Kansas Medical Assistance Program





June 2006

Provider Bulletin Number 627d

HCBS FE Providers

Sleep Cycle Support Provider Manual Update

The Documentation Requirements section of the *HCBS FE Sleep Cycle Support 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 Sleep Cycle Support 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.

8000. Updated 6/06

Only one unit is allowed within a 24 hour period of time.

The reimbursement for this service is defined as a range to allow flexibility and efficiency in service deliver; provide consistency with other Medicaid services such as Home Health Aide visits; and to meet consumer preferences in providers and service delivery methods. Consumer health and safety and program cost effectiveness will be monitored through case management. This will ensure providers deliver the necessary scope of service as agreed and defined in the plan regardless of the length of time needed to deliver the service.

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:

- Identification of \forall the waiver service being provided
- Customer's and caregivers initials each visit if using a time sheet which covers more than one day
- Customer's name and signature, at a minimum each week
- Caregiver's name and signature, at a minimum each week
- Date of service (MM/DD/YY)
- Start time for each visit; include AM/PM or utilize 2400 clock hours
- Stop time for each visit; include AM/PM or utilize 2400 clock hours

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

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

Electronic Documentation:

Documentation must at a minimum include the following:

- Identify the HCBS waiver service being provided
- Identify the customer receiving the service(s)
- Identify the attendant providing the service(s)
- Date of service
- The start time of the service: include AM/PM or utilize 2400 clock hours
- The end time of the service: include AM/PM or utilize 2400 clock hours
- Identify duties performed during each visit
- The customer's signature authorizing the utilization of the electronic documentation system at the start of service delivery

Electronic documentation of service delivery is allowed effective July 1, 2003, when meeting both documentation standards and signature standards as outlined above.

KANSAS MEDICAL ASSISTANCE HCBS FE SLEEP CYCLE SUPPORT PROVIDER MANUAL BENEFITS & LIMITATIONS