



Electronic Visit Verification			
Meeting Name:	EVV MCO Authorizations		
Objective:	Discuss expectations around AZ configuration for EVV		
Facilitator:	Danielle Ashlock	Date & Time:	10/7/2019 – 9:00 AM (AZ)
Location/Dial In:	WebEx Meeting	Next Meeting:	TBD

Place an "X" next to present Attendees and an "O" next to those that out of office.

Attendees:					
Alvarez, Diana	X	Fidel, Nicolette	X	Nyberg, Tim	X
Ashlock, Danielle	X	Hall, Matt	X	Park, Sara	X
Bangert, Sean	X	Handler, Zachary	X	Petre, Lori	X
Benedetti, Susan	X	Jansen, Yvonne	X	Rocker, Vihn	X
Davidson, Debra	X	Johnson, Dara	X	Ross, Judy	X
Douglas, Tashonna	X	Leitao, Josh	X	Thatcher, Ray	X
Dunkleberger, Jay	X	Mas, Rodd	X	Winfrey, Jason	X
Elmquist, Andrea	X	Monte John	X	Alyssa	X
				Dan	C

Agenda Discussion:		
Topic:	Presenter :	Notes:
1. Objective of the meeting and project	Dara Johnson	<ul style="list-style-type: none"> • Objective: Expectations around AZ configuration for EVV <ul style="list-style-type: none"> • EVV Spans all lines of Business • Purpose of EVV system" <ul style="list-style-type: none"> ○ Measure Access to Care ○ Time of Needs Assessment ○ Prior Auth ○ Missed Visits ○ Point of Care • Fundamental - need to help Sandata ensure that they can pair members to providers and the actual authorization • Need to work with Sandata to configure their system to measure access to care and authorizations • Currently, review has shown that some services are prior authorized and some are not <ul style="list-style-type: none"> • Want to discuss requiring auth for all services to have a consistent approach • Need to consider that decisions made may impact service delivery.
2. SandData Prior Auth Layout	All	Danielle has Sandata layout for authorization file. <ul style="list-style-type: none"> • Will send out a DRAFT for MCOs to review and consider data elements • Should data elements be included in prior auths & claims files? <ul style="list-style-type: none"> ○ This is the authorization file, asking MCO's to supply single



		<p>authorization file to Sandata for services that require auth</p> <ul style="list-style-type: none"> ○ AZAHCCCS will supply claims files and provider information for everyone else. ○ Many of the codes are not currently PA'd. Will we have to generate the auth file based on claims being presented? This is an administrative burden for the health plans and the clients. <ul style="list-style-type: none"> • The intent is to present the data to compliment the scheduling data. If we do not provide, the access to care piece of the technology does not work. • Sandata will require a new element to the authorization and the auth file - data needs assessment • Want to be able to track beginning at the point the services are assessed as medically necessary to when services are provided via the EVV system. <ul style="list-style-type: none"> ▪ AHCCCS and the Health Plans do not currently track or collect this information • Sandata will need fundamental data <ul style="list-style-type: none"> ▪ Date need was identified ▪ Date service was provided ▪ Order for service ▪ Date request was received ○ Currently creating a data flow regarding PA services and how providers can request PA or enter PA online for EVV services <ul style="list-style-type: none"> • Moving toward a self authorization service through online web service that providers already have access to • Provider would enter the frequency of services on a schedule <ul style="list-style-type: none"> ▪ Ex: for the next six weeks, will see patient twice per week. Do not have to enter dates or times. ▪ Auth will be for the service and the scheduling will capture if the service actually happened ○ Authorization is broad whereas the Scheduling is more specific <ul style="list-style-type: none"> • All data elements that will jump start the service <ul style="list-style-type: none"> ▪ Critical data elements <ul style="list-style-type: none"> • Format will not change, but data entry elements will change to make service unique to AZ • Client ID • Prover Agency ID • Dates • Authorized Services • Limits & Modifiers <ul style="list-style-type: none"> • The objective is to understand the services that have been auth and what provider has been auth to supply the care. • Need to establish identifiers and parameters around services provided
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		<ul style="list-style-type: none"> • EVV system will be able to link members to providers and route info appropriately so that auth can be seen by health plan, EVV, and providers • Allows ability to track activities performed to overall intentions for patient care <ul style="list-style-type: none"> ○ Melina indicates that she has created a high level DRAFT of the workflow that she can share with Dara <ul style="list-style-type: none"> • Dara indicates that Melina can send to the team along with definition of needs assessment • Advised that team should review and we will plan a meeting to regroup in a meeting <ul style="list-style-type: none"> ▪ Danielle will send a follow up meeting invite with expectations regarding attendees. ▪ Will send technical addendum document \ <ul style="list-style-type: none"> • Health plans should have internal meetings to discuss data expectations and streamline ▪ All questions should be sent to Tashonna & Danielle to add to Agenda
3.		
4.		

Next Steps:	
1.	Health Plans will host internal meetings to plan, discuss data elements, barriers, etc.
2.	Health Plans to review layout and strategize on gathering data elements for auth layout
3.	
4.	
5.	

Action Items:		
Description:	Responsible:	Due Date
1. Send out a copy of SanData Layout file	Danielle Ashlock	10/7/2019
2. Send out DRAFT of workflow	Melina Solomon	10/8/2019
3. Send out follow up meeting invite	Danielle Ashlock	10/8/2019
4.		