



State of Louisiana

Louisiana Department of Health

Bureau of Health Services Financing Office for Citizens with Developmental Disabilities Office of Aging and Adult Services

MEMORANDUM

OAAS-P-19-005 OCDD-P-19-006

TO:

OAAS/OCDD Direct Service Providers Utilizing Third Party EVV

Systems

FROM:

Julie Foster-Hagan, OCDD Assistant Secretary

Tara A. LeBlanc, OAAS Assistant Secretary Jove

Brian Bennett, Medicaid Section Chief

DATE:

May 2, 2019

Re:

Reporting Requirements for Third Party EVV Systems

In order to accommodate providers with Electronic Visit Verification (EVV) systems already in place and allow the use of other EVV systems that may better meet business needs, the Louisiana Department of Health (LDH) allows provider's use of their own EVV system for in-home personal care attendant services as long as all state and federal requirements are met.

These EVV systems must upload data on a daily basis into the state EVV system, Louisiana Service Reporting System (LaSRS), so that overlapping services can be identified and the geolocation of provided services are captured. Timely submission of EVV data into LaSRS also ensures LDH obtains a complete audit trail of all edits to electronic records.

Effective May 21, 2019, LDH is requiring that these EVV systems upload data to LaSRS on a weekly basis. ALL EVV services for Sunday — Saturday must be uploaded to LaSRS by 9:00 pm the following Tuesday. Manual entries may be uploaded at the provider's convenience.

Effective October 1, 2019, all EVV systems must upload data to LaSRS on a daily basis but no later than the next business day.

LDH must assure that data originating from outside EVV systems is reported accurately and that all records that are manually entered or modified are identified as such. It is also imperative that LDH receives timely information from EVV systems and the data

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submitted to the state's EVV system is accurate. This is a mandatory requirement for both audit and oversight purposes and to ensure compliance with the 21st Century Cures Act.

Attached is an attestation (OAAS-PF-19-001 and OCDD-PF-19-001) that each provider and their EVV vendor MUST review, sign, and submit to LDH. By signing, the provider and EVV vendor attest that:

- Any changes/edits to services captured by their EVV system are entered through "normal data entry" protocols;
- The system automatically identifies any changes/edits to services as "manual" or "edited" entries;
- Data is not manipulated through the back-end of a system (raw data files);
- All changes/edits are only made through the front end of the system which captures required edit information; and
- Provider access to actual raw data is restricted by the EVV vendor.

Please submit the completed and signed attestation statement to LDH by close of business **May 17, 2019.** Questions regarding this letter may be submitted to EVVHelp@LA.GOV.

c: Statistical Resources, Inc.

Attachment



Attestation for Providers Utilizing Their Own EVV System



Providers electing to use their own electronic visit verification (EVV) system are responsible for ensuring that the system meets the intent of the 21st Century Cures Act and other state-specific requirements outlined in the <u>Data Integration Process</u> and <u>Data Bridge Elements</u> documents found at <u>www.ldh.la.gov/index.cfm/page/2751</u>.

This attestation verifies the following:

- 1. All iterations of an EVV record (including ALL manual edits) are uploaded to the state EVV system.
- 2. Original geolocation(s) of an EVV record is uploaded to the state EVV system.
- 3. Any change to an EVV record is tagged and reported as a manual edit to that record.
- 4. Manually edited records capture and report the following information:
 - o Date and time of edit
 - o Person editing the record
 - o Geolocation of where the edit originated
- 5. The EVV system does not allow changes to data through a back-end process and prohibits manual manipulation of data. Changes to data are made through the front-end process, which automatically captures and logs required edit information.

Providers utilizing their own EVV system are required to make their system and its data available to any state or federal agency upon request for audit purposes. Additionally, the provider is required to submit reports upon request to the state or federal agency.

By signing this attestation, both the provider and their EVV vendor attest that they understand and will comply with the requirements outlined above. In the event of an investigation or audit, this attestation binds the HCBS provider and their EVV vendor to follow any applicable state or federal regulations.

The signed and dated document shall be submitted to the following address by 5/17/19:

Louisiana Department of Health c/o Medicaid Program Support and Waivers Section P.O. Box 91030, Bin 24 Baton Rouge, LA 70821

| Provider Agency Name | |
|--|-------------------|
| | |
| Printed Name of Provider Agency Owner/Executive Director | Title |
| | |
| Provider Agency Signature | Date |
| | |
| Provider Numbers (7 Digit Medicaid Provider Number(s)) Utilizi | ng the EVV System |
| | |
| EVV Vendor/Company Name | |
| | |
| | |
| EVV Vendor Representative Printed Name | Title |
| | |
| 1 | |
| EVV Vendor Representative Signature | Date |