



June 4th Electronic Visit Verification (EVV) stakeholder meeting data:

Number of stakeholders who registered for the June 4th stakeholder meeting: **186**

Of the individuals who registered, **152** attended.

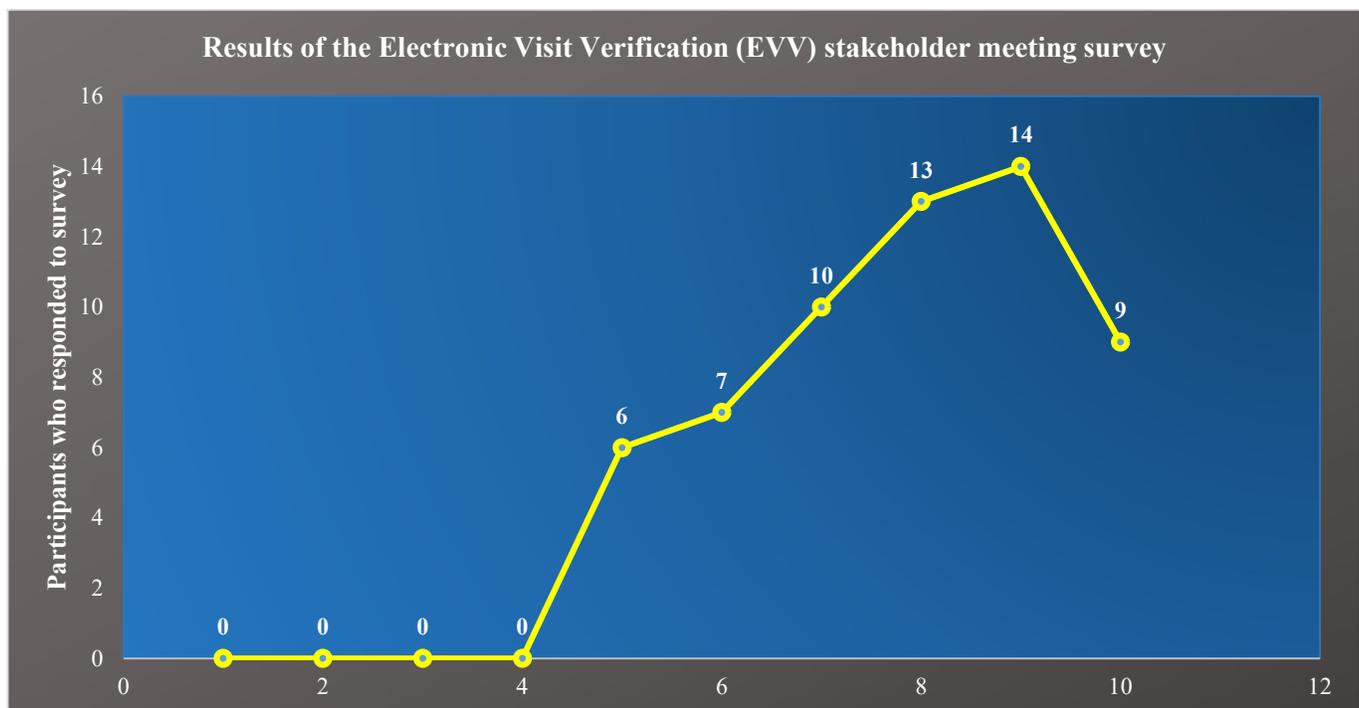
82% attended the June 4th stakeholder meeting.

Of the 152 attended the stakeholder meeting, **59** stakeholders responded to the survey questions

June 4th EVV survey results:

Stakeholders who participated in the EVV survey right after the meeting: **59**

On a scale of one to 10 (10 being exceptional), what was your overall satisfaction with this meeting?



Data Table											
Satisfaction scale: 1 to 10	1	2	3	4	5	6	7	8	9	10	Total
Participants' ratings	0	0	0	0	0	7	10	13	14	9	59
<i>For example: Number of participants who rated 10 for the overall satisfaction with this meeting is 9.</i>											

- **Did the meeting time work well for you? (June 4th stakeholder meeting time was 2:30 PM to 4:00 PM CST)**

Of the 59 stakeholders who responded to this question, **58** responded to “Yes.”

One individual did not respond to this question.

- **Was the meeting length appropriate?**

Of the 59 stakeholders who responded to this question, **58** responded to “Yes.”

One stakeholder responded to “No,” and provided the below comments:

Comments: Have the questions submitted before the meeting so answers are readily available. Feel like this meeting was rushed and not alot of information to [sic] alleviation concerns or to prepare staff and providers.

- **What are some recommendations for improvement (i.e. Content, Topics, day or time of meeting)**

(1) Who are stakeholders that have been invited? More specifics about the PAS program and how SNA Plans work with all of this EVV technology. Who within DHHS is being trained? Specifically are we training EA SSW who complete the SNA Plans with our clients about EVV or did I miss something during the presentation? Places needing to test EVV within the state to make sure that GPS does work in the middle of the Sandhills, etc

(2) would have liked more time on the slide showing the web address.

(3) It was very informative and it answered a lot of my questions.

(4) Expand the topics as individual discussions with Q & A After

- (5) is it possible to get the slides before the meeting to be prepared.
- (6) Great sound quality at this meeting. Much appreciated.
- (7) Most States have generated an EVV List Serve so that interested parties can register and receive notifications of changes, rather than being required to repeatedly log on and look to see if there have been any updates. If this is something that Nebraska implements it would be good for that to be included.
- (8) If is possible, when the presentation gets to the Q&A section, maybe panelists could unmute those who have questions rather than the panelists trying to interpret how the question is written?
- (9) Have the questions submitted before the meeting so answers are readily available. Feel like this meeting was rushed and not a lot of information to alleviation concerns or to prepare staff and providers.
- (10) I felt it was a great meeting. Very informational.
- (11) If the caregiver doesn't have a smart device, are they allowed to use the participant or clients device?
- (12) Thank you for an outstanding presentation. The content was great and I love that lots of time was allowed for Q & A. This is important!
- (13) Recorded for anytime viewing.
- (14) The person asking the question should have the ability to elaborate when the question is read.
- (15) As this is new, we as providers are going to need more info.
- (16) Speak specifically to PAS vs A&D Waiver so there could be a smaller listening audience and maybe have a chance to answer more questions.
- (17) I will be interested in future webinar's that deal with the actual set up. This webinar contained very useful information to understand the EVV process

• **What suggested EVV topics would you like to see for the next meeting?**

- (1) Not clear on how Therap is going to link to this app
- (2) having the PAS Program Specialist or her representative available at this would be helpful. I didn't see any place that I was able to submit a question.
- (3) clarification on portal/scheduling procedures.

- (4) Is there a back up plan if there is a Tellus system failure?
- (5) Who and How will the provider be trained to use this EVV.
- (6) How is this going to effect the organizations that now do the billing via hardcopy?
- (7) more on the third party integration
- (8) I found from a document on your website that DHHS.MedicaidFA-EVV@nebraska.gov is the email address to send any EVV related questions. That too should be included in my opinion during your future events.
- (9) Service Codes--Does PAS code 4475 apply to Home Health staff who provide services?
- (10) Preventing fraud. who is overseeing claims, role of Agencies, meetings are scheduled for monthly, but the EVV starts in September and we are in June?
- (11) Signatures - the signature is required by the Legal Guardian if the client is unable to sign for themselves. Can they get the signature later? The guardian is not always present.....Sometimes the guardian and the provider are the same person, so an authorized representative has to sign, and that person is most likely not available to sign at the time of services either. Will someone be verifying the sigatures beings they can not be paid without the proper signature?
- (12) Would like to see the billing piece and how that is going to work.
- (13) More demos. Such as inputting data, schedule's. the meat of the system.
- (14) How to implement the service auths. Who creates the service auth/tasks? Basically more information on the development of the tasks, etc. The portal seems very easy; just have questions about the development of what staff can select on the portal.
- (15) More discussion over billing, how we get are remittance advices, are there reports within tellus that will show us the breakdown of each shift actually worked, etc.
- (16) the actual setting up of the schedule, staff, task etc.
- (17) What will RD/Sc roles in the new process be? * Will we still have to look over billings, or is DHHS Lincoln central office reviewing the claims?
- (18) If provider does not have an android phone /apple or tablet, they can no longer do the billing doc/timesheets? they would have to purchase one of these devices, is that correct? * Any idea of what the call center hours would be? *Will you have a mass training for the chore providers closer to the roll out date? *How will they be notified?

THANK YOU !