

Electronic Visit Verification (EVV) Technical Assistance Call

Housekeeping



All attendees will be on mute throughout the presentation



Please send all questions to <u>EVVHelp@health.ny.gov</u>



Today's call

- Introduction/Updates Kiera Bentley
- Attestation Demo CSRA Team
- API Demo CSRA Team
- Open Q & A Dan Hallenbeck/ EVV Team
- Next Steps

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Updates

- Production API will go live on December 10th
 - <u>https://developer.emedny.io/</u>
 - All valid submitters can begin submitting at this time

*December 31st, 2020 - Final Date for Providers to Implement EVV for Medicaid Personal Care Services (PCS)

- Walkthrough of artifacts
 - EVV Technical User Guide
 - eMedNY.org
 - EVV Interface Control Document
 - eMedNY.org and <u>https://www.health.ny.gov/evv</u>



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EVV Enrollment and Submission Information

Outlined below are the steps to follow on being prepared to submit EVV data:

- Step 1: Enroll as a NYS Medicaid Provider and get an MMIS ID, if not currently enrolled
- Step 2: Determine who will be your "submitter" (you can be your own submitter)
- Step 3: If your submitter is not yet enrolled as a Medicaid Provider, have them enroll as well
- Step 4: Submit an EVV Attestation Form
- Step 5: Have the submitter obtain the login credentials for the eMedNY Provider Web Portal, so that they can gain access to the eMedNY API Developer Portal https://portal.emedny.org
- Step 6: Using web portal credentials, login to https://developer.emednytest.io (available now for testing) OR https://developer.emedny.io (PROD which will be made available later), to obtain an API key.

*Please review the EVV User Guide located on <u>www.emedny.org</u> for more detailed info!





Create a PE Portal Account

How to get there:

- Go to <u>www.emedny.org</u>
- Click on Electronic Visit
 Verification (EVV) on the right hand side of the main page.





Link to the PE Portal

You will get to the PE Portal by clicking on "Attestation Form" under Useful Links



Electronic Visit Verification (EVV)

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.

EVV is a system that may include multiple point-of-care verification technologies, such as telephonic, mobile, and web-based verification inputs. The system electronically verifies the occurrence of home-or community-based service visits, identifying the time that service provision begins and ends to ensure accurate claims disbursement and safeguarding that beneficiaries who are authorized to receive services get the expected care. EVV is used to:

- Verify visits on a real-time basis, including date, location, type of service, individual(s) providing and receiving services, and duration of service(s)
- Validate hours of work for home health employees
- Eliminate billing data entry mistakes
- Reduce costs related to paper billing and payroll
- Help combat fraud, waste, and abuse



- Provider Enrollment
- Provider Portal
- Attestation Form
- Interface Control Document
- Published Rate Codes and Procedure Codes subject to EVV
- Technical Assistance Information

This page has a lot of info!

- Interface Control Doc
- EVV Technical User Guide
- Provider Web Portal
- Attestation Form- click here



Sign up for the PE Portal

- Signing up for an account is easy. Click on "Sign up" at the bottom.
- A valid email address is required
- Phone number MUST start with +1
- Password must contain a lower case letter. Password must contain an upper case letter
- Password must contain a special character
- Password must contain a number.
- Password must contain at least 16 characters

For questions on the PE Portal, please call the eMedNY Call Center at 1-800-343-9000

eMedNY^aID Sign in with your username and pass Username Username Password Password Forgot your password? Sign in Need an account? Sign up https://pe.emedny.o

eMedNY^aID

Sign up with a new account

	Username				
	Username				
sword	Name				
	Phone number				
	+12125551234				
	Email				
	name@host.com				
	Password				
	Password				
	Sign up				
ora/	Already have an account? Sign in				
<u>'' ''</u>					
	NEW Department				

Confirming Your PIN:

- You will then be told a PIN has been sent to your email address you used to create your account.
- Go to your email to get the PIN and enter it here.
- Click "Confirm Account"

	eMedNY ^a ID	
We h Enter Verif	have sent a code by email to n***@g** r it below to confirm your account. fication Code	*.com.
	Confirm Account	



Your Provider Dashboard in the PE Portal:



 Click on, Click here to begin the process. This will allow you to add the MMIS ID you are submitting for to your file.



Entering the Provider Information:

- The PID is the provider ID (also known as a MMIS ID)
- Enter the PID or NPI of the provider you are submitting the attestation for.
- Click Next
- It will then display the information for the provider you entered, if this is correct, click **Next.**



Linking Your Provider to Your PE Portal Account:

- A PIN will be sent to the *email address eMedNY* has on file for the correspondence address attached to the provider ID, NOT the email address you used to create an account in the PE Portal.
- To change the correspondence email address, click on "Change Email for Attestation" under Useful Links on the EVV page of emedny.org
- https://www.emedny.org/evv/email/

Confirming Your PIN:

- Once you have the PIN sent to the email address, the screen will change for you to enter the PIN number. Enter the PIN from the email.
- Click on **Submit**.
- Once PIN is submitted, you can start the attestation form.

For assistance with this process, please call the eMedNY Call Center at

1-800-343-9000





EVV Attestation

Provider Enrollmen

Your one-time PIN number has arrived

This PIN was generated to finish linking a provider to your accoun so you can continue the EVV Attestation process. Enter this PIN in the Provider Enrollment portal on the submission

it was requested for

414412

eMedNY

Need help? You can contact us a

Your user account is not currently linked to this provider

To link your account to this provider, please select "Send PIN". A 6 digit PIN number will be sent to the correspondence email address we have on file for this provider.



Pepartment

Cancel

Please enter your 6-digit PIN number below

We have sent the PIN number to the correspondence email address we have on file for the provider. Select 'Submit' to finish linking this provider to your account and continue to the attestation form.

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				(Cancel	Submit	
Enter 6-digit PIN number							
PIN Number	B						

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Send PIN

×

Entering Information on the Attestation Form:

- The electronic form has three sections: Introduction, Attestation, Submitters
- Introduction:

December 2020

• Please read it for your knowledge and click Next.





Attestation:

 Enter your information for email, name and title.

Submitters:

 Click on Add Submitters to start entering the submitters you are attesting will be submitting EVV data on your behalf (this includes yourself if applicable to you).

 Attestation New York Electronic Visit Verification (EVV) Provider A Introduction New York Electronic Visit Verification (EVV) Provider Attestation O Submitters s Act federal law passed December 2016, and New York State specif Department of Health (DOH) and the Office of Medicaid Inspector General (OMIG) upon request by such agencylies Organization/Individual Email COMPLETE () Owner/Officer Title Owner/Officer Name Submitters Identify EVV submitters 2 Let's add your submitters You can add as many submitters as you need. When you're done, click "Next" to move or What Do I Need to Do? Add a submitter > Name and Complete > C Repeat to My submitters You haven't added any submitter dd submitters

eMedNY Provider Enrollment



Hello, Jeremy! 😩 🖂

COMPLETE (

C PREVIOUS D NEXT

My submitters

Adding a new submi

Choose a name for your

submitter Name

Submitter 1

Entering Your Submitter(s):

- Submitter Name, then click **Next**.
- Submitter NPI or MMIS ID, then click Validate.
- Confirm the information, and click **Confirm** if correct.

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omitter and then	click "Continue" to fill it out				
	My submitters				
	🔘 1. Submitter 1 🗸				
	Identify EVV submitters				
	O Click on the "Valida	ate" button to the right to cor	firm that this information is correct.		
	EVV Submitter NPI or 0000000000	MMIS ID *			
		Provider Va	lidation		×
		Confire	ensure that the informati m" to complete validatior	on shown is correct, and t 1.	hen click
			Provider Name MMIS ID/PID		
			NPI	13	
			CANCEL	CONFIRM	
			CAROLL		
				NEW Der	
				YORK DE	Jartment Jealth

Saving and adding another Submitter:

- If adding another submitter, click on SAVE & ADD ANOTHER.
- If done, click on SAVE & CLOSE.
- Your three sections will now have green check boxes, when you are done adding all your submitters, click **Continue** at the top.

ntroduction

Attestation



Submitting Your EVV Attestation

- If you need to make changes, click on "I want to Make Changes."
- If you are ready to go to submission, click on "I'm Ready to Proceed."
- The screen will display your provider information at the top, you can still go back if needed, or click on "Review and Submit" to view all of the information you entered, and submit your form.



Confirm your Information:

- Be sure all the information on the screen is correct.
- Click on "I need to make changes" if not correct
- Click on "Confirm and Submit" if all is correct. Clicking "Confirm and Submit" submits your EVV attestation form.
- EVV attestation forms are processed within 24 hours.





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Question and Answer

- We will try to answer as many questions within the given timeframe
- If your question is not answered, please send it to <u>EVVHelp@health.ny.gov</u>
- To ask a question, please type question in the Chat Box
 - Please do not repeat your questions, we will do our best to get to as many as possible



Still time to Test!

- If you are interested in signing up for testing, please email: <u>emednyapirequest@gdit.com</u>
- Or email EVVHelp@health.ny.gov



Next Steps

- Continue to test
- Upcoming Technical Assistance Calls
 - December $15^{th} 2:00 3:00 \text{ PM}$
 - December $29^{th} 2:00 3:00 \text{ PM}$
- December 31st, 2020 Final Date for Providers to Implement EVV for Medicaid Personal Care Services (PCS)



EVV Implementation Questions and Resources



EVV Help Mailbox

<u>EVVHelp@health.ny.gov</u>

NYS EVV Listserv Email

• listserv@listserv.health.state.ny.us

Please include the following in your email sign-up request: SUBSCRIBE EVV-L YourFirstName YourLastName



Website Resources

NYS DOH EVV Website

https://www.health.ny.gov/evv

