Kansas Medical Assistance Program





June 2006

Provider Bulletin Number 627a

HCBS FE Providers

Assistive Technology Provider Manual Update

The Documentation Requirements section of the *HCBS FE Assistive Technology Provider Manual* has been updated. Visit the KMAP Web site at https://www.kmap-state-ks.us to view the updated manual.

Information about the Kansas Medical Assistance Program as well as provider manuals and other publications are on the KMAP Web site at https://www.kmap-state-ks.us. For the changes resulting from this provider bulletin, select the *HCBS FE Assistive Technology Provider Manual*, page 8-2.

If you have any questions, please contact the KMAP Customer Service Center at 1-800-933-6593 (in-state providers) or (785) 274-5990 between 7:30 a.m. and 5:30 p.m., Monday through Friday.

8400. Updated 6/06

Documentation Requirements:

Written documentation is required for services provided and billed to the Kansas Medical Assistance Program. Documentation at a minimum must include the following:

Provider must maintain a copy of the receipt identifying that the service was provided.: at a minimum The receipt must include:

- Name of the provider
- Identification of y item or technology technology/service being provided
- Date of service (MM/DD/YY)
- Amount of purchase
- Customer's name and signature

Documentation must be generated at the time of purchase. Generating documentation after-the-fact is not acceptable.

Documentation must be clearly written and self-explanatory, or reimbursement may be subject to recoupment.

Signature Limitations

In all situations the expectation is that the consumer provides oversight and accountability for people providing services for them. Signature options are provided in recognition that a consumer's limitations make it necessary that they be assisted in carrying out this function. A designated signatory may be anyone who is aware services were provided. The individual providing the services **cannot** sign the time sheet on behalf of the consumer.

Each time sheet must contain the signature of the consumer or designated signatory verifying that the consumer received the services and that the time recorded on the time sheet is accurate. The approved signing options include:

- 1. Consumer's signature
- 2. Consumer making a distinct mark representing their signature
- 3. Consumer using their signature stamp
- 4. Designated signatory

In situations where there is no one to serve as designated signatory the billing provider establishes, documents and monitors a plan based on the first three concepts above.

Consumers that refused to sign accurate time sheets when there is no legitimate reason, should be advised that the attendant's time may not be paid or money may be taken back. Time sheets that do not reflect time and services accurately should not be signed. Unsigned time sheets are a matter for the billing provider to address.

KANSAS MEDICAL ASSISTANCE HCBS FE ASSISTIVE TECHNOLOGY PROVIDER MANUAL BENEFITS & LIMITATIONS