WHITE PAPER

Understanding Electronic Visit Verification (EVV)



Executive Summary

Electronic Visit Verification (EVV) provides a framework for preventing fraud, boosting accountability, and strengthening oversight for home and community-based care funded by Medicaid. First introduced in 2016 as part of the 21st Century Cures Act, this system verifies that home healthcare services are delivered as scheduled, to the right client, and by the correct caregiver.

While its intended purpose revolves around compliance, EVV's utility has evolved far beyond simple box-checking: it also helps agencies build trust among their client base, create a safer and more predictable environment for clients, and simplify operations thanks to real-time documentation. However, because EVV implementation is managed state-by-state, requirements differ across the country. Each state has adopted its own systems and reporting standards, which complicates matters for agencies that operate in multiple regions.

This white paper explores the central role of verification in home care today, why **EVV compliance** is an essential pillar of operational excellence, and how agencies can navigate state-level nuances.



How Does Electronic Visit Verification Work?

How does electronic visit verification work? EVV systems collect a few different data points for each visit, all in real time. First, the caregiver uses an EVV-enabled **mobile app** to clock in, which records the date, time, and GPS location. The same action is performed at the end of the appointment. Instead of an app, some agencies require caregivers to call a toll-free number at the beginning and end of the visit using the client's landline, or to input unique codes generated by an inhome sensor at the client's residence.

Core Components of EVV

No matter which method is used, the outcome is the same: agencies and state regulators receive an immutable, time-stamped record that details the "who," "what," "when," and "where" of each appointment.

- Clock-in, clock-out, and date: records the exact start and end time of each visit to confirm punctuality and duration of care.
- Service type: details the specific support that was delivered (e.g., personal care, home health care, skilled nursing).
- Recipient: confirms that the individual receiving care matches the authorized plan.
- Provider identity: verifies which caregiver is providing services, typically through secure login or unique ID.
- Visit location: uses GPS, landline caller ID, or in-home devices to confirm the exact service delivery location.

Verification Methods

GPS-Enabled Mobile App

This option is ideal for real-time data capture, verifying a visit's exact time and location in one fell swoop. It's also the most flexible option for caregivers while they're in the field. However, it requires access to a smartphone or tablet, plus reliable cellular or Wi-Fi coverage.

Landline (Interactive Voice Response)

This simple, familiar, and cost-effective solution doesn't require the internet or smartphones, and it's reliable in areas with poor connectivity. However, caller ID is limited in that it can only confirm that the call originated from the client's landline—instead of precise GPS—and cannot capture service details.

In-Home Device / One-Time Password Generator

These fixed devices can operate without internet, cellular service, or landlines, meaning they are reliable in low-service areas. They do require installation and maintenance, though, and service details typically have to be entered separately.



Why EVV Matters — Benefits & Challenges

Without a standardized verification system in place, the home care industry has historically faced issues with "phantom visits" and billing errors that lead to financial losses for Medicaid. For example, processing a repayment for an appointment that never actually happened. EVV puts a stop to these fraudulent claims by tying each visit to objective data points like a GPS-verified location.

By requiring caregivers to confirm the delivery of each service (as recommended in the client's plan), EVV strengthens the quality and consistency of an agency's care. It ensures that **scheduled visits** are carried out as planned, and that missed or late appointments are flagged and resolved quickly. With these systems in place, clients and their families can trust that the necessary care is delivered reliably and transparently.

On the agency side, EVV simplifies documentation by automatically capturing data that would otherwise be logged manually. It also standardizes all necessary paperwork for compliance purposes, leaving agencies organized and <u>audit-ready</u>. As mentioned above, instant identification of late arrivals or missed visits can quickly bridge service gaps and increase schedulers' overall agility.

While EVV offers plenty of benefits for all parties, it's important to remain cleareyed about its challenges as well. Like any new system, implementing EVV requires a significant investment in caregiver training to ensure your entire staff can use it properly and to its full potential. Some employees may face steep learning curves with new technology, leading to delayed rollouts or additional training requirements.

Clients may also have privacy concerns related to GPS tracking or in-home devices, placing the onus on agencies to balance compliance and respect for their boundaries. Differences between state-mandated EVV programs also require affected agencies to juggle various regulatory requirements, which can complicate their operations.



Regulatory Compliance

Back to EVV's foundational purpose: <u>regulatory compliance</u>. The 21st Century Cures Act specifically mandates all EVV platforms to capture six distinct data points:

- Type of service provided
- Individual receiving the service
- Date of service
- Location of service delivery
- Individual providing the service
- Time the service begins and ends

EVV became mandatory for all personal care services and home health services in 2021 and 2023, respectively, so all affected agencies should already be using these systems. If not, the penalties for non-compliance are clear: states that fail to implement EVV are subject to a progressive reduction in federal Medicaid matching funds.

The reduction begins at 0.25% per year, then increases annually up to a total of 1%. While these penalties are levied against the state itself, the financial burden is often passed down to the providers that must adopt these systems to remain eligible for Medicaid reimbursement.

Once agencies are fully onboarded and compliant, they must continue meeting those standards. As EVV laws and the associated technologies evolve, employees will require supplemental training and education to keep up with what's new.

State-by-State Variations

In the U.S., states generally fall into two main categories when it comes to choosing **EVV vendors**. The first is an open-model framework, which allows states to select whichever EVV provider they prefer. The second is a closed-model framework, which mandates that all agencies use the same vendor statewide. Some states may also choose to adopt a hybrid model in which a common platform is available, but agencies can select their own vendor as long as it meets all of the necessary requirements.

Agencies operating across state lines should be especially invested in adopting a flexible solution, as they will need to work around evolving EVV standards on multiple fronts. Vendors with a strong customer support team in place are all the more valuable, as they offer an invaluable resource for agencies navigating these complex landscapes.



Implementation Best Practices

Every successful implementation process is rooted in training and education. Agencies must provide comprehensive, hands-on <u>training</u> for all caregivers and administrative staff who will be using EVV, demonstrating how to navigate the new platform and troubleshoot some common issues. Be sure to supplement the initial training with routine refreshers and quick-reference guides to reinforce correct usage and keep employees up-to-date on what's new.

On-the-go caregivers will need access to at least one device to help them complete the EVV process, such as a smartphone or tablet, and reliable connectivity where required. An add-on consideration: secure data systems offer another layer of compliance when handling EVV data and integrating it with payroll, scheduling, and billing platforms.

As you roll out EVV across your organization, work closely with your vendor to ensure your system is configured based on state-specific requirements while mirroring agency workflows. To make the most of your new platform, regularly review its performance, request feature updates, and participate in vendor-provided training once onboarding is complete. Whenever you encounter technical challenges down the line, make sure you know exactly where to point caregivers — like a help desk or support representative — to resolve their issue.

The Future of EVV

EVV has already evolved beyond a basic compliance tool, and it is expected to continue expanding its care management utility as time goes on. On the regulatory front, states may tighten reporting standards requiring EVV to capture even more granular information. Some industry players also predict that EVV may become more intertwined with <u>electronic health records</u> (EHRs), enabling greater interoperability and further reducing data clutter and duplication.

Future-proofing your EVV investment means choosing a vendor with a track record of monitoring industry developments, adapting quickly to regulatory and technological changes, and offering scalable capabilities that support operational efficiency no matter how much you grow.

Become EVV Compliant With AxisCare

Understanding the role of EVV and setting yourself up for a smooth implementation process is non-negotiable. That's where AxisCare comes in. For years, we've helped agencies achieve and maintain compliance with purposebuilt systems and improve their operational efficiency in the process. Request a free demo to learn more about what we can do for your organization.

