



Best Practices for Implementing EVV in your Self-Directed Program



Hello, it's my pleasure to be here!

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Nationally Certified Person-Centered Thinking Trainer



Ten years providing Medicaid Financial Management Services long-term care waivers, consumer-directed programs, and case management.



**Bachelor of Science Human Services,
Metro State University**



Leader in Self-Direction



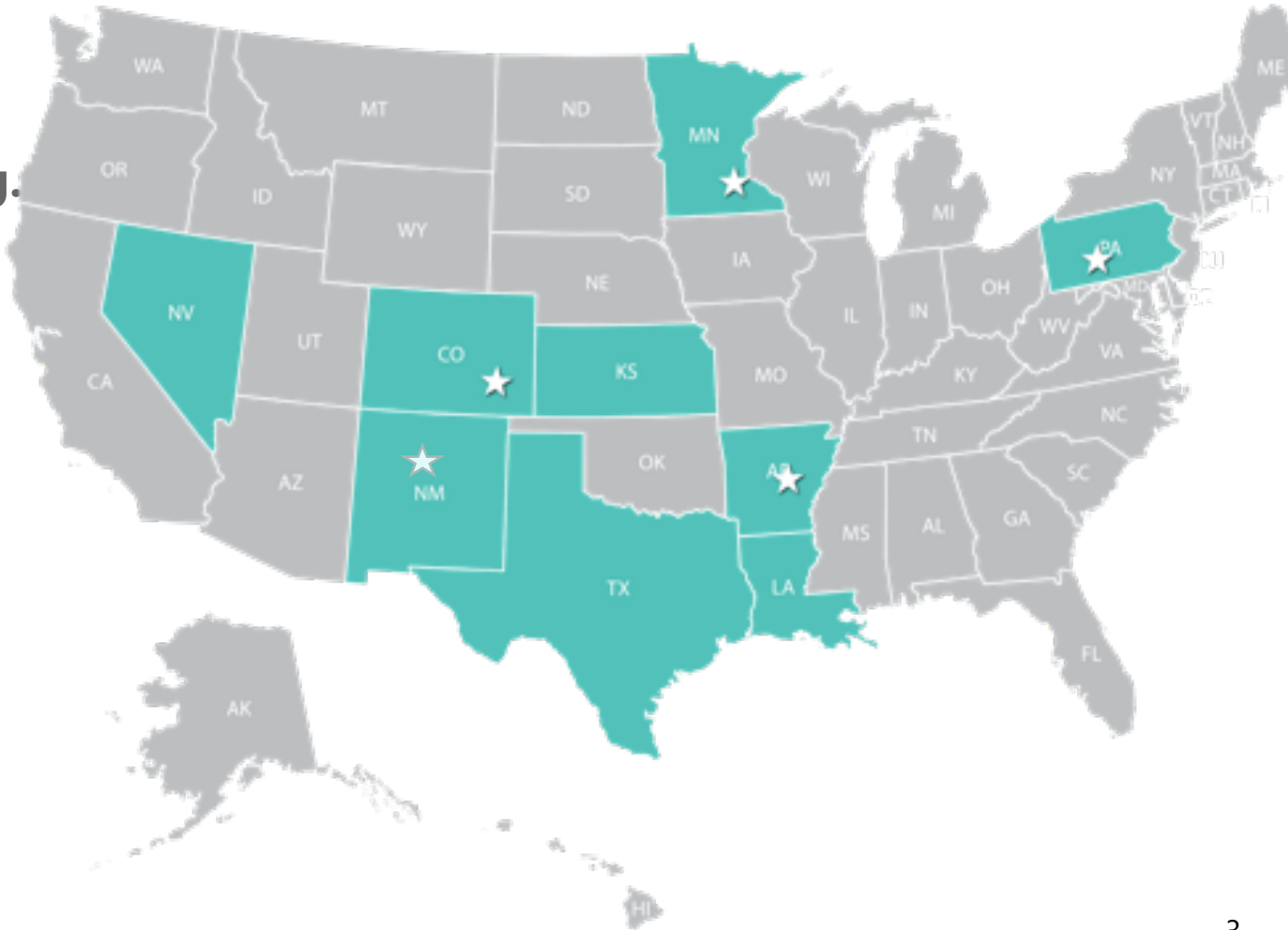
National Industry leader providing premium FMS services to 9 states and growing.



Arkansas, Palco's headquarters, was the first state to pilot "self-direction" more than 20 years ago. Palco was the nation's first fiscal employer agent (F/EA).



Focused on industry standards and Person-Centered Practices.



Palco Mission



We serve people.

We provide services that enable individuals to live independent lives, where they are empowered to make their own choices about what's best for them.

We embrace diversity of thought and the promise of new ideas, honed by experience and enhanced by technology.



Presentation Overview

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Financial Management Services

Kady Predota

02

Managed Care Organization

Cheryl Laaker

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Electronic Visit Verification

Grant McKay

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Participant

Ian Kuenzi



Your Panelists



Cheryl Laaker

Sunflower Health Plan
Manager of Community Engagement
State



Grant McKay

Fiserv
Sales Executive



Ian P. Kuenzi

Program Participant and Advocate
Kansas Works Program

There is freedom of choice in home-based care.

01

Financial Management Services Perspective



Key Considerations ?

- Employer authority belongs to the Participant/Designated Employer, not the FMS. They are the ones scheduling and managing their visits.
- Edits and Exceptions
- Employee and Employer approvals
- Training and Support in various media
- FMS EVV integration

Successful EVV Implementation ?

- State/MCO collaboration and weekly meetings to review all aspects of the requirements
- Sufficient lead time prior to go live, for trainings
- Joint communication efforts and multiple avenues of support for stakeholders
- Robust training and FAQs to help people understand the background for why EVV is being implemented

Palco (FMS) EVV Perspective



What are Biggest Challenges ?

- Ensuring technical specifications align across multiple outlets such as the FMS system, MMIS/Claims systems, EVV vendor and State aggregator when necessary
- Determining a system for edits and approvals that does not present a joint employer liability
- Short time frames to implement such a large change to large populations of folks where technology may not always be their strength

Implementation Differences ?

- Exempting live-in caregivers
- ADA accommodation processes and support
- Employer tools and documentation within the EVV system, including employer tools
- Integration with other health and human services platforms for more robust support
- Listening sessions focused on transparency and feedback





Committed to transforming care.



02

**Managed Care Organization
Sunflower Health Plan**



**sunflower
health plan™**

Overview of EVV Implementation in KS



- KS WORK Program serves participants receiving Medicaid benefits who remain eligible by maintaining a job working at least 8 hours a month



- EVV was implemented in January 2020
 - Implementation was a 6-month project involving MCO staff, advocates, EVV vendor and FMS



- Program supports over 125 participants, both rural and urban

Sunflower Health Plan MCO Perspective



01

What did you find most challenging about EVV implementation?

- A) Helping less tech savvy people learn how to provide the correct information from their devices and become comfortable with using them.
- B) Encouraging people to attend the trainings.
- C) Access to Wi-Fi particularly in rural areas

02

How has Sunflower benefited from EVV implementation?

EVV provides a more accurate, instantaneous picture of the supports our members receive.

03

What worked well in the implementation that you recommend others consider?

- A) Having one point of contact to answer questions.
- B) Provide multiple days, and times for trainings.
- C) Include a member advocate who uses the system available to provide support to members.
- C) Easy to follow step-by-step instructions with pictures.

04

Twelve months later, how is it going?

There are still a handful of members struggling with the technology piece, especially those with small allocations and older PCAs. Wifi connectivity is still a concern in some rural areas. Overall, it has been a good change to provide more accurate reporting of utilization of hours. It is good to have the back up of checking hours in Connect for when EVV is down or people are not able to access EVV immediately. Most people have accepted the change.



Leveraging tools to improve Self-Directed care.



03

Electronic Visit Verification
Vendor
Fiserv

First Data
is now **fiserv.**

Staying Focused On Outcomes



What are common misconceptions you see when a State begins the process of implementing EVV in self-direction?

A

1) A required schedule.

Service recipients, or a representative on their behalf will not have an avenue to review and confirm verified visits.

Or payroll will be delayed.

- An example is Self- Directed EVV is not the same as agency based EVV.



What are important technology aspects of implementing EVV in self-direction that administrators should considering when partnering with an EVV vendor?

A

1) The ease of use and multiple methods to check in/out.

2) Multiple ways for service recipients to review and approve time.

Where do we go from here?



**Fiserv
Perspective**



CMS certification under the Outcome Based Approach

COVID- 19 Impacts

- a) Telehealth
- b) Remote monitoring

Auxiliary benefits of EVV

- a) Real time missed visit tracking
- b) Remote monitoring
- c) Observations
- d) Value based recordings

Mobile focus & program efficiencies



Reflections of a participant.



04

Participant Perspective

Ian P. Kuenzi

Learning from personal experiences



How has EVV changed the way you receive services?

- Minimal changes to the day-to-day care
- Ensuring as an Employer that my Employees are compliant and using the technology as required

Have your personal care attendants responded to the change?

- My caregivers have responded well and understand it is a requirement of keeping their employment
- When issues with the technology arise, we work together to troubleshoot

What was your biggest challenge during implementation?

- Getting members to realize it is a Federal requirement and not an MCO or FMS policy
- Members returning paperwork to get signed up

Learning from personal experiences



What worked well with the overall implementation?

- Lots of communication between both FMS vendor and Sunflower
- Several training opportunities and components for people to access it in a way that worked well for them- webinar, self-paced, phone, user guides

What are some of the biggest challenge's others have shared with you in your role as an advocate?

- Learning the technology and making technology a part of their daily lives when it maybe was not before
- Additional service provisions make it harder for people to receive the care they need

What are some things that can be improved as time goes on?

- Continued app improvements to speed up the performance and make it more intuitive and user friendly for personal care attendants



The important thing is to not stop questioning.

Albert Einstein



Questions for the Panel

Contact Information



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Thank You for your time!

