

## Electronic Visit Verification



As a leader in long-term services and supports (LTSS), Optum® has provided tech-enabled solutions to help providers deliver home-based care for many years. Our Electronic Visit Verification (EVV) solution helps recipients live independently with greater control over their own care, and helps states enhance payment efficiency and accuracy. EVV technology verifies that in-home care is delivered to the recipient, along with the location and time.

### The growing importance of using EVV

The use of personal care and home health services for Medicaid members continues to increase rapidly. With the introduction of the 21st Century Cures Act\* of 2016, EVV has become more important than ever. The act will require personal care providers to use an EVV solution with the objective of verifying the right services are being performed, and that the individual is receiving the services at the appropriate time and in the right location.

### How Optum EVV benefits states, providers and recipients

- **States:** Optum EVV helps states qualify for full federal funding of personal care and home health services. Our easily configurable platform supports state-specific policies around covered benefits and agency payroll requirements. It also provides scenario-specific alerts.

Optum EVV provides real-time reporting and monitoring by population segments. This helps states better manage quality delivery of care and the budgets to support this.

The Cures Act will require home health care and personal care providers to use EVV.

- **Recipients:** The Optum EVV solution provides recipients with flexibility for appointments and services. Validating delivery of services helps improve recipients' health and welfare.
- **Provider organizations:** Optum EVV provides a solution to actively manage the scheduling of services for the care delivery workers. In addition, our solution provides oversight of verified services, time sheet management, and the ability to deliver aggregated data reports to the state.

Because we have been accountable for the health care outcomes for individuals requiring long-term services and support (LTSS) over 30 years, we developed an EVV solution based on firsthand knowledge of the needs of recipients, providers and program administrators. The deep understanding Optum has of the communities served, from needs assessment to service authorizations to EVV and claims payment, enables a smooth implementation for states. Additionally, we are an experienced partner with states in implementing large-scale programs on time, and bring deep LTSS expertise in delivering our EVV solution.

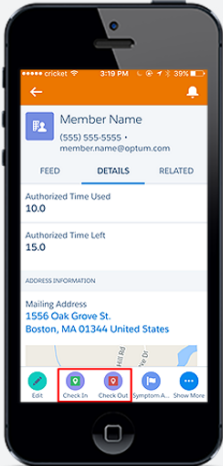
### Easy interface for all stakeholders

Optum EVV offers easy user interfaces that help solve the needs of all three stakeholders: the care provider, the recipient and the program administrator.

- **Care provider:** Mobile app tracks GPS, date and time, and recipient(s) served. It leverages users' existing handheld devices and built-in assistive technology.
- **Recipient:** With the ability to share additional insights at the point of care and automatically generate real-time care team alerts, Optum EVV enables timely interventions that can result in better health outcomes.
- **Program administrator:** The EVV dashboard provides real-time provider visit data at both individual and aggregate levels.

### Why Optum?

Optum brings experience and expertise in creating a robust EVV solution. We have end-to-end process expertise with technology solutions for LTSS and Medicaid, including EVV. Furthermore, the Optum EVV solution will support any of the CMS-recommended EVV implementations, either through Software as a Service (SaaS) or Business Process as a Service (BPaaS).



**How it works**

Enabled by mobile app on the care provider's handheld device

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Provider and recipient both verify check-in and check-out

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Uses GPS on the provider's mobile device to record geographic location

**To learn more about Optum Electronic Visit Verification, contact us**

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\*Public Law 114-255—Dec. 13, 2016, 130 STAT. 1033. 21st Century Cures Act, page 130STAT.1274.



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