Alternate EVV Vendor State Attestation

For Nebraska Department of Health and Human Services (DHHS) EVV Program

Revision 1.1

Revised: July 2024



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Alternate Electronic Visit Verification (EVV) Vendor Requirements

Section 12006(a) of the 21st Century Cures Act mandates that states implement EVV for all Medicaid personal care services (PCS) and home health services (HHCS) that require an in-home visit by a provider. This applies to PCS 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.

In 2020, Nebraska Medicaid announced that PAS and HCBS Providers were required to use the EVV system for their billing as of January 2021. Recent audit findings show that providers have not complied with the regulations outlined in Nebraska Administrative Code (NAC) titles 403, 404,471, and 480. Per the 21st Century Cures Act, all Providers participating in the Medicaid program who render Personal Care Services (PCS) are required to use the EVV system. To engage in the Nebraska Department of Health and Human Services (DHHS) EVV Program, Alternate EVV Vendors must meet the following minimum requirements:

- 1. Be compliant with the 21st Century Cures Act by electronically verifying the following:
 - Type of service performed,
 - Individual receiving the service,
 - Date of the service,
 - Location of service delivery,
 - Individual providing the service,
 - Time the service begins and ends.
- 2. Allow authorized users to enter participant information, which includes:
 - Name.
 - Address.
 - o To be associated to each participant for verification purposes,
 - o Street address, city, state, and zip code,
 - Any additional addresses entered will not remove previously entered addresses from the system records,
 - Phone Number.
 - Medicaid ID (State Assigned ID, the N-Focus ID),
 - Nebraska Medicaid Payer ID.
 - Any other identifiers needed to uniquely identify the participant for services and billing.
- 3. Allow authorized agency providers to enter caregiver's information, to include the following:
 - Name.
 - Address,
 - o Street address, city, state, and zip code,
 - Phone Number,
 - Date of Birth,



- Last four (4) digits of the social security number,
- Email Address.
- 4. Secure and control user access by the Alternate EVV Vendor, so as to limit any unauthorized entry, manipulation, or review of EVV data, to include the following:
 - The user/caregiver is not permitted to access the EVV system,
 - The user/caregiver is not authorized by the Medicaid certified entity and billing provider to enter information in the EVV system on behalf of that provider,
 - The user/caregiver is not permitted to see participant or agency provider data,
 - Must be Health Insurance Portability and Accountability Act (HIPAA) compliant and provide appropriate security and privacy controls to protect Personally Identifiable Information (PII) and Protected Health Information (PHI) data.
 - o Ensures all PHI is encrypted at all times in transit and at rest.
- 5. Ensure Caregivers, Agency Providers, and Individual Providers have EVV capability in all areas being serviced, the Alternate EVV Vendor, at minimum:
 - Must utilize Mobile application which utilizes Global Positioning Systems (GPS) will be the <u>primary</u> method of collecting visit information. Must operate in offline mode to capture visit data when cellular or Wi-Fi connectivity is unavailable,
 - o Must use technology that is accessible to all participants and providers.
 - IVR will only be used conditionally with prior approval from the state
 - o Requires the individual to have a landline,
 - o Provider is required to submit a request to use IVR to the State designee,
 - Alternate EVV Vendor is required to transmit IVR phone number as well as pin information with visit detail.
- 6. Utilize unique sign in credentials for each user who accesses the system and retain information about any changes to electronically captured visit information:
 - Only allow access to the system by properly credentialled users,
 - Only provider agency administrators will be allowed to manually edit visit data system of record/electronic log Tracks all edits to data completed by administrators, recording username and date/time stamp in an audit log.
- 7. Be capable of retrieving current and archived data to produce reports to adequately document services delivered as follows:
 - Report output should include of services delivered, tasks performed, participant identity, beginning and ending times of service, and date of services,
 - Any report shall include an explanation of codes utilized by the provider/vendor (i.e., xx

 Personal Care),
 - Report should include the provider's identity by either name of provider or Medicaid ID / National Provider Identifier (NPI)/Tax ID.
- 8. Maintain reliable backup and recovery processes that ensure that all data is preserved in event of a system malfunction or disaster. Data must be backed up, at a minimum, weekly, and retained for ten (10) years.
- 9. Support expansion of the EVV Program by allowing:
 - Addition of potential future services,
 - Addition of participants,
 - Addition of tasks,



- Addition of any visit requirements as decided by Nebraska DHHS or based on any applicable state or federal laws.
- 10. Providers and vendors shall:
 - Accommodate more than one (1) participant and/or provider in the same home at the same phone number,
 - Customize, collect, verify, document, and transmit specific provider services and visit tasks (i.e., bathing, meal assistance, etc.) delivered to each participant.
- 11. Provide training for Alternate EVV Vendor system functionality. Netsmart aggregator training will be provided by Netsmart.
- 12. Share client integration documents (user manuals, integration guides, etc.) with Netsmart.
- 13. Comply with published Netsmart requirements for integration messaging format, transport protocol, and security.
- 14. Ensure the quality of the data submitted to Netsmart.
- 15. Must provision functionality for the monitoring and correction of any errors returned by Netsmart, and a mechanism to resend corrected transactions.
- 16. Transmit electronically EVV data to Netsmart per Netsmart Alternate EVV Vendor Implementation Guide. A partial list of key requirements are as follows:
 - Data format & layout to comply with Netsmart Rendered Services Data Dictionary,
 - Transmit data from all of your represented providers to a Netsmart-hosted single SFTP directory or HTTPS end point,
 - Manage error responses from Netsmart, error resolution, and resubmission of failed transactions.
 - Transmit at least visit created/scheduled and visit ended (completed, cancelled, etc.) status.
 - Transmit changes in visit status within 60 minutes of change, 24x7.
- 17. Be able to electronically collect provider and participant authentication and confirmation of service delivery as part of EVV. Such confirmation will be delivered as part of the visit record to Netsmart.
- 18. Use only FIPS Pub 140-2-approved (or higher) encryption algorithms.
- 19. Execute the Netsmart Integration Agreements.
- 20. Execute the Vendor Attestation annually or upon new requirements as defined by Nebraska DHHS



Attestation

I attest that with all of the requirements of the Nebraska MC	(Alternate EVV Vendor) is in compliance CO program as outlined above. (Alternate EVV Vendor) will produce supporting
documentation upon request or audit.	(Alternate EVV Vendor) will produce supporting
Print Name	Alternate EVV Vendor
Signature and Date	Title and Phone Number