

1. When can we get list of patients effected?

- The patients you service today are the same patients you will be servicing going forward. The information will be loaded by end of day May 23, 2016 in to the EVV system.

For the following services:

- a. Homemaker
- b. Personal care
- c. Combined Personal Care/Homemaker

For the following programs:

- a. DEA Community Home Care Program
- b. DEA Co Pay Level 1
- c. DEA Co Pay Level 2
- d. CORE
- e. PREVENTIVE
- f. Habilitation

2. Do we have to bill through Sandata?

- Yes, for the above programs and services you do have to generate the 837 through the Sandata EVV system.



3. How much can we add to the staff data stored into the system and are we going to be able to use it to track things that the employee owes to the agency such as vaccine records that are mandatory for the state or for supervisions which we currently track using our old system?
- Sandata does have this capability via compliance, but this is not part of current offering that EOHHS procured. We have brought it up to their attention and is being considered.
4. Are BHDDH clients included?
- BHDDH is not part of the June 1st launch but will be part of Phase 3. We will post the dates for the phases as soon as they are defined.



EVV Frequently Asked Questions



5. Who makes up the home health aide care plan?

- Sandata does have care plan as functionality but it is not part of the current offering that EOHHS has procured. EOHHS is looking at this for the future. The care plan will be managed as it is today for your organization.

6. We have patients that arrive home on a bus from daycare - adult or pedi. The nurse/CNA waits for the bus to arrive and it could be on time, 15 minutes late, 30 minutes late, etc. How is the employee supposed to be compensated? No one will want to go wait for a bus to arrive home if they will not be paid.....

Associated Question:

What if the caregiver has to drop a recipient off or pick them up from another location (e.g. Dr's office, treatment, etc...) How should the caregiver be instructed to call? Should they call from the drop off/pickup location, which would appear as an unidentified call for the office to correct?

- The caregiver can call in using their own cell phone when they are waiting for the bus or at an outside location. It will be treated as an exception that will require the caregiver to give explanation to the coordinator so they can make the adjustment in Visit Maintenance and note why they did not call from the assigned client location. They should however call out from the client location.



EVV Frequently Asked Questions



7. What happens if a patient changes from Neighborhood Health Plan to state fee-for-service on Sunday May 1st and is to be seen at 7am. How does the system let the CNA/Scheduler know of the change on a weekend on the 1st of the month?

- Eligibility updates daily in the system. The agency will still need to check the health care portal to verify. If on Monday the agency finds out that the client has changed providers then they can go into the system and schedule the visit. If there are calls existing for that client they will merge with the schedule for billing.

8. Will a visit be able to be scheduled and completed even if the state caseworker has not completed their authorization? If not, what will happen?

- If you do not have an authorization you can schedule visits with the assistance of the System Administrator Oversight. It will allow you service your client but it will prevent you from billing until you obtain that authorization.

9. CHAP accreditation requires signed paperwork. Will aides have to do both paper and electronic paperwork?

- There is no current capability for the caregiver to obtain signature today. It will benefit you to continue your practice today for obtaining signature via paper.

10. Will nurses have to do anything besides call in and out?

- They would also be required to log their tasks when they check out.



EVV Frequently Asked Questions



11. Can we request a dial in box for each of our patients to ensure that all visits are recorded (patients often decline to allow caregivers to use their home phone, and caregivers sometimes lose their phones, have services shut off, or do not have smart phones)

- There will be a form for you to fill out that will be found on the EVV website where you will request the FVV devices. After the form is completed, the form will be sent to EOHHS for approval. There should be a valid reason such as no phone, no internet access as to why the patient would require an FVV device.

