

Thrive BEHAVIORAL
NETWORK LLC
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February 25, 2026

Subject: Opposition to Application of EVV to IRTS Services in HF 3634

Dear Chair and Members:

On behalf of Thrive Behavioral Network, I am writing to express our concern regarding provisions in HF 3634 that would apply Electronic Visit Verification (EVV) requirements to Intensive Residential Treatment Services (IRTS) as one of the 14 high-risk services identified by the commissioner.

IRTS is a 24-hour, provider-owned, licensed residential mental health service delivered in a fixed facility—not in a participant’s private home or community setting. These programs operate under continuous on-site staffing, structured therapeutic programming, daily clinical documentation, medication administration controls, and rigorous state licensing oversight.

Electronic Visit Verification was designed as a fraud-prevention mechanism for home- and community-based services where verifying the time and location of discrete service visits may otherwise be difficult. That policy rationale does not align with the IRTS model.

Applying EVV to IRTS would not increase fraud prevention or oversight because:

- Residents live in the facility.
- Staff are continuously on site.
- Services are documented through electronic health records and treatment documentation systems.
- Programs are subject to ongoing DHS licensing review and audit.

Instead, extending EVV to IRTS would:

- Duplicate existing documentation systems
- Increase administrative and technology costs
- Divert direct-care staff time away from patients
- Create operational inefficiencies in a 24-hour residential environment where services are continuous rather than visit-based

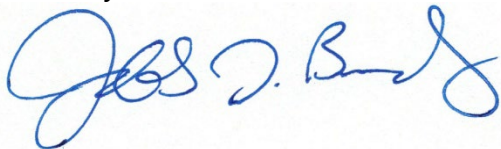
IRTS providers are already managing severe workforce shortages and rising acuity among individuals with serious and persistent mental illness. Additional unfunded compliance mandates strain resources without improving accountability or quality.

We respectfully request that HF 3634 be amended to explicitly exclude facility-based residential services such as IRTS from EVV requirements. Oversight tools should be targeted, proportional, and aligned with the structure of the service being regulated.

Thrive strongly supports responsible stewardship of public funds and appropriate fraud prevention efforts. However, policy tools must match the delivery model. In this case, EVV does not improve transparency or accountability within a licensed residential setting.

Thank you for your consideration. We welcome the opportunity to discuss this issue further.

Sincerely,



Jeff Bradley
President