

EVV Stakeholder Meeting

March 25, 2025

Agenda

EVV Data

Top Visit Alerts & Resolution Paths

Manual Entries

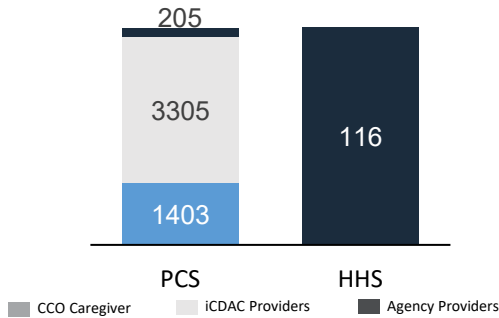
Care Plan Tasks

ICDAC Expectations

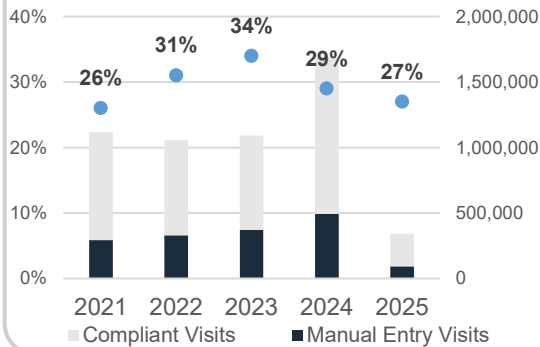
IA MCO Electronic Visit Verification Overview

Providers / Caregivers Using EVV

2021 – 2025

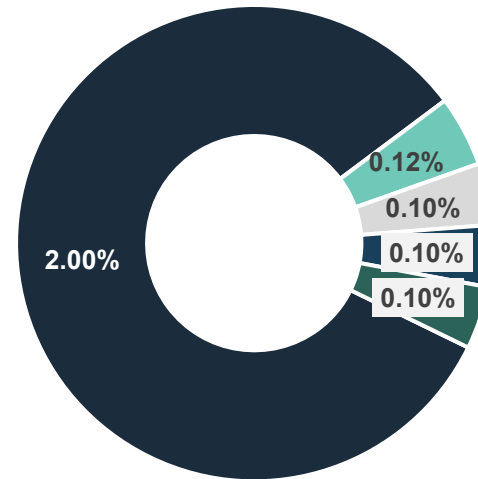


Manual Entries



Top 5 Visit Alerts from 2024

Percentage of Total Visits



- VCR2012 - Visit does not have an associated authorization
- VCR2001 - Member does not have active eligibility during visit duration

Visit Alert Resolution Paths

▶ VCR2012 - Visit does not have an associated authorization

▶ Has the MCO issued the authorization?

▶ If yes, please confirm that the visit is sent to CareBridge with an authorization reference number that matches the authorization information in the CareBridge EVV Solution.

▶ If no, please confirm the visit is categorized as 'sometimes authorized' and that the visit is being sent to CareBridge with a null value in the AuthRefNo field.

(Refer to the *Iowa EVV Authorization Issuance Type slide*)

▶ **ALWAYS Authorized Services**: These services will always require an authorization to be present in the CareBridge system for EVV visits to be captured.

▶ **SOMETIMES Authorized Services**: These services will only require an authorization to be present in the CareBridge system some of the time for EVV visits to be captured.

Iowa EVV Authorization Issuance Type

Code	Description	Auth Issuance Type/Expectations		
		AGP	ITC	MHC
S9122	Home Health Aide [waiver]	Always	Always	Always
S9123	Skilled Nursing (RN) [waiver]	Always	Always	Always
S9124	Skilled Nursing (LPN) [waiver]	Always	Always	Always
T1002	Nursing Care, RN, IMMT, home	Always	Always	Always
T1003	Nursing Care, LPN, IMMT, home	Always	Always	Always
T1004	Home Health Aide, IMMT	Always	Always	Always
T1004:U3	Home Health Aide	Always	Always	Always
T1021	Home Health Aide	Always	Always	Always
T1030	Nursing Care, RN, home	Always	Always	Always
T1031	Nursing Care, LPN, home	Always	Always	Always
S9122	Home Health Aide [non-waiver]	Always	Sometimes	Sometimes
S9123	Skilled Nursing (RN) [non-waiver]	Always	Sometimes	Sometimes
S9124	Skilled Nursing (LPN) [non-waiver]	Always	Sometimes	Sometimes
G0151	Physical Therapist (PT), home health setting or hospice	Sometimes	Sometimes	Sometimes
G0152	Occupational Therapist (OT), home health setting or hospice	Sometimes	Sometimes	Sometimes
G0153	Speech Language Pathologist (SLP or ST), home health setting or hospice	Sometimes	Sometimes	Sometimes
G0156	Home Health Aide, home health or hospice setting	Sometimes	Sometimes	Sometimes
G0158	OT Assistant, home health setting or hospice	Sometimes	Sometimes	Sometimes
G0159	PT, home health setting	Sometimes	Sometimes	Sometimes
G0160	OT, home health setting	Sometimes	Sometimes	Sometimes
G0161	SLP, home health setting	Sometimes	Sometimes	Sometimes
G0299	RN Direct Care, home health or hospice setting	Sometimes	Sometimes	Sometimes
G0300	LPN Direct Care, home health setting or hospice	Sometimes	Sometimes	Sometimes

Visit Alert Resolution Paths

▶ **VCR2001 - Member does not have active eligibility during visit duration**

▶ Please contact the Member's MCO if you have questions about member eligibility.

▶ **VCR2008 - Visit requires a manual visit reason**

▶ Please supply a manual visit reason and resubmit the visit.

Code	Description
MR1000	Caregiver error
MR1005	No access to application or IVR
MR1010	Technical error
MR1015	Duplicates/overlapping
MR1020	Forgot to clock in
MR1025	Missing/waiting for authorization
MR1030	Employee removed from current budget
MR1035	Possible EIN issues
MR1040	Overtime with two service codes and no OT Agreement
MR1045	Over budget without a form on file
MR1050	Member Initiated
MR1055	New Agency Using EVV

Visit Alert Resolution Paths

► VCR2007 - Visit requires a missed visit reason

- Please supply a valid missed visit reason and resubmit the visit.

Code	Description
MR1000	Caregiver error
MR1005	No access to application or IVR
MR1010	Technical error
MR1015	Duplicates/overlapping
MR1020	Forgot to clock in
MR1025	Missing/waiting for authorization
MR1030	Employee removed from current budget
MR1035	Possible EIN issues
MR1040	Overtime with two service codes and no OT Agreement
MR1045	Over budget without a form on file
MR1050	Member Initiated
MR1055	New Agency Using EVV

► VCR2028 - Visit is missing a missed visit action

- Please supply a valid missed visit action and resubmit the visit.

Code	Description
MVA1000	Rescheduled
MVA1005	Back-up plan initiated
MVA1010	Contacted service coordinator
MVA1015	Contacted MCO member services
MVA1020	Service provided as scheduled

EVV Requirements

The EVV system must electronically verify that home or community-based service visits occur by electronically collecting seven points of data:

1. Type of service performed
2. Who received the service
3. Date of service
4. Location of service delivery
5. Who provided the service
6. When the service begins
7. When the service ends

Manual Entries

Manual entries should be a rarity, not the norm

- Manual entries should only be completed when there is no ability to utilize one of the two normal methods to check in/out of the visit (mobile app or IVR)
- A manual revision is completed when the visit needs to be adjusted. For instance, the caregiver forgot to check out, so the check-out time needs to be modified
- Manual entries and manual revisions should be used as a last resort to ensure that visit data is correct

Iowa Medicaid has approved an exception for live-in caregivers to use manual entry each day worked for the amount of time they have provided services that day. The entry should include documentation in the care plan for all tasks completed that day. The entry should also be completed the same day the service was provided.

Manual Entries

- ▶ The CareBridge app is designed to be able to be used with or without WiFi connectivity
 - CareBridge's mobile application allows for "store and forward" capabilities, where EVV information is stored at the time of service and uploaded to the CareBridge platform when connectivity resumes
 - CareBridge EVV also offers other modalities for EVV such as Interactive Voice Response (IVR) functionality if a smart phone is not available for use

Requirement:

- ▶ Less than 25% of documented visits will be manual entries or revisions.

Manual Entry Data

Manual Entry percentages can be found in the CareBridge portal

- Dashboard tab
- Employee tab

Dashboard

The Dashboard allows providers to view key graphs, metrics, and data related to operational efficiency.

- Compliance section- displays your overall compliance score as well as late, missed and manual entry visit percentages.

DASHBOARD & REPORTING

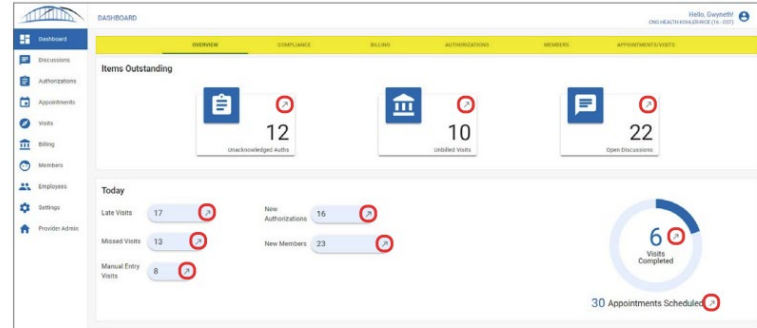
OVERVIEW

This section introduces the features within the CareBridge Solution that enable Provider Agency Employees to view key graphs, metrics, and data related to operational efficiency.

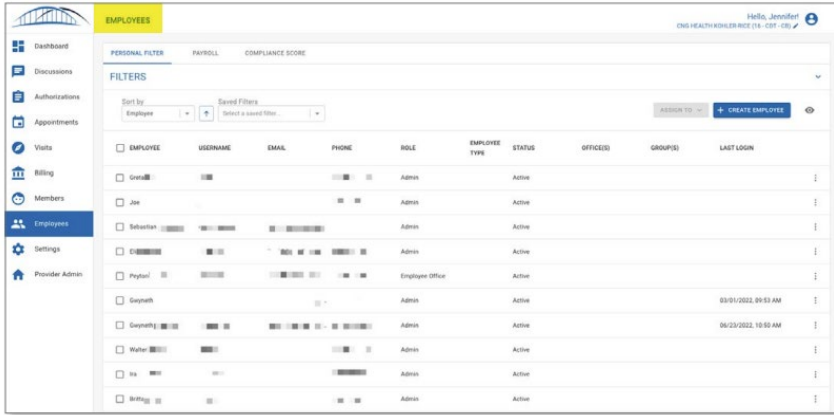
DASHBOARD

The CareBridge Provider Portal Dashboard page allows Agency Employees to view key metrics to better prioritize and manage tasks on which action may need to be taken. On the Dashboard page, there are tabs for each of the dashboards available (Figure 92).

Figure 92. Dashboard page



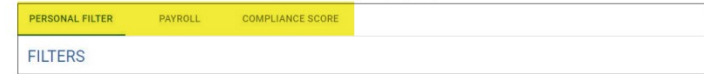
- **OVERVIEW:** This dashboard displays metrics related to items that are outstanding or may require action and metrics related to operational efficiency within the Provider Agency today.
- **COMPLIANCE:** This dashboard displays metrics to better understand how many completed visits are EVV-compliant and how many are the sources of non-compliance.
- **BILLING:** This dashboard displays metrics related to the revenue cycle of completed visits in the CareBridge Solution.
- **AUTHORIZATIONS:** This dashboard helps Agency Employees better understand the number of active authorizations and authorizations by service type.
- **MEMBERS:** This dashboard helps Agency Employees explore the number of active members.
- **APPOINTMENTS & VISITS:** This dashboard displays metrics related to the number of scheduled appointments and completed visits.



EMPLOYEES REPORTS

By default, the **PERSONAL FILTER** is selected upon navigating to the Employees page. It can be used to filter and sort the Employees page table in a variety of ways to return the subset of employees that is most useful. In addition to the **PERSONAL FILTER**, there are two reports that have predefined filters to help quickly navigate to useful employee data (Figure 16).

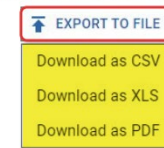
Figure 16. Employees page reports



- **PAYROLL:** This report returns payroll data for a given time for each employee based on completed visits in that time.
- **COMPLIANCE SCORE:** This report returns a list of all employees sorted in ascending order by Compliance Score. Compliance Score is the percentage of EVV visits that are compliant, (defined as EVV or IVR visits) relative to the total number of visits. Examples of non-compliant visits are manual entries, late visits, or missed visits.

To export any of the data on the Employees page to a **PDF**, **XLS**, or **CSV** file, select the **EXPORT TO FILE** button on the bottom of the page (Figure 17). Upon selecting the file type, the document will begin downloading and will be available on the Settings page on the left navigation pane under the **DOCUMENTS** sub-tab. For more information, see the [Settings](#) section.

Figure 17. Employees page **EXPORT TO FILE** options



Employees

Employees tab also has a compliance score section that allows you to export compliance data for each employee in your provider agency.

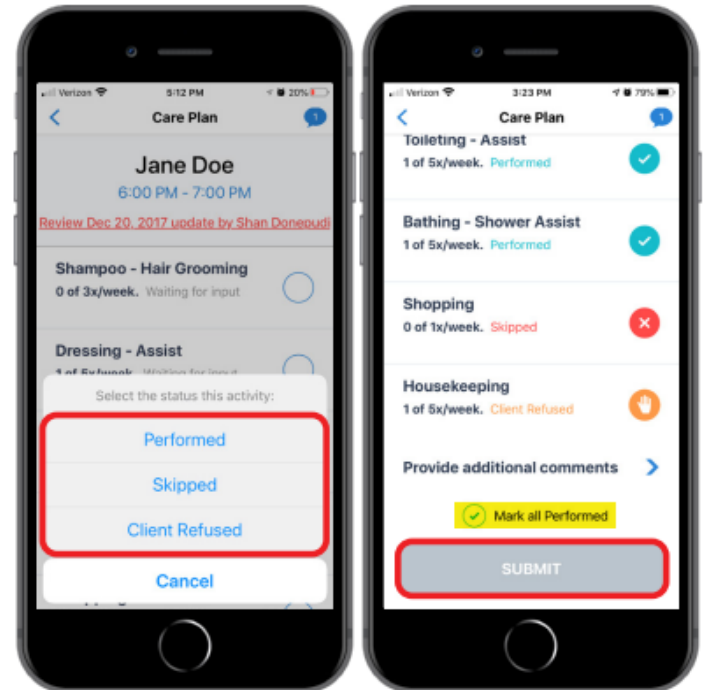
Care Plan

- ▶ The Care Plan should be completed anytime documentation is not completed outside of EVV, such as CDAC services
- ▶ The Care Plan is where staff documents the services they provided during the visit (check boxes)
 - Examples: Observation and evaluation, Wound care, Administration of medications
CDAC: N6 Essential Housekeeping, N10 Essential Transportation, N12 Medication Assistance, S4 Catheterizations
- ▶ The Care Plan activities should be completed at the end of the visit before the Caregiver checks out

Expectation:

- ▶ The Care Plan is completed for every EVV visit

Figure 5. Care Plan



Compliance with IAC (CDAC)

- ▶ CDAC services do not include reminders, cueing or supervision of the member
- ▶ Daily CDAC Cap: current Iowa Administrative Code has a daily dollar amount cap for CDAC services:
 - \$93.68/day for ICDAC (T1019 & T1019:U3)
 - \$139.18/day for Agency CDAC (S5125 & S5125:U3)
 - About 23 units max/day (or 5 hours and 45 minutes)

Expectation: CDAC provider will ensure that IAC is being followed

Following the CDAC Agreement

- ▶ The CDAC Agreement is an agreement between the member and the CDAC agency or caregiver to provide the services outlined within it, including:
 - Frequency of visit
 - Visit duration
 - Tasks completed during the visit

Expectation:

- ▶ CDAC provider will schedule staff in accordance with the CDAC Agreement
- ▶ CDAC provider will discuss any concerns with the CDAC Agreement with the member's case manager

Training Resources:



Points of Contact

- ▶ Please reach out to your health plan partners re: billing, claims, units authorized:
- ▶ **Wellpoint of Iowa:**
 - Phone: 1-800-731-2134
 - Email: ProvidersolutionsIA@wellpoint.com
- ▶ **Iowa Total Care:**
 - Phone: 1-833-404-1061
 - Email: itc_evv@IowaTotalCare.com
- ▶ **Molina Healthcare of Iowa:**
 - Phone: 1-844-236-1464
 - Email: iaproviderrelations@molinahealthcare.com

- ▶ Please reach out to **CareBridge Support**, for example re: EVV Vendor Setup, pre-billing alerts:
 - Email: iaevv@carebridgehealth.com

- ▶ Third Party EVV Integration, for example re: pre-billing alerts:
 - Email: evvintegrationsupport@carebridgehealth.com

Reminder:
Upcoming Home Health Care Stakeholder Call
April 1, 2025
Time: 3pm-4pm

<https://www.zoomgov.com/j/1602746481?pwd=waYahVganJdx9J5YgqFkWzKUYR45MO.1>

Meeting ID: 160 274 6481

Passcode: 799702