<p style="text-align:center">Uploading EVV Data into Therap for LTSS Services</p>

The Division of Long Term Services and Supports (LTSS) is in the process of implementing the requirements of the 21st Century Cures Act and Electronic Visit Verification (EVV) based on guidance from CMS.
https://www.medicaid.gov/medicaid/hcbs/guidance/electronic-visit-verification/index.html

As such, for services subject to EVV:
- Nursing (10100, 08069, 08069, 08093, T1000)
- Homemaker (08068, 03003, S5130)
- In Home Respite (08065)
- Personal Care (08068, 03004, T1019)
- Adult Companion (S5135)
- Chore Services (S5120)

The following data must be collected in close to real time:
- Type of service performed (the service name and code)
- Individual receiving the service
- Date of the service (start and end could be different)
- Location of service delivery (start and end could be different)
- Individual providing the service (uniquely identified staff)
- Time the service begins and ends (each captured in real time)

The Service and Individual are supplied to providers via the Pre-Auth which is available in Therap.

The primary method for data collection should capture all of the above from the staff providing the service. This includes the geolocation of the staff at service start or end. This is ideally captured from a mobile device such as a smartphone or tablet. It can also be obtained from a location enabled laptop.

CMS also allows for alternate methods of data collection when the primary method is unavailable. LTSS has worked with Therap to provide a number of alternative methods. It should be noted that all methods of EVV are subject to audit, including demonstration of how the alternate system (if a system other than Therap is used) collects data in real time and assures integrity of the data collected and any changes made to it.

When a situation arises in which unanticipated services must be provided in order to assure the wellbeing of the consumer, the provider must notify the LTSS Specialist by the next business day in order to receive approval for the services. As such, prescheduling is not required, but must take place at the regularly scheduled location.

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Alternate methods available to LTSS providers include:

- Offline
    - If a cell signal or internet connection is not available, the provided mobile app can still be used to check in and out. Any alternate system that is used offline must still capture the required 6 elements above.
- Telephony
    - This should only be used where there can be access to a previously identified landline. In that case the telephony system used must capture in real time (at the start and end of the service in question) the phone number being called from, the service provider, the service recipient and service provided.
- Fall back
    - In rare circumstances where none of the other methods are available, the service provider can collect data on paper and attach this to the record in the system. Again, this will need to be available for audit.

Uploading EVV data into Therap:

If the provider chooses not to collect EVV data using Therap, and has received an exemption from LTSS, then EVV data collected will need to be uploaded into Therap using the spreadsheet and upload process that is available.

Each entry that is uploaded into Therap should include the geolocation and address for where the service was provided. If the start and end locations are different, then both locations should be included.

If the location is not confirmed by geolocation, then the start (and end location if different) location that is derived from the alternate method should be included.

If the location is confirmed by telephony/IVR, then the phone number used to confirm the location must be included.