



Electronic Visit Verification (EVV) Live-In Caregiver Attestation Form

Electronic visit verification (EVV) is a technology solution which electronically verifies visit information to ensure that home and community-based services are delivered to the client. States are permitted to exempt live-in caregivers from EVV requirements for services provided to the client within the shared home setting. This form is intended to document that an employee resides with the client in services, either permanently or for extended periods of time.

Employee Name: _____ SSN (last 4 digits): _____

Name of Client: _____ DOB: _____

Shared Physical Address: _____ City/State/Zip: _____

EMPLOYER'S ATTESTATION:

Please indicate which of the below scenarios is applicable.

- "Permanently" – this employee resides on the same premises as the client permanently by living, working and sleeping on the premises seven days per week and has no separate home of his/her own.
- "Extended Periods of Time" – this employee resides on the same premises as the client for an extended period of time by living, working and sleeping on premises for five days a week (120 hours or more) OR spends less than 120 hours per week working and sleeping on premises but spends five consecutive days or nights residing on premises.

I understand that hours submitted by this employee for services provided to this client within the shared home setting are exempt from EVV requirements. I also understand that services provided in any other community-based setting outside of the shared home location must meet EVV requirements in order for Acumen to issue payroll. I also agree to notify Acumen immediately if this shared living arrangement ever changes in the future, resulting in this employee and this client residing separately. When this happens, this employee will begin meeting EVV requirements for all services provided no matter the setting.

Name of Employer: _____

Employer's Signature: _____ Date: _____