# Electronic Visit Verification (EVV) Question and Answer

1. Who is the State's Electronic Visits Verification (EVV) Vendor?

   The State's EVV Vendor is Therap. You may visit Therap's website at www.TherapServices.net to learn more about them.

2. Will Therap interface with software and does it have to be on a mobile phone?

   In order to meet EVV regulations providers will have to be able to prove who provided what services, to what person and at which location. The ideal way to have that done is through geolocation. A mobile phone is not required, but it is likely that the most economical way to do EVV is through a phone app that communicates back to Therap. The State is still exploring acceptable alternatives for providers to utilize when a mobile phone is not available.

3. Will providers be documenting more than just the start/end time? Will other notes be required? The 21st Century Cures Act requires EVV Systems to verify the following information: Type of Service performed; Individual receiving the services; Date of the Service; Location of the service delivery; Individual providing the service; time the service begins and ends.

   Initially, the State will concentrate on meeting the EVV regulations and will not require additional documentation to be in Therap; however, Therap does have the capability of housing documentation. If providers would like their staff to do the documentation

while they are doing their check-ins, Therap will be happy to help with the setup and the training.

4. With the mobile app – will staff require a smart phone?

   There are a couple of options for the mobile application. Some providers provide a phone to their staff to use while they are working to complete the EVV for their job duties; some providers have even provided laptops. The State is required to follow the EVV regulations and the app on a smart phone or tablet has been found the most efficient way to do that; however, providers will need to develop their own policies regarding devices, applications etc.

5. Will there be a cost to providers to use Therap?

   No, the fee for the functionality of the web application and mobile app are covered by the State; however, providers will need to develop their own policies regarding devices, applications etc. as the Therap contract does not include the cost of devices.

6. Do providers have to use this system?

   Yes, providers will be required to utilize Therap to send and receive LTSS authorizations for services, at a minimum. LTSS is hopeful that providers will take advantage of Therap for EVV purposes; however, providers will still have the choice to maintain their own system and provide required information on to the State. Per the FY2019 In-Home Provider Supplemental Provision, the provider must utilize the State provided EVV System or request a waiver. If the provider determines utilization of the State's EVV system is not feasible, the provider must request and receive written approval from the State to utilize an alternate EVV system. In the event the requirement to utilize the

State's EVV system is waived, the provider must make their EVV data readily available to the State.

7. Will there be an interface via consumer's home phone?

   A mobile application is the preferred method for EVV, but when this is not an option, there is an ability to do Interactive Voice Response (IVR). This would allow the provider of services to call in and press "1" to check in and "2" to check out. It is less ideal due to not being able to collect additional data; being geolocated and other functions the app gives.

8. This system is just for EVV, correct?

   No, the State will be transitioning to Therap for functions outside of EVV. Within the next 6-12 months, providers will begin receiving client authorizations through Therap and will also utilize Therap for recording service delivery and for billing purposes. This will replace the process of sending in a 522E Request for Payment form or Medicaid billing form.

9. Any way for employees/ management to deal with "people being people" and making mistakes?

   Yes, the review and approval process is built within the Therap system.

10. Management can review EVV and verify lines and claim dates?

    Yes, when an EVV is recorded, there is a step for Management to verify that time before moving forward to create any billing. Therap will have presentations and webinars at future dates to explain these features.

11. What will the State implement first within Therap and what features will be implemented later?

    Therap functions will gradually be rolled out in the coming years. There is a lot more functionality to come with a whole case management piece. The EVV will be rolled out at the same time as the service authorizations and the billing because they are all intertwined with each other. What will come later is the care plan, assessment, referrals, client access etc.

12. Will providers need to enter employees/shift into the system? Or is a "generic" person for consumer?

    One of the requirements of EVV is to identify the person that is providing the service. Each provider's employees will have to be uniquely identified through Therap to be able to check in and out. Each provider will be responsible for adding each of their employees into Therap.

13. Will employees have to enter a pin or something?

    Employees will have a log in with a username and password to use with the mobile and web application.

14. Are there other states using Therap?

    There are other states using Therap for documentation and billing, but there are no other states utilizing EVV at this time. Currently, South Dakota's Community Support providers for the CHOICES waiver utilize Therap for documentation and billing.

15. If providers have last minute scheduling changes for visits, how will this be addressed through Therap?

    There is functionality within Therap to adjust scheduling. The details related to administrative roles within Therap are still being determined by policy.

    How will providers be notified of new authorizations?

    Providers will log into Therap and see notifications for new authorizations on the dashboard or providers can set up to have an email or text sent when the provider receives a new notification. Therap will be scheduling demonstrations for providers on how these will work in the near future.

16. What do providers do when a client is not home?

    Providers will be able to document not home visits in Therap. The employee will be able to check in and check out and add a note indicating the consumer was not home.

17. What if internet is down?

    Alternative options to complete an EVV when there is limited or no internet access will be covered in future demonstrations.

18. Will providers be able to use Therap for other services being provided by the agency for non-LTSS consumers?

    Yes, this is a potential option for providers. The Therap account where providers will receive LTSS service authorizations, do LTSS EVV and LTSS billing belongs to the State of South Dakota. If a provider wants their staff to use a similar system for all customers served (both LTSS and non LTSS), Therap is more than willing to explore this option with the provider. There will be a fee assessed with that consultation.

19. What is the fingerprint background requirement for FY19 stated in the Supplemental Agreement?

    Following an onsite review last fall, the Centers for Medicare and Medicaid Services (CMS) recommended that South Dakota establish fingerprint background checks for providers that enter the homes of consumers. Currently, providers must conduct a background check to screen for abuse, neglect, and exploitation for all employees hired to work in homes of consumers. Based on CMS' recommendation, LTSS is requiring providers to develop a policy to implement fingerprint background checks for all employees hired to work in the homes of consumers. The policy must be readily available upon request.

20. Do any providers currently use fingerprinting or background checks?

    Yes, there are currently providers that require fingerprint background checks as part of their company's policies.

21. We were told fingerprint background checks can take 4-6 weeks to get theme back, is this true?

    Per a provider on the phone that does background checks, they usually only take a week or so to get back.

22. What does the fingerprint background check capture that isn't captured by what providers are already doing?

    Fingerprint background checks provide the most reliable background information and would also ensure consistency across providers.

23. We currently do a number of other checks; can we assume some of these can be dropped to do this one?

    The checks required by LTSS are outlined in the FY2019 In-Home Provider Supplemental Provision.

24. How do providers obtain fingerprint background check? Do police stations allow walk-ins?

    A state applicant fingerprint card can be obtained from the DCI at no cost by calling (605) 773-7817. The provider may request as many fingerprint kits as they would like to. The provider gives a fingerprint card to the potential employee. The potential employee must take the fingerprint card to his/her local law enforcement agency (Police Department or Sheriff's Office) to be printed. There may be an additional charge by these agencies to cover the cost of fingerprinting. Once the fingerprint card is completed, the employee returns the fingerprint card to the provider. The provider must send the fingerprint card, signed authorization (on the back of the card) and a check or money order for $26.75 to DCI. For more Information on State Only Background Checks please visit the Office of the South Dakota Attorney General's webpage at: https://atg.sd.gov/LawEnforcement/Identification/stateonlybgcheck.aspx.