

5123:2-9-05

HCBS waivers - waiver service documentation requirements for services provided to individuals.

(A) Purpose

This rule sets forth the requirements of the information that must be maintained by the provider of services in order to fully disclose the nature and extent of the services delivered as authorized in accordance with section 5111.871 of the Revised Code.

(B) Definition of service documentation

"Service documentation" means the maintenance of all records and information on one or more documents, including documents that can be printed from electronic software programs, in such a manner as to fully disclose the nature and extent of the services delivered and must include each of the following items to validate medicaid reimbursement:

(1) Date of service;

(2) Place of service;

(3) Name of the recipient;

(4) Medicaid identification number of the recipient;

(5) Name of the provider;

(6) Provider identifier/contract number;

(7) Signature of the person delivering the service or initials of the person delivering the service if a signature and corresponding initials are on file with the provider;

(8) Type of service (for homemaker/personal care, type must include if routine, on-site/on-call, or level one emergency);

(9) Number of units of the delivered service or continuous amount of uninterrupted time during which the service was provided;

(10) Group size in which the services were delivered as defined in paragraph (D)(12) of rule 5123:2-9-06 of the Administrative Code;

(11) Arrival and departure times of the provider of service's site visit to the recipient's location or of the recipient's visit to the provider of service's location;

(12) Description and details of the services delivered that directly relate to the

services specified on the recipient's approved individual service plan as those services to be provided;

(13) A notation made at least monthly indicating the response to services delivered; and

(14) Forms that identify, for the individual, the ISP service(s) to be delivered. The forms shall include all of the above and may be checked off and initialed by staff for each continuous period of service delivery time for each date of service. Any variation between the ISP requirements and actual staff to individual ratios, times of service delivery, group size, or type of service delivered shall be documented. Documentation shall reflect the actual staff to individual ratios and the time period of the variation.

(C) Invoices the provider of services submits to the department for reimbursement of services delivered shall not be considered service documentation. Any information contained on the submitted invoice may not and shall not be substituted for any required service documentation information that the provider of services is required to maintain to validate medicaid reimbursement.

(D) Services shall not be considered as delivered unless the provider maintains service documentation.

(E) Reimbursements made to the provider of services for services delivered that are not supported by service documentation or are supported by service documentation that does not include all the required items listed in paragraph (B) of this rule may be recoverable under paragraph (P) of rule 5123:1-2-08, paragraph (N) of rule 5123:1-2-11, paragraph (O) of rule 5123:2-8-16, and paragraph (I) of rule 5123:2-9-06 of the Administrative Code.

(F) Each provider of services shall maintain all service documentation in an accessible location. The service documentation shall be available, upon request, for review. Agencies with the authority to view such records upon request are the centers for medicare and medicaid services, the Ohio department of job and family services, the Ohio department of mental retardation and developmental disabilities, the county board of mental retardation and developmental disabilities and regional councils of government that submits to the department payment authorization for the service and those designated or assigned authority by the Ohio department of job and family services or the Ohio department of mental retardation and developmental disabilities.

(G) The provider(s) of services shall maintain all service documentation for a period of six years from the date of receipt of payment for those services or until an initiated audit is resolved, whichever is longer.

(H) Should the provider of services discontinue operations, the provider of services shall, within seven days of discontinuance, notify the county board as to the location of

where the service documentation will be stored, and provide the county board with the name and telephone number of the individual responsible for maintaining the records.

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CERTIFIED ELECTRONICALLY

Certification

06/20/2005

Date

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