



HCBS, EVV and the Pandemic—Surprising Lessons Learned

December 2020

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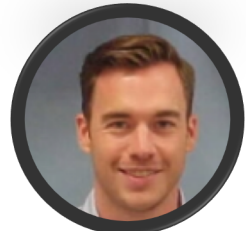
Introductions



Jamie Richardson
VP Payer Business Development



Kristine Snyder
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Home Care, EVV and the Pandemic—Surprising Lessons Learned



- About Sandata
- Sandata EVV programs in Pandemic
- Payer EVV Observations
- Payer Case Study
- Provider EVV Observations
- Provider Case Study
- Pandemic EVV Lessons Learned
- EVV and the Future

About Sandata



Experience

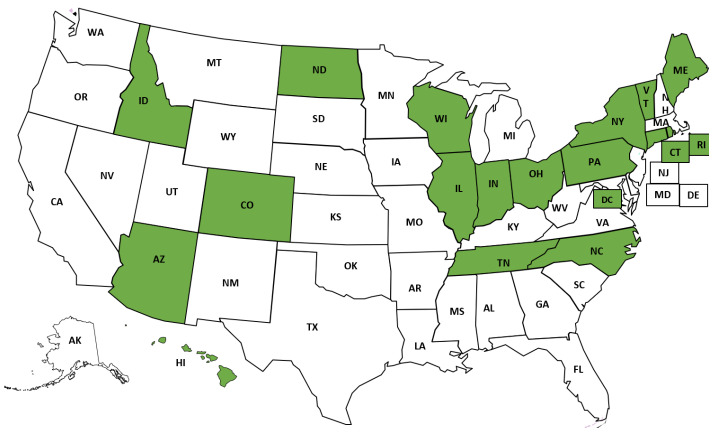
- 18 statewide Medicaid programs
- 50 managed care orgs
- 15,700 agencies
- 2.1M patients
- No failed implementations

Technology

- Software as a service
- ADA/WCAG 508 compliant
- True interoperability with open EVV and open billing
- 187 vendor integrations
- HITRUST certified

Innovation

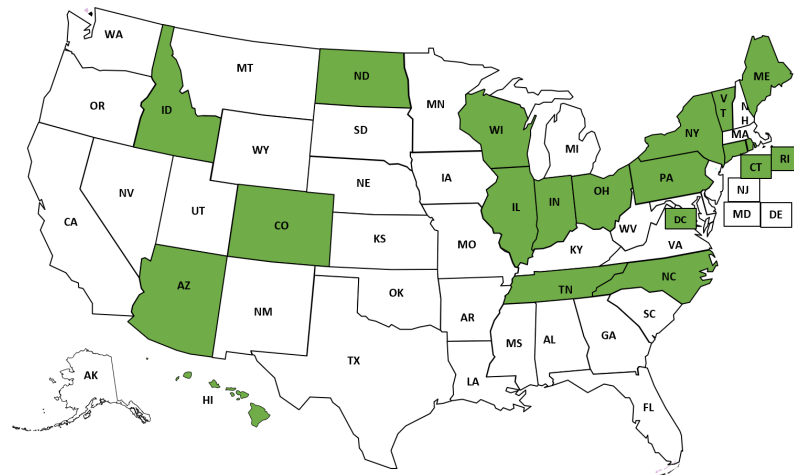
- 1st to introduce EVV
- 1st to introduce FVV devices
- 1st to introduce Mobile EVV
- 1st to introduce EVV Aggregator
- 1st to achieve CMS EVV certification



Sandata is the one home care solution that's making it easier for Payers and providers to work together to provide care

Sandata EVV Programs in Pandemic

- 18 Payer EVV programs are in varied stage of maturity
- Key 2020 focus has been on EVV Cures Compliance 😓
- Presentation observations are from more mature EVV programs
- Those programs include:
- 6,000 Provider Agencies
- 160K members
- Observations Include:
 - Payer Perspective and Actions
 - Provider Perspective and Actions
 - EVV in the Future



November 16, 2020

Demand for home health care surges amid COVID-19, shifting industry landscape

Payer EVV Observations

- EVV allowed payers to monitor HCBS service delivery in real time
- EVV data immediately indicated a decrease in home care visits
- Payers quickly understood the impact to :
 - Member Care
 - Provider service delivery
 - Caregivers
- Payers took multiple routes, including:
 - Policy Updates/Changes
 - Operational Updates/Changes
 - Using EVV data to identify gaps
 - Used EVV data with other data sources to measure more exact impact

Have new codes been added to the medical emergency list for COVID-19?

Yes. The following coronavirus/COVID-19 diagnosis codes have been added to the medical emergency list for all lines of business:

- Enabled nursing home and congregate care members to access telehealth services

Learn more about the emergency provisions now in place for Medicaid beneficiaries.

DIRECT CARE WORKFORCE - EMERGENCY PROVISIONS

- Expanding Direct Care Workforce - Agency Providers
- Expanding Direct Care Workforce - Participant Directed

What the U.S. Government is Doing

- [Government Response to Coronavirus, COVID-19](#)

Medicaid and CHIP Resources

- [Coverage and Reimbursement of COVID-19 Vaccines, Vaccine Administration and Cost-Sharing under Medicaid, the Children's Health Insurance Program, and Basic Health Program Toolkit](#) (PDF, 675.45 KB)
- [COVID-19 FAQs for State Medicaid and CHIP Agencies](#) (PDF, 1.07 MB) (Updated 6/30/2020)
 - [New COVID-19 FAQs for State Medicaid and CHIP Agencies](#) (PDF, 246.21 KB) (FAQs contained in this document are available in the [COVID-19 FAQs for State Medicaid and CHIP Agencies](#) (PDF, 1.07 MB)) (Posted 6/30/2020)
- [COVID-19 FAQs on implementation of Section 6008 of the Families First Coronavirus Response Act](#) (PDF, 183.46 KB) (Updated 4/13/2020)

Payer COVID Support Through EVV: A Case Study



- Background of program in case study:
- Providers are required to take training on the EVV system in order to obtain a provider agreement contract
- Providers are required to use EVV for EVV-eligible services
- Providers are required to capture client verification through voice or signature, for almost all EVV-eligible services
- The program has been operational for several years
- There are multiple payers who are part of the program

Payer COVID Support Through EVV: A Case Study



Lesson #1- EVV Helped Identify At-Risk Populations

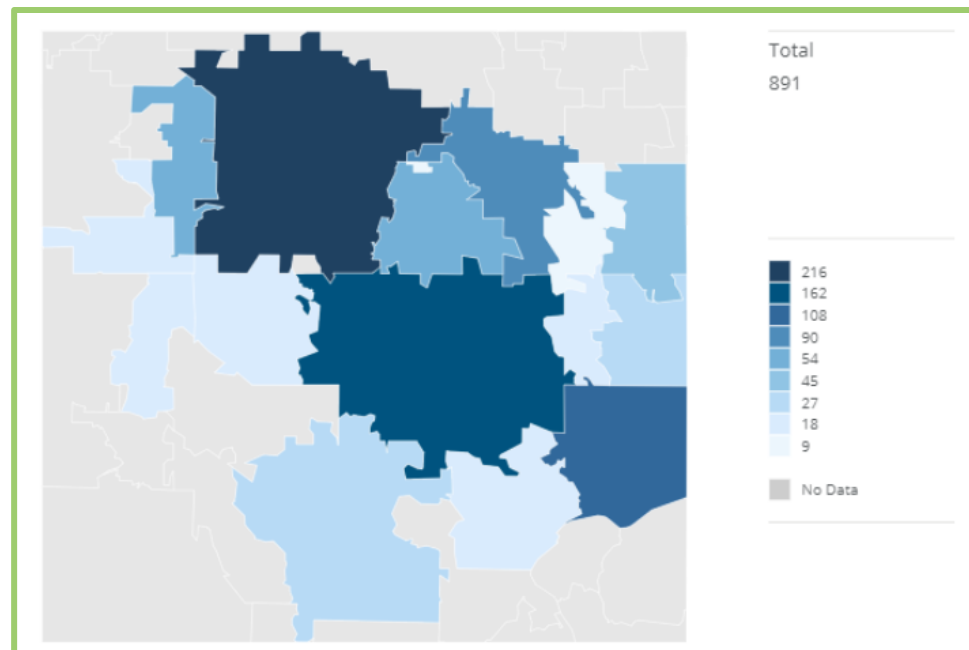
- Analyze data in a week-over-week view
- Providers whose visits have declined considerably visible for outreach
 - Were staffing levels suffering due to COVID?
 - Were caregivers not able to provide care?
- Clients whose visits declined considerably visible for outreach
 - Were clients unable to schedule or accept visits?
 - Did clients not have a provider available to provide services?

Provider Medicaid ID	Payer	Visits Two Weeks Ago	Visits Last Week	% Change in Visits
Provider 1	(Medicaid)	145	142	-2%
Provider 2	(Medicaid)	142	135	-5%
Provider 3	(MCO)	10	1	-90%
Provider 4	(Medicaid)	8	5	-60%
Provider 5	(Other Payer)	6	3	-50%
Provider 6	(MCO)	26	1	-96%
Provider 7	(Other Payer)	1,156	28	-98%

Payer COVID Support Through EVV: A Case Study

Lesson #1 (Continued)- EVV Helped Identify At-Risk Populations

- Provider locations able to be displayed in a heat map
 - Map could be broken down by county or even zip code
- Compare to map of where clients receive services
 - Show areas that could be at risk for a provider shortage



Payer COVID Support Through EVV: A Case Study



Lesson #2- Informed/Forecasted Care Management Impact

- Care Management Team support
- Volume of visits and number of caregivers seen in EVV helps estimate PPE needs in home and community-based services
- EVV system configured to support situational needs: waiver of training requirement for temporary providers

6,748

Providers Logging Visits

1,486,424 Total Visits

< > MARCH 2020

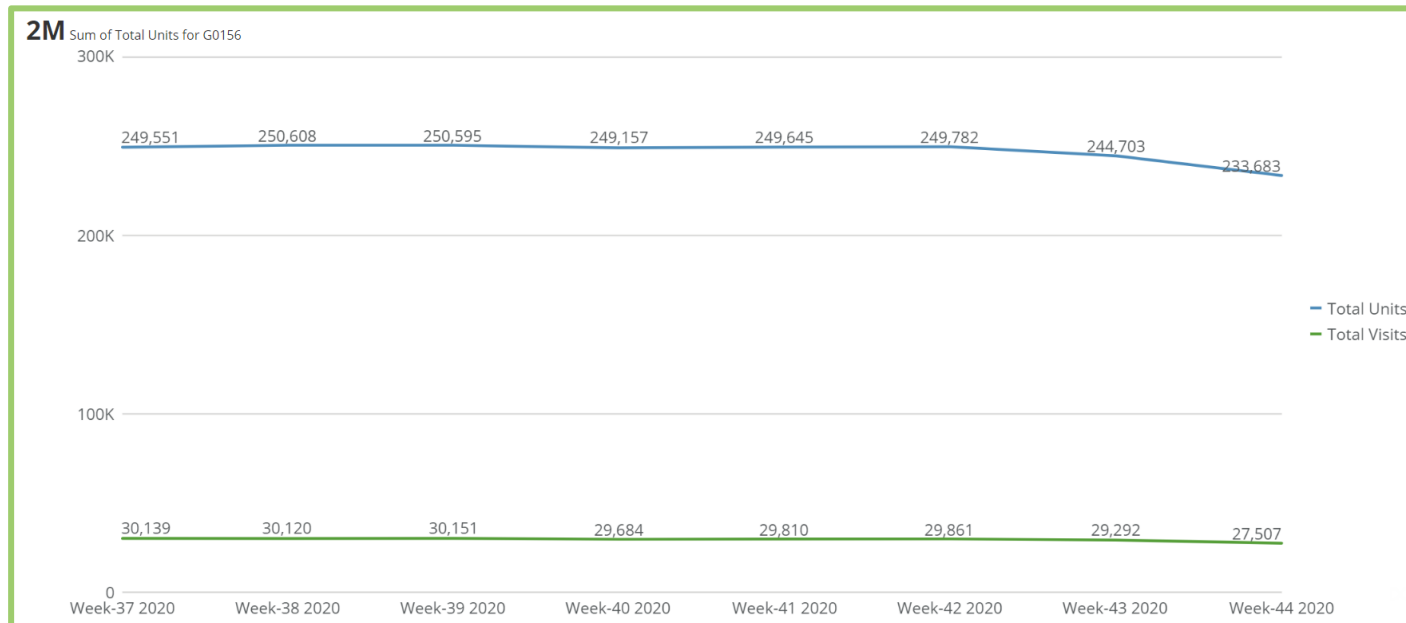
Sun	Mon	Tue	Wed	Thu	Fri	Sat
1 33.72K	2 53.65K	3 52.49K	4 53.49K	5 52.74K	6 52.85K	7 37.36K
8 34.17K	9 54.69K	10 53.7K	11 54.86K	12 53.37K	13 53.05K	14 37.23K
15 34.58K	16 53.2K	17 51.96K	18 53.05K	19 51.98K	20 52.44K	21 37.28K
22 35.07K	23 53.48K	24 52.13K	25 53.37K	26 52.16K	27 52.23K	28 37.2K
29 34.54K	30 52.89K	31 51.51K	1	2	3	4

Payer COVID Support Through EVV: A Case Study



Lesson #3- Informed/Forecasted Fiscal Impact

- Trend EVV visits and units logged
 - Wanted to see if less units were being logged, which would result in less money billed through claims
 - Could result in potential savings for the payer
- Enabled Fiscal Team to gain insight into expected fiscal impact



Payer COVID Support Through EVV: A Case Study



Applying lessons learned in the future:

- With available data, what questions are you trying to answer?
 - More data equals more complete answers!
- Who would benefit from knowing the data?
 - Consider Payer Partners:
 - MCOs
 - Other participating state agencies
- How do you establish a process to collect, analyze, and disseminate data?
- Could EVV system be configured to support situational needs?
- What adaptations or program growth could lead to more data in the future?
- Could there be additional modules or equipment used in the program to provide more value in the future?

Provider Activity and Observations

- HCBS Providers had to deal with a lot of CHANGE!!
 - Deploy and report screening tools
 - Report Member Health Concerns
 - Policy updates
 - Coding and billing updates
- Technology tools, lead by EVV, helped Providers better manage environment and changes, including:
 - Identify Gaps in Care
 - Support Changes in schedules
 - Provide improved and immediate communication channels
 - Updating member status
 - Collect and share immediate member info to assess risk

Home Health Agencies: CMS Flexibilities to Fight COVID-19

HEALTHCARE WORKERS

Interim Guidance for Implementing Home Care of People Not Requiring Hospitalization for Coronavirus Disease 2019 (COVID-19)

COVID-19 GUIDELINES FOR HEALTHCARE PROVIDERS

Essential COVID-19 Tools & Resources for Home Care & Hospice

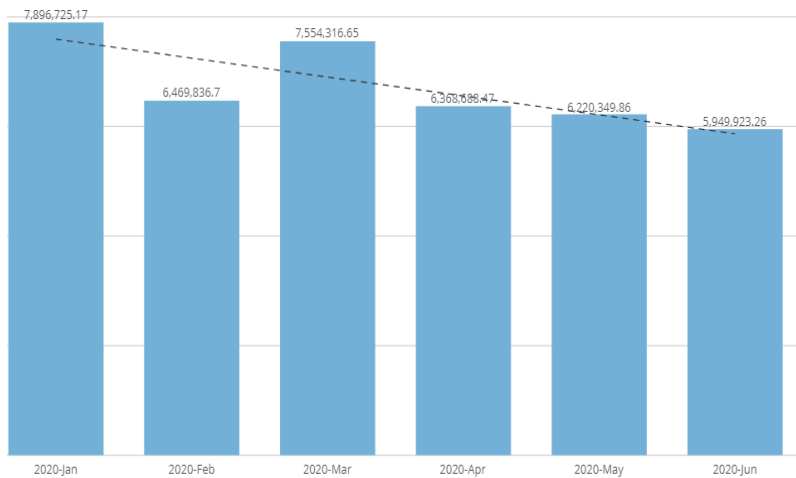
As we continue to deal with the effects of the COVID-19 public health emergency, as with any other newly identified virus there is much to learn about the disease process, mode of transmission, incubation period, symptoms, and treatment. We developed an extensive resource page to keep you informed and up-to-date.

[Learn more](#)

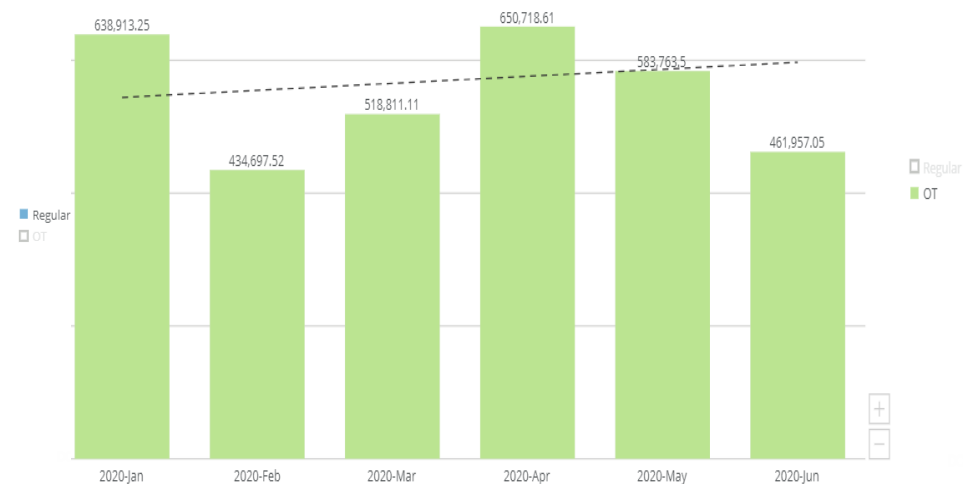
EVV Helped: Overcoming New Challenges

Provider agencies faced a number of unique challenges at the onset of COVID:

1. Keeping employees/clients safe and protected
2. Maintaining business operations, often remotely
3. Complying with new and updated regulatory requirements
4. Understanding the impact to their organizations



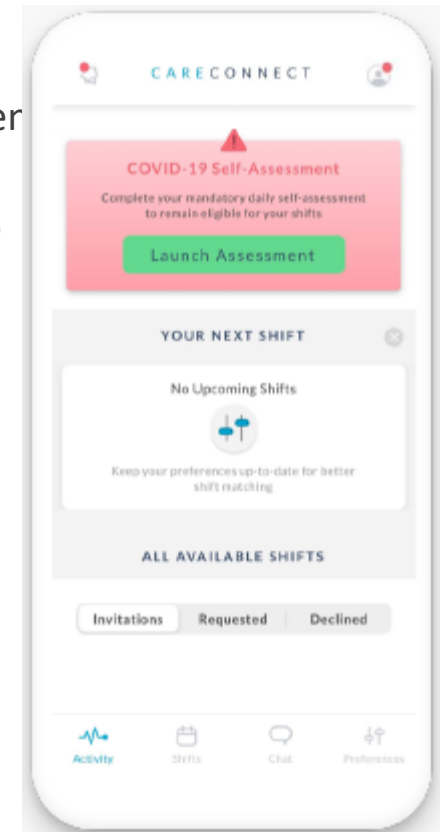
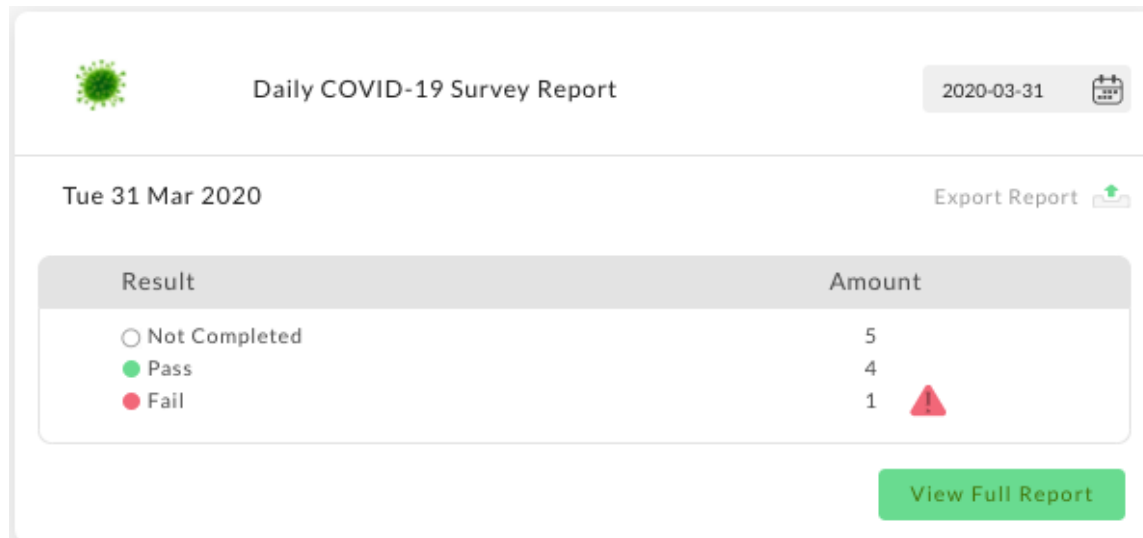
Regular hours trended down between Jan 20' and Jun 20'



Overtime hours trended up between Jan 20' and Jun 20'

EVV Helped: Administered Real-Time Surveys Pre-Visit

- Sandata Provided Caregiver and Patient Surveys Tools
 - 18 agencies participated in the Care Assurance Program.
 - Program provided free COVID surveys for caregivers via mobile app or telephony system **prior to traveling** to a patient's location.
 - Realtime alerts of failed screenings to ensure caregivers can be contacted and replaced in a timely fashion without jeopardizing patient service.
 - Realtime alerts of failed screenings for patients to enable agencies to adjust their model of care and institute required protocols for response.



EVV Helped: Technology Response to a Changing Environment



How agencies were able to meet these needs in a challenging environment via technology:

- Mobile EVV
 - Clients and Staff alike prefer not to share telephones to clock in and out of visits. Mobile App usage allowed aides to utilize their own phones to mark attendance via GPS coordinates
 - App allows for entry of notes and observations specific to COVID provided useful insights into cases and allowed agencies to stay on top of any health concerns during the pandemic.
- Enhanced Communication/Scheduling/Training Software
 - Provide insight into highest cost assignments and ensure all caregivers are analyzed. Oftentimes providers have staff willing to work but just aren't top of mind.
 - Algorithms help identify the best fit staff that will not lead to additional costs (e.g., overtime)
 - Training software to allow for remote e-learning to meet requirements without in-person class attendance

Pandemic EVV Lessons Learned

BIRMINGHAM, Ala. (October 19, 2020)—The COVID-19 pandemic changed the world for homecare—

- Home Care Services increased as result of Pandemic
- Technology/EVV supported understanding what was happening to HCBS Care in real time, and how to deal with changing requirements and landscape
- Having EVV service delivery baseline prior to Pandemic was key
- EVV compliance is very important for baseline and moving forward
- Enhanced business intelligence and analytics were critical
- Technology/EVV supported a remote workforce
- Technology supported more immediate communication among service delivery team and all stakeholders
- EVV data can be enhanced: More and better data can power so much more than just healthcare visits
- EVV provides the technology foundation to build upon
- EVV solution and capabilities can be ‘adjusted’ to immediate needs

EVV and the Future

- EVV technology will be the standard for HCBS moving forward
- As the use of EVV matures, stakeholders will identify how to fully leverage technology for evolving HCBS service needs , including;
 - EVV data to fully understand HCBS real time service delivery
 - Member data collection at the point of care to share with multiple stakeholders/systems
 - Enhanced communication among care team and stakeholders
 - Support Telehealth
 - Improved business process for all
 - Provider report cards
 - Leveraging EVV data for program and payment improvement
 - Support changing environment and requirements