

Hearing Date: 7/29/2019

Today's Date: 7/31/2019

Agency: The Ohio Department of Medicaid

Rule Number(s): 5160-1-40

If no comments at the hearing, please check the box. ☐

List organizations or individuals giving or submitting testimony before, during or after the public hearing and indicate the rule number(s) in question.

1. Ohio Council for Home Care and Hospice

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Hearing Report and Summary

Consolidated Summary of Comments Received

Please review all comments received and complete a consolidated summary paragraph of the comments and indicate the rule number(s).

OCHCH, Ohio Council for Home Care and Hospice, made one general comment and then several recommendations. With the addition of new provisions, OCHCH wanted to inform ODM that the implementation of EVV was not “free” to the agencies as ODM as been advertising as agencies are spending time, resources, and money on training and roll-out.

OCHCH recommendations include a requirement on the Department to notify providers and vendors when EVV program requirements found on the ODM website have changed.

The wording regarding GPS unavailability found in section (D)(1)(b)(v) needs to be clarified as to when it is appropriate and acceptable to use the MVV device.

Section (E)(2) of the rule states that if the provider is unable to get approval of an alternative vendor, then the ODM provided Sandata system must be used. OCHCH alleges that this is a new provision and recommends removing this provision as it is already mandated in other areas of the rule.

Clarify the website reference in section (G)(2)(g) of the rule.

Hearing Report and Summary

Incorporated Comments into Rule(s)

Indicate how comments received during the hearing process were incorporated into the rule(s). If no comments were incorporated, explain why not.

No changes were made to the rule.

While we accurately state that the Department has made the Sandata system (including training and 24/7 technical support) available at no cost to providers, the Department also acknowledges that providers of HCBS may incur administrative costs related to the implementation of EVV into their business process. Those administrative costs vary widely based on provider size, patient mix and business operations. As a result, the department is unable to accurately estimate those costs.

ODM and Sandata communicate routinely with providers, individuals receiving services, and other stakeholders about program updates, program changes and educational opportunities related to EVV. While our primary method of communication is by email, we also use phone calls and the United States Postal Service as appropriate. This information is also shared with the EVV Stakeholder Advisory Group (with a membership of more than 300 providers, individuals receiving services, and advocates). In addition, we routinely partner with external entities to share information with providers. However, providers often fail to maintain current contact information with the Department, so we are hesitant to commit to a specific notice requirement that might impede the Department's ability to react quickly to provider concerns. We do remain committed to working with stakeholders to continue to improve the effectiveness of our communication strategies.

Each alternate system vendor relationship is unique as are the underlying compliance issues that may need to be resolved to ensure that the provider has compliant EVV data in the Sandata aggregator to support the claims for reimbursement. We recognize the significance of a decision that would require an agency provider to transition and would not make such a decision unless other options proved ineffective. The language is drafted in a way that provides the Department flexibility to address each issue in light of the specific compliance issue and the efforts of both the provider and the vendor in resolving the issue.

This provision is unchanged from the prior version of the rule. ODM provides the Sandata system to all providers at no cost and bears responsibility for ensuring that the Sandata system is fully compliant with the program requirements. If an agency chooses to use an alternate system, the agency chooses to assume the responsibility for ensuring system compliance with both the technical requirements and the business requirements. OAC Rule 5160-1-40(E)(2) provides a path for providers who are unable to come into compliance in a timely manner. Nothing in this provision prevents a provider from pursuing certification of an alternate system at a date in the future. Note that the Department continues to review the alternate system approval process to find ways to better support providers choosing this option.

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This provision is one item in a list of the data elements that must be maintained in the EVV system for each individual receiving services subject to EVV requirements. This information is available in a number of documents, including the technical specifications for alternate systems and the provider training manuals, found on our website. In addition, the Sandata system is menu driven and will guide providers in entering all required information.

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