

Electronic Visit Verification (EVV) Survey for Providers

This is a copy of the EVV survey for providers to use as a guide when completing the online survey. Please complete the survey online at <https://www.surveymonkey.com/r/TXSJRFN>.

1. Organization:
2. Address:
3. Name of Person Completing the Survey:
4. Title of Person Completing the Survey:
5. Number of individuals employed by your organization:
6. Do you provide home and community based services?
7. Number of individuals receiving home and community based services from your organization:
8. If yes, please select all services that your agency provides.
 - Activities of Daily Living
 - Art Therapy
 - Behavior Support Services
 - Community Participation Support
 - Community Supports
 - Companionship
 - Equine Therapy
 - Home Health Aides
 - Home Health RN
 - Home Health LPN
 - Home Health Physical Therapy,
 - Home Health Occupational Therapy
 - In-Home and Community Support
 - Music Therapy
 - Nutritional Counseling
 - Orientation and Mobility
 - Personal Assistant Services
 - Respite
 - Specialized Skill Development
 - Speech and Language Therapy
9. Does your organization currently use EVV? (IF NO, SKIP TO QUESTION 17)
10. What vendor do you use for EVV?
11. What kind of technology does your organization utilize? Please select all that apply.
 - Smartphone

- Tablet
- Landline Telephone
- Device installed in the participant's home
- Other (text field)

12. What functionality does it have? Please select all that apply.

- Timekeeping capabilities
 - Out-of-home visits
 - Trips to care-related facilities
 - Trips to the agency and other non-client activities
- GPS location
- Biometric recognition (fingerprint, voice verification, etc.)
- Scheduling
- Reporting
- Claims submission/Billing
- Authorizations

13. How does it support services in rural areas in which GPS and cell service are not available?

14. Does it support different types of visits and workflows, including unscheduled visits, delivery of unplanned care and shared care? Does it provide an automated missed visit notification?

15. What data elements are collected? Please select all that apply.

- Type of service performed
- Person receiving the service
- Date of the service
- Location of service delivery
- Person providing the service
- Time service begins and ends

16. When your agency implemented its EVV system, what did clients find most useful notifying and educating them of the changes?

- Informational website
- Communications from case managers or caregivers
- Mailings and educational materials
- Leaflets in enrollment packets
- "Robo" calls

17. As the Commonwealth looks to purchase an EVV system, do you have any suggestions on what kind of technology or logistical considerations should be included in the vendor selection?