

<b>DRAFT</b>	<b>MTL 03/21OL</b>
DIVISION OF HEALTH CARE FINANCING AND POLICY	Section: 2205
MEDICAID SERVICES MANUAL	Subject: APPEALS AND HEARINGS

2203.13 ELECTRONIC VISIT VERIFICATION (EVV)

Refer to Addendum B for more information regarding EVV system requirements.

~~The 21<sup>st</sup> Century Cures Act requires the use of an EVV system to document services that are provided for all personal care services 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 if it meets the 21<sup>st</sup> Century Cures Act requirements for documentation.~~

~~All service information must be recorded in an electronic system that interfaces with either a telephone or an electronic device that generates a timestamp. The provider agency must verify the EVV record, including any visit maintenance, prior to submitting a claim associated with the EVV record. All claims must be supported by an EVV entry into an EVV system prior to claim submission. Any errors within EVV submissions must be supported by offline documentation.~~

~~Agencies must ensure each personal care attendant has a unique identifier (National Provider Identification – NPI) associated with their worker profile in the EVV system.~~

~~A. STATE OPTION:~~

- ~~1. The EVV system electronically captures:
 
  - ~~a. The type of service performed, based on procedure code;~~
  - ~~b. The individual receiving the service;~~
  - ~~c. The date of the service;~~
  - ~~d. The location where service is provided;~~
  - ~~e. The individual providing the service;~~
  - ~~f. The time the service begins and ends.~~~~
- ~~2. The EVV system must utilize one or more of the following:
 
  - ~~a. The agency/personal care attendant’s smartphone;~~
  - ~~b. The agency/personal care attendant’s tablet;~~
  - ~~c. The recipient’s landline telephone;~~
  - ~~a. The recipient’s cellular phone (for IVR purposes only);~~~~

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~~b. Other GPS-based devices as approved by DHCFP.~~

~~B. DATA AGGREGATOR OPTION:~~

~~1. All Personal Care Agencies that utilize a different EVV system (as approved by the DHCFP) must comply with all documentation requirements of this chapter and must utilize the data aggregator to report encounter or claim data.~~

~~a. Appropriate forms must be approved by the DHCFP before use of the system to ensure all data requirements are being collected to meet the 21<sup>st</sup> Century Cures Act.~~

~~b. At a minimum, data uploads must be completed monthly into the data aggregator.~~

2203.14 DHCFP LTSS INITIAL REVIEW

Once the applicant has been approved for the waiver, DHCFP LTSS will review all initial eligibility packets for completeness to ensure waiver requirements are being met. The eligibility packet for review must include:

1. The NF LOC screening to verify the applicant meets NF LOC criteria;
2. At least one waiver service identified;
3. The SOC complete with signature and dates; and
4. The HCBS Acknowledgement Form complete including initials, signature, and date.

NOTE: Electronic signatures are acceptable pursuant to NRS 719.350 “Acceptance and distribution of electronic records by governmental agencies” on forms that require a signature.