

DDS EVV Program

Frequently Asked Questions (FAQ) For Providers

Updated as of: 2/2/21

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FAQ Responses:

1. What is EVV?

Electronic Visit Verification (EVV) is a telephonic and computer-based system that documents the precise visit times and services provided by your staff.

2. What is the DDS timeline for EVV?

The federal 21st Century Cures Act requires states to implement EVV for certain Medicaid funded programs. DDS is required to have the EVV system in place and active by 1/1/21.

3. Response time from Sandata to address calls for assistance: In some instances, Providers report waiting 2-4 weeks for Sandata to respond to a ticket.

DDS and Gainwell meet with the Sandata call center and leadership team daily to review open tickets. There have been several issues that due to the complex nature of DDS' EVV solution, have required updates to table data as well as coding changes which have taken longer than a typical call is resolved. We strive to resolve open tickets as quickly as possible.

4. What form of documentation is required for EVV?

The DDS Documentation Guidelines remain in effect. DSS auditors are taking part in an EVV Pilot where they will review EVV data and provide information that will assist DDS in updating documentation guidelines. Currently tasks are not required for the provider system. They are required in the Self-Determination system, however.

TECHNOLOGY & UTILIZING THE EVV SYSTEM

5. Is DSS considering opening this to other vendors or at least using a system integrator so we can use our existing reporting systems?

DSS has not changed position on the use of a single state mandated EVV system for the visit check in/check out. Sandata provides a visit extract (file specs are available) that can be imported into existing systems.

6. Is there a plan to enhance the Sandata system to improve entry of multiple services?

DSS has enhanced the telephony check in/check out process to accommodate consecutive services. The Sandata Mobile App (SMC) mobile application was upgraded in June 2019 to apply this same feature for mobile users, who utilize schedules, which significantly reduces the visit maintenance effort.

7. Does DDS plan to adopt the 90% compliance rate that is currently in place?

DDS is currently reviewing the compliance plan and will provide an update to providers shortly.

8. What number does a Provider insert in the Medicaid ID field?

The Provider should put the DDS PIN # in this field.

9. What is the status of the Overlap Declaration process?

It was recently discovered that an overlap provider who selected SAM, could change their mind and begin using the portal without any additional work on either DDS or Sandata's part. There is work, however, There to allow an overlap provider to change their selection to using only SAM. If a provider is interested in learning more please review the administrator training found here:

<https://www.sandatalearn.com?KeyName=ctddsagency> or contact Customer Care at (855) 399 8050.

10. Can you address the delay in data transmission from DDS to Sandata?

There should not be more than a 24-hour delay for information to reach Sandata. If you have your authorization from DDS and experience more than a 48-hour delay, please contact Sandata Customer Service.

11. **What do we do if an individual is in the Sandata system but they are not eligible for EVV?**
DDS IT is creating a process to deactivate individuals sent to Sandata in error. This process will take a while. We are sorry for the inconvenience.
12. **GPS feature in SMC- Do staff need to use this each shift/access the GPS? What is the GPS used for in SMC?**
When staff log into work with an individual, the GPS location is captured automatically and there isn't a choice to turn this off. The GPS location identifies the location of the start of the service and the location of the end of service.
13. **If a staff regularly meets an individual down the road from their apartment (city parking is limited in front of their apartment), is it okay for them to log in when they are with the individual/meeting outside of the apartment?**
This would depend on the GPS signal range. You would need to test this. If it is outside the apartment complex office, you should be able to add that address to the individual's profile to accommodate.

EVV REQUIRED SERVICES & TASKS

14. **Home Care services vs. Residential In-home Services: The viability of EVV for Home Care services vs. Residential In-home Services are significantly different. How are these differences taken into account in the DDS EVV system?**
DDS recognizes the need for flexibility. DDS has met with providers who vocalized similar requests and DDS chose to use the check in/check out only at this time. Scheduling will remain an option for the future.
15. **What is the status of Shared Living and requirement to use EVV?**
Shared Living doesn't require EVV. Services an individual receives (IHS or PS) should be separate authorizations. These services do require EVV. The Operation Center will work with the regions and providers to review and make any necessary changes to all Shared Living authorizations to ensure compliancy with the DDS Waiver.
16. **IHS Services: How should Virtual IHS services be recorded in the EVV system or Web Res Day?**
To be able to define Virtual Visits from face to face visits, there would need to be a reason code in the Sandata system. DDS is currently assessing the need.

TRAINING

17. **Is adequate training going to be provided on the EVV system?**
Training for DDS providers will be offered via live and recorded Instructor led webinar sessions and training resources continue to be available via the Sandata Learning Management System. Invitations to training will be sent to all DDS EVV service providers prior to each training session. Providers can also access support from Sandata Customer Support.
Please note, due to the COVID-19 pandemic, in-person trainings are indefinitely on-hold. Additional information regarding training options will be communicated directly to providers.
18. **Does DDS have a timeline for when they are going to be providing the training to providers to use EVV? With the expectation that providers will use this effective January 1, 2021 it is important that a training timeline and schedule is shared.**
For providers who are new to the EVV Portal - Instructor led training is currently available through December 2020. Providers should have received a Training Invitation dated September 2020 that contains five steps to gain access to their EVV system. The first step provides instructions to sign up for Administrator Training through Sandata. Once the Administrator completes training, the EVV contact will receive an email containing the Welcome Kit and account credentials. The EVV Administrator will then have the ability to add staff and provide access to EVV training.

https://portal.ct.gov/-/media/DDS/evv/New_Provider_to_Electronic_Visit_Verification.pdf

19. How many people can an agency have attend the Administrator training?

An agency can have as many people as they wish to attend the Administrator Training.

20. EVV Training: There was training on how to set up EVV, how to capture visits and how to clear exceptions but there was no information on what happens after that. Is the information sent real time and automatically to DDS? If not, what is the procedure for us to submit the information.

The visit data is sent to DDS nightly in the data warehouse feed. DDS can view visits as they occur in the Sandata system with Jurisdictional View.

OVERLAP PROVIDERS

21. Do Overlap Providers use the existing call-in numbers (assigned to ABI/Autism program) or the new DDS number?

Agencies can use the new DDS telephone numbers allow the caregiver to enter the service ID which is required for a confirmed visit. If the existing DSS telephone number is used instead, visit maintenance will be required to add the service to the visit.

22. DDS specific tasks are not visible in overlap providers santrax system as a task option. They are also not available to DDS staff when they call into ABI/Autism santrax phone numbers.

The issue related to missing DDS tasks in SAM has been escalated to Sandata's configuration team. This should be resolved soon.