Steve Sisolak Governor

Director



DEPARTMENT OF

HEALTH AND HUMAN SERVICES

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DIVISION OF HEALTH CARE FINANCING AND POLICY Helping people. It's who we are and what we do.

Nevada Medicaid Request for Public Engagement on **Considerations to Electronic Visit Verification System Procurement**

Overview

The 21st Century Cures Act requires the use of an Electronic Visit Verification (EVV) system to document services that are provided for all Personal Care Services (PCS) and Home Health Care Services (HHCS) under a Medicaid State Plan or waiver program. This mandate requires provider agencies to use an EVV system to record service delivery visit information. Nevada Medicaid utilizes the open-system model, procuring a vendor but also allows agencies to utilize their own EVV system if it meets the 21st Century Cures Act requirements for documentation. Nevada implemented the use of its EVV system for PCS on September 29, 2019. To comply with the Cures Act mandate Nevada must also implement the use of EVV for HHCS, including Private Duty Nursing (PDN) services, that require an in-home visit by a Home Health agency.

Request for Proposal

Nevada Medicaid is developing a Request for Proposal (RFP) for an EVV vendor that can provide their best solution to incorporate both PCS and HHCS in one system. The Division is seeking stakeholder feedback on items that could be considered in the RFP. Over the next few weeks, stakeholder comments and feedback will be gathered to aid in the development of the RFP for the next EVV vendor contract period. The goal is to utilize stakeholder input to continue improvement of our Electronic Visit Verification for PCS and HHCS provided to eligible Nevada Medicaid enrollees.

System Benefits

EVV is a system that electronically verifies the provision of care and allows for increased program oversight, automates the documentation of services received, and reduces administrative burden associated with manual processes. The benefits to providers include elimination of paper timesheets, the use of a scheduling component that can be used to schedule workers who provide services, a billing process for immediate electronic claims submittal, technology to improve business practices, view and manage visits in real time, and the ability to create automated detailed reports. The benefits to the recipients include, electronic records that capture and verify visit times and specific tasks for services received.

System Criteria

As currently required by the Cures Act EVV mandate, visits conducted to provide PCS and HHCS must be electronically verified. Nevada's current EVV system requires the following for PCS:

- Electronic documentation of
 - the type of service
 - individual receiving the service
 - date, time, and location of the service
 - agency and individual providing the service
- Prior authorization for services uploaded to the EVV system
- Services are electronically documented using the EVV mobile application on a GPS-enabled mobile device or the Interactive Voice Response (IVR) system using the recipient's landline/phone Caller ID
- Fee-For-Service claims be validated by an EVV entry into an EVV system that captures the required elements prior to claim submission

Stakeholder Engagement

While the above requirements will still be in place, the Division is interested in obtaining stakeholder feedback on the following areas:

- Greater flexibility for live-in caregivers who provide services that use an EVV
- Easier implementation of rate changes
- Improved coordination of between change of ownership
- Automatic Payer Assignment updates
- Removal of the GPS component of the EVV system to track visits. This would require changes to federal law.

The proposed items and initiatives under consideration by the Division are merely suggestions to be considered while developing the EVV system RFP and are not final policy decisions or final RFP elements. Compared to past procurements, the Division's expectations have increased for successful bidders of the EVV System RFP. The Division is seeking proposals from experienced vendors:

- With a robust EVV system that can incorporate our needs for the different services requiring its use
- That are willing to provide Nevada with a system that exceeds the requirements outlined in the federal mandate, and that is minimally burdensome, taking into account existing best practices
- With experience developing EVV systems in a State with which it can partner to realize the Division's mission and program objectives through providing quality PCS, HHCS and ultimately improve services provided to eligible Medicaid enrollees in Nevada.

Feedback on this notice in general and specifically these items should be submitted to the Division in writing by 5:00pm, April 30, 2022 via <u>Itss@dhcfp.nv.gov</u>. The Division will not acknowledge receipt of comments. Acceptance of comments places no obligations of any kind upon the Division. Furthermore, when submitting comments and feedback to this notice, commenters should clearly identify themselves and their affiliation, the item to which their comments are referring, and applicable program policy and/or requirements to which they are responding. Commenters are not required to address all the items in this notice. The Division may publish feedback received to the public at-large via the Division's websitewww.dhcfp.nv.gov.

Providing comments in response to this letter will not prohibit interested parties from responding to any future procurements.