Participants

CICA: Janet Canterbury, Cindy Caldron, Kristine Loomis, Brad Toy, William Reed, Michael Condon, Joey Riley, Jene McCovey, Charlie Bean

CDSS: Debbi Thomson, Kim Rutledge, Sue Quichocho, Karol Swartzlander

Discussion

Where are you at in the process?

CDSS indicated departments are still analyzing EVV requirements and researching other states’ approaches and systems. The state convened a stakeholder meeting/conference call on October 12 to gauge thinking around EVV prior to the release of the November 2 Request for Information (RFI). The purpose of the RFI is to gather information about EVV.

State departments are currently reviewing the 18 RFI responses and preparing for the March 9 stakeholder meeting. More information about the meeting will be released later this week. Information gathered from the RFIs and from CMS webinar presentations will be shared at the meeting.

CDSS has been talking with advocates to identify the big concerns, which can hopefully be addressed on March 9. The state is anticipating a lengthy process to implement EVV in CA, given the IHSS program is the largest personal care services program in the county and most states use an agency model rather than self-directed model. The state’s primary consideration is what would work for programs in CA.

Involvement in any CDSS debates, discussions, or other settings regarding EVV.

CDSS expressed a full intent and commitment to engaging stakeholders, yet noted it is still early in the process. The state is proceeding at a deliberate, slow and thoughtful pace.
Given it is sometimes difficult to provide feedback in larger groups, CDSS will also hold small group sessions. CDSS wants to leverage the significant knowledge of groups such as CICA.

CDSS intends to mimic the Electronic Timesheet System (ETS) process for development and implementation of EVV. Recipients and providers gave direct feedback on the ETS prototype, prior to the pilot and subsequent phased statewide rollout of ETS.

CDSS is open to CICA’s offer to help host conference calls.

CDSS explained that an [EVV webpage](https://www.evvedd.com) and email address, evv@dss.ca.gov, have been establish to promote continuous feedback from stakeholders.

CICA volunteered to help establish a representative workgroup – all disabilities, geographic areas, etc., across the state.

**CICA requested a mechanism to both monitor and provide feedback on state progress on EVV.**

CDSS stated the department could hold a regular call with CICA.

**Update:** Beginning March 2018, CDSS will join the monthly statewide CICA conference call to provide EVV updates, as information is available, and seek feedback from members.

CICA emphasized the importance of regular and ongoing communications, given wide-spread concerns, paranoia and fear. CICA also asked if a financial review of how much EVV will cost, including lawsuits to stop implementation, had been done.

CDSS noted the federal law comes with penalties and that the full fiscal impact is difficult to determine at this point. The state is gathering information about potential solutions and must establish implementation parameters before determining full costs. However, fears and concerns are areas that can be discussed and CICA is a good place to share those concerns.

CDSS noted that one of the biggest fears is being homebound. From both a state and federal perspective, that is not the intent of EVV. EVV should not change the way services are currently provided. If a recipient is in the community, this is where services will be provided.
CICA asked about the impact to providers.

CDSS expects the main impact to providers will be how time is reported. There will be no more paper timesheets. The state is looking at multiple options for providers to report their time such as mobile app, telephone, etc., to enable providers to select the solution that best meets their needs.

CDSS, identifying the level of service detail required as another concern, noted CMS has stated the service categories can be very broad.

CICA asked how one would record their time as a family provider, a live-in or one under protective services.

CDSS noted the program pays a maximum of 283 hours per month or approximately 9.5 hours per day, which is reported on a timesheet. Further discussion is expected on these issues. The state is also looking at when recipients would approve the time. CDSS currently assumes that recipients will have multiple options for approving timesheets, including approving at the end of the pay period as they do now. The state seeks to make EVV as least burdensome as possible.

CICA noted a concern about computer literacy and dexterity.

CDSS shares this concern, which is why multiple EVV options are being considered. CDSS understands alternatives to computers, such telephone check in, must be made available. The state wants to provide as much flexibility as possible.

CICA stated that when CMS initially put out information, it was very minimal and felt that was positive. CICA suggested the state could save money by attaching EVV to ETS.

CDSS wants to keep the system to be as a simple as possible and minimize impact. CDSS is considering leveraging the ETS.

CICA stated there may be extra work with EVV reporting and asked if providers would be paid. How would EVV work for more complex cases, including WPCS? How will EVV be enforced?

CDSS stated that providers aren’t paid for completing timesheets today and it is unknown if this policy will be impacted by EVV.