

Maxim Supports Standards for Electric Visit Verification

Electronic Visit Verification or EVV is a telephone and/or computer-based electronic technology used for the purpose of verifying and reporting the delivery of in-home services from the patient's home.

The adoption of an EVV system for a state's home health Medicaid population will improve billing accuracy, reduces gaps in care plans, and strengthens program integrity by reducing incidents of fraud and creating efficiencies for both the state and home care provider. As multi-state provider, operating in 41 states, we are currently implementing EVV services to varying degrees.

Flexibility is the Key

Maxim supports the adoption of a flexible Standards-Based EVV model that accomplishes the state's goals but allows companies that have an existing EVV solution to continue using those systems. We have found that system difficulties and higher administrative costs have occurred when states have adopted a closed – one vendor – model or have mandated a process that will not permit different systems to exchange information seamlessly. Ideally, we would want to continue using our existing systems without having to make significant administrative changes to align with whatever EVV vendor the state settles on.

Maxim recognizes that smaller home care companies may not be using an EVV system today so the state may need to contract with a vendor for those providers. The state is likely to save money if the vendor contract is limited to only smaller companies without an existing EVV and but having the larger providers use their existing system.

Standards for all EVV Systems

Maxim is supportive of EVV standards that all home care providers would be required to meet. A state could adopt such standards and require all home care providers that are using an EVV system to certify that their system meets the standards. To this end, we propose the following:

A system that allows verified electronic transactions to be transmitted from an approved EVV system in a standard format and within a timeframe specified by the state to the state's one designated database for the purpose of aggregating electronically verified transaction data from various provider systems.

At a minimum, any approved Electronic Visit Verification (EVV) system shall:

- (a) Record the exact date services are delivered;*
- (b) Record the exact time the services begin and exact time the services end;*
- (c) Verify the location from which the services are registered;*
- (d) Include a mechanism to verify whether their employees are present (e.g., at the beginning and end of a visit) at the location and time where services are to be provided for recipient;*
- (e) Require a personal identification number unique to each caregiver and, if appropriate, a unique password established by said caregiver;*
- (f) The system must have a proven biometric or other mechanism for the consumer of services to validate the delivery of service;*
- (g) Be capable of producing reports of services delivered, tasks performed, recipient identity, beginning and ending times of service and date of service in summary fashion that constitute adequate documentation of service;*
- (h) The system must be HIPAA compliant;*
- (i) The system must insure at least daily back-up of all data collected;*

(j) Due to the mission critical nature of such a documentation system, it must demonstrate a viable disaster recovery mechanism allowing for its use within 12 hours of any disruption to services, subject to exceptional circumstances such as war and other disasters of national scope;

Conclusion

Partnering towards an EVV solution that meets the goals of the state as well as large and small home care providers will bring more accountability and efficiency into the Medicaid program; reduce fraud and abuse and saving money for both the state and provider.

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