



EVV Frequently Asked Questions

Updated!

Is there going to be an alternative for consumers or caregivers who are not familiar with technology? Some of our consumers do not even own cellular phones.

There will be training for consumers or caregivers not familiar with technology. Additionally, if a member does not have a smart phone that will support the use of the mobile application, members can secure a smart phone at no cost through a national program. This program is not related to MT DPHHS, please visit [My Benefit Phone](#) for information regarding this program.

6/14/2023

Updated!

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

Providers will complete the [Provider Survey](#) to begin the process.

After the Provider Survey is completed, the alternate vendor will complete the [Alternate Vendor Survey](#).

Self Direct Employers do not need to complete the survey. If you use Acumen as your Fiscal Intermediary, Acumen will fill out the survey. If you are a Self-Direct Agency with Choice, the provider agency that you work with will complete the survey.

A user manual including user requirements will be made available as part of the implementation process.

6/14/2023

Updated!

Where can I find the list of Montana EVV services? When will I be required to comply?

When Montana goes live in September 2023, these [Montana EVV Services](#) will all be required to comply at that time.

6/14/2023

New!

What if you don't have internet Service or poor internet?

The mobile application provided by the state and a requirement for all Alternate EVV vendors is that they support offline capabilities which allow the ability to conduct a visit check in and check out when not connected to cellular or wifi and then allows the visit to be automatically submitted when the device has subsequent cell or wifi service.

6/14/2023

Updated!

What about emergency visits, self-directed scheduling, and unit tracking?

Emergency visits can be scheduled on the fly from the mobile application meaning they do not have to be scheduled prior to time of service.

Self-directed scheduling can be done ahead of time or on the fly the same way emergency visits can be scheduled.

Unit Tracking information will appear in the member's information tab. Navigating to the information will be included in training.

6/14/2023

New!

How do I apply for an IVR exemption?

An IVR exemption must be submitted by the member online.

More information to come!

6/14/2023

New!

[Where can I find online training for Mobile Caregiver+?](#)

[Mobile Caregiver Plus Training](#) provides various training, webinars, and weekly scheduled Live Q&A sessions with Netsmart training professionals.

6/14/2023

New!

[If we are using a 3rd party vendor who has Cures Act compliant IVR \(or other\) capabilities, are we able to utilize those?](#)

Yes, you will. Regardless of which EVV solution you use, IVR is considered a 90-day exception, which the member must apply for in order to use.

6/14/2023

[If my company has services that do not require EVV, do we have the option to use it for those services also?](#)

At the time of implementation, we're only including the services required to use EVV. However, if there is a desire to expand the list of services beyond those that specifically require EVV, we will consider those requests after go-live.

5/24/2023

[Are live-in caregivers included or exempt from the EVV mandate?](#)

These caregivers are included in the EVV mandate.

5/24/2023

[Are we able to download the Netsmart app and do test entries with our time tracking software?](#)

Not at this time, however, we will have test providers set up for user acceptance testing when we enter the testing phase.

5/24/2023

[If 2 caregivers or a caregiver and a member share an email address, will they each need independent email addresses to register for the platform?](#)

All users need to have either a unique email OR a unique phone number. We understand many users share an agency email address, and therefore, they would need to have individual phone numbers to register.

5/15/2023

[Can Self Direct consumers still create their own schedules in this system?](#)

Caregivers can schedule visits in the mobile application for immediate use and for future use. If a recurring visit is needed (i.e. 8am-4pm M,W,F ongoing), the provider administrator will have to schedule in the provider portal. Recurring Visit scheduling functionality does not exist in the mobile application.

5/15/2023

[Will Self Direct users still submit their hours to the Acumen Fiscal Agent in addition to using the solution?](#)

Per Acumen - What is nice about our solution is that our self-directing clients and their employees are already using DCI, which is also our EVV solution/alt evv vendor. As such, they will continue to use the same system however they will need to start using new tools to capture their visits, like the DCI Mobile Application. The DCI Mobile Applications is linked directly to their other DCI accounts in our DCI Web Portal. This means that they will get to retain their username and password that is already established to access our Web Portal, but they can now use it for the mobile application.

5/15/2023

[Is/will there be a training scheduled for providers who will be using alternate EVV Vendors?](#)

There will be training for both provider scenarios (i.e., providers that solely use the Netsmart application and training for providers that use an alternate EVV vendor). These trainings will be scheduled as we get closer to implementation.

4/19/2023

Do you have a guide which outlines the specs of this program? Such as what type of devices are needed for remote documentation, does this work in a "disconnect" mode as services are provided in remote areas without internet/phone access, etc.

The Department will publish the minimum device requirement to use the mobile application. The mobile application can work in a offline mode when either cellular or internet service is not available.

4/19/2023

On an open model, is it expected that schedules are sent from the EMR? Or can it be submitted when completed visits are?

Schedule information will be submitted with the visit record.

4/19/2023

Will caregivers be logging into the app on a phone from their provider or the client's phone?

The expectation is that the caregiver will be using this mobile application from their own mobile device or a device provided to them by the provider. If they do not have a device and the member is willing to let them use the member device to access the application the caregiver could log in using the member's device to record the visit.

4/19/2023

How will a consumer that uses a signature stamp now be able to sign each day when they are unable to sign paper ones now?

Our application will provide the ability to set a member specific setting that a signature is not required for that member and instead that "rubber stamp" is the reason for bypassing the signature requirement.

4/19/2023

Will caregivers have to sign for every single visit?

Caregivers will log into the application to record each visit.

4/19/2023

Can the clock in and outs be adjusted?

If the provider is using the state's solution, the clock in/clock out times may be adjusted through the provider portal. This will be part of training.

4/19/2023

Can you only submit one recipient claim at a time or can you bulk submit multiple recipients altogether?

Claims can be bulk submitted, does not need to be by member or visit. There is a select all option on the screen. This will be part of training.

4/19/2023

Will each visit be processed and return as a separate claim on the remittance?

Yes, every claim is unique to a member, provider combination but can have many different lines on the claim.

4/19/2023

Does the caregiver portal also allow for import of scheduling calendar data as well as the export? For example n in-house scheduling app.

You cannot import a schedule into Mobile Caregiver+. You may be able to in a third party solution, but not at this time in Mobile Caregiver+.

4/19/2023

Can consumers refuse to use EVV or landline?

Consumers cannot refuse to use EVV. Consumers can request an exception to use IVR. Generally the use of IVR is for a limited time exception, but the state will handle those on a case by case basis.

4/19/2023

Currently, live in caregivers are not required to clock in or out on a timesheet. Will this policy change?

Yes, caregivers will need to clock in for a service to begin and clock out for a service to end.

4/19/2023

How are staff changes during the visit handled?

Caregivers will need to clock in and out to begin and end their shift. For example, if one caregiver is being relieved by another caregiver, the first caregiver will need to clock out to complete their visit and the second caregiver will need to clock in to begin a visit.

4/19/2023

Are notes required whenever a task wasn't completed?

If a service has a list of tasks and no tasks are selected, the caregiver will be required to provide a note to explain why none of the listed tasks were provided.

4/19/2023

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. Caregivers can schedule visits in the mobile application for immediate use and for future use. If a recurring visit is needed (i.e. 8am-4pm M,W,F ongoing), the provider administrator will have to schedule in the provider portal. Recurring Visit scheduling functionality does not exist in the mobile application.

Revision Date: 5/15/2023

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. This information will also be shared in monthly external townhall meetings.

Revision Date: 5/16/2023

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.

12/31/2022

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.

12/31/2022

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.

12/31/2022

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 allow IVR for a limited time. This will be handled on a case by case basis.

Revision Date: 5/15/2023

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.

12/31/2022

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.

12/31/2022

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

DPHHS selected Netsmart as the state's EVV solution offered to providers at no cost. DPHHS signed a contract with Netsmart in December 2022. The DPHHS EVV project will kick-off in January 2023 and the Department expects to go-live in September 2023. Providers that elect to use a third-party EVV solution (i.e., either their existing EVV solution or acquire an EVV solution other than Netsmart) can do so as long as the selected solution is certified for EVV use with Montana Medicaid by DPHHS. The process for certifying a third-party EVV solution will be communicated in late spring early summer 2023.

Revision Date: 1/4/2023

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.

12/31/2022

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.

12/31/2022