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GAVIN NEWSOM
GOVERNOR

DATE: March 1, 2022

CalEVV Information Notice: 22-01

TO: PROVIDERS OF HOME AND COMMUNITY BASED PERSONAL CARE SERVICES (PCS)

SUBJECT: ELECTRONIC VISIT VERIFICATION (EVV): MANDATORY SELF-REGISTRATION OF HOME AND COMMUNITY BASED PERSONAL CARE SERVICE (PCS) PROVIDERS

PURPOSE: PCS PROVIDER EVV COMPLIANCE

This Information Notice is to remind providers of Medi-Cal home and community based personal care services (PCS), who are not enrolled as individual IHSS or WPCS providers, and are subject to EVV, that they must be registered, trained, and using either the CalEVV system or an alternate EVV system, by no later than March 1, 2022.

The link for provider self-registration and additional tools can be found on the Department of Health Care Service's webpage at <https://www.dhcs.ca.gov/provgovpart/Pages/EVV.aspx>.

BACKGROUND:

[Section 12006\(a\) of the Cures Act](#), signed into law on December 13, 2016, added section 1903(l) to the Social Security Act (the Act), mandating that states require EVV use for Medicaid-funded PCS and home health care services (HHCS) for in-home visits by a provider.

The California Medi-Cal program must implement EVV for PCS by January 1, 2022 and for HHCS by January 1, 2023. The EVV requirement applies to:

- PCS provided under the Medi-Cal state plan or a waiver of the plan, including under sections 1905(a)(24), 1915(c), 1915(i), 1915(j), 1915(k), and Section 1115 of the Act, and
- HHCS provided under 1905(a)(7) of the Social Security Act or a waiver of the Medi-Cal State Plan.

California Welfare & Institutions (W&I) Code [section 14043.51](#) implements the federal EVV requirements as follows:

- It gives DHCS authority to implement an EVV System as required by federal law, in collaboration with other governmental entities; and
- Requires providers rendering Medi-Cal services subject to EVV to comply with EVV requirements established by DHCS and partners or be subject to non-compliance actions
- Authorizes DHCS and its partners to implement the EVV System through Provider Bulletins and Letters such as this one.

PROGRAM(S) AFFECTED:

The following Medi-Cal funded programs are subject to the EVV requirements:

- California Department of Health Care Services
 - 1915(c) Home and Community-Based Alternatives Waiver;
 - Fee for Service Medi-Cal;
 - Medi-Cal Managed Care Plans
- California Department of Aging
 - 1915(c) Multipurpose Senior Services Program (MSSP);
 - 1115 Waiver Community-Based Adult Services
- California Department of Public Health –
 - 1915(c) HIV/AIDS Medi-Cal Waiver Program (MCWP)

Certain Department administering specialized Medi-Cal programs have issued guidance tailored to providers under those programs. Providers of PCS and/or HHCS under the following programs should follow guidance issued by the administering departments:

- IHSS Program (including WPCS) for individual providers, administered by the Department of Social Services
- Developmentally Disabled 1915(c) Waivers, and 1915(i) State Plan Services, administered by the Department of Developmental Services

PROVIDER COMPLIANCE:

As provided in W&I code [§14043.51](#), DHCS has the authority to enforce the EVV requirements for all Medi-Cal providers that are not individual In-Home Supportive Services/Waiver Personal Care Services providers, by doing the following:

- Providing technical assistance on compliance.
- Requiring an approved corrective action plan.
- Recovering associated overpayments.
- Imposing enrollment or monetary sanctions.
- Taking any other remedial action, as deemed appropriate.

EVV DEFINITION(S):

1. A caregiver is considered a “Live-in Caregiver,” if the caregiver regularly remains in the beneficiary home for more than 24 hours at a time, during which they are available to provide any of the authorized personal care services.
2. Personal Care Services – the name is not uniform across all the authorities under which it can be covered as a Medi-Cal benefit, but in general, it consists of services supporting Activities of Daily Living (ADL), such as movement, bathing, dressing, toileting, and personal hygiene. Personal care services can also offer support for Instrumental Activities of Daily Living (IADL), such as meal preparation, money management, shopping, and telephone use.
3. Provider - means a provider who is enrolled in the Medi-Cal program per [W&I Code 14043.1](#)

WHAT IS NOT SUBJECT TO EVV:

PCS that are provided to inpatients or residents of a hospital, nursing facility, intermediate care facility for individuals with intellectual disabilities, or an institution for mental diseases, and personal care services that *do not* require an in-home visit, **are not subject** to EVV requirements.

PCS or HHCS rendered by an individual living in the residence does not constitute an “in-home visit and **are not subject** to EVV requirements.

DHCS interprets that an “in-home visit” to exclude PCS provided in congregate residential settings where 24 hour service is available and **are not subject** to EVV requirements.

Please review the [EVV Provider Types and Codes](#) document on the [DHCS EVV website](#) for a list of impacted service codes.

If you have any questions or concerns, please contact our EVV team by email at EVV@dhcs.ca.gov.

Technical questions from providers can be directed to CACustomerCare@Sandata.com or by phone at (855) 943-6070.

Original Signed By,

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