

General Questions

1. Has DPHHS selected an EVV vendor for the State EVV solution? If not, when will this happen?

No. DPHHS expects to select an EVV vendor solution by the end of calendar year (CY) 2022.

2. Has DPHHS established the criteria for a third-party EVV solution to be certified by DPHHS? If not, when will this be available?

No. DPHHS expects to define third-party EVV solution criteria as part of the Design, Development, and Implementation phase of the DPHHS EVV solution implementation. Tentatively we expect to have this information in Spring 2023 to ensure providers have adequate time to evaluate their solution and work with DPHHS to certify.

3. How will DPHHS make additional information available to providers and other external stakeholders?

DPHHS will share updated information regarding plans for provider manual, policy, and/or Administrative Rules updates through website updates as additional information becomes available.

4. Will DPHHS apply for a Good Faith Exemption for home health care services (HHCS) to delay compliance until January 2024?

Yes. DPHHS will be submitting a Good Faith Exemption for HHCS.

5. How does EVV technology work?

An EVV system electronically confirms that home and community-based service visits, subject to EVV, occur by keeping track of the six points of data (1) Who receives the service; (2) Who provides the service; (3) What type of service is performed; (4) Place where service occurs; (5) Date of the service; and (6) Time the service begins and ends in real time.

6. Will Montana be using GPS technology to help capture the required EVV data?

Yes. The EVV solution uses GPS technology to verify services rendered. The solution only uses GPS technology (location tracking) upon check-in and check-out when the mobile application is engaged. The EVV mobile application will not continuously track the location of the provider, member, or aide.

7. If I do not have internet, how should the visit be documented?

The EVV solution allows for check-ins and check-outs when the device is offline. Details will be outlined and provided during future provider training.

8. Is there an alternative to GPS tracking that has been considered and/or will be provided if a member prefers this option?

After consultation with the Centers for Medicare and Medicaid Services (CMS) regarding various approaches to be compliant with the 21st Century Cures Act, DPHHS will consult with our stakeholder group and determine which of the compliant methods is most appropriate for Montana.

9. Why is DPHHS implementing EVV?

In December 2016, the United States Congress enacted the 21st Century Cures Act (Cures Act). Section 12006 of the Cures Act requires states to implement EVV for Medicaid-covered personal care services (PCS) and home health care services (HHCS) that require an in-home visit by a provider. DPHHS is implementing EVV technology to be compliant with the federal requirements detailed in the Cures Act.

10. How does implementing EVV benefit Medicaid programs?

Failure to comply with the Cures Act results in reductions in the Federal Medical Assistance Percentage (FMAP). FMAP provides federal funding for the Montana Medicaid program, including personal care services (PCS) and home health care services (HHCS). A reduction in funding negatively impacts provider and member communities by reducing the money available to pay providers for the services they render. Once EVV has been fully implemented, Montana will avoid reductions in federal funding.

11. Can providers choose to use a different EVV vendor of their choice?

DPHHS has chosen to implement EVV using an Open Vendor model. While DPHHS will offer a State EVV solution, providers may choose to use an alternative system provided by another vendor if specific criteria are met. These criteria will be updated and added to this webpage once finalized.

12. Will the EVV vendor include options to ensure that scheduling features will be flexible enough to meet self-direct options for last-minute scheduling and/or daily or weekly service authorization schedules rather than daily scheduled times?

Yes. More information on this will be provided during future training.

13. Will the system provide flexibility for receiving care outside of Montana?

If the program allows for out-of-state services, the proposed solution will be required to support services delivered out-of-state.

14. What is the ongoing monthly or annual cost to the state for EVV?

There will not be a monthly or annual charge or cost for providers to use the solution components provided by the State as part of the EVV solution acquisition. The EVV solution components will be finalized later in 2022.