# Employer's Selection for Electronic Visit Verification (EVV)

EVV is a telephone and computer-based system that documents the time your attendant starts and ends delivering services to you. This form is to be completed by Consumer Directed Services (CDS) Employers in EVV regions. The CDS Employer keeps a copy and sends the original to the Financial Management Services Agency (FMSA).

| | **For FMSA Use Only** |
|---|---|
| 1. Individual's Name | 3. Individual's Identification Number |
| 2. Employer's Name (if different from the individual) | 4. Relation to Individual |

5. My FMSA has explained my options for using EVV. I am selecting:

☐ **Full Participation:** My CDS Employee(s) will call-in when they start work and call-out when they end work. I will use the computer to do Visit Maintenance.

☐ **Partial Participation:** My CDS Employee(s) will call-in when they start work and call-out when they end work. My CDS Employee(s) will continue using paper time sheets. I will send the paper time sheets to my FMSA. My FMSA will do Visit Maintenance to make the EVV system match the paper time sheets.

☐ **No EVV Participation:** My CDS Employee(s) will continue using paper time sheets. I will approve the paper time sheets and send them to my FMSA to pay my employees.

6. Reason: _____

_____ _____
Signature — CDS Employer Date

_____ _____
Signature — FMSA Representative Date