



E-Alliance Extra

Missouri Alliance for Home Care

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CURES Act EVV – Possible Delay?

Legislation delaying implementation of EVV ([S. 2897](#)) has been introduced in the Senate. Language has not been posted online yet, but it calls for a one year delay.

The Senate Finance Committee, who has jurisdiction over this issue, sounds quite supportive of it. They did not give a specific path for it to become law, only that a larger legislative vehicle will be needed, but they did say it needs more broad support.

Senators Murkowski (R-AK) and Brown (D-OH) are credited with sponsorship and Senators Feinstein (D-CA), Murray (D-WA), Sullivan (R-AK), Klobuchar (D-MN), Smith (D-MN), and Portman (R-OH) have already cosponsored.

Stay tuned for further developments.....

Your Electronic Visit Verification Questions Answered

The Centers for Medicare and Medicaid Services (CMS) released an Informational Bulletin and FAQs to assist states in meeting electronic visit verification (EVV) requirements specified in the 21st Century Cures Act (Cures Act). The CMCS Informational Bulletin shares EVV implementation strategies and identifies promising practices for EVV education and training. The FAQs provide responses to an array of critical questions received from states since the passage of the Cures Act, including clarification on the specific types of personal care and home health services that must utilize EVV systems. What follows here is a summary of the most important and relevant parts of the [EVV FAQs](#).

DO THE EVV REQUIREMENTS IN THE CURES ACT COVER HOME HEALTH SERVICES?

The 21st Century Cures Act provides that states must require the use of an electronic visit verification (EVV) system for personal care services (PCS) and home health care services (HHCS) that require an in-home visit by a provider. This applies to home health services requiring an in-home visit that are described in section 1905(a)(7) of the SSA and provided under the state plan or under a waiver of the state plan. If the service includes personal care services or home health services, even if it has a different name

or also includes other services, it is subject to EVV. Any home health services that the state has opted to cover under the state plan or under a waiver of the plan, and that require an in-home visit, would be subject to the EVV requirement. For example, if a medical supply is delivered through the mail, or is picked up at the pharmacy, EVV does not apply. However, if a medical supply requires an in-home visit for set-up, then EVV applies. This applies to both managed care and fee-for-service delivery systems.

WHEN MUST EVV SYSTEMS BE IN PLACE?

An EVV system must be in place for personal care services starting January 1, 2019.
An EVV system must be in place for Home Health Services starting January 1, 2023.

WHAT TYPE OF EVV SYSTEM IS REQUIRED?

The statute does not require the use of a particular EVV system, but the system must be able to electronically verify, with respect to visits conducted as part of personal care services or home health care services, the following:

1. the type of service performed;
2. the individual receiving the service;
3. the date of the service;
4. the location of service delivery;
5. the individual providing the service; and
6. the time the service begins and ends.

The law also requires states to provide for a stakeholder process to allow input into the state's implementation of the EVV requirement from providers of PCS and home health services, beneficiaries, family caregivers and other stakeholders. As long as all of the statutorily mandated information is collected on personal care and home health care services requiring an in-home visit by a provider, states have significant discretion to utilize the system(s) of their choosing. CMS does not endorse one type of system over another. States may implement more than one EVV system to account for differences in geography, strength of cellular networks, etc.

WHAT ABOUT PRIVACY CONCERNS?

The Cures Act does not require states to capture each location as a person is moving in the community. Services either starting or stopping in the individual's home are subject to EVV requirements, and capturing the location in which the service is started and stopped is sufficient for meeting the minimum requirements of the law. CMS permits states to choose to require more information if they deem it necessary to effectively combat waste, fraud, and abuse, and state Medicaid agencies have considerable discretion in selecting an EVV system that meets their particular requirements.