



## FAQS ABOUT ELECTRONIC VISIT VERIFICATION (EVV)

### EVV Terminology

Term	Definition
EVV	Electronic Visit Verification
CalEVV System	The state supplied EVV data collection system available to provider agencies
CalEVV Aggregator	The system that collects and stores all EVV data sent by providers through CalEVV and Alternate EVV Systems
Alternate EVV System	Companies collecting and sending EVV data on behalf of provider agencies
Provider Agency	The employer of the staff providing the direct service
Jurisdictional Entity (JE)	The local entity with the direct relationship with the state; for DDS, that is the regional centers
PCS	Personal care services
HHCS	Home health care services

### General Information

#### **Q1. What is electronic visit verification (EVV)?**

**A1.** EVV is a part of the 21st Century Cures Act enacted in 2016. The federal government put EVV into place to help ensure people are getting the services in their home that they need and are entitled to.

#### **Q2. What does the 21st Century Cures Act require?**

**A2.** [Section 12006\(a\) of the 21st Century Cures Act \(the Cures Act\)](#), mandates that states implement EVV for all Medicaid personal care services (PCS) and home health care services (HHCS) that require an in-home visit by a provider. This applies to PCS and HHCS provided under sections 1905(a)(24), 1915(c), 1915(i), 1915(j), 1915(k), and Section 1115; and HHCS provided under 1905(a)(7) of the Social Security Act or a waiver, per [Medicaid.gov](https://www.Medicaid.gov).

### **Q3. What information does the EVV system have to verify?**

**A3.** SSA section 1903(l)(5)(A) provides that the system must be able to electronically verify, with respect to visits conducted as part of PCS or HHCS in an individual's home, the data points below.

- the type of service performed;
- the individual receiving the service;
- the date of the service;
- the location of service delivery;
- the individual providing the service; and
- the time the service begins and ends

### **Q4. When does the Federal Government require states to implement EVV?**

**A4.** Pursuant to Subsection (l) of Section 1903 of the Social Security Act (SSA) (42 U.S.C. 1396b), all states must implement EVV for Medicaid-funded PCS by January 2020 and HHCS by January 2023. In accordance with federal provisions, the State submitted a Good Faith Effort Exemption (GFE) request on October 2, 2019 to the Centers for Medicare & Medicaid Services (CMS) to extend the EVV implementation date for PCS to January 1, 2021. On October 22, 2019, CMS approved the State's GFE request for PCS, and California's GFE approval letter from CMS is available on the [EVV CMS GFE Webpage](#).

PCS implementation was January 1, 2022. HHCS and Self-Determination Program service implementation is expected by January 1, 2023.

### **Q5. Which regional center services and service codes does EVV apply to?**

**A5.** EVV applies to PCS and HHCS funded by the Department of Developmental Services (DDS) and provided through regional centers.

Those PCS services are:

- Respite, 465, 862, 864 and 310
- Supported Living, 896
- Personal Assistance, 062
- Home Maker Services, 858, 860 and 313
- Community Living Supports, 320

Those HHCS services are:

- Nursing, 460, 742, 744 and 361
- And agencies providing:
  - Home Health, 854, 856 and 359
  - Speech Therapy, 707
  - Speech, Hearing and Language, 372
  - Occupational Therapy, 773 and 375
  - Physical Therapy, 772 and 376

Guidance regarding services and service codes can be found at [EVV Guidance RC Service Codes \(ca.gov\)](#).

**Q6. Does EVV apply to early intervention services provided to children ages 0-3 in the Early Start program?**

**A6.** No. Services provided to children in the Early Start program are governed and funded by Part C of the Individuals with Disabilities Education Act (IDEA). These services are not funded through a Medicaid Waiver.

**Q7. Does EVV apply to services in the Self-Determination Program (SDP)?**

**A7.** Yes. Any regional center service that provides PCS or HHCS would be covered under the EVV requirement. For a full list of regional center PCS and HHCS services and service codes see above answer.

**Q8. Are there other exemptions for EVV?**

**A8.** Yes. If the staff person providing services lives with the consumer, that staff will not be subject to the EVV requirement for services to that consumer. For EVV, that individual is considered a “live-in staff”.

Guidance regarding “live-in staff” and the attestation form for the live-in exemption can be found:

- English
  - [EVV Guidance Live-in Caregiver Exemption and Attestation](#)
  - [EVV Live-in Caregiver Provider Attestation Form](#)
- Spanish
  - [EVV Guidance Live-in Caregiver Exemption and Attestation-Spanish.docx](#)
  - [EVV Live-in Caregiver Provider Attestation Form\(es\)](#).

**Q9. Who is providing the state’s EVV system/solution?**

**A9.** The state has contracted with Sandata Technologies, LLC to provide the state’s EVV data collection solution; called CalEVV. Sandata Technologies, LLC also provides the CalEVV Aggregator where EVV data from CalEVV and other Alternate EVV systems send EVV data.

For technical assistance with any of the Sandata contracted products, please contact them at 1 (855) 943-6069 or by email at [CAAltEVV@sandata.com](mailto:CAAltEVV@sandata.com).

## **Consumer Related**

**Q1. If the staff person that provides my personal care or home health services lives with me, will they have to do EVV?**

**A1.** No. If the individual providing your services lives with you, they will not be subject to the EVV requirement for your services. For EVV, that individual is considered a “live-in staff”.

For more information, please see the guidance documents regarding the live-in staff exemption linked above under General Information, number 8.

**Q2. What if I live in a rural area and there is no cell coverage or access to the internet?**

**A2.** The State’s EVV system, called CalEVV, allows staff to use either an app on their cell phone or a telephone to call in visit information. If your provider is not using CalEVV, talk with them about how they are collecting your EVV visit data when there is no cell coverage or access to the internet.

**Q3. Can EVV be implemented in ways that minimize privacy concerns, particularly around the need to capture location information through the EVV system?**

**A3.** Services provided in your home, including those that start or stop in your home, are subject to EVV requirements. Electronically capturing the location in which the service is started and stopped is sufficient for meeting the minimum requirements specified in the Cures Act.

**Q4. Will the EVV requirement change my services?**

**A4.** No. The EVV requirement does not change how your services are provided, where you receive services, or who provides them to you.

## **Provider Related**

### **Q1. When can Providers expect to receive information and training regarding the required use of the new EVV system?**

**A1.** Throughout EVV implementation, DDS has been hosting frequent webinars where current and upcoming activities are provided. Previous webinar materials and any upcoming webinar registration links can be found at this link under the [“Meetings” tab on the EVV webpage](#).

Provider agencies looking for training on CalEVV or the CalEVV Aggregator can learn how to access available trainings under the [“Resources/Training” tab on the EVV webpage](#).

Additionally, anyone who would like an email notification when DDS has updates regarding EVV, can request to be put on the notification list by emailing [EVV@dds.ca.gov](mailto:EVV@dds.ca.gov).

### **Q2. Why is in-home supportive services (IHSS) implementing the EVV system during different timeframes than the regional centers?**

**A2.** IHSS is leveraging their electronic timesheet system for EVV and therefore is on a different timetable than regional centers and other state programs. For more information about the EVV implementation process for IHSS, please go to the [CDSS EVV Webpage](#).

### **Q3. Will the State provide an EVV system for providers to use or will providers have to secure their own EVV system?**

**A3.** Providers are able to use the state’s provided EVV system, called CalEVV or another EVV system of their choosing to collect EVV visit data.

If providers choose their own EVV system, the system must comply with the requirements noted in the “General Information”, question number 3 above, and be able to transmit that data to the CalEVV Aggregator.

System specifications needed to send data to the CalEVV Aggregator via an Alternate EVV system can be found under the [“Alternate EVV Solutions” tab on the EVV webpage](#).

### **Q4. What measures will be taken to secure privacy and confidentiality of data?**

**A4.** The State has safeguards in place to ensure individual’s private information will remain confidential and protected. All federal and state requirements around privacy such as HIPAA remain intact. EVV only verifies the six data elements required by law.

**Q5. Do EVV data collection systems have to use global positioning system (GPS)?**

**A5.** No. The 21st Century Cures Act requires that location is collected for each EVV visit, and the state's EVV solution, called CalEVV, collects GPS coordinates at the start of the visit and end of the visit when using the mobile application. The application is not collecting GPS data outside of visit start and stop time. The application does not track staff or consumers throughout the visit. GPS coordinates are stored in the CalEVV system as part of the visit information and are informational only.

GPS is one method to electronically capture the location of service delivery at check-in and check-out. Other EVV data collection systems may collect the location requirement of EVV using another method.

**Q6. Is EVV causing consumers to be homebound?**

**A6.** California's approach to EVV will not change how services are provided nor where services are delivered. Pursuant to Public Law 114-115 Sec 12006 (c)(3), EVV shall not limit the service provided, constrain an individual's choice of caregiver, or impede the way care is delivered.

**Q7. We provide SLS services in a 24/7 group residential setting with multiple staff working with multiple consumers but not necessarily according to a scheduled time. How does EVV apply to this type of situation?**

**A7.** Until such a time that regulations are developed by DDS regarding these type of scenarios in residential settings, please reference the CMS guidance via FAQs linked here: <https://www.medicaid.gov/federal-policy-guidance/downloads/faq051618.pdf>.

**Q8. What if the services provided under EVV designated service codes are not provided in the consumer's home?**

**A8.** EVV visit capture is required for services that take place in the consumer's home including those that start and/or stop in the consumer's home.

**Q9. Does CalEVV replace, or communicate with, eBilling?**

**A9.** No. The eBilling system and EVV systems for visit verification will not communicate. They are separate entities serving separate purposes.

