**Electronic Visit Verification Question & Answers**

1. For those with exceeding weekly caps; why can’t we edit the EVV clock in/out if it exceeds per day and the DSW is responding that it was an error?
   a. Providers are allowed to edit the in/out time to reduce time if a worker exceeds the schedule. The EVV system is not a time and attendance program, but an EVV program to ensure billing is correct.

2. On a compliance standpoint, won’t these caps begin to cause a problem with following the plan of care due to it is considered not following the plan of care when less/more time is worked according to the plan of care?
   a. If policy allows for the flexibility, then is should not be a compliance issue. However, the DSW is required to document deviations to the POC on the daily progress note. Lack of documentation of the deviation may result in a compliance issue.

3. Edit option on claim lines; why is there an option to edit if we should not be editing any EVV time?
   a. There are several reasons that a time may need to be edited or manually entered:
      i. DSW forgot to clock in/out
      ii. Location is not able to access any type of internet service
      iii. DSW is unable to clock in/out for some reason (forgot phone, phone is cut off, emergency situation, etc.)

4. LIVE deadline; when is the absolute deadline of when all DSWs should be live?
   a. Now that the last deadline for EVV has passed, all DSWs should be live in the system now.

5. No service area for those that do not have service in the area his/her client lives, what should our absolute protocol be? What is being done for those recipient’s where cell service is ‘spotty’ at best
   a. Document the lack of service which should contain the following:
      i. Participant’s name
      ii. Physical address
      iii. Date and time provider supervisor tested access to LaSRS at this location
      iv. Service Carrier (AT&T, Verizon, T Mobile, etc.)
      v. Test LaSRS on the DSW’s phone/device to ensure it is not operator error
      vi. Signature/date of person conducting the test.
   b. Retain the documentation of the test in the participant’s file. The provider may be asked to submit this documentation at some point to validate the manual entry.

6. Financial struggle; for some DSWs, they are unable to have data due to it is a financial burden; how do you suggest we handle this? Please keep in mind that larger providers employ 700+ DSWs, buying tablets as smaller providers are doing is not realistic.
   a. The state is providing the EVV system free of charge to providers. It is set up to be accessed from a device with internet access (smart phone, tablet, or computer).
   b. A provider agency who decides to provide the device for login should consider getting one device per participant, not per DSW.

7. Paper documentation; does the paper documentation have to match exactly, even if it is off by 1-2 minutes?

March 23, 2018
a. OCDD and OAAS are addressing how to handle potential differences between progress notes and LaSRS. However, DSWs have access to their log in/out times, and should use those times for any paper documentation that requires an in/out time.

8. Transportation with Supports and NOW clients when on Mobile Crew – these are being blocked? Why?
   a. Changes have been made to the system that removes these blocks; however, the provider must observe any ratio assigned to a Supported Employment service provided when also providing SE transportation.

9. When a staff has clocked in a few minutes early and stays a few minutes late after a 16-hour shift, those few minutes are being blocked. Rightfully so, but there is NO room for even a second?
   a. The 16-hour maximum for NOW IFS hours was put in to place when NOW first started. We strongly suggest that providers not schedule a 16 hour shift to allow room for securing back up staff.
   b. DSWs who continually clock/out in a few minutes early/late should be retrained on clocking in/out as close as possible to the time their shift starts to avoid the 16-hour notice.

10. What is being done for those staff who do not understand how to operate a cell phone (usually older staff who are the best workers) and the provider is still inputting their time into the system?
    a. Providers are responsible for training their DSWs on how to clock in/out of the system.
    b. Other providers have successfully trained their older staff to use the system. It takes a concerted effort and perhaps a “cheat sheet” on the process. We use technology in many ways, and individuals learn to adapt (remote controls, microwaves, computers, cell phones, etc.).
    c. There are websites that help someone to learn how to remember their password (Google “remember password”). A person’s log in is their name with a period between first and last name and sometimes a number at the end, which should be easy to remember.

11. At what point will percentage of edits be used ‘against’ a provider?
    a. The thresholds are being developed to ensure areas that do not have cell service are not adversely affected. This is why it is important for providers to have documentation on file regarding cell service (see number 5).

12. Can we begin training our DSWs for 2018 or do we need to wait so that the time can be added into EVV?
    a. All DSWs should be trained prior to a region’s “go live” date. The last “go live” date was 2/19/18.

13. When reviewing the mapping, we were told by SRI that the red bubbles are unreliable? There are times when we have clocked recipient’s in and/or out personally and it will show that we are in another part of North Louisiana (red bubble). Will those be looked at differently?
    a. Only green bubbles can be used to validate GPS location at clock in/out. GPS markers with red bubbles may be reviewed if it is found that a large percentage of a DSW or provider’s EVV clock in/out result in the “red bubbles”. The provider will be contacted to assist with determining the cause in those cases.
b. It is important to note that when overlaps occur between two providers (which still happens), then LDH may consider those with an accurate GPS location (green bubble) as valid vs. those with a red bubble.

14. We have asked for a ‘test client’ to use when training new DSWs. When we are training them now, we have to void the times which is causing the percentage of edits to increase. Can you please put in a test client for training purposes?
   a. All providers have access to a test LaSRS system, which can be used for training.
   b. It is important to remember that if someone accidentally logs in to the training system and uses it for live data, SRI will not be able to transfer the data electronically, which will require the provider to manually enter the data. This may adversely affect the percentage of allowed edits for the provider.

15. Over/Under PA report
   a. How do the negative recoupments effect the ability to get paid for the positives owed?
      i. If you have a negative recoupment, then you may receive a “194 denial” when you bill the positives owed as the units for the negative recoupment are blocked for that participant/service/PA period. We recommend that you resolve the negatives first and then bill for the positives.
   b. Is it important to process recoupment and re-billing for a participant by the quarter? If so, why?
      i. Not necessarily. As long as you adjust the original schedule billed, you can work on it as you wish. However, as stated in 15a, you should resolve any negative recoupments before you work “positives owed” for a particular participant/service/PA period as it could result in a 194 denial.

16. Please explain the “rolling 24-hour period” for “exceeding 16 hours”
   a. In the NOW for IFS hours, a worker cannot work more than 16 hours in a rolling 24-hour period. LaSRS will look at services from Monday at 12:01am to Tuesday at 12:01am, and Monday 12:02 am to Tuesday at 12:01 am, etc. An algorithm is run in LaSRS to detect anyone that has worked more than 960 minutes of NOW S5125 services in a 24 hour period.
   b. When you receive the “Exceeded 16-hour rule” notification, review all S5125 schedules for the worker between the first schedule with the notification through the last schedule with the 16-hour notification. Add up the minutes worked and it should total more than 960, which creates the notification.

17. Can you enable a “show password” option on the log in screen so a worker can see if they are entering something that is incorrect? This will reduce the number of lockouts.
   a. We are unable to do this due to HIPAA concerns.

18. When do you start counting the five “FYI over 16 Hours” per quarter? An “exceeded 16 hours” notification will count towards the five per quarter when the worker has worked at least 16 hours and 8 minutes (968 minutes) in a 24-hour period.

19. When adjusting SIL billing completed prior to EVV, what is the process?
   a. SIL entries made in LAST can still be edited in LAST under the following conditions:
      i. The original entry into LAST was made within one year of service date.
      ii. The existing schedule is changed within 2 years of original service date.
20. There are times when the staff go to clock out and the system says “still processing”. When I try to print a PA, the screen goes blank.
   a. All technical difficulties should be reported to SRI as close to possible as when they occur. When you call SRI (225-767-0501), tell the person that answers the phone that LaSRS is not responding and you need immediate assistance. Those calls are routed as priority for a response.