



Missouri Department of Health and Senior Services

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MEMORANDUM FOR ALL HOME AND COMMUNITY BASED CARE PROVIDERS

FROM: Celesta Hartgraves, Director
Division of Senior and Disability Services

SUBJECT: Electronic Visit Verification (EVV) Regulation

Pursuant to Sections 660.023 and 208.909, all Home and Community Based Services (HCBS) providers are required to utilize a telephone tracking system for the purpose of reporting and verifying the delivery of services authorized by the Division of Senior and Disability Services (DSDS).

The statutory requirement for using a telephone tracking system does not apply to providers of Personal Care in an Assisted Living Facility or Residential Care Facility (PC RCF/ALF) or Adult Day Care setting (ADCW).

This memo is being sent to provide notification that DSDS has promulgated a regulation regarding this statutory requirement for HCBS providers. Missouri 19 CSR 15-9 Electronic Visit Verification becomes effective on February 29, 2016. The regulation can be found at:

<https://www.sos.mo.gov/CMSImages/AdRules/csr/current/19csr/19c15-9.pdf>

The term “electronic visit verification” (EVV), as defined in the regulation, includes telephone and computer-based systems as well as other electronic technology which HCBS providers can utilize to meet the statutory requirements. The regulation provides more details regarding acceptable technologies.

The information below may be helpful to providers when reviewing the regulation:

- 19 CSR 15-9.100 Definitions, defines “Task” as: Tasks for all HCBS service types, including, but not limited to, tasks defined in 13 CSR 70-91, 19 CSR 15-7, and 19 CSR 15- 8. 19 CSR 15-8 includes a description of Routine Tasks in the Consumer Directed Services. This does not change the requirement to document all tasks delivered. Pursuant to 13 CSR 70-91, vendors shall continue to document all tasks delivered to the participant for reimbursement purposes.

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- Pursuant to 13 CSR 70-91, HCBS providers must continue to ensure documentation of the attendant's or aide's name on timekeeping records and the provider's EVV system shall have the capability of including this information on reports.
- Per the regulation, the EVV system shall document start and end time of services, and providers shall bill accordingly. In order for the provider to identify the amount of time to bill for each service type, EVV systems can document tasks delivered and bill by service type accordingly. By documenting time spent on tasks, providers are documenting the services delivered. For services that do not have an applicable task, such as Respite Care Services, EVV shall document the service provided rather than tasks.
- Providers may choose to have their EVV system not record tasks. However, the tasks must be recorded either in the EVV system or by timesheets. Regardless of the method(s) used, the provider must be capable of retrieving current and archived data for producing reports/documentation.
- Manual modifications can be made to EVV systems as needed (e.g. aide forgot to clock in), and the provider shall document the justification of these modifications. This documentation can be retained in the EVV system, if the system has this capability, or the participant's file through a paper timesheet or case note.

Any questions regarding this memorandum should be directed to the Bureau of Program Integrity via e-mail at programintegrity@health.mo.gov or by phone at 573-526-8557.

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