



RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

September 7, 2018

Statewide Medicaid Managed Care (SMMC) Policy Transmittal: 2018-01

Applicable to the **2018-2023 SMMC contract benefits** for:

- Managed Medical Assistance (MMA) and MMA Specialty
- Long-Term Care (LTC)
- Dental

Re: Electronic Visit Verification (EVV) System

The managed care plan's compliance plan, anti-fraud plan, and fraud and abuse procedures must comply with s. 409.91212, F.S. (Attachment II, Section X.F.4.d.) The managed care plan's compliance plan, anti-fraud plan, and fraud and abuse procedures must include detailed procedures for verifying enrollees' identity and that enrollees actually received services billed by providers. In addition, the managed care plan must describe the process by which the delivery of personal care services and home health services are monitored and validated via an Electronic Visit Verification (EVV) system effective January 1, 2019 (as required by federal law in the "21st Century Cures Act"). (Attachment II, Section X.F.4.d.(4)) The managed care plan may be required to provide to the Agency or its agents any other information, documentation, or data relative to this Contract in accordance with 42 CFR 438.604(b). In such instances, and at the direction of the Agency, the managed care plan shall fully cooperate with such requests and furnish all data or information in a timely manner, in the format in which it is requested. The managed care plan shall have at least thirty (30) days to fulfill such ad hoc requests, unless the Agency directs the managed care plan to provide data or information in less than thirty (30) days. (Attachment II, Section XVI.A.1.b.) The purpose of this policy transmittal is to notify the managed care plan of a change in the effective date for the mandatory implementation of EVV and to advise plans of an ad hoc request for the managed care plan's implementation action plan for EVV.

The Agency has determined to delay the implementation of EVV as required in the SMMC Contract from January 1, 2019 to October 1, 2019. Consequently, managed care plan must implement its EVV system no later than October 1, 2019.

Nothing in this policy transmittal should be construed to limit the managed care plan in implementing its EVV system for home health services earlier than October 1, 2019. However, if the managed care plan chooses an earlier implementation date, the managed care plan must submit a timeline to the Agency for review that addresses completion of implementation steps/activities, which includes but is not limited to provider education and training, EVV systems testing, and piloting (if applicable). The managed care plan's timeline must be submitted to the Agency by October 4, 2018 to the plan specific sub-folder within the folder 5. AdHoc Submissions on the SmmcReady18-23 SFTP site. The managed care plan should submit this timeline using the following naming convention: EVVTL ***YYYYMMDD, where *** is the managed care plan's three-character identifier, YYYY is the four-digit year, MM is the two-digit month, and DD is the two-digit day on which the timeline is due.



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If you have questions or concerns, please contact your Agency contract manager at (850) 412-4004.

Sincerely,

A handwritten signature in black ink that reads "Shevaun Harris". The signature is written in a cursive style with a prominent loop at the end of the name.

Shevaun Harris
Assistant Deputy Secretary for
Medicaid Policy and Quality

SH/sr