		
	POLICY	AND PRO	CEDU	RES		
SUBJECT: Electronic Visit Verification (EVV)				POLICY #: 4.49-P		
DEPARTMENT:	Provider Network Mana	agement	<u> </u>			
Effective Date:	Review/Revised Date:	DMHC		PAC		
1/25/2023	10/2022	DHCS	X	QI/UM COMMITTEE		
		BOD		FINANCE COMMITTEE		
Emily Duran Chief Executive Officer  Chief Operating Officer			Date			
Chief Medical Officer			Date			
Director of Claims						
Senior Director of Provider Network  Chief Information Officer			Date			

## **POLICY:**

Effective January 1, 2023, per APL 22-014<sup>1</sup>, Electronic Visit Verification (EVV) is a federally mandated telephone and computer-based application program that electronically verifies in-home service visits. Kern Health Systems (KHS) will require Electronic Visit Verification (EVV) for all personal care services (PCS) and home health care services (HHCS) that are delivered during in-home visits by a provider. KHS will supply providers with technical assistance and training on EVV compliance.

### **PROCEDURES:**

## 1.0 EVV REQUIRED SERVICES

EVV will be required for all PCS and HHCS that delivered during an in-home visit by a provider, including providers that begin in the community and end in the home, or vice versa.. This includes, but is not limited to, PCS and HHCS delivered as part of Community-Based Adult Services (CBAS), Whole Child Model and Community Supports – personal care and homemaker services, respite services, day habilitation programs – and all other covered HHCS. KHS will utilize the most recent list of EVV Provider Type, Procedure, Place of Service Codes posted on the Department of Health Care Services (DHCS) website to identify qualifying services and providers.

### 1.1 EXCLUSIONS

The following services will not be subject to EVV requirements:

- a) HHCS or PCS that do not require an in-home visit
- b) HHCS or PCS provided in congregate residential settings where 24-hour service is available
- c) HHCS or PCS rendered by an individual living in the member's residence
- d) Any services rendered through the Program of All-Inclusive Care for the Elderly.
- e) HHCS or PCS that are provided to inpatients or residents of a hospital, nursing facility including skilled nursing facility or residence of nursing facility, intermediate care facility for individuals with intellectual disabilities, or an institution for mental diseases
- f) Durable Medical Equipment

# 2.0 PROVIDER REQUIREMENTS

All Network Providers are required to comply with EVV requirements when rendering PCS and HHCS, subject to federal EVV requirements. To capture EVV, providers have the option to use the State-sponsored EVV Solution<sup>2</sup> or an alternate EVV solution that meets the state and federal EVV requirements. All PCS and HHCS providers are required to register in the State EVV self-registration portal and complete applicable training. Providers of Community Supports – Personal Care and Homemaker Services, Respite Services, and Day Habilitations Programs are required to register no later than October 19, 2022.

# 2.1 PROVIDER TRAINING AND REGISTRATION

### 2.1.1 STATE-SPONSORED EVV SOLUTION

All PCS and HHCS providers opting to utilize the State-sponsored EVV solution must complete the self-registration process to gain access to the State-sponsored EVV solution and EVV Aggregator. Providers must complete training on how to operate the solution and capture required EVV data elements.

### 2.1.2 ALTERNATE EVV SYSTEM

PCS and HHCS providers have the option to implement EVV requirements using an alternate EVV system. Any alternate EVV system must comply with all business requirements and technical specifications, including the ability to capture and transmit the required data elements to the State EVV Aggregator. PCS and HHCS

providers utilizing an alternate EVV system are required to register in the EVV self-registration portal and complete applicable training.

# 2.2 PROVIDER EVV SUBMISSION REQUIREMENTS

All PCS and HHCS providers must capture and transmit the following six mandatory data components:

- a) The type of service performed
- b) The individual receiving the service
- c) The date of the service
- d) The location of service delivery
- e) The individual providing the service
- f) The time the service begins and ends

# 2.3 CLAIMS BILLING REQUIREMENTS

All claims for PCS and HHCS services must be submitted with allowable Current Procedural Terminology (CPT) or Healthcare Common Procedure Coding System (HCPCS) codes as outlined in the Medi-Cal Provider Manual. Providers must indicate the proper Place of Service (POS) Code or Revenue Code on claims and/or encounters to indicate the rendering of PCS or HHCS in a member's home.

## 3.0 KHS REQURIEMENTS

### 3.1 EVV VENDOR

KHS will utilize a vendor as a provision of ensuring compliance with EVV requirements.

If KHS decided to utilize a vendor other than the State-sponsored EVV solution, it will file the resulting administrative service agreement with the Department of Managed Health Care (DMHC)

#### 3.2 MONITORING

KHS will monitor PCS and HHCS providers for compliance with EVV requirement and CalEVV Information Notices and alert DHCS to any compliance issues.

#### 3.2.1 INSTANCES OF NONCOMPLIANCE

When a provider is identified as non-compliant with EVV requirements, KHS will:

- a) Supply providers with technical assistance and training on EVV compliance
- b) Require provider to comply with approved corrective action plan (4.40-P Corrective Action Policy)
- c) Deny/withhold payment
- d) Arrange for enrollees to receive services from another provider
- e) Halt future authorizations to the provider

## 4.0 DELEGATED OVERSIGHT

KHS is responsible for ensuring that their delegates comply with all applicable state and federal laws and regulations, contract requirements, and other DHCS guidance, including applicable APLs, Policy Letters, and Dual Plan Letters. These requirements must be communicated by KHS to all delegated entities and subcontractors.

# **REFERENCE:**

**Revision 2022-10**: New policy created by Provider Network Management to comply with DHCS APL 22-014. Approved by the DHCS on 12/29/2022.

- 1. State of California Health and Human Services Agency, Department of Health Care Services website, APL 22-014 (ca.gov)
- 2. https://www.dhcs.ca.gov/provgovpart/Pages/EVV.aspx